

Official websites use .gov A .gov website belongs to an official government organization in the United States. Secure .gov websites use HTTPS A lock () or https:// means you've safely connected to the .gov website. Share sensitive information only on official, secure websites. The number of reported cases of congenital syphilis (CS) has increased every year since 2012 in the United States. From 2017 to 2021, the CS rate increased 219% from 24.4 to 77.9 cases per 100,000 live births.¹ CS prevention relies on screening and treatment of pregnant women found to have syphilis. Many states' laws require syphilis testing of pregnant women. State policies regarding prenatal syphilis screening may be one way to address rising CS rates through increased screening. This webpage includes the text of state laws requiring screening of pregnant women for syphilis in the United States. The method for performing the legal analysis underlying the information on this page is based on a 2018 peer reviewed article published in the Maternal and Child Health Journal.² This webpage expands on that article through regularly updated legal assessments. The most recent legal assessment was in November 2023. To better understand these policies, you can also review the text of the laws underlying the analysis, which are included on this page.

Disclaimer: The information on this web page does not represent the official legal positions of the U.S. Department of Health and Human Services (HHS), the Centers for Disease Control and Prevention/HHS, or state and local governments, and is not meant to provide specific legal advice. Users of this web page should consult with their official state and local legal counsel for specific legal advice and guidance. X = Screening

Required O = Screening Required only if at increased risk Each licensed physician and in the absence of a licensed physician each licensed graduate nurse who attends a pregnant woman for conditions relating to the pregnancy during the period of gestation or at delivery shall take, or have taken, a sample of the blood of the woman at the time of the woman's first professional visit or within 10 days after the visit, unless the serological test is contrary to the tenets or practice of the religious creed of which the

woman is an adherent. The blood specimen shall be submitted to an approved laboratory or clinic for a standard serological test of syphilis. Any other person permitted by law to attend pregnant women but not permitted by law to take blood samples shall have a sample of blood taken by a licensed physician, or on order of a licensed physician, and shall submit the sample to an approved laboratory or clinic for a standard serological test for syphilis. A licensed physician or licensed nurse attending a pregnant woman during the period of gestation or at delivery, or a representative of a laboratory or clinic who violates AS 18.15.150 - 18.15.180 is guilty of a misdemeanor and, upon conviction, is punishable by a fine of not more than \$500. However, a person attending a pregnant woman during the period of gestation or at delivery, who requests the specimen in accordance with AS 18.15.150, and whose request is refused, is not guilty of a misdemeanor. For the purposes of AS 18.15.150 - 18.15.180 a standard serological test is a test for syphilis approved by the department and shall be performed in a laboratory or clinic approved by the department. On request the laboratory test required by AS 18.15.150 - 18.15.180 shall be performed without charge at the laboratories of the department. The blood specimen thus obtained shall be submitted to an approved laboratory for a standard laboratory test for syphilis. Any licensed physician and surgeon, or other person engaged in attendance upon a pregnant woman or a recently delivered woman, or any representative of a laboratory who violates any provision of this chapter, is guilty of a misdemeanor. However, a licensed physician and surgeon, or other person engaged in attendance upon a pregnant or recently delivered woman, whose request for a specimen is refused, is not guilty of a misdemeanor for failure to obtain it. The Maternal and Child Health Program Act (Section 27) shall not apply if the pregnant woman objects to the test required by that act on the ground that the test conflicts with her religious beliefs or practices. Any licensed physician and surgeon or other person engaged in attendance upon a pregnant woman during the period of gestation or at delivery or any representative of a

laboratory who violates the provisions of this part 2 is guilty of a misdemeanor and, upon conviction thereof, shall be punished by a fine of not more than three hundred dollars. Every licensed physician and surgeon or other person engaged in attendance upon a pregnant woman during the period of gestation or at delivery who requests such specimen in accordance with the provisions of section 25-4-201 and whose request is refused is not guilty of a misdemeanor.

