

# Southern California Border HIV/AIDS Project

## HIV Testing Results Form

Today's Date: (MM/DD/YY)

		/			/		
--	--	---	--	--	---	--	--

Staff ID:

--	--	--

Project sub-site:

--	--	--

HRSA number (ALWAYS USE, if known):

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Date of test: (MM/DD/YY)

		/			/		
--	--	---	--	--	---	--	--

Results:

HIV-negative    Inconclusive    HIV-positive

Estimated return date: (MM/DD/YY)

		/			/		
--	--	---	--	--	---	--	--

Date client returned for results: (MM/DD/YY)

		/			/		
--	--	---	--	--	---	--	--

Did client return for results?    yes    no

**Target Population: (Check all that apply)**

Latino/a migrant farm worker (male/female)

yes    no

Latino/a youth sex worker (male/female)

yes    no

Transborder Latino (male)

yes    no

Latina adult sex worker (female)

yes    no

Newly immigrated Latino MSM (male)

yes    no

Latina woman (female)

yes    no



8939510960