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Recommendations marked in bold font indicate a change in the way we believe a healthcare worker should perform his/her job. For instance, a phrase such as **must** or **should** means that a new recommendation and the title of a chapter in the Guideline of the Month.

# Revised Recommendations for HIV Testing of Adults, Adolescents, and Pregnant Women in Health-Care Settings

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## Abstract

These recommendations for human immunodeficiency virus (HIV) testing are intended for all health-care providers in the public and private sectors who are seeking to detect new infections in patient populations, identify persons who are unaware of their HIV infection, and prevent transmission of HIV to persons who are at risk for infection. These recommendations supersede previous recommendations for HIV testing in health-care settings (*MMWR 1987;36(Suppl 2S):1S–7S*; *MMWR 1989;38(S-6):1–7*; *MMWR 1990;39(RR-17):1–14*; *MMWR 1993;42(RR-2):1–10*; *MMWR 1995;44(RR-7):1–15*; *MMWR 2001;50(RR-19):1–32*; *MMWR 2003;52(RR-15):1–18*; *MMWR 2005;54(RR-14):1–17*; *MMWR 2006;55(RR-14):1–23*; *MMWR 2007;56(RR-10):1–12*; *MMWR 2008;57(RR-9):1–8*; *MMWR 2008;57(RR-10):1–12*). These recommendations also supersede previous recommendations for HIV testing in prenatal settings (*MMWR 1995;44(RR-7):1–15*; *MMWR 2001;50(RR-19):1–32*; *MMWR 2006;55(RR-14):1–23*; *MMWR 2008;57(RR-10):1–12*). Recommendations for HIV testing in prison and jail facilities are unchanged (*MMWR 1989;38(S-6):1–7*; *MMWR 1990;39(RR-17):1–14*; *MMWR 2003;52(RR-15):1–18*). Recommendations for HIV testing in prison and jail facilities will be addressed in a separate document.

**Special testing** Recommendations for HIV testing in health-care settings include the following:

- Opt-out HIV screening should be offered to all patients in health-care settings unless the patient declines (opt out) testing.
- Informed consent for HIV testing should be incorporated into the patient's general consent for medical care.
- Separate written consent for HIV testing should not be required; general consent for medical care should be considered sufficient to encompass consent for HIV testing.
- Prevention messages tailored to the general health-care setting are recommended when HIV testing is offered.

**Opt-out screening** Recommendations for opt-out HIV screening are as follows:

- HIV screening should be included in the routine panel of screening tests for all pregnant women.
- Opt-out HIV screening should be offered to all persons who are admitted to health-care facilities until their discharge (opt out screening).
- Opt-out HIV screening should be offered in emergency rooms and urgent care facilities to persons who are unaware of their HIV status.
- Repeat screening in the third trimester is recommended in certain jurisdictions with high prevalence of HIV infection during pregnancy.

**Implementation** Implementation of these recommendations for HIV testing can be implemented in a manner that minimizes costs to the health-care system. Such measures include the use of a 3-step process for testing, combining rapid HIV tests with conventional HIV tests, and using laboratory-based HIV testing in conjunction with rapid HIV testing.

**Definitions**

**Diagnostic testing.** Performing an HIV test for persons with clinical signs or symptoms consistent with HIV infection.

**Screening.** Performing an HIV test for persons in a defined population.

**Opt out.** Informing patients that a test for HIV infection is planned, and that they will be specifically tested for the human immunodeficiency virus (HIV), unless they decline (opt out).

**Informed consent.** Informing patients about the nature of the test, the meaning of test results, and the risks and benefits of testing, the implications of HIV test results, and how health-care information and confidentiality will be protected. Informed consent typically includes providing oral or written information regarding HIV, the risks and benefits of testing, the implications of HIV test results, how test results will be communicated, and the confidentiality protections for HIV-infected persons.

**Informed consent for HIV testing.** Informing persons that HIV testing is planned, and that they have the opportunity to decline testing (opt out).

