

# **treatment passport**

## **Why keep a treatment history?**

- A summary of your notes can help you understand your health and treatment.
- It can help if your doctor changes or if you speak to other people for advice.
- Or if you change hospitals or clinics including in another country. Even though your medical records should be sent to the new clinic, this doesn't always happen.

Your future treatment depends on this previous history.

This includes your CD4, viral load and resistance tests. It also includes the drugs you used and the reasons for changing them.

You might need this record for 20 years or more.

Your doctor can help fill in this book but it does not replace your medical notes.

All patients have the right to see their full medical records and to make photocopies from them.

Please call i-Base for more copies:

020 8616 2210.

Name:

Date of birth:

Allergies ie penicillin, Septrin, abacavir etc - see p14.

*Current hospitals or clinics*

Name \_\_\_\_\_

Patient no. \_\_\_\_\_

Phone no. \_\_\_\_\_

Name \_\_\_\_\_

Patient no. \_\_\_\_\_

Phone no. \_\_\_\_\_

Name \_\_\_\_\_

Patient no. \_\_\_\_\_

Phone no. \_\_\_\_\_

*Other useful contacts:*

Pharmacy \_\_\_\_\_

GP \_\_\_\_\_

*i-Base treatment information phonenumber:*

**0808 800 6013**

*If found please post to i-Base return service:*

i-Base, 107 The Maltings, 169 Tower Bridge Rd,  
London SE1 3LJ

## Hospitals and clinics

Record the hospitals and specialist clinics where you have been treated.

Date diagnosed: \_\_\_\_\_

Date of seroconversion:(if known) \_\_\_\_\_

Hospital and doctor(s) seen	Dates
	First seen:  Left:
	First seen:  Left:
	First seen:  Left:

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	First seen:  Left:
	First seen:  Left:
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## CD4 and viral load

These blood tests monitor your health and your response to treatment (ART).

CD4 count - A marker of your immune system.

CD4% - Sometime more stable than CD4.

Viral load - This test measure the virus. It shows how well ART is working.

Even rough figures are useful. The lowest ever CD4 count and highest ever viral load are the most important.

On stable ART, many clinics only measure the CD4 count once or twice every year or two.

Date (month / year)	CD4 (cells/mm <sup>3</sup> )	CD4%	Viral load
<i>e.g july 04</i>	<i>234</i>	<i>14</i>	<i>80,000</i>

Date	CD4	CD4%	Viral load
(month / year)	(cells/mm3)		

## Other tests

Keep a record of resistance and other tests. Note that resistance test results are very detailed and complicated - but also very important in deciding treatment.

Ask for a full copy of these results and keep them safe.

Date (month/year)	Test name	Results
<i>e.g july 2014</i>	<i>genotype</i>	<i>3TC resistance (M184V)</i>



Date (month/year)	Test name	Results

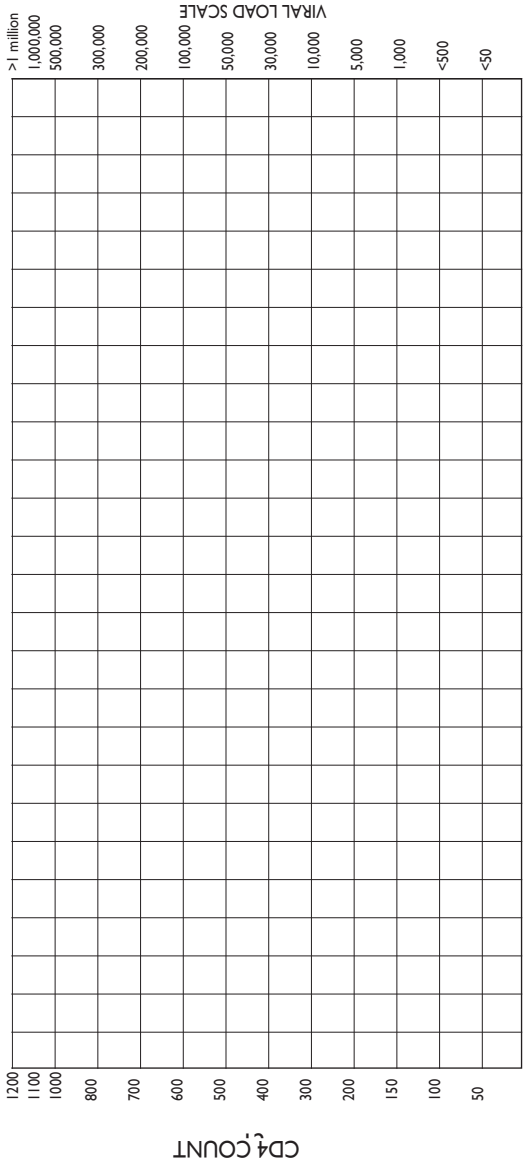
## ARV treatment (ART)

Your choice of ART in the future depends on the drugs you used in the past. It also depends on the reason you stopped using them. Even rough dates are useful. See p.19 for drug names.

