

Physician Script on Perinatal HIV Screening



All pregnant women should be screened for human immunodeficiency virus (HIV) infection as early as possible during each pregnancy. Human immunodeficiency virus screening should occur after the patient is notified that the screening is recommended for all pregnant women and that she will receive the test as part of the routine panel of prenatal tests unless she declines (opt-out screening). Pregnant women should be provided with oral or written information about HIV that includes an explanation of HIV infection, a description of interventions that can reduce HIV transmission from mother to infant, the meanings of positive test results and negative test results, and the opportunity to ask questions and decline testing. No additional process or written documentation of informed consent, beyond what is required for other routine prenatal tests, is required for HIV testing, unless state legal requirements necessitate additional documentation. A repeat test in the third trimester is recommended for women at high risk of acquiring HIV; however, some states require a repeat test later in pregnancy for all pregnant women. Obstetrician–gynecologists should be aware of and comply with their states' legal requirements for perinatal HIV screening. Legal requirements for perinatal HIV testing may be verified by contacting state or local public health departments or at www.nccc.ucsf.edu (also see Resources). If a patient declines HIV testing, it should be documented in the medical record and should not affect access to care. She also should be reoffered testing at a subsequent visit.

When notifying pregnant patients about HIV screening in states using opt-out screening, obstetric providers may find it helpful to preface the conversation with the following suggested script:

“I test all my pregnant patients for HIV as part of the panel of routine tests to alert me to any conditions that require regular attention or treatment to promote the best possible outcome in pregnancy. You also may need a repeat HIV test in the third trimester. This patient information, *HIV and Other Important Pregnancy Tests*, will explain the importance of each test. When you have finished reading this information, I would be glad to answer any questions you have. You will be tested for HIV today unless you tell me not to.”

(see reverse)

To assist obstetric providers with prenatal HIV screening, the American College of Obstetricians and Gynecologists offers a Patient Education Pamphlet, HIV and Pregnancy, and the enclosed HIV and Other Important Pregnancy Tests, a convenient-to-use tear pad describing in simple language the recommended blood tests for all pregnant women. This tear pad also answers frequently asked questions about HIV testing, treatment, and risks for exposed babies. Obstetric providers may use the tear pad to help notify pregnant women about HIV testing, but used alone, the information in the tear pad may not meet informed consent requirements in individual states.

Resources

The American College of Obstetricians and Gynecologists
409 12th Street SW, PO Box 96920
Washington, DC 20090-6920
800-673-8444 or 202-638-5577
www.acog.org
HIV web site: www.womenandhiv.org

The National HIV/AIDS Clinicians' Consultation Center at the University of California –San Francisco maintains an online compendium of state HIV testing laws that can be a useful resource (www.nccc.ucsf.edu).

Location/Overnight Address: National HIV/AIDS Clinicians' Consultation Center
UCSF Department of Family and Community Medicine at San Francisco General Hospital
1001 Potrero Ave., Bldg. 20, Ward 22
San Francisco, CA 94110
Mailing Address:
UCSF Box 1365
San Francisco, CA 94143-1365
415-206-8700
Perinatal HIV Hotline: 1-888-448-8765
www.nccc.ucsf.edu

Centers for Disease Control and Prevention
1600 Clifton Road NE
Atlanta, GA 30333
www.cdc.gov/hiv

Downloadable resources for patients are available at
www.cdc.gov/hiv/resources/brochures/index.htm