**PCSI Clinical Guidelines**

**Table 1. Summary of current screening[[1]](#footnote-1) and HAV & HBV vaccination recommendations for infected populations with syndemics[[2]](#footnote-2) in San Francisco**

| **Populations** | **HIV screen** | **Chlamydia screen** | **Gonorrhea screen** | **Syphilis screen** | **HCV screen** | **HBV Screen** | **HBV Vacc.** | **HAV Vacc.** | **TB screen** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **PLWHA** |  | On entry, then based on population recommendations | | | | On entry | On entry or if not properly vaccinated | On entry | On entry, then annually |
| **Chlamydia** | All persons at least once, then based on specific  recommendations |  | At time of treatment\* | At time of treatment\* | NR | NR\*\* | Anyone >19 | NR | NR |
| **Gonorrhea** | At time of treatment\* |  | At time of treatment\* | NR | NR\*\* | Anyone >19 | NR | NR |
| **Syphilis** | At time of treatment\* | At time of treatment\* |  | NR | NR\*\* | Anyone >19 | NR | NR |
| **HCV** | On entry | See population data for specific recommendations | | |  | To diagnose past or present infection | On entry | On entry | On entry |
| **Acute HBV** | On entry | On entry | | |  |  |  | On entry |  |
| **Chronic HBV** | On entry | See population data for specific recommendations | | | On entry |  |  | On entry | On entry |
| **Latent TB** | On entry | If clinically indicated | If clinically indicated | On entry | NR |  |
| **Active TB** | On entry | Consider screening on entry | Consider screening on entry | Screen for HBV, then vaccinate if HBV neg | NR |  |

**\* If patient has Chlamydia, Gonorrhea, or Syphilis screen for all**

**\*\*Except if foreign-born in HBV-endemic area (all except North America, Australia, Japan and Western Europe)**

**NR: Not recommended**

**Table 2. Summary of screening and HAV & HBV vaccination recommendations for specific populations in San Francisco**

| **Populations** | **HIV screen** | **Chlamydia screen** | | **Gonorrhea screen** | | **Syphilis screen** | **HCV screen** | **HBV Screen** | **HBV Vacc.** | **HAV Vacc.** | **TB screen** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **General population** | All persons at least once, then based on specific  recommendations | See population data for specific recommendations | | | | | All persons 40-69yrs at least once, then based on specific  recommendations | See population data for specific recommendations | Universal Child <18  as well as anyone >19 who is high risk or by request | Universal Child <18  as well as anyone >19 who meets certain provisions (ie liver disease) | No unless from  high risk pool  See guidelines |
| **Homeless and marginally housed** | See population data for specific recommendations | | | | | | On entry and annually | NR | See general pop. | See general pop. | Screen on entry then annually if still in shelter or SRO |
| **Foreign Born** | See population data for specific recommendations | | | | | | Foreign born from HCV endemic countries particularly SE Asia, Japan, Egypt & Pakistan | All except for Australia, Western Europe, & N. America (w/exception of native ppls of Alaska & northern Canada) | If from country w/>2% pr. test then vaccinate | See general pop. | Foreign born from TB endemic countries (All except for North America, Australia, Japan, and Western Europe) |
| **Incarcerated Individuals** | At intake, risk targeted for substance use | At intake, All MSM  Males <30  Females <35  PLWHA | At intake, All MSM  Males <30  Females <35  PLWHA | | At intake, PLWHA  If GC+ and/or CT+ = directed testing | | By request, IDU, substance users and annually for PLWHA | By request, PLWHA, IDU, or from country w/>2% pr. | Anyone >19  PLWHA, by request or medical indication | If HBV &/or HCV+ and HAV unknown, test then vaccinate | On entry and then annually |
| **Pregnant (any age)\*** | 1st trimester, repeat 3rd trimester, test at labor &delivery if no result in record | 1st trimester, repeat 3rd trimester if high risk | 1st trimester, repeat 3rd trimester if high risk | | 1st trimester, repeat 3rd trimester if high risk | | 1st trimester, repeat 3rd trimester if high risk | To diagnose past or present infection | Test surface antigen (required by law) and test for antibody, if both HBsAg and antibody to HBsAg results are negative, vaccinate | NR | Screened during pregnancy if from high risk demographic pool (see guidelines) |
| **IDU** | Every 6 months  Then see recommendations | See population data for specific recommendations | | | | | Annually for current and upon entry for history of IDU | To diagnose past or present infection | Anyone >19 | On entry | Annually |
| **Gay, Transmale or other MSM** | Every 6 months  Then see recommendations | Every 3-6 months | | Every 3-6 months | Every 3-6 months | | See general pop. | To diagnose past or present infection | Anyone >19 | On entry | No unless high risk pool  See guidelines |
| **Transfemale** | Every 6 months  Then see recommendations | Every 3-6 months | | Every 3-6 months | Every 3-6 months | | See general pop. | To diagnose past or present infection | Anyone >19 | On entry | No unless high risk pool  See guidelines |
| **Male (non-MSM/non PLWHA/non-FTM)** | All persons at least once | NR | | NR | NR | | See general pop. | From country w/>2% pr. | Anyone >19 | NR | No unless high risk pool  See guidelines |
| **Female** | All persons at least once | <25 every 12 months  IUD-at time of insertion | | <25 every 12 months  IUD-at time of insertion | NR | | See general pop. | From country w/>2% pr. | Anyone >19 | NR | No unless high risk pool  See guidelines |

1. Screening means testing regardless of risk-factor or symptoms, please note that this does not preclude testing based on clinical symptoms, diagnostic testing based on signs or systems, exposure to a specific disease, and or prior infection and retesting after treatment to assess for possible re-infection [↑](#footnote-ref-1)
2. Syndemics, When used as a noun, a syndemic is defined as two or more afflictions (diseases), interacting synergistically, contributing to increased transmission and/or worsened outcomes of either or all diseases in a population. [↑](#footnote-ref-2)