

### CLIENT HIV Point of Care (POC) Test Results – Daily Log

Testing Site: \_\_\_\_\_

Reviewed by: \_\_\_\_\_

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

				Control Spot (Top)		Test Spot (Bottom)		Confirmation of Reactive POC Result			Waste	Expired	
Date	Tester	Lot # and Expiry Date	Client Identifiers (2)	Valid	Invalid	Not Reactive	Reactive	True Positive	False Positive	WHY Not Confirmed	Enter # from below	# of kits	Comments
			<b>TOTAL</b>										

**INVALID?** – No blue dot at top. Repeat POC if possible, enter repeat result on new line. Test by serology if unable to do another POC test. Add comment regarding possible cause.  
**If Invalid a second time** – send serology sample for lab testing AND RUN QC before testing more clients.

**Reasons for Waste** – Please enter the number associated with the type of waste in the appropriate cell above.

- |                            |  |                        |                           |                                      |
|----------------------------|--|------------------------|---------------------------|--------------------------------------|
| 1 Blood collection Problem | 3 Previously Positive Result               | 5 Patient Refused      | 7 Client requested retest | 9 Other (please explain in Comments) |
| 2 Vial Spill               | 4 Kit Failure - NOTIFY PROGRAM IMMEDIATELY | 6 Instructions Failure | 8 Missing kits            |                                      |