6.1 During prenatal care, the midwife or other licensed health care provider shall follow a regular schedule of prenatal care with increasing frequency towards term. The responsibilities of the midwife during this time include:

6.1.1 Initial Prenatal Visit:

6.1.1.1 History and assessment of general health;

6.1.1.2 History and assessment of obstetric and psychosocial status;

6.1.1.3 Discussion of current CDC recommendations for immunization during pregnancy;

6.1.1.4 Physical Exam, including:

6.1.1.4.1 Height;

6.1.1.4.2 Weight;

6.1.1.4.3 Blood pressure;

6.1.1.4.4 Pulse;

6.1.1.4.5 Breast exam;

6.1.1.4.6 Abdomen, to include fundal height, fetal heart tones, fetal lie, and presentation;

6.1.1.4.7 Estimation of gestational age;

6.1.1.4.8 Assessment of varicosities, edema, and reflexes.

6.1.1.5 The midwife must complete the following laboratory tests at the initial prenatal visit:

6.1.1.5.1 Hemoglobin or hematocrit or CBC;

6.1.1.5.2 Urinalysis for protein and glucose;

6.1.1.5.3 Syphilis serology;

6.1.1.5.4 Blood group, Rh type, and antibody screen;

6.1.1.5.5 Hepatitis B surface antigen;

6.1.1.5.6 Rubella screen;

6.1.1.5.7 Gonorrhea test;

6.1.1.5.8 Chlamydia test;

6.1.1.5.9 HIV test;

6.1.1.5.10 Urine culture.

6.1.1.6 The midwife must provide appropriate prophylactic antibiotic therapy for GBS positive clients pursuant to CDC guidelines.

6.1.1.7 The midwife should consider genetic testing, urine drug screen, and Hepatitis C testing as indicated.

6.1.2 On-going Prenatal Care:

6.1.2.1 Assessment of general health;

6.1.2.2 Assessment of psychosocial health;

6.1.2.3 Nutritional counseling;

6.1.2.4 Physical Exam to include, but not limited to:

6.1.2.4.1 Blood pressure;

6.1.2.4.2 Weight;

6.1.2.4.3 Abdomen, to include fundal height, fetal heart tones, fetal lie, and presentation;

6.1.2.4.4 Estimation of gestational age by physical

findings; 6.1.2.4.5 Assessment of varicosities, edema and reflexes. 6.1.2.5 The midwife must offer the following laboratory tests: 6.1.2.5.1 Hemoglobin, hematocrit, or CBC between 28 and 32 weeks; 6.1.2.5.2 Gross urinalysis for protein and glucose at each visit; 6.1.2.5.3 Glucose Tolerance Test; 6.1.2.5.4 Group Beta Strep (GBS) cultures, according to CDC guidelines. If penicillin allergic, determine antibiotics to which the strain of GBS carried by the client is sensitive and treat appropriately during labor; 6.1.2.5.5 Herpes (HSV 1 or HSV 2) cultures, if indicated; 6.1.2.5.6 Prophylactic Rh-immune globulin information for Rh negative clients; 6.1.2.5.7 Urine Drug Screen.

205.1 Unless the person in charge of a case of pregnancy includes in the patient's case history a written statement giving the medical reasons why a serological test for syphilis and a laboratory test for gonorrhea performed at the times specified in this section would be harmful to the patient, that person shall include both of these tests in the management of the case at the first visit of that patient's pregnancy is established as a certainty. 205.2 When it is determined that tests for syphilis and gonorrhea have been performed within thirty (30) days before the visit at which pregnancy is established, the serological test need not be performed at that time. 205.3 Any person in charge of a case of pregnancy during the last trimester shall include in the management of the case a serological test for syphilis and a laboratory test for gonorrhea, notwithstanding the fact that either or both tests have already been performed during the pregnancy. 205.4 Any person required by the provisions of this section to make a written report of a case of venereal disease shall submit the report to the Director in a sealed envelope, marked "Confidential." 205.5 The name of the person reported as having a case of venereal disease may be referred to by number. 205.6 Whenever the person reporting a case of venereal disease elects to report by number instead of by name, a record shall be kept of the case in the files of the person reporting under the same number for a period of not less than three (3) years from the date of diagnosis. 205.7 The record required in § 205.6 shall be made available to the

