# **HIV USE CASE: 2006 HIV Testing Guidelines**

**CDC Guidelines:** [Revised Recommendations for HIV Testing of Adults, Adolescents, and Pregnant Women in Health-Care Settings](https://www.cdc.gov/mmwr/preview/mmwrhtml/rr5514a1.htm)

Key Recommendations are highlighted in yellow:

#### Screening for HIV Infection

* In all health-care settings, screening for HIV infection should be performed routinely for all patients aged 13--64 years. Health-care providers should initiate screening unless prevalence of undiagnosed HIV infection in their patients has been documented to be <0.1%. In the absence of existing data for HIV prevalence, health-care providers should initiate voluntary HIV screening until they establish that the diagnostic yield is <1 per 1,000 patients screened, at which point such screening is no longer warranted.
* All patients initiating treatment for TB should be screened routinely for HIV infection.
* All patients seeking treatment for STDs, including all patients attending STD clinics, should be screened routinely for HIV during each visit for a new complaint, regardless of whether the patient is known or suspected to have specific behavior risks for HIV infection.

**Repeat Screening**

* Health-care providers should subsequently test all persons likely to be at high risk for HIV at least annually. Persons likely to be at high risk include injection-drug users and their sex partners, persons who exchange sex for money or drugs, sex partners of HIV-infected persons, and MSM or heterosexual persons who themselves or whose sex partners have had more than one sex partner since their most recent HIV test.
* Health-care providers should encourage patients and their prospective sex partners to be tested before initiating a new sexual relationship.
* Repeat screening of persons not likely to be at high risk for HIV should be performed on the basis of clinical judgment.
* Unless recent HIV test results are immediately available, any person whose blood or body fluid is the source of an occupational exposure for a health-care provider should be informed of the incident and tested for HIV infection at the time the exposure occurs.

**Consent and Pretest Information**

* Screening should be voluntary and undertaken only with the patient's knowledge and understanding that HIV testing is planned.
* Patients should be informed orally or in writing that HIV testing will be performed unless they decline (opt-out screening).
  + Screening after notifying the patient that an HIV test will be performed unless the patient declines (opt-out screening) is recommended in all health-care settings. Specific signed consent for HIV testing should not be required. General informed consent for medical care should be considered sufficient to encompass informed consent for HIV testing.
  + HIV test results should be provided in the same manner as results of other diagnostic or screening tests.
* Oral or written information should include an explanation of HIV infection and the meanings of positive and negative test results, and the patient should be offered an opportunity to ask questions and to decline testing. With such notification, consent for HIV screening should be incorporated into the patient's general informed consent for medical care on the same basis as are other screening or diagnostic tests; a separate consent form for HIV testing is not recommended.
* Prevention counseling should not be required as a part of HIV screening programs in health-care settings.
* Easily understood informational materials should be made available in the languages of the commonly encountered populations within the service area. The competence of interpreters and bilingual staff to provide language assistance to patients with limited English proficiency must be ensured.
* If a patient declines an HIV test, this decision should be documented in the medical record.

**Note:** *Please know that this guideline is being updated and so these recommendation may change.**We will be working with Informaticians within the center to create value sets and translate the updated guideline but that would be next year.*

**USPSTF Guidelines: HIV Screening**

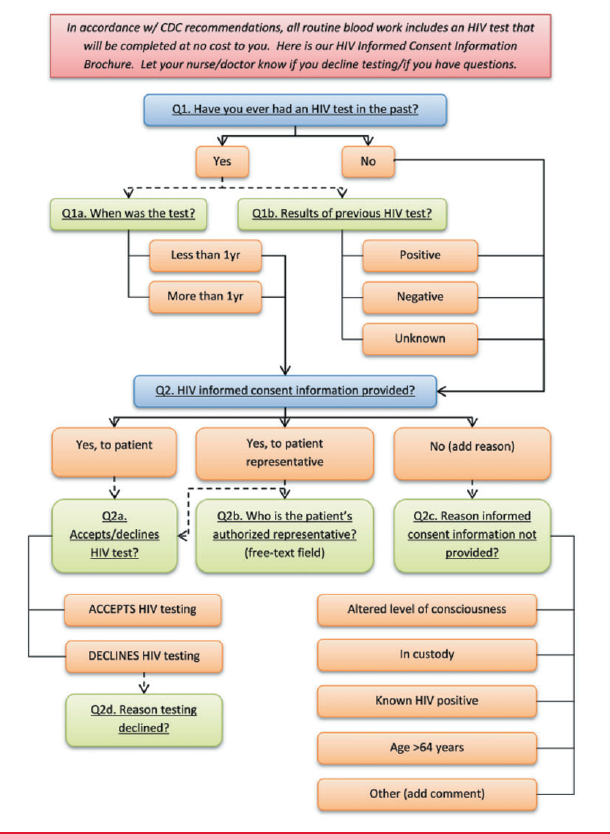
Adolescents and Adults 15-65 Years Old

The USPSTF recommends that clinicians screen for HIV infection in adolescents and adults aged 15 to 65 years. Younger adolescents and older adults who are at increased risk should also be screened.

