**UC09: Health Center Worker provides protocolized pMTCT + antenatal care**

Description: Once women are identified as pregnant, it is considered standard of care in Rwanda to receive at least 4 antenatal care visits. When mothers are found to be HIV+, they get a specific pMTCT care protocol, which routinely occurs in health centers, but must occasionally be referred (as not all health centers have pMTCT/HIV care). During these visits, it is the job of the health center worker to manage and prescribe prophylactic HIV drugs, provide preventive and diagnostic care against specific protocols for each visit, and to triage high risk health conditions and delivery conditions appropriately.

Actors: Health Center Worker, Patient, patient record system (OpenMRS), and Shared Health Record (SHR) **[is there a more specific pMTCT nurse actor in these circumstances?] –yes, sometimes there is a pMTCT worker**

Pre-Conditions: Patient identified as pregnant, at risk or diagnosed with HIV, and due for an antenatal care visit

Post-Conditions: Health center worker completes pMTCT antenatal care form and gets data into OpenMRS. OpenMRS automatically transmits this information to the SHR.

Special Requirements: n/a

Event Flow Chart:

Ideal Pathway: mother comes to health center (w/CHW involvement), mother gets registered by front clerk electronically, registration process triggers SHR patient record import into OpenMRS, OpenMRS to generate summary health record (perhaps pMTCT content specific?), OpenMRS alerts to historical issues of concern (ie, HIV), as well as to anticipated pMTCT services and screening protocols. Health center worker ultimately carries out protocolized clinical encounter using pMTCT antenatal care form, information gets entered into OpenMRS by health worker, OpenMRS transmits data to SHR.

Technology Navigation:

State Diagrams (if applicable):

Alternative Pathway(s):

* **Mother comes to HC on her own**: In such cases the community health worker needs to be informed of the patient’s visit. This could potentially occur through a SMS transaction.
* **No clinical summary**: Mother comes to health center, health center worker carries out clinical encounter using pMTCT antenatal care form, information gets entered into OpenMRS by health worker, OpenMRS transmits data to SHR.
* **No history-specific alerting**: mother comes to health center, OpenMRS to generate summary health record (perhaps pMTCT content specific?), OpenMRS alerts to anticipated pMTCT services and screening protocols. Health center worker carries out protocolized clinical encounter using pMTCT antenatal care form, information gets entered into OpenMRS by health worker, OpenMRS transmits data to SHR.
* **No anticipated service alerts**: mother comes to health center, OpenMRS to generate summary health record (perhaps pMTCT content specific?), OpenMRS alerts to historical issues of concern (ie, HIV). Health center worker carries out protocolized clinical encounter using pMTCT antenatal care form, information gets entered into OpenMRS by health worker, OpenMRS transmits data to SHR
* **Manually accessed summary generation vs. registration-based trigger**: mother comes to health center, clinic worker uses OpenMRS to generate summary health record (including previous pregnancy information), health center worker carries out clinical encounter using antenatal care form, information gets entered into OpenMRS by health worker, OpenMRS transmits data to SHR.
* **Data Entry Clerk vs. Nurse/Midwive direct entry**: Mother comes to health center, health center worker carries out clinical encounter using antenatal care form, information gets entered into OpenMRS by data entry clerk, OpenMRS transmits data to SHR.
* **Printed vs. Computer Interface-based Summaries**: the patient record could potentially deliver the patient’s summary information in many ways, including a printed form, a computer-based direct interaction with data, or even pushed information to a mobile device (tablet, smartphone, etc).

Extension Points (other use cases that link):

* UC07: Health Center Worker verifies/documents pregnancy
* UC08: Health Center Worker provides protocolized antenatal care

Needed Documents:

* All pMTCT protocols and/or forms in English