Director upon request. 205.8 The reports and records incident to a case of venereal disease shall be used for statistical and public health purposes only, and the Director shall not disclose the identity of the person so reported except under order of a court or with the written permission of the person. Every person, including every physician licensed under chapter 458 or chapter 459 or midwife licensed under part I of chapter 464 or chapter 467, attending a pregnant woman for conditions relating to pregnancy during the period of gestation and delivery shall cause the woman to be tested for sexually transmissible diseases, including HIV, as specified by department rule. Testing shall be performed by a laboratory appropriately certified by the Centers for Medicare and Medicaid Services under the federal Clinical Laboratory Improvement Amendments and the federal rules adopted thereunder for such purposes. The woman shall be informed of the tests that will be conducted and of her right to refuse testing. If a woman objects to testing, a written statement of objection, signed by the woman, shall be placed in the woman's medical record and no testing shall occur. The department may require every pregnant woman to submit to a standard serologic test, as defined by the department, and may require any person attending or giving prenatal care to such woman to take or cause to be taken a blood specimen for use in such test. Such specimens shall be submitted for laboratory testing in the manner prescribed by the department; and all laboratories conducting such tests shall comply with the rules, regulations, and reporting requirements prescribed therefor[sic] by the department. Every physician attending a pregnant woman in the State for conditions relating to the woman's pregnancy during the period of gestation or at delivery, shall, in the case of every woman so attended, take or cause to be taken one or more samples of the blood of the woman, except when the attending physician shall have evidence that a pregnant woman has met this requirement through a previous test for syphilis, and shall submit such samples to an approved laboratory for a standard serologic test for syphilis. Every other person permitted by law to attend pregnant women in the State,

but not permitted by law to take blood samples, shall cause one or more samples of the blood of every pregnant woman attended by the person to be taken by a duly licensed physician or state certified laboratory, or any other person permitted by law to withdraw blood and shall have the samples submitted to an approved laboratory for a standard serologic test for syphilis. The samples of blood shall be taken at such times during the period of gestation as are designated by rules adopted by the department of health. Every pregnant woman shall permit the sample of the woman's blood to be taken as hereinabove provided. Every licensed physician attending a pregnant woman for a condition relating to her pregnancy, or at delivery, or after delivery for a condition relating to her pregnancy, shall in the case of every woman so attended, take or cause to be taken a sample of blood of such woman at the time of first examination or within fifteen (15) days thereafter, and shall submit such sample to the laboratory of the department of health and welfare or to a laboratory approved by the director of the department, for a standard serological test for syphilis. In submitting such sample to the laboratory, the physician shall specify whether it is for a prenatal test or a test following recent delivery. The laboratory of the department of health and welfare shall analyze such sample upon the request of any licensed physician and may collect a fee for the performance of such analyses. Every other person attending a pregnant or recently delivered woman in the state, but not permitted by law to take blood samples, shall within fifteen (15) days of the first examination cause a sample of blood of such woman to be taken by a licensed physician and have the sample submitted to the laboratory of the state department of health and welfare for a standard serological test for syphilis, or to a laboratory approved by said board. Any person who violates the provisions of sections 39-1001-39-1006 shall be guilty of a misdemeanor; provided, however, that every licensed physician or other person attending a pregnant or recently delivered woman, who requests such sample in accordance with the provisions of sections 39-1001-39-1006, and whose request is refused, shall not be guilty of a

misdemeanor. The Division of Family Health, Department of Public Health, State of Illinois, through its Maternal and Child Health Program may allocate funds for programs providing health services for women of reproductive age. All such services must be delivered based upon the standards of the American College of Obstetrics and Gynecology set forth in Section 630.80(a)(5), Family Planning Services Code (77 Ill. Adm. Code 635.90), Regionalized Perinatal Health Care Code (77 Ill. Adm. Code 640), and Hospital Licensing Requirements (77 Ill. Adm. Code 250.1810-1860) (See Section 630.80(a)(5)). One or more of the following MCH services may be included in application proposals for Title V and State MCH Project grant funds:

Sec. 10. A physician who diagnoses a pregnancy of a woman shall take or cause to be taken a sample of blood: and shall submit each sample to an approved laboratory for a standard serological test for syphilis.

Sec. 11. A person other than a physician who is permitted by law to attend a pregnant woman, but who is not permitted by law to take blood specimens, shall cause a sample of the blood of the pregnant woman to be taken by a licensed physician, who shall submit the sample to an approved laboratory for a standard serological test for syphilis.

