

# Chart Review Form (Required)

Reviewer: \_\_\_\_\_ Date of Review: \_\_\_\_\_

Risk Reduction Specialist: \_\_\_\_\_ Chart Number: \_\_\_\_\_

Date of Session(s):

Initial \_\_\_\_\_

Follow-Up \_\_\_\_\_

Rapid \_\_\_\_\_

Rapid Follow-Up \_\_\_\_\_

Completeness of Record	Yes	No	N/A
Signed consent form (if anonymous, consent signed appropriately)			
HIV Result			
Other lab result(s)			
If confidential test, best way to contact			
Referrals documented			
Confirmation of referrals documented			
Documentation of partner referrals			
Risk Reduction Specialist notes on Initial Session			
Risk Reduction Specialist notes on Follow-Up Session			
Evidence that the client was given a written copy of step(s)			

Documentation of Core Elements	0	1	2	3	N/A
Client's perception of his/her own HIV/STD/HCV risk					
Summary of risks					
Pattern of risk behavior/risk triggers					
Last possible exposure/risk behavior					
Past attempts at risk-reduction					
Current client support including services					
Overall Quality of Documentation of Core Elements:	(0=documentation missing; 1=room for improvement; 2=satisfactory; 3=very good)				

Quality of Risk Reduction Step (Initial)	0	1	2	3
Addresses behavior(s) related to HIV/STD/HCV risk				
Relates to client's specific risk circumstances				
SMART Step (specific, measurable, appropriate, realistic, time-phased)				
Appears realistic (incremental step)				
Overall Quality of Risk Reduction Step:	(0=documentation missing; 1=room for improvement; 2=satisfactory; 3=very good)			

<b>Quality of Risk Reduction Step (Follow-Up)</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>N/A</b>
Addresses behavior(s) related to HIV/STD/HCV risk					
Relates to client's specific risk circumstances					
SMART Step (specific, measurable, appropriate, realistic, time-phased)					
Appears realistic (incremental step)					
Overall Quality of Risk Reduction Step:	(0=documentation missing; 1=room for improvement; 2=satisfactory; 3=very good)				

Comments on any items missing or incompletely documented:

Comments on the adequacy of the counseling notes:

Transcribe the risk reduction step(s) *exactly as recorded*:

Comments on the quality of the risk-reduction step(s):

Overall strength of the documentation:

Areas requiring development or improvement:

Additional comments: