Appendix B: Changes to engagement in care flowcharts recommended by the CHIPS Steering Committee

Table s1: Changes to engagement in care flowcharts recommended by the CHIPS Steering Committee

Flowchart	Changes
Flowchart 1: Off ART	 More detail about CD4 cell count needed to classify follow-up time: Changes < 50 cells/μL need immediate follow-up if CD4 cell count ≤350 cells/μL (next visit in 1 month) More leniency if first drop CD4 cell count ≥50 cells/μL in higher CD4 categories (>350 cells/μL) (next visit in 3 months) More concerned about a second consecutive CD4 cell count drop ≥50 cells/μL even with CD4>350 cells/μL
Flowchart 2: On ART, viral load >50c/mL	 (next visit in 2 months) More detail required about size of increase and decrease of VL: Participants on a PI for >6 months with a larger increase in VL (not defined in meeting but subsequently defined as per Guidelines for the use of antiretroviral agents in HIV-1 infected adults and adolescents. 2016 (284) as >0.5 log) need to have a clinic appointment sooner (next visit in 1 month) Participant on cART for 1-6 months, not on a PI with a larger decrease in viral load (defined as above as a drop of >0.5 log (next visit in 2 months) If increase/decrease of ≤0.5 log or no decrease in viral load make appointment sooner (next visit in 1 month) More detail about CD4 cell count needed to classify follow-up time. Participant on ART for on PI, previous VL>50c/mL≥, CD4 cell count 351-500,: More leniency if first drop ≥50 cells/μL in higher CD4 categories (>350 cells/μL) (next visit in 3 months) More concerned about a second consecutive CD4 cell count drop ≥50 cells/μL even with CD4>350 cells/μL (next visit in 2 months)
Flowchart 3:On ART viral load ≤50c/mL	Add detail that if weight ≥40kg OR on adult doses.