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CDC's "Revised Guidelines for HIV Counseling, Testing, and Referral" and "Revised Recommendations for HIV Screening of Pregnant Women" - Highlights

Guidelines for HIV Counseling, Testing, and Referral (CTR)

HIV Counseling, Testing, and Referral (CTR) services are intended to be flexible and tailored to the specific settings and populations served. They are meant to promote early knowledge of HIV status; provide information on transmission, prevention, and the meaning of HIV test results; and promote access to needed medical, preventive, and psychosocial support services.

HIV prevention counseling focuses on the patient's unique circumstances and risk behaviors and helps the patient develop workable strategies to reduce his/her risk of acquiring or transmitting HIV. Prevention counseling should:

- Include a personalized risk assessment;
- Support steps already taken to reduce risk;
- Correct the patient's specific misconceptions;
- Negotiate a concrete, behavior-change step the patient can take to reduce HIV risk further; and
- Build the skills needed to reduce risk.

Patient education about the HIV testing process may be provided in a pamphlet or video appropriate to the patient's language and developmental level if provider time is limited.

Targeting HIV CTR. Alaska presently has a low HIV prevalence ($\leq 1\%$), even in settings that serve populations at increased behavioral or clinical risk (e.g. substance abuse treatment programs, correctional facilities, and STD clinics). HIV testing should always be provided to persons with sexual or injecting partners who are HIV-infected, patients with active TB, and prenatal patients.

Giving test results by telephone. HIV test results may be given by telephone by agreement with the patient in circumstances where face-to-face encounter is unlikely or will delay delivery of results. Every effort must be made to ensure patient identity and maintain confidentiality when delivering results. CDC Guidelines support face-to-face provision of HIV test results for HIV positive patients and HIV-negative patients at increased risk who are candidates for further HIV prevention counseling and service referrals.

Confidential testing. Safeguarding confidentiality encourages HIV testing and can facilitate earlier entry into medical care for persons with HIV. Unless prohibited by the patient, the test should be performed confidentially with identifying and locating information documented in the patient's record to promote provision of test results and appropriate follow up.

Care and case management. Patients testing HIV positive should be provided or referred for medical care, case management, and partner notification assistance. Case management (to help patients access needed services and support participation in care) is available through organizations in Anchorage, Fairbanks, and Juneau as well as Alaska Native tribal health organizations (call the AIDS Helpline at 1-800-478-2437).

Partner notification (partner counseling and referral services) should be provided voluntarily to all persons with HIV-positive test results to confidentially advise their sexual or injecting partners of their exposure to HIV and how to access CTR. The Alaska Division of Public Health strongly urges providers to enlist partner notification assistance for their patients from trained Public Health personnel. In so doing, providers can assure the patient that the patient's identity will not be disclosed to the partners they name and that partners both in and out of state can be advised of their exposure.*

*For assistance with HIV partner notification, prevention counseling, or quality assurance for CTR services, call the HIV/STD Program at 269-8000. Suspected or diagnosed cases of HIV and AIDS are reportable as separate events by calling HIV/STD Program personnel, the 24-hour Rapid Telephonic Reporting system (1-800-478-1700 or 561-4234 in Anchorage), or by confidential fax to 1-907-561-4239.

Recommendations for Screening Pregnant Women for HIV

- Voluntary HIV testing should be offered during prenatal care;
- The testing process can be simplified so that pretest counseling is not a barrier to testing; and
- HIV testing should be offered at the time of labor and delivery for women who have not received testing earlier in the

pregnancy.

Treatment Guidelines for HIV-infected women and for reducing perinatal HIV transmission are available at <http://www.hivatis.org>.

On November 9, 2001, the Centers for Disease Control and Prevention (CDC) published "Revised Guidelines for HIV Counseling, Testing, and Referral" (pages 1-58) and "Revised Recommendations for HIV Screening of Pregnant Women" (pages 59-86) applicable to all settings offering HIV testing [[Morbidity Mortality Weekly Report](#), MMWR 50(RR-19)]. The full document is available at www.cdc.gov/hiv/pubs/guidelines.htm#counseling or by calling the HIV/STD Program at 1-907-269-8000.