



Republic of the Philippines  
Department of Health  
**OFFICE OF THE SECRETARY**

June 7, 2016

**DEPARTMENT CIRCULAR:**

No. 2016- 0171

**TO: ALL HIV/AIDS CORE TEAM (HACT) CHAIRS OF HOSPITALS, DIRECTORS OF BUREAUS, SERVICES, REGIONAL OFFICES, MEDICAL CENTER CHIEFS OF DOH-RETAINED HOSPITALS, DOH-DESIGNATED HIV TREATMENT HUBS, SATELLITE TREATMENT HUBS, KEY PARTNERS from LOCAL GOVERNMENT UNITS, INCLUDING SOCIAL HYGIENE CLINICS, TB DOTS and PMDT FACILITIES**

**SUBJECT: Enhancing Linkage to care of People Living with HIV (PLHIV)**

---

Data from the DOH – Epidemiology Bureau shows that only 44% of all people diagnosed with HIV from 2010 to 2015 were started on Anti-Retroviral Therapy (ART). Based on the 2013 external evaluation of the health sector's response to HIV in the Philippines, long turn-around time of confirmatory HIV testing is one of the identified barriers for prompt referral and management. In the interim, this memorandum shall ensure linkage to care of clients with reactive HIV screening test to immediately be assessed by Treatment hubs, satellite treatment hubs and HIV primary care clinics in order to provide early treatment and management.

Specific Guidelines:

1. Clients with REACTIVE HIV screening test results shall be provided with post-test counseling and immediately referred to Treatment hubs or satellite treatment hubs. The post-test counseling should include the importance of early assessment. Reactive samples shall still be sent to the STD/AIDS Cooperative Central Laboratory (SACCL) at the San Lazaro Hospital for confirmatory testing by all HIV Testing facilities in accordance with the national diagnostic algorithm.
2. The client should be provided with a referral letter stating that the client is referred for **baseline assessment and further management, pending confirmatory test result from SACCL.**
3. Treatment hubs/satellite treatment hubs shall conduct repeat HIV screening of clients referred in No. 1.

- a. If the repeat screening test is reactive, clinical assessment including baseline CD4 testing shall be done.
- b. If the repeat screening test is non-reactive, advise the client to follow-up with his/her HIV counselor from the referring facility for the confirmatory test result.

c. Initiation of ART shall be highly recommended for the following:

Target Population	Recommendation
Severe/advanced HIV infection (WHO clinical stage 3 or 4)	Initiate ART regardless of CD4 cell count
HIV infection (WHO clinical stage 1 or 2)	Initiate ART if CD4 < 200 cells/mm <sup>3</sup>

- d. Standard reporting forms of the DOH- Epidemiology Bureau shall be utilized.

For your information, immediate dissemination and compliance.

  
**JANETTE P. LORETO-GARIN, MD, MBA-H**  
 Secretary of Health