# **HIV CDS Logic**

**Based on 2006 CDC HIV 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)

Recommends screening all individuals **13-65**, including all pregnant women presenting from initial diagnosis through those presenting in labor. Recommends more frequent screening for individuals at high risk.

**Supplemental Content USPTF June 2019 HIV Screening:**

<https://www.uspreventiveservicestaskforce.org/Page/Document/UpdateSummaryFinal/human-immunodeficiency-virus-hiv-infection-screening1>

<https://jamanetwork.com/journals/jama/fullarticle/2735345>

Recommends screening all individuals **15-65**, including all pregnant women presenting from initial diagnosis through those presenting in labor. Recommends screening for younger or older individuals who are determined to be at high risk. Recommends more frequent screening for individuals at high risk.

Factors Conferring “High Risk” Category Membership:

* Male-to-male sexual contact
* IV drug use
* Heterosexual or other contact with:
  + Anal intercourse without condom
  + Vaginal intercourse without a condom and with more than 1 partner whose HIV status is unknown
  + Individuals who exchange sex for drugs or money
  + Having STI
  + Partner with STI
  + Partner with HIV
  + Partner in other high-risk category above
* People requesting STI testing
* Patients with TB

Indication for immediate screening:

* Healthcare exposure to blood or other infectious bodily fluid
* Request for pre-exposure screening prior to new partner

Screening in pregnancy:

<https://jamanetwork.com/journals/jama/fullarticle/2735344?appid=scweb>

* All women should be screened for HIV as part of early or initial prenatal screening
* Women in high risk category or in area with high prevalence of HIV should be rescreened in the third trimester

Consent:

* Patient will be notified that testing is being ordered either in person verbally or in writing
* Patient may opt out of testing at this time—if patient opts out this should be documented
* Patient does not require counseling to be tested
* Educational material should be offered to patient in appropriate health literacy level, modality and language

Testing:

Pregnant women in labor, recommend Rapid HIV test—otherwise routine HIV testing

* Rapid testing: Rapid HIV test IF POSITIVE then:
  + also order HIV-1 and HIV-2 with HIV-1 p24 antigen IF POSITIVE then use routine testing pathway

IF NEGATIVE:

OR

* Routine testing: HIV-1 and HIV-2 antibodies with HIV-1 p24 antigen with reflex (automatic) supplemental testing if positive

IF NEGATIVE: STOP

AND: If supplemental testing indeterminate:

* HIV-1 RNA

After all NEGATIVE testing:

* Routine safe sex counseling

After all POSITIVE testing:

Optimally there would be an HIV treatment CDS pathway triggered

At a minimum:

* Counseling
* Referral for HIV specialty treatment
* HIV viral load test

Rescreening:

* All individuals should have at least one lifetime HIV test
* Individuals at high risk should be screened at LEAST annually:
  + Selected individuals at highest risk should be screened more frequently up to every 3-6 months
  + Individuals seeking STI testing should be screened at every visit

Exceptions to screening\* (2006 guideline only):

* If prevalence in practice is <0.1%, routine screening can be omitted in patients who do not have any high risk factors and who are not pregnant

**HIV Screening: Screening Protocol Age 13/15-65**

Criteria: Patient or partner with: IVDU+, sex work (money or drugs), STD+, MSM, multiple partners, new partner OR blood/fluid exposure, TB+ or STD clinic encounter

***False***

Risk group meeting criteria for HIV screening?

***True***

HIV Prevalence <0.1%?

***True***

Patient Opt Out: document and reset reminder?

***False***

Turn off reminder

Patient provided informed consent (verbal or written)?

***False***

***True***

Document provider consent provided (yes/no), Order screen for HIV with rapid test, antibody/p24 or RNA (see notes)

***True***

HIV+

***True***

Add HIV diagnosis, report to public health surveillance, add to HIV registry, trigger HIV care protocol, counseling

***False***

Candidate for PrEP?

***False***

***True***

Counsel prevention, reset screening reminder

Initiate PrEP protocol