

Figure 11.1 Overview of approach to the patient with advanced disease



Patients enter this algorithm if identified with new stage 3 or 4 disease or with a CD4 <200. Many patients with a CD4 <200 may be otherwise well but a triage system in a busy outpatient waiting room will identify the sicker patients with stage 3 or 4 disease and enable fast-tracking into the process outlined below.

First step for all patients with advanced disease is to check for danger signs.

If no danger signs, take fuller history, examination and do rapid diagnostic tests (Figure 11.2)

Patient is placed into one of 4 categories based on **clinical stability** and **ART status** (Figure 11.3)

ART-naïve or ART <6 months	STABLE and ART-naïve or on ART for <6 months	UNSTABLE and ART-naïve or on ART for <6 months
Total ART > 6 months (ongoing or interrupted)	STABLE and on ART for >6 months; ongoing or interrupted	UNSTABLE and on ART for >6 months; ongoing or interrupted

Packages of care defined by above 4 categories and detailed in figures 11.3, 11.4 and 11.5.

If danger signs present, (see Figure 11.2) provide urgent supportive management; eg, oxygen, IV fluids, and refer.

If transfer to referral site delayed provide whatever additional emergency management is possible (Figure 11.6)



Refer to hospital