OPPORTUNITIES TO OPTIMIZE

1. **Link self-risk assessment to EHR** which helps reduce care team member discomfort in asking sexual history or drug use questions, as well as patient discomfort with privacy. Self-risk assessment provides efficiency in obtaining information that will help determine what type of testing should be offered and what intervention or referral the patient may need to support health maintenance.

2. **Conduct nurse or MA-driven risk assessments involving a chart review.** This can create a more personable, trusting experience for clients, include some patient education, and unburden work for physicians. However, they take more time to complete than a self-risk assessment.

3. **Implement opt-out testing,** when allowed by state statutes, in order to make screening a routine part of clinical services, saving time as well as patient or provider discomfort.

**PRE-ROUTINE SCREENING:**

1. Patient intake
2. Patient triaged
3. Opt-out test offered

**Routine Screening: Test performed and results communicated**

- Tests ordered
- Test performed
- Presumptive counseling and treatment
- Patient informed of results

**FOLLOWING UP:**

- **POSITIVE RESULT**
  - Report result to local health department
  - Prescription administered
  - Linked to care

- **NEGATIVE RESULT**
  - Post-test counseling/education

**OPPORTUNITIES TO OPTIMIZE**

4. **Bundle tests,** as patients who qualify for routine screening for STIs may also need other routine tests. Order sets useful at this stage to easily identify which tests should be bundled.

6. **Offer presumptive counseling or treatment** before results if patient meets certain risk criteria to minimize loss to follow-up.

7. **Outline clear delineation of care team roles in delivering results.** Locations where providers lack time can have patient navigators take on this role.

8+. **Report to local health department** if confirmatory test is positive

9. **Outline clear delineation of roles for prescription administration** to ensure patient receives treatment ordered.

10. **Link patient back to care** if confirmatory test or additional examination is needed. The team follows-up with patient and ensures they attend their next appointment.