Sec. 12. If at the time of delivery positive evidence is not available to show that standard serological tests for syphilis have been made in accordance with section 10 of this chapter, the person in attendance at the delivery shall take or cause to be taken a sample of the blood of the woman at the time of the delivery and shall submit the sample to an approved laboratory for a standard serological test for syphilis. The department shall adopt rules which incorporate the prenatal guidelines established by the centers for disease control and prevention of the United States department of health and human services as the state guidelines for prenatal testing and care relative to infectious disease. A provision of this chapter shall not be construed to require or compel any person to take or follow a course of medical treatment prescribed by law or a health care provider if the person is an adherent or member of a church or religious denomination and in accordance with the tenets or

principles of the person's church or religious denomination the person opposes the specific course of medical treatment. However, such person while in an infectious stage of disease shall be subject to isolation and such other measures appropriate for the prevention of the spread of the disease to other persons.

1.18(1) Purpose. Iowa Code section 263.8 and 681—subrule 5.3(1) provide that the state hygienic laboratory shall perform without charge all bacteriological, serological, and epidemiological examinations and investigations which are required by the department and established in rule, including specimens relating to diseases communicable from human to human and from animals to human and any specimen when there is probable cause that a direct threat to public health exists. The purpose of this rule is to designate those examinations which shall be performed by the state hygienic laboratory without charge pursuant to these legal authorities.

1.18(2) Acute infectious diseases. Regardless of the entity that submits the specimen, the following examinations shall be performed by the state hygienic laboratory without charge:

1.18(3) Sexually transmitted disease and infections and HIV/AIDS. The following examinations shall be performed by the state hygienic laboratory without charge if the following defined criteria have been met and if the specimen was sent to the state hygienic laboratory from sites approved by and submitted to the laboratory by the department: Each physician or other person attending a pregnant woman in this state during gestation, with the consent of such woman, shall take or cause to be taken a sample of blood of such woman within 14 days after diagnosis of pregnancy is made. Such sample shall be submitted for serological tests which meet the standards recognized by the United States public health service for the detection of syphilis and hepatitis b to a laboratory approved by the secretary of health and environment for such serological tests. Any state, United States public health service, or United States army, navy or air force laboratory or any laboratory approved by the state health agency of the state in which the laboratory is operated shall be considered approved for the purposes of this act. Any laboratory in

this state, performing the tests required by this section shall make a report to the secretary of health and environment of all positive or reactive tests on forms provided by the secretary of health and environment and also shall make a report of the test results to the submitting physician or person attending the woman. Laboratory statements, reports, files and records prepared pursuant to this section shall be confidential and shall not be divulged to or open to inspection by any person other than state or local health officers or their duly authorized representatives, except by written consent of the woman. Every physician attending a woman in the State by reason of her being pregnant during gestation shall in the case of every woman so attended take or cause to be taken, with her consent, a sample of blood of such woman, and submit such sample for a standard serological test for syphilis and Rh factors to a laboratory of the department or to a laboratory approved for these tests by the department. Such laboratory tests as are required by sections 1231 to 1234 must be made on request without charge by the department. (a) This section does not apply to a woman who objects to a standard serological syphilis test because the test is against the religious beliefs and practices of the woman. (b)(1) The individual attending a woman for pregnancy shall submit to a medical laboratory: (2) The medical laboratory to which a blood sample is submitted shall do a standard serological syphilis test that is approved by the Department. A physician attending a pregnant woman in this commonwealth during gestation shall take or cause to be taken a sample of blood of such woman at the time of first examination, and shall submit such sample for a standard serological test for syphilis to a laboratory of the department or to a laboratory approved for such test by the department; provided, that not more than one physician attending a pregnant woman during gestation shall be required to comply with the provisions of this section. Sec. 5123. (1) Except as otherwise provided in subsection (3), a physician or an individual otherwise authorized by law to provide medical treatment to a pregnant woman shall take or cause to be taken at the time of the woman's initial examination

test specimens of the woman for the purpose of performing tests for HIV, syphilis, and hepatitis B, and take or cause to be taken during the third trimester of the woman's pregnancy test specimens of the woman for the purpose of performing tests for HIV, hepatitis B, and syphilis in accordance with guidelines established by the federal Centers for Disease Control and Prevention, and shall submit the specimens to a clinical laboratory approved by the department for the purpose of performing tests approved by the department for the infections described in this subsection. (2) Except as otherwise provided in subsection (3), if, when a woman appears at a health care facility to deliver an infant or for care in the immediate postpartum period having recently delivered an infant outside a health care facility, no record of results from the tests required under subsection (1) is readily available to the physician or individual otherwise authorized to provide care in such a setting, then the physician or individual otherwise authorized to provide care shall take or cause to be taken test specimens of the woman and shall submit the specimens to a clinical laboratory approved by the department for the purpose of performing tests approved by the department for syphilis, HIV, and hepatitis B. (3) Subsections (1) and (2) do not apply if, in the professional opinion of a physician, the tests are medically inadvisable or the woman does not consent to be tested. The woman may orally communicate her decision to decline the testing. (4) The physician or other individual described in subsections (1) and (2) shall make and retain a record showing the date the tests required under subsections (1) and (2) were ordered and the results of the tests. If the tests were not ordered by the physician or other person, the record must contain an explanation of why the tests were not ordered. (5) The test results and the records required under subsection (4) are not public records, but are available to a local health department and to a physician who provides medical treatment to the woman or her offspring.

Subdivision 1. Practice standards. Subd. 2. Written plan. A licensed traditional midwife must prepare a written plan with each client to ensure continuity of care throughout

pregnancy, labor, and delivery. The written plan must incorporate the conditions under which the medical consultation plan, including the transfer of care or transport of the client, may be implemented. Subd. 3. Health regulations. A licensed traditional midwife must comply with all applicable state and municipal requirements regarding public health. Subd. 4. Client records. A licensed traditional midwife must maintain a client record on each client, including: Subd. 5. Data. All records maintained on each client by a licensed traditional midwife are subject to sections 144.291 to 144.298. Any licensed physician, midwife, registered nurse and all persons who may undertake, in a professional way, the obstetrical and gynecological care of pregnant women in the state of Missouri, who shall publish in any manner not required by law the result of said blood tests, or who, if a blood test is made, fails to follow the provisions of sections 210.030 to 210.060 or who misrepresents the facts required to be reported in said sections, shall, on conviction, be adjudged guilty of a misdemeanor, and be punished by imprisonment in the county jail not exceeding one year, or by a fine of not more than one thousand dollars, or by both such fine and imprisonment. In addition to meeting the eligibility criteria for client screening established by the board pursuant to 37-27-105, a direct-entry midwife shall recommend that patients secure the following services by an appropriate health care provider: The district court within the county wherein any person affected by this part resides may waive the requirements of this part as to the person if the judge is satisfied, by affidavit or other proof, that the tests required by the part are contrary to the tenets or practices of the religious creed of which the applicant is an adherent and that the public health and welfare will not be injuriously affected thereby. Every physician attending pregnant women in the State for conditions relating to their pregnancy during the period of gestation and/or at delivery shall, in the case of every woman so attended, take or cause to be taken a sample of blood of such woman at the time of first examination and take or cause to be taken a sample of blood of the woman or from the umbilical cord of the infant at the time of delivery of a live infant,

and shall submit such sample to an approved laboratory for a standard serological test for syphilis. Every other person permitted by law to attend pregnant women in the State, but not permitted by law to take blood samples, shall cause a sample of blood of such pregnant women or postpartum woman or infant, as the case may be, to be taken by a physician duly licensed to practice medicine and surgery and have such sample submitted to an approved laboratory for a standard serological test for syphilis. For the purpose of this act a standard serological test shall be a test for syphilis approved by the State Department of Health, and shall be made at a laboratory licensed in syphilis serology by the department, or by a laboratory in this State approved to make such tests by said department, or at a laboratory outside this State approved by said department, or the health department of the state or territory of the United States or District of Columbia wherein it is located, or at a laboratory of the Armed Forces of the United States or the United States Public Health Services. Such laboratory tests as are required by this act may, at the option of the department, be performed in the laboratories of the State Department of Health without charge. Every responsible physician or birth attendant shall acquire from all infants born, whether alive or dead after 22 weeks gestation, a sample of blood from the umbilical cord and submit it to an approved laboratory for standard serological tests for syphilis. If body blood from the mother is tested for syphilis at the time of birth, the cord blood test requirement shall be waived if the infant's body blood is tested after any positive test result of the mother's blood. *10 NYCRR 69-2.2 requires testing of the infant's cord blood at delivery. While this law did not meet our coding criteria of being a test of the woman, it may nevertheless be relevant for purposes of congenital syphilis prevention. If any pregnant woman is attended during the period of gestation by any person authorized to attend pregnant women, other than a licensed physician, but who is not permitted to take test specimens, then such authorized person shall notify immediately the health commissioner of the city or general health district of the residence of such pregnant

