

Child Follow up after full HIV Disclosure

Full HIV disclosure date: _____ **2-week appointment date:** _____

Following full HIV disclosure, a 2-week consultation appointment is recommended to allow the child and primary caregiver to return in good time with any questions or issues they may have. This portion of the paediatric disclosure form allows focused assessment over time of the child's reaction to his/her HIV diagnosis, starting with the day when full disclosure is done and throughout the period when the child and caregiver will be most vulnerable. This section should be completed in addition to the table on page 1 of this form. The child's reaction during each visit should help the provider and primary caregiver develop action plans for ongoing support to the child. The post-disclosure follow up should continue until the child has accepted his or her HIV status.

Date of full disclosure	Persons present at full disclosure	Child's reaction to full disclosure		Action Plan	
Date of follow-up visit	Child's reaction since full HIV disclosure		Action taken during this visit	Action Plan	
	Caregiver's reflection	HCW's assessment		Caregiver	HCW