The following is a listing of clinical conditions appropriate for clinical telehealth infectious disease consultations. If you would like to refer a patient with a condition which is not listed below, please send your request with the patient’s chart notes to the telehealth coordinator for the specialist’s consideration.

**Clinical Conditions:**
- HIV Infection at virtually any stage
- Viral Hepatitides
- Fungal infections (cutaneous or systemic)
- Complicated urinary tract infections
- Chronic osteomyelitis
- Evaluations for immune deficiency

**Disease specific requirements:**

<table>
<thead>
<tr>
<th>Clinical Condition</th>
<th>Tests prior to consult</th>
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<tbody>
<tr>
<td>HIV</td>
<td>HIV viral load</td>
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<tr>
<td></td>
<td>CD4 count</td>
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<tr>
<td></td>
<td>Prior antiviral meds</td>
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<tr>
<td>HCV</td>
<td>HCV viral load</td>
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<td></td>
<td>Genotype</td>
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<td></td>
<td>Liver functions tests</td>
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<tr>
<td></td>
<td>HAV, HBV serologic tests</td>
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Diagnoses with vague complaints (chronic fatigue syndrome, fibromyalgia) are more problematic and are usually best evaluated in person. Inappropriate conditions would include those patients too ill to give a history or submit to an examination.

**Appointment Scheduling:**
- New: 60 minutes
- F/U: 30 minutes

**Level of Presenter Required:**
- May include a brief introduction from the primary care provider when appropriate

**Video Equipment Required:**
1. Videoconferencing unit
2. General patient exam camera

**The following information must be received prior to scheduling an appointment:**
1. [Telehealth Referral Request Form](#).
2. Recent H&P and all applicable clinical information from patient’s chart
3. Disease specific tests as outlined

**The following must be received before the consult begins:**
1. Signed [UC Davis Health Acknowledgement of Receipt: Notice of Privacy Practices form](#) (new patients only)
2. Documented verbal consent from patient for participation in telehealth consultation

**Consultant:** Stuart Cohen, MD