Drugs & combination details (name +dose)	Date started	Date stopped	Reason
e.g efavirenz 600mg	Feb 2014	May 2014	bad sleep and dreams

Drugs & combination	Date started	Date stopped	Reason

This page can plot your CD4 and viral load results



## Side effects and allergies

Your main side effects or drug-related allergies.

Side effect or symptom	Suspected drug	Date started/ stopped

## Other infections and illnesses

A record of other infections (eg TB) or HIV-related illnesses (CMV, PCP, shingles etc) is important.

Illness or infection	Treatment + dose	Dates

## Hepatitis

Your hospital should test for hep A, B and C when first diagnosed. They should offer vaccines against hep A and B if you are not already protected (see p16).

Hepatitis genotype	Test date	Treatment if any + dates

## Immunisation record

Record vaccines (i.e hepatitis A and B, pneumovax, flu, tetanus holiday vaccinations and COVID-19).

HIV positive people usually require non-live vaccines. You may have to ask for these.

Vaccination or immunisation	Date



## **Trials and studies**

Research studies and trial meds that you used.

Study name and treatment received	Dates

## Commonly used meds

Most drugs are known by several names.

The most common names for main drugs used are listed below. Some early HIV drugs are not included.

Chemical	Trade	Abb.	Chemical	Trade	Abb.
<i>Integrase Inhibitors: (INIs or INSTIs)</i>			<i>Fixed Dose Combinations (FDCs)</i>		
dolutegravir	Tivicay	DOL	Atripla (EFV+TDF+FTC)		
elvitegravir	Vitetka	EVG	Biktarvy (B/F/TAF)		
raltegravir	Isentress	RAL	Delstrigo (DOR+TDF+3TC)		
cabotegravir	- see FDCs		Dovato (DTG + 3TC)		
<i>NNRTIs: (non-nukes)</i>			Eviplera (RPV+TDF+FTC)		
doravirine	Pifeltro	DOR	Genvoya (EVG/c+FTC+ TAF)		
efavirenz	Sustiva	EFV	Odefsey (RPV+TAF+FTC)		
etravirine	Intelence	ETR	Stribild (EVG/c + FTC+TDF)		
nevirapine	Viramune	NVP	Triumeq (DOL+ABC+3TC)		
rilpivirine	Edurant	RPV	Trizivir (AZT+3TC+ ABC)		
<i>NRTIs: (nukes) and dual-nukes</i>			Vocabria+Rekombys:		
Kivexa (ABC+3TC)		KVX	(injectable CAB/RPV-LA		
Truvada (TDF+FTC)		TVD			
Descovy (TAF+FTC)		F/TAF	<i>Booster drugs (/r or /c)</i>		
emtricitabine	Emtriva	FTC	ritonavir	Norvir	RTV or /r
lamivudine	Epivir	3TC	cobicistat	Tybost	COB or /c
abacavir	Ziagen	ABC	<i>Booster dual formulations (/r or /c)</i>		
tenofovir DF	Viread	TDF	Evotaz (atazanavir/c)		
tenofovir AF	-	TAF	Rezolsta (darunavir/c)		
<i>Protease Inhibitors: (PIs)</i>			Kaletra (lopinavir/r)		
atazanavir	Reyataz	ATZ	<i>Drugs for related infections:</i>		
darunavir	Prezista	DRV	Septrin	cotrimoxazole	
tipranavir	Aptivus	TPV	Acyclovir	Zovirax	
<i>Entry Inhibitors:</i>			foscarnet	Foscavir	
enfuvirtide	Fuzeon	T-20	interferon	various	INF
fostemsavir	Rukobia	FOS	ribavirin	various	RBV
ibalizumab	Trogarzo	IBAL			
maraviroc	Celsentri	MVC			





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www.i-Base.info**

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