**Prevention messages.** Information on how to reduce the transmission of HIV.

## Rationale for New Recommendations

Other prevention strategies, including antiretroviral treatment, male circumcision, and basic and potentially transmitted diagnosis HIV infection screening at diagnosis but are not tested for HIV. Of. Since the 1980s, the demographics of the HIV/AIDS epidemic in the United States have changed. Increasing proportions of infected persons are aged ≥25 years, women, members of racial or ethnic minorities, persons who have acquired HIV infection through heterosexual contact, and persons who are unaware of their HIV infection. Although HIV testing in health-care settings has contributed to the prevention of HIV infection, the epidemic continues to grow.

Although HIV testing in health-care settings has contributed to the prevention of HIV infection, the epidemic continues to grow. Approximately 1.2 million persons in the United States are infected with HIV, an estimate of persons ≥25 years of age, and 56,300 persons were infected with HIV in the United States in 2006. Approximately 21% of persons who are infected with HIV are unaware of their HIV infection. Persons who are unaware of their HIV infection are responsible for an estimated 50% of the sexual transmissions of HIV. Persons who are unaware of their HIV infection are responsible for an estimated 50% of the sexual transmissions of HIV. Persons who are unaware of their HIV infection are responsible for an estimated 50% of the sexual transmissions of HIV. These recommendations supersede previous recommendations for HIV testing in health-care settings (*MMWR 1987;36(Suppl 2S):1S–7S*; *MMWR 1989;38(S-6):1–7*; *MMWR 1990;39(RR-17):1–14*; *MMWR 1993;42(RR-2):1–10*; *MMWR 1995;44(RR-7):1–15*; *MMWR 2001;50(RR-19):1–32*; *MMWR 2003;52(RR-15):1–18*; *MMWR 2005;54(RR-14):1–17*; *MMWR 2006;55(RR-14):1–23*; *MMWR 2007;56(RR-10):1–12*; *MMWR 2008;57(RR-9):1–8*; *MMWR 2008;57(RR-10):1–12*). These recommendations also supersede previous recommendations for HIV testing in prenatal settings (*MMWR 1995;44(RR-7):1–15*; *MMWR 2001;50(RR-19):1–32*; *MMWR 2006;55(RR-14):1–23*; *MMWR 2008;57(RR-10):1–12*). Recommendations for HIV testing in prison and jail facilities are unchanged (*MMWR 1989;38(S-6):1–7*; *MMWR 1990;39(RR-17):1–14*; *MMWR 2003;52(RR-15):1–18*). Recommendations for HIV testing in prison and jail facilities will be addressed in a separate document.

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These recommendations for human immunodeficiency virus (HIV) testing are intended for all health-care providers in the public and private sectors who are seeking to detect new infections in patient populations, identify persons who are unaware of their HIV infection, and prevent transmission of HIV to persons who are at risk for infection. These recommendations supersede previous recommendations for HIV testing in health-care settings (*MMWR 1987;36(Suppl 2S):1S–7S*; *MMWR 1989;38(S-6):1–7*; *MMWR 1990;39(RR-17):1–14*; *MMWR 1993;42(RR-2):1–10*; *MMWR 1995;44(RR-7):1–15*; *MMWR 2001;50(RR-19):1–32*; *MMWR 2003;52(RR-15):1–18*; *MMWR 2005;54(RR-14):1–17*; *MMWR 2006;55(RR-14):1–23*; *MMWR 2007;56(RR-10):1–12*; *MMWR 2008;57(RR-9):1–8*; *MMWR 2008;57(RR-10):1–12*). These recommendations also supersede previous recommendations for HIV testing in prenatal settings (*MMWR 1995;44(RR-7):1–15*; *MMWR 2001;50(RR-19):1–32*; *MMWR 2006;55(RR-14):1–23*; *MMWR 2008;57(RR-10):1–12*). Recommendations for HIV testing in prison and jail facilities are unchanged (*MMWR 1989;38(S-6):1–7*; *MMWR 1990;39(RR-17):1–14*; *MMWR 2003;52(RR-15):1–18*). Recommendations for HIV testing in prison and jail facilities will be addressed in a separate document.

For persons at risk for health care settings:

- HIV screening should be included in the routine panel of screening tests for all pregnant women.
- Opt-out HIV screening should be offered to all persons who are admitted to health-care facilities until their discharge (opt out screening).
- Opt-out HIV screening should be offered in emergency rooms and urgent care facilities to persons who are unaware of their HIV status.
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