woman. The health commissioner shall cause the test specimens to be taken of such pregnant woman for the purpose of the standard syphilis and gonorrhea tests. Such taking of specimens is subject to section 3701.50 of the Revised Code relating to the condition of the pregnant woman. Every physician who attends any pregnant woman for conditions relating to pregnancy during the period of gestation shall take specimens of such woman at the time of first examination or within ten days thereof, and shall submit such specimens to an approved laboratory for standard syphilis and gonorrhea tests. If, in the opinion of the physician attending such woman, her condition does not permit the taking of specimens for submission to an approved laboratory, then no specimens shall be taken prior to delivery. If no specimens are taken prior to delivery because of the woman's condition, then such specimens shall be taken as soon after delivery as the physician deems it advisable. The health commissioner of the city or general health district, wherein any person required to be tested for syphilis and gonorrhea under this section or section 3701.49 of the Revised Code resides, may waive the requirements of such sections if the commissioner is satisfied by written affidavit or other written proof that the tests required are contrary to the tenets or practices of the religious creed of which the person is an adherent, and that the public health and welfare would not be injuriously affected by such waiver. None of the provisions of this act shall apply to any person who, as an exercise of religious freedom, administers to or treats the sick or suffering by spiritual means or prayer, nor to any person who, because of religious belief, in good faith selects and depends upon such spiritual means or prayer for the treatment or cure of disease. It shall be the duty of every physician engaged in prenatal attendance upon a pregnant woman to obtain a blood specimen of that pregnant woman within thirty (30) days after the first professional visit. That blood specimen shall be submitted to the laboratory of the state department of health, or to a laboratory approved by the department, for the performance of a Wassermann or other standard laboratory blood test for syphilis. Any

violation of the provisions of this section shall constitute a misdemeanor and that physician shall be fined not less than ten dollars (\$10.00) nor more than one hundred dollars (\$100) for each offense. Every physician attending a pregnant woman in the State for conditions relating to her pregnancy during the period of gestation or at delivery shall, in the case of every woman so attended, take or cause to be taken a sample of blood of such woman at the time of his first examination or within three days thereafter and shall submit such sample to an approved laboratory for a standard serological test for syphilis, rubella, Rh factor and a hemoglobin determination, if the latter test is not performed by the physician's staff. Such an approved laboratory must participate in an appropriate proficiency testing program approved by the Department of Health and Environmental Control. Every person, other than a physician, permitted by law to attend pregnant women in the State, but not permitted by law to take blood samples, shall cause a sample of blood of each such pregnant woman to be taken by a physician duly licensed to practice medicine and surgery, registered nurse, laboratory technician or other person authorized to take blood for blood tests and have such sample submitted to an approved laboratory for a standard serological test for syphilis, rubella, Rh factor and a hemoglobin determination, if the latter test is not performed by the physician's staff. Any person who violates any of the provisions of this section shall be guilty of a misdemeanor and, upon conviction, shall be punished by a fine of not more than one hundred dollars or imprisonment for not more than thirty days. The provisions of this section shall not apply to any person who submits a sworn affidavit stating that she objects to the tests herein required on grounds such tests conflict with her religious tenets or beliefs. Each physician attending a pregnant woman in this state during gestation shall, in the case of each woman so attended, take or cause to be taken a sample of blood of such woman at the time of the first examination, and submit such sample for standard serological tests for syphilis to the Office of Laboratory Services or such other laboratories cooperating with, and approved by, the Department

