



# Saskatchewan HIV/HCV Preceptorship Opportunities

## Primary Care Physicians, Nurse Practitioners & Medical Residents

### *Information Package*

Updated July 2020

Recognizing that patients living with HIV and/or HCV have varied medical and social needs, it is beneficial for primary care providers to receive specialized training to develop the knowledge and skills required to confidently manage HIV and HCV.

In response, the Saskatchewan Infectious Disease Care Network (SIDCN) coordinates HIV & HCV preceptorship opportunities for primary care physicians, nurse practitioners and medical residents. Mentees are matched with an Infectious Disease Specialist or experienced HIV/HCV Physician and attend half or full day HIV/HCV clinics. Clinics occur at various locations across the province, and funding is provided if travel is required.

*This Assessment program has been certified by the College of Family Physicians of Canada for up to 16 Mainpro+ credits.*

### **Benefits of HIV/HCV Physician Preceptorship**



### **HIV/HCV Preceptorship Experience**

During the preceptorship, participants will gain knowledge to:

- Counsel patients on common concerns around HIV and/or HCV that arise in routine care.
- Recognize when to refer complex cases to the relevant specialists.
- Acquire knowledge about medications used to treat HIV and cure HCV.
- Counsel patients on best practices for harm reduction and prevention.

After the completion of the preceptorship, members of the HIV/HCV specialist team will continue to be available for consultation or to answer any further questions.

For more information or to request a preceptorship, contact [amanda.galambos@sidcn.ca](mailto:amanda.galambos@sidcn.ca)



## Request Form

# HIV and/or HCV Preceptorship

(Return form by e-mail [amanda.galambos@sidcn.ca](mailto:amanda.galambos@sidcn.ca) or fax (306) 952-4089)

<b>Name</b>	
<b>Address</b>	
<b>E-mail</b>	

<input type="checkbox"/>	Primary Care Physician
<input type="checkbox"/>	Medical Resident

<input type="checkbox"/>	Nurse Practitioner
<input type="checkbox"/>	Other:

**Are you interested in receiving preceptorship specific to:**

- HIV  HCV  Both

**Which statement best describes your current HIV practice:**

- Managing primary care in people living with HIV, but not initiating Anti-Retroviral (ARV) Medication
- Initiating newly diagnosed patient with HIV on ARVs, as well as managing their primary care needs
- Testing and referring patients to another HIV care provider
- Do not yet feel comfortable managing HIV. I need more education
- Other:

**Which statement best describes your current HCV practice:**

- Managing primary care in people living with HCV, but not prescribing Direct Acting Agents (DAAs)
- Initiating newly diagnosed patient with HCV on DAAs, as well as managing their primary care needs
- Testing and referring patients to another HCV care provider
- Other:

**Do you have any specific learning goals or areas of interest?**

**Additional Comments**



## HIV/HCV Preceptorship Expense Form Expense Claim Form

### Participant Information

Name:

Address:

E-mail:

### Mentorship Information

Name of mentoring physician:

List the location(s) where your mentorship experience occurred:

Check all that apply to the mentorship setting(s): <ul style="list-style-type: none"> <li><input type="radio"/> Urban</li> <li><input type="radio"/> Rural</li> <li><input type="radio"/> Northern</li> <li><input type="radio"/> First Nation Community</li> </ul>	<ul style="list-style-type: none"> <li><input type="radio"/> Acute/Hospital</li> <li><input type="radio"/> Out-Patient Clinic</li> <li><input type="radio"/> Travel/Remote Clinic</li> <li><input type="radio"/> Other:</li> </ul>
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### Expense Claim

Date(s) of Mentorship	Mileage Calculate .50 cents x total # km	Meal allowance \$20.60
1.		
2.		
<b>Total Amount \$</b>		

Once completed, return to:  
**Amanda Galambos**  
 HIV Primary Care Capacity Program Coordinator  
 Saskatchewan Infectious Disease Care Network  
 320 Ave F South, Saskatoon, SK S7M 1T2  
 Fax (306) 952-4089  
[amanda.galambos@sidcn.ca](mailto:amanda.galambos@sidcn.ca)