<https://www.uspreventiveservicestaskforce.org/Page/Document/UpdateSummaryFinal/human-immunodeficiency-virus-hiv-infection-screening>

**Examples of Clinical Decision Support Tool in EMR**

1. McGuire R, Moore E. [Using a configurable EMR and decision support tools to promote process integration for routine HIV screening in the emergency department](https://watermark.silverchair.com/ocv031.pdf?token=AQECAHi208BE49Ooan9kkhW_Ercy7Dm3ZL_9Cf3qfKAc485ysgAAAj4wggI6BgkqhkiG9w0BBwagggIrMIICJwIBADCCAiAGCSqGSIb3DQEHATAeBglghkgBZQMEAS4wEQQMV3ht8lbey4PlJS7_AgEQgIIB8Y-b1V5dMVyLxbDS_RYR-oEjble8D5pYDed9GheFxObm8C0EUIefk7JCjFKs4-MjatDrU8wMGOA2k_59JzQhlfg1SqJjWmjE7Sp15AJXSQTIv_nwPuEfbEWqfljOIDL_Fvie5b1B_2WZJHUZJ5AZjwuAwBzIvz3tbRIsnhD-B3eZUDEvxDL9vRFBEOBKc2Z8EtvKcfUuLpz3kotk8i7OMoKc07anlNmfSBmjr8ZdXqUDGrbF5AIY0WHFN-yctfLu-_42w_bK7JAL1AvuJjrT5m-sHKzg-Lag8qkI7txGaEFyd5quoVPogIHZ8JmoQPP8RoLYsicMJ7QPFQHxxaZGclR1diDEq1C9MyihGlkk-qKuf9ujHbbUO0bAF08LMBfUSddkXGcIbUy0tCiMpgHYmP2sDPP4fnrxgPCDzEkXAqc_-O4-i_lZRPTmL_byjlfgNpZhNC3nml5GtB7ERiWf_C6XjuJ1bvqvlosI3J5h9wfOvowms1zbKKEaTfkwjCvY04hg_r_cnYVG3PCcgY45qoct7r4HLvsehYyVKgS0oK9d9NhSzHc5k-3y_g0FHaAmQOuaot50Jj155jQSvq4MkCPt1rKwRo2E_J64qEJONc4Qxj8lPzkOOEkoKKSH_N5sYT-eRMd_Lf84gY4FBnTnBEKS). J Am Med Inform Assoc. 2016 Mar;23(2):396-401. doi: 10.1093/jamia/ocv031. Epub 2015 Sep 2.



1. [Routine Opt-out HIV Screening and Detection of HIV Infection among Emergency Department Patients](https://targethiv.org/sites/default/files/supporting-files/11084_Gonzalez_Davila_508.pdf), Nada Fadul, MD1; Ciarra Dortche, MPH2; 1University of Nebraska Medical Center; 2East Carolina University

*(This presentation has a EMR algorithm)*

1. [Implementation of an innovative, integrated electronic medical record (EMR) and public health information exchange for HIV/AIDS](https://academic.oup.com/jamia/article/19/3/448/2909232), Journal of the American Medical Informatics Association, Volume 19, Issue 3, May 2012, Pages 448–452, <https://doi.org/10.1136/amiajnl-2011-000412>
2. Georgia Tech Spring semester class work to convert the 2006 testing guidelines through FHIR:

<https://cs6440-s19-prj039.apps.hdap.gatech.edu/> (*the link says ‘service unavailable’ and I am following up with GATech to find out what happened.)*

* The first page you see is the "View Guidelines" page. This shows all guidelines that have already been entered. I have gone ahead and entered three of the guidelines you have sent us.
* The large green button in the top right is how you add a guideline. When you get to the Add Guideline page, you will see several inputs. The "Description" input is where you put the text of the guideline. The remaining inputs are where you enter the specific information important to the guideline. For instance, for a guideline that reads "Any individual between 13 and 64 should get tested for HIV at least once", you would enter "13" in the low age box, and "64" in the high age box. For a guideline that does not depend on age, you can check "All ages".
* The same logic goes for the "Conditions" and "Procedures" inputs. If any of these is important to the logic of the guideline, you can select it here. You can select more than one for each.
* For the "Previously Tested for HIV" input, this indicates whether a guideline is applicable to anyone ("Any") or someone who has never been tested before ("No"). For example, the guideline reference before (13-64 years old) only applies to people who have never been tested before ("No"). The guidelines that people who tuberculosis should be tested applies to anyone, regardless of whether they've been previously tested ("Any").
* Back on the main page, you can select "Edit" to edit an existing guideline. This page looks almost identical to the "Add Guideline" page, but will be pre-filled with the existing guideline information.
* Finally, back on the main page, you can also delete existing guidelines using the "Delete" button.