of Health. Every person other than a physician permitted by law to attend upon pregnant women in the state but not permitted by law to take blood tests, shall cause a sample of the blood of such pregnant woman to be taken by a duly licensed physician and submitted for standard serological tests for syphilis to the Office of Laboratory Services or such other laboratories cooperating with, and approved by, the Department of Health. (a) A physician or other person permitted by law to attend a pregnant woman during gestation or at delivery of an infant shall: (a-1) A physician or other person permitted by law to attend a pregnant woman during gestation or at delivery of an infant shall: (b) A successor is presumed to have complied with this section if the successor in good faith obtains a record that indicates compliance with Subsections (a) and (a-1), if applicable. (c) A physician or other person in attendance at a delivery shall: (c-1) If the physician or other person in attendance at the delivery does not find in the woman's medical records results from the diagnostic test for syphilis and HIV infection performed under Subsection (a-1), the physician or person shall: (c-2) If the physician or other person responsible for the newborn child does not find in the woman's medical records results from a diagnostic test for syphilis and HIV infection performed under Subsection (a-1), and the diagnostic test for syphilis and HIV infection was not performed before delivery under Subsection (c-1), the physician or other person responsible for the newborn child shall: (d) Repealed by Acts 2009, 81st Leg., ch. 1124, § 7. (e) Repealed by Acts 2009, 81st Leg., ch. 1124, § 7. (f) Repealed by Acts 2009, 81st Leg., ch. 1124, § 7. (g) Repealed by Acts 1993, 73rd Leg., ch. 30, § 3, eff. Sept. 1, 1993. (h) Repealed by Acts 2009, 81st Leg., ch. 1124, § 7. (i) Before conducting or causing to be conducted a diagnostic test for HIV infection under this section, the physician or other person shall advise the woman that the result of a test taken under this section is confidential as provided by Subchapter F,¹ but that the test is not anonymous. The physician or other person shall explain the difference between a confidential and an anonymous test to the woman and that an anonymous test may be available from

another entity. The physician or other person shall make the information available in another language, if needed, and if resources permit. The information shall be provided by the physician or another person, as needed, in a manner and in terms understandable to a person who may be illiterate if resources permit. (j) The result of a test for HIV infection under Subsection (a)(2)(B), (a-1), (c-1), or (c-2) is a test result for purposes of Subchapter F. (k) Before the sample is taken, the health care provider shall distribute to the patient printed materials about AIDS, HIV, hepatitis B, and syphilis. A health care provider shall verbally notify the patient that an HIV test shall be performed if the patient does not object. If the patient objects, the patient shall be referred to an anonymous testing facility or instructed about anonymous testing methods. The health care provider shall note on the medical records that the distribution of printed materials was made and that verbal notification was given. The materials shall be provided to the health care provider by the department and shall be prepared and designed to inform the patients about: (l) A physician or other person may not conduct a diagnostic test for HIV infection under Subsection (a)(2)(B), (a-1), or (c-1) if the woman objects. A physician or other person may not conduct a diagnostic test for HIV infection under Subsection (c-2) if a parent, managing conservator, or guardian objects. (m) If a screening test and a confirmatory test conducted under this section show that the woman is or may be infected with HIV, hepatitis B, or syphilis, the physician or other person who submitted the sample for the test shall provide or make available to the woman disease-specific information on the disease diagnosed, including: (n) A physician or other person may comply with the requirements of Subsection (m)(1) by referring the woman to an entity that provides treatment for individuals infected with the disease diagnosed. (o) In this section, "HIV" has the meaning assigned by Section 81.101. (p) Not later than January 1 of each odd-numbered year, the department shall report to the legislature the number of cases of early congenital syphilis and of late congenital syphilis that were diagnosed in this state in the preceding biennium. A

