



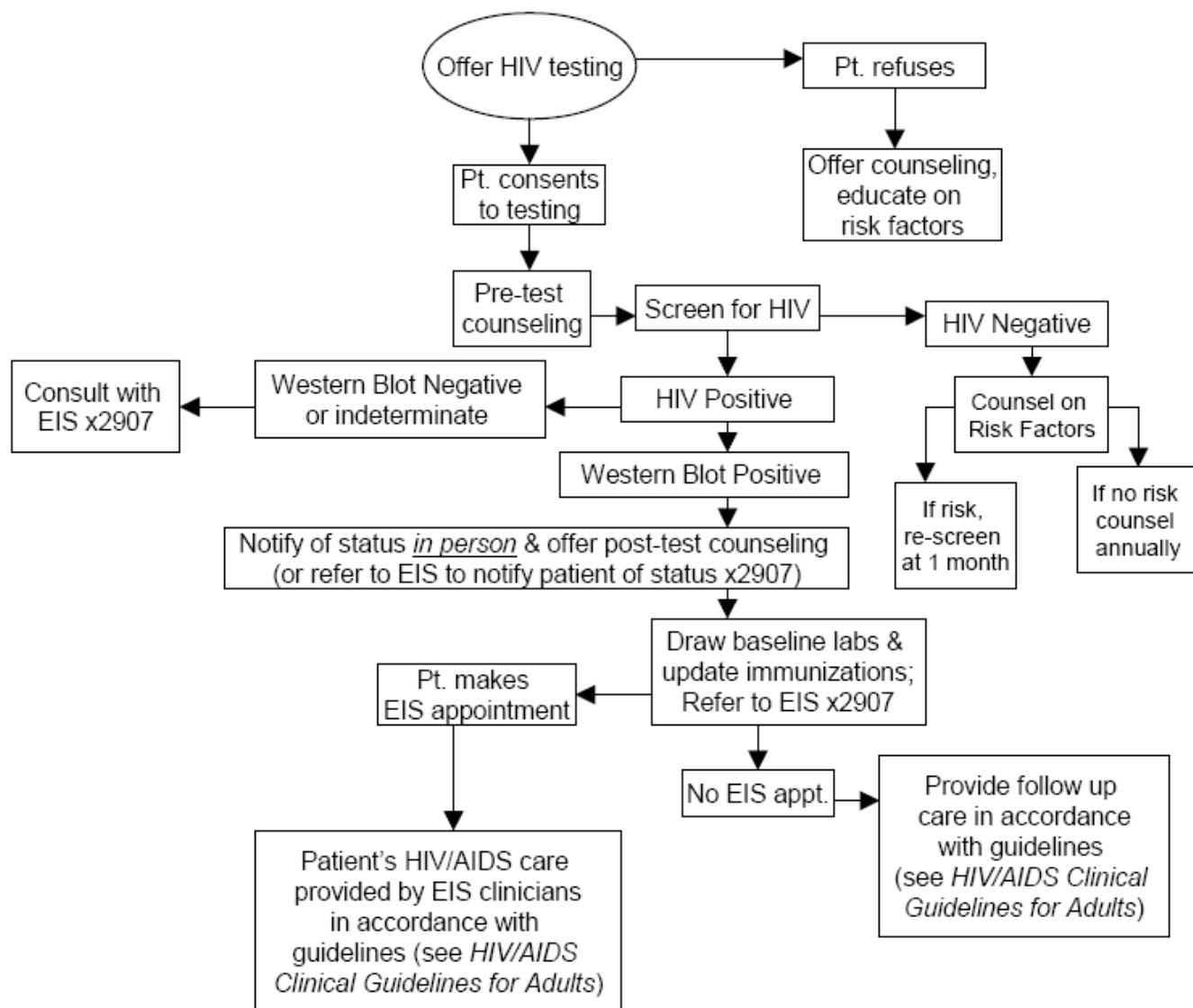
HIV—Screening & Consent for Testing

1. Algorithm for HIV Screening
2. Screening & Consent for HIV Testing
 - a. Offering testing
 - b. Counseling on HIV Risk Factors
 - c. Pre-test Counseling
 - d. Post-test Counseling
 1. Positive Result
 2. Preliminary Positive Result

This guideline is designed for general use for most adult patients, but may need to be adapted to meet the special needs of a specific patient as determined by the patient's provider.

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Algorithm for HIV Screening



This guideline is designed for general use for most patients, but may need to be adapted to meet the special needs of a specific patient as determined by the patient's provider.

2. Screening & Consent for HIV Testing

a. Who should be offered HIV testing?

