

**10.9 HIV (HUMAN IMMUNODEFICIENCY VIRUS) TESTING**

TITLE	DESCRIPTION
DEFINITION:	CDC recommends that opt-out HIV screening and diagnostic testing be considered for all clients age 13-64 in health care settings. Significant populations of HIV-infected people are undiagnosed. This protocol assists with early diagnosis of HIV infection and reduction of transmission by education and awareness. Clients should be screened according to current CDC STI Treatment Guidelines. HIV infection is a reportable condition in the state of Montana.
SUBJECTIVE:	<p><b>Must include:</b></p> <ol style="list-style-type: none"> <li>Sexual Health Assessment.</li> </ol> <p><b>May Include</b> (at least one of the following):</p> <ol style="list-style-type: none"> <li>All clients being treated for an STI.</li> <li>Clients 13-64 years of age.</li> <li>Clients entering into a new sexual relationship.</li> <li>Client whose blood or body fluid was the source of an occupational exposure (such as health care workers, boxers, lab techs, law enforcement personnel, and blood and organ donors).</li> <li>All injection drug users and their sex partners.</li> <li>People who exchange sex favors for money or drugs (and their partners).</li> <li>Any client who has had a new sex partner since their last test.</li> <li>All pregnant clients (should be done at prenatal visit).</li> <li>All clients with symptoms of HIV infection or opportunistic infection.</li> <li>All inmates of prison or jail systems and their partners.</li> </ol>
OBJECTIVE:	<p><b>May Include:</b></p> <ol style="list-style-type: none"> <li>Signs of being immunocompromised.</li> <li>Evidence of any STIs.</li> <li>Clients should be screened according to current CDC STI Treatment Guidelines. The following screening criteria for clients should be used: <ol style="list-style-type: none"> <li>Female: <ol style="list-style-type: none"> <li>All female clients aged 13-64 years (opt-out).</li> <li>All female clients who seek evaluation and treatment for STDs.</li> </ol> </li> <li>Male: <ol style="list-style-type: none"> <li>All male clients aged 13-64 years (opt-out).</li> <li>All male clients who seek evaluation and treatment for STDs.</li> </ol> </li> <li>Men Who Have Sex with Men (MSM): <ol style="list-style-type: none"> <li>At least annually for sexually active MSM if HIV status is unknown or negative and the patient himself or his sex partner(s) have had more than one sex partner since most recent HIV test.</li> </ol> </li> </ol> </li> </ol>
LABORATORY:	Approved HIV screening tests.
ASSESSMENT:	Candidate for HIV testing.
PLAN:	<ol style="list-style-type: none"> <li>HIV screening should be voluntary and performed only with client knowledge and understanding. <ol style="list-style-type: none"> <li>Provide client-centered HIV information.</li> </ol> </li> </ol>

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	<ul style="list-style-type: none"> <li>b. Clients should be informed about HIV infection and the meaning of reactive, positive, and negative test results.</li> <li>c. If the client declines HIV screening, this should be documented in the chart.</li> </ul> <p>2. HIV screening results are confidential with the exception by law (MT Administrative Rule 37.114.203)</p> <p>3. Provide client with test results in person.</p> <ul style="list-style-type: none"> <li>a. If non- reactive test by rapid test or negative by diagnostic tests: <ul style="list-style-type: none"> <li>i. Inform client that an early HIV infection may still be present.</li> <li>ii. Encourage repeat HIV testing in 3 months if client has a risk factor.</li> <li>iii. Reinforce need for safer sex practices.</li> </ul> </li> <li>b. If reactive by rapid HIV test: <ul style="list-style-type: none"> <li>i. Advise client that there is a likelihood of HIV infection and that the test must be confirmed with additional testing.</li> <li>ii. Obtain blood specimen for confirmatory testing for HIV infection.</li> <li>iii. Test for other STIs.</li> <li>iv. Obtain pregnancy test, if indicated.</li> <li>v. Refer for crisis intervention, if indicated.</li> <li>vi. Encourage safer sex practices.</li> </ul> </li> <li>c. If positive by diagnostic tests: <ul style="list-style-type: none"> <li>i. Assess need for immediate referral for medical, behavioral, psychological services, PMD, and infection control specialists, etc.</li> <li>ii. Offer list of community resources such as local public health departments and HIV support groups.</li> <li>iii. Offer <a href="http://www.cdc.gov/hiv">CDC HIV</a> information for additional information. (<a href="http://www.cdc.gov/hiv">http://www.cdc.gov/hiv</a>) and 1-800-232-4636) and other resources as appropriate.</li> <li>iv. Refer prenatal clients for high-risk OB care.</li> <li>v. Refer non- pregnant clients for immediate consultation with an HIV specialist (such as infection control provider).</li> <li>vi. Provide appropriate HIV counseling to all clients with confirmed HIV positive test, and to their partners and contacts.</li> <li>vii. Test for other STIs.</li> <li>viii. Pregnancy test, if indicated.</li> <li>ix. Encourage safer sex practices.</li> <li>x. Sexual and needle-sharing partners need to be notified of possible exposure to HIV and encourage them to be tested.</li> <li>xi. Local reporting laws and regulations must be followed.</li> </ul> </li> <li>d. Refer for Pre-Exposure Prophylaxis (PrEP) or Post-Exposure Prophylaxis (PEP) if indicated.</li> </ul>
EDUCATION:	<ul style="list-style-type: none"> <li>1. If client declines testing, provide information about anonymous/confidential testing (home tests are available for those 17 years of age and older).</li> <li>2. Educate client about the limitations of the test.</li> <li>3. Counsel and reinforce the importance of safer sex practices and have a risk reduction plan.</li> <li>4. Stress the importance of follow-up and testing of sexual contacts, if HIV positive.</li> </ul>

TITLE	DESCRIPTION
REFERRAL TO MEDICAL PROVIDER:	<ol style="list-style-type: none"> <li>1. Clients with acute opportunistic infections.</li> <li>2. Clients with serious depressive reactions to test results.</li> <li>3. All positive confirmatory tests.</li> </ol>
REFERENCES:	<ol style="list-style-type: none"> <li>1. <a href="https://www.cdc.gov/std/tg2015/tg-2015-print.pdf">Centers for Disease Control and Prevention. Sexually Transmitted Diseases Treatment Guidelines, 2015. MMWR Recomm Rep 2015;64 (No.RR-3): Pp. 21-25. (https://www.cdc.gov/std/tg2015/tg-2015-print.pdf).</a></li> <li>2. <a href="http://www.cdc.gov/hiv/library">HIV/AIDS</a>. (www.cdc.gov/hiv/library). (Updated 08/11/2016, Retrieved 2/9/2017).</li> <li>3. <i>Women's Health Care Clinic, Harbor, UCLA. <a href="http://whcc.labiomed.org/book/3.1.18%20Human%20Immunodeficiency%20Virus%20HIV%20Testing.pdf">Human Immunodeficiency Virus (HIV) Testing</a>. 8/2015. (http://whcc.labiomed.org/book/3.1.18%20Human%20Immunodeficiency%20Virus%20HIV%20Testing.pdf).</i></li> <li>4. <a href="https://www.cdc.gov/std/tg2015/screening-recommendations.htm">Centers for Disease Control and Prevention Screening Recommendations</a> (https://www.cdc.gov/std/tg2015/screening-recommendations.htm). Retrieved 8/19/19.</li> </ol>