frequently in some developed countries about HIV management. HIV is a public health concern in all spheres of health care and its guidelines need to be constantly updated. The objective is to present the development of the virtual strategies for improvement of quality of health of HIV care in Latin America community-based Primary Care (PC) practices.

Methods A descriptive study of the development of a learning object was carried out to improve effectiveness of care of HIV by the PC physicians. The structure and elements of a traditional AD strategy were adapted by an educational outreach program.

Results The development of a learning object led to the compilation of materials necessary for the professional practice of HIV treatment, including models for notification, prescription, segmental examinations and the development of a flow for decision making, including multidisciplinary aspects such as contraception, social benefits, control of opportunistic infections, and others. The instructional design was structured to facilitate navigation, and can be used as support material during consultations, and can be easily accessed by mobile or computers.

Conclusion After the START and TEMPRANO studies trials, which are tools extensively used in the management of HIV, PC practices assume a pivotal part of the care of people living with HIV. The Guidelines’ priority agenda of updating includes a number of other chronic and acute illnesses, however, especially in developing countries, there is no sheltered schedule for the physician to undertake lifelong education that includes so many updates. Virtual AD has the potential to reach out a large number of physicians, even with difficult access or time, without losing the one-by-one training feature.

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