- HIV risk assessment and screening should be incorporated into standard medical care of **all** clients.
- Clients who meet the following criteria are at greater risk:
 - Injecting drug users
 - Individuals who have unprotected sex with someone with HIV
 - Men who have sex with men (MSM)
 - Individuals who have ever been diagnosed with, or treated for an STD, hepatitis or TB
 - Pregnant women
 - Babies born to infected women
 - Health care workers with known occupational exposure
 - Anyone with any risk factor identified in a risk assessment

Checklist retrieved June 14, 2006 from:

http://www.health.state.ny.us/diseases/communicable/hepatitis/docs/instructions_doh4336.pdf

b. All patients should be counseled on risk factors for HIV (see sections c. and d. below for specific pre- and post-test counseling guidelines). **If a patient verbally consents, an HIV screen should be ordered. Verbal consent should be documented in the patient's medical record.**

- If a patient has an HIV+ test result, the lab will automatically perform a confirmatory Western Blot on the sample. Only when the Western Blot is positive, the test results must be given *in person* to the patient by the tester, the patient's primary care provider (PCP), or by the EIS staff. (If the Western Blot is *negative* or *indeterminate*, contact EIS providers at x2907).
- Post-test counseling will be offered at the time of notification of diagnosis.
- Patients will be referred to EIS services upon diagnosis by contacting the EIS CM at 729-2907 or 729-4209. Primary Care Providers (PCP) may refer patients to EIS at any time for consultation. Patients may also self-refer.
- Prior to referral to EIS (if possible):
 - The patient will be updated on immunizations and screenings (see *HIV/AIDS Clinical Guidelines for Adults, Section 3F: Management of HIV/AIDS Infected Adults—Immunizations*).
 - The Alaska Native Medical Center (ANMC) Referral and Consultation Form will be completed and faxed to the EIS Case Manager at fax #: 729-3952.
- At the patient's EIS appointment:

- Patients will be notified, in person, of their diagnosis, if the tester or PCP has not already notified them.
- Post test counseling will be offered when notified of diagnosis.
- The HIV panel blood draw will be completed (*see HIV/AIDS Clinical Guidelines for Adults, Section 3D: Management of HIV/AIDS Infected Adults—Recommended laboratory schedule*)

c. HIV pre-test counseling

The following checklist is a guide to pre-test counseling for patients who consent to HIV testing:

- Discuss risk factors for HIV with patient including risks for transmission and how HIV can be prevented.
- Perform an in-depth personalized risk assessment with the patient to identify risk reduction methods specific to their circumstances.
- Provide information about HIV disease and availability of treatment.
- Provide information regarding the HIV test including types of tests available [OraQuick®, OraQuick Advance® (if available), Multispot® rapid HIV test on serum, Enzyme Immunoassay (EIA) on serum or plasma], test benefits, and consequences.
- Discuss the importance of obtaining test results and provide patient with specific procedures for doing so.
- Explain the meaning of test results in explicit, understandable language.
- Provide resources about where to obtain further information and other services.
- Notify patients that all positive tests will be confirmed with a Western Blot prior to patient notification.
- Inform patient that all positive tests must be reported to the State Department of Epidemiology.
- Explain to patient that they will be notified in person of any positive test result and offered post-test counseling at time of notification.
- Inform patient that if the results of the HIV test are positive they will be asked to identify partners (including name, phone number and address, if available) and that the State Dept. of Epidemiology will make an effort to contact and test these partners, but will not notify the partner who referred them nor the circumstances under which the exposure occurred.

d. Checklist for HIV post-test counseling

1. The following checklist is a guide to post-test counseling for patients who tested positive for HIV:

- Provide education about HIV disease and treatment options.

- Request partner identification information including name, phone number and address of contacts.
- Refer to EIS (x2907) for follow-up care. If patient refuses EIS appointment, provide follow-up care to patient, if possible (see *HIV/AIDS Clinical Guidelines for Adults, Section 3: Management of HIV/AIDS Infected Adults* for guidelines).
- Provide referrals for mental health, substance abuse, traditional medicine, clergy
- Offer family and partner education and counseling
- Notify State Department of Epidemiology (State Epidemiology Office at 907-269-8000, or automated reporting system at 1-800-478-1700).
- Providers and counselors can refer to <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5019a1.htm> for more information about HIV counseling and providing HIV test results.

2. Reactive (Preliminary Positive) Rapid HIV Test Results

Further testing is always required to confirm a reactive (preliminary positive) test result. Providing reactive (preliminary positive) results to clients without the benefit of a same-day confirmatory test can be a challenge. For all clients with a reactive rapid HIV test result, it is essential to:

- Explain the meaning of the reactive test result in simple terms, avoiding technical jargon.
- Emphasize the importance of confirmatory testing and schedule a return visit for the confirmatory test results.
- Stress the importance of taking precautions to avoid the possibility of transmitting infection to others while awaiting results of confirmatory testing.

A simple message to convey this information could be:

“Your preliminary test result is positive, but we won’t know for sure if you are infected with HIV until we get the results from your confirmatory test. In the meantime, you should take precautions to avoid transmitting the virus.”

Retrieved on June 14, 2006 from:

<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5019a1.htm>