practitioner of medicine and surgery or osteopathy attending a pregnant individual shall take samples of blood of such individual, if possible prior to the third month of gestation, and submit the same to a laboratory approved by the Commissioner for a standard serological test for syphilis. Every other person permitted by law to take blood tests shall similarly cause a sample of blood of a pregnant individual attended by the person to be taken by a duly licensed practitioner of medicine and surgery or osteopathy and submit it to a laboratory approved by the Commissioner for a standard serological test for syphilis. The failure of any physician, nurse or midwife to comply with the provisions of § 32.1-60, § 32.1-62 or § 32.1-65 shall, in addition to any other penalty prescribed by law, constitute grounds for revocation of the license or permit of such physician, nurse or midwife by the board issuing such license or permit. Every physician, physician assistant, or advanced practice registered nurse attending a pregnant woman during gestation shall examine and test such woman for such venereal diseases as the Board may designate within 15 days after beginning such attendance. Every other person permitted by law to attend upon pregnant women but not permitted by law to make such examinations and tests shall cause such examinations and tests to be made by a licensed physician, licensed advanced practice registered nurse, or clinic. Serological tests required by this section may be performed by the Department of General Services, Division of Consolidated Laboratory Services (DCLS). Every physician attending a pregnant woman in the state of Washington during gestation shall, in the case of each woman so attended, take or cause to be taken a sample of blood of such woman at the time of first examination, and submit such sample to an approved laboratory for a standard serological test for syphilis. If the pregnant woman first presents herself for examination after the fifth month of gestation the physician or other attendant shall in addition to the above, advise and urge the patient to secure a medical examination and blood test before the fifth month of any subsequent pregnancies. Except as provided in RCW 70.24.025 and 70.24.027, any

person who violates any of the provisions of this chapter or any rule adopted by the board under this chapter, or who fails or refuses to obey any lawful order issued by any state, county or municipal health officer under this chapter shall be deemed guilty of a gross misdemeanor punishable as provided under RCW 9A.20.021. Every physician engaging in attendance upon a pregnant woman in West Virginia shall, as soon as he or she is engaged to attend a woman and has reasonable grounds for suspecting that pregnancy exists, acquaint such woman with the provisions of this article and take or cause to be taken a specimen of blood from such woman. This specimen shall be submitted to the state hygienic laboratory or other laboratory approved by the state department of health as required by the preceding section. If the woman is in a stage of gestation or labor at the time that the diagnosis of pregnancy is made, which may make it inadvisable to obtain the specimen, the specimen of blood shall be obtained within ten days following delivery. The state hygienic laboratory of the state health department shall perform the serological tests required by law on all blood specimens taken from pregnant women by physicians for examination. These tests shall be performed without charge. Upon request it shall be the duty of county and district health officers to draw blood specimens from pregnant women for performing thereon a serologic test for syphilis. This service shall be performed without charge. In those areas where the services of a district or county health officer are not available, the state health department shall assume the responsibility of obtaining the required blood specimens without any charge to the pregnant women. Any physician or representative of a laboratory, making such examinations or tests as are required by this article, or filing such birth or stillbirth certificates, who shall knowingly misrepresent any of the facts called for in the laboratory reports or birth or stillbirth certificate, or who otherwise knowingly and wilfully[sic] shall violate any provision of this article, shall be guilty of a misdemeanor and upon conviction thereof shall be subject to a fine of not less than ten dollars nor more than fifty dollars. For the purposes of this act [§§ 35-4-501 through

35-4-505], a standard serological test shall be a test for syphilis approved by the state department of health, and shall be performed in a laboratory approved by the state department of health. Such laboratory tests as are required by this act shall be performed on request without charge at the state department of health laboratory. Every physician licensed to practice medicine attending a pregnant woman in the state for conditions relating to her pregnancy during the period of gestation or at delivery shall take, or cause to be taken, a sample of blood of such woman at the time of her first professional visit or within ten (10) days thereafter. The blood specimen thus obtained shall be submitted to an approved laboratory for a standard serological test for syphilis. Every other person permitted by law to attend pregnant women in the state but not permitted by law to take blood samples, shall cause a sample of blood of such pregnant women to be taken by a physician duly licensed to practice medicine and have such sample submitted to an approved laboratory for a standard serological test for syphilis. Any licensed physician and surgeon, or other person, engaged in attendance upon a pregnant woman during the period of gestation and/or at delivery, or any representative of a laboratory who violates the provisions of this act [§§ 35-4-501 through 35-4-505] shall be guilty of a misdemeanor, and upon conviction thereof shall be fined not to exceed one hundred dollars (\$100.00); provided, however, every licensed physician and surgeon or other person engaged in attendance upon a pregnant woman during the period of gestation or at delivery, who requests such specimen in accordance with the provisions of W.S. 35-4-502, and whose request is refused, shall not be guilty of a misdemeanor.

