



**MINISTRY OF HEALTH**  
Viral Load Request Form

**Facility Details**

Facility Name: .....  
MFL Code: .....  
Facility/CCC email: .....  
Facility/CCC phone no: .....

County: .....  
Sub-county: .....  
Clinician's phone no: .....  
Clinician's Name: .....

**Facility Laboratory details**

Date & Time sample dispatched: .....  
Lab focal person phone contact: .....  
**Hub details**  
Date and time sample dispatched: .....  
Hub focal person phone contact: .....

No	Patient Name	CCC No <i>Indicate full ccc number of the clients as it appear in the patient file. (MFL-XXXXX )/NUPI</i>	Recency No RECMF####	Justification code	DOB <i>(dd/mm/yyyy)</i>	Sex	If female, select the following 1= Pregnant 2= Breast feeding 3= None of the above	Sample type <i>(select from code below)</i>	Date & Time of collection <i>(dd/mm/yy yy)</i>	Date & Time of separation /centrifugation <i>(dd/mm/yyyy)</i>	Date started on ART <i>(dd/mm/yy yy)</i>	Current ART Regimen <i>(select from code below) (dd/mm/yyyy)</i>	Date initiated on current regimen <i>(dd/mm/yyyy)</i>	Rejection <i>(for reason select from code below)</i>	
														Y/N	Reason
A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P
1		ccc													
		NUPI													
2		ccc													
		NUPI													
3		ccc													
		NUPI													

**Code for Sample Type:**

1= Plasma in PPT 2= Plasma in cryovial

**Code for Justification:** 1= Routine VL 2=confirmation of treatment failure (repeat VL) 3= Clinical failure 4= Single drug substitution 5=Baseline VL (for infants diagnosed through EID) 6=Confirmation of persistent low-level Viremia (PLLV) 7= Recency 8= PMTCT NP 9=PMTCT KP +

**Code for Sample Rejection** 1=Missing Sample 2=Hemolysed sample 3=Missing patient ID 4=Sample request form & sample mismatch 5=Sample not under cold chain 6=Expired PPT tubes 7=No request form 8=Improper packaging 9=Insufficient volume

**NOTE: FOR ANY SAMPLE THAT HAS A RECENCY NUMBER NOTE THAT THE COLUMN: B, C, L, M & N ARE NOT MANDATORY FIELDS**

**ADULT ART REGIMEN CODES**

1<sup>ST</sup> LINE: | AF2E=TDF + 3TC + DTG | AF2B=TDF + 3TC + EFV | AF1D=AZT + 3TC + DTG | AF1B=AZT + 3TC + EFV

| AF4B=ABC + 3TC + EFV | AF4C=ABC + 3TC + DTG | AF2D=TDF + 3TC + ATV/r | AF2F=TDF + 3TC + LPV/r | AF1E=AZT + 3TC + LPV/r | AF1F=AZT + 3TC + ATV/r | AF2A=TDF + 3TC + NVP | AF1A=AZT + 3TC + NVP | AF4A=ABC + 3TC + NVP | AF5X=Any other 1st line Adult regimens

2<sup>ND</sup> LINE: | AS1A=AZT + 3TC + LPV/r | AS1B=AZT + 3TC + ATV/r | AS1C=AZT + 3TC + DTG | AS2A=TDF + 3TC + LPV/r | AS2B=TDF + 3TC + DTG | | AS2C=TDF + 3TC + ATV/r | AS5A=ABC + 3TC + LPV/r | AS5B=ABC + 3TC + ATV/r | AS5C=ABC + 3TC + DTG | AS6X=Any other 2nd line Adult regimens |

3<sup>RD</sup> LINE: | AT2D=TDF+3TC+DTG+DRV+RTV | AT2E=TDF+3TC+RAL+DRV+RTV | AT2F=TDF+3TC+DTG+ETV+DRV+RTV | AT2X=Any other 3rd line Adult regimens |

**PAEDIATRIC REGIMEN CODES**

1<sup>ST</sup> LINE: | CF2B=ABC + 3TC + EFV | CF2D=ABC + 3TC + LPV/r | CF2A=ABC + 3TC + NVP | CF2F=ABC + 3TC + RAL | CF2G=ABC+3TC+DTG | CF1A=AZT + 3TC + NVP | CF1B=AZT + 3TC + EFV | CF1C=AZT + 3TC + LPV/r | CF4E=TDF + 3TC + DTG | CF5X=Any other 1st line Pediatric regimens |

2<sup>ND</sup> LINE: | CS1A=AZT + 3TC + LPV/r | CS2A=ABC + 3TC + LPV/r | CS2B=ABC+3TC+DTG | CS1C=AZT + 3TC + DRV+RTV+RAL | CS2D=ABC + 3TC + DRV+RTV+RAL | CS4X=Any other 2nd line Pediatric regimens |

3<sup>RD</sup> LINE: | CT1H=AZT + 3TC + DRV+RTV+RAL | CT2D=ABC + 3TC + DRV+RTV+RAL | CT3X=Any other 3rd line Pediatric regimens



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