# Risk Reduction Observation Notes: Follow-Up Session for Negative HIV and/or HCV Results

**Risk Reduction Specialist:** __________________________  **Observer:** __________________________

**Session Date:** __________________________  **Site/Location:** __________________________

**Start Time:** __________________________  **End Time:** __________________________  **Total time:** __________________________

Did this Risk Reduction Specialist also do the initial counseling for this session?  □ Yes  □ No

**Instructions:** Use this form during the risk reduction session to take notes. Use Form A-2, Risk Reduction Observation: Follow-Up Session for Negative HIV and/or HCV risks, for your final documentation.

## Orient to Session and Provide Test Result(s)
- Introduce
- Confidentiality
- Verify
- Readiness
- Provide clearly
- Review meaning
- Assess reaction
- Recent risk
- Other test results

## Review the Risk Reduction Step
- Review
- Success
- Barriers
- Problem solve
- Encourage

## Revise the Risk Reduction Step
- Challenges to change
- Revise/develop step
- Problem solve
- Support
- Commitment
- Document

## Identify Sources of Support and Provide Referrals
- Assess support
- Previous referrals
- Longstanding issues
- Willingness
- Types
- Provide referrals
- Help access
### Summarize and Close the Session
- Review appts
- Encourage client
- Review contact info
- Close

### Use of Counseling Skills, Concepts, and Components


### Other Comments