

APPENDIX A: HIV Point of Care (POC) Testing Reporting Form

Site Name: _____

Site Coordinator: _____

Reporting Period (Check one of the following):

- First Quarter: January 1 to March 31
- Second Quarter: April 1 to June 30
- Third Quarter: July 1 to September 30
- Fourth Quarter: October 1 to December 31

Reporting Year: _____

HIV POCT Test Results:

1. Number of **reactive** HIV POC tests for this reporting period: _____
2. Number of **non-reactive** HIV POC tests for this reporting period: _____
3. Number of **indeterminate/invalid** HIV POC tests for this period: _____
4. **Total Number of HIV POC tests** for this reporting period (1+2+3): _____

This form is to be filled out by the Site Coordinator and submitted to the HIV Strategy Coordinator or ISC/NITHA representative for your area, based on the former regional health authority. Up-to-date contact information can be found at: <https://skhiv.ca/about-us/#hiv-coordinators>.

<p>Far North (AHA, NE 1 & 2, NW 1) Email: Esther.Keighley@saskhealthauthority.ca Phone: (306) 425-8517 Fax: (306) 425-8530</p>	<p>Prince Albert Parkland / Kelsey Trail Health Regions Email: Paulette.Martin@saskhealthauthority.ca Phone: (306) 765-6537 Fax: (306) 765-6536</p>
<p>Regina Qu'Appelle / Five Hills Health Regions Email: Laurel.Stang@saskhealthauthority.ca Phone: (306) 766-7940 Fax: (306) 766-7796</p>	<p>Sunrise / Sun Country Health Regions Email: Deanna.Bartok@saskhealthauthority.ca Phone: (306) 786-0851 Fax: (306) 786-0525</p>
<p>Prairie North / Heartland Health Regions Email: Kristi.O'Driscoll@saskhealthauthority.ca Phone: (306) 446 8638 Fax: (306) 446 7378</p>	<p>Saskatoon / Cypress Health Regions Email: Michelle.Messner@saskhealthauthority.ca Phone: (306) 514 8903 Fax: (306) 655 3433</p>
<p>Indigenous Services Canada (ISC) Email: laura.matz@sac-isc.gc.ca Phone: (306) 515-4608 Fax: (306) 934-3000</p>	<p>Northern Inter-Tribal Health Authority (NITHA) Email: adepadua@nitha.com Phone: (306) 953-5035 Fax: (306) 953-5020</p>

HIV Strategy Coordinators and ISC/NITHA representatives are responsible for submitting a copy of this form to the STBBI Project Assistant via email: contact@skhiv.ca or cchukwuelue@skprevention.ca. Completed forms can also be submitted via fax to 306-651-4301