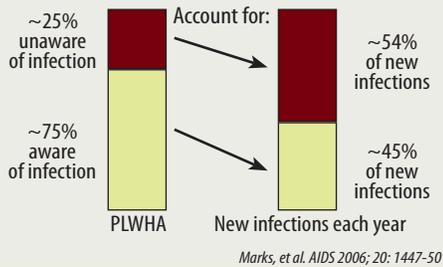


# MAKE HIV TESTING ROUTINE IN YOUR PRACTICE

## THE PROBLEM

- ◆ Every 9½ minutes, someone in the US is infected with HIV.  
[www.nineandahalfminutes.org](http://www.nineandahalfminutes.org)
- ◆ The CDC Estimates more than 20% of persons living with HIV do not know they are infected.
- ◆ Late HIV diagnosis contributes to:
  1. Poor outcomes, decreased productivity, and early death;
  2. Increased health care costs; and
  3. More transmission of HIV.

### Awareness of Serostatus Among People with HIV and Estimates of Transmission



## THE FACTS

- ◆ Persons who do not know they are HIV+ may be responsible for more than half of new sexual transmissions of HIV.
- ◆ 1 out of 3 HIV infected Texans are diagnosed with AIDS within one year of their HIV diagnosis.
- ◆ Early diagnosis and treatment leads to better prognosis, greater response to therapy, reduced viral load, and lower transmission of HIV.
- ◆ Hospitals, community clinics, and doctor's offices account for more than half of all HIV diagnoses in Texans.
- ◆ Routine HIV testing in multiple major emergency departments has identified new HIV infections that would have normally been missed.

## THE SOLUTIONS/RESULTS

- ◆ Implement routine HIV testing in all health care settings according to the CDC 2006 Revised Recommendations for HIV Testing of Adults, Adolescents, and Pregnant Women in Health Care Settings. *MMWR 2006; 55 (RR14);1-17.*
- ◆ Establishing early care for HIV+ patients results in better survival gains than chemotherapy (non-small cell lung cancer), adjuvant chemotherapy (breast cancer), acute myocardial infarction, and bone marrow transplant (relapsed non-Hodgkin's lymphoma). *Walensky et al. JID, 2006.*



## STRATEGIES TO OVERCOME BARRIERS

<http://testtexashiv.org>  
[www.dshs.state.tx.us/hivstd/services](http://www.dshs.state.tx.us/hivstd/services)

### TIME CONSTRAINTS

To facilitate routine HIV testing:

- ◆ Conduct patient flow analysis to identify best process for your setting.
- ◆ Institute routine testing in Standing Delegation Orders.
- ◆ Integrate a reminder notification in EMR system.
- ◆ Post reminder messages at points of care directed at providers and staff.

### CONSENT

- ◆ Texas law does not require separate consent form for routine HIV testing.\*
- ◆ General consent for care includes HIV testing.
- ◆ Documented verbal consent is sufficient.
- ◆ Pretest counseling is NOT required.

\* Texas Health and Safety Code, Chapter 81 - Communicable Diseases  
[www.statutes.legis.state.tx.us/Docs/HS/htm/HS.81.htm](http://www.statutes.legis.state.tx.us/Docs/HS/htm/HS.81.htm)

### DELIVERING RESULTS

- ◆ Providing HIV/AIDS diagnosis is no different than delivering a diagnosis of cancer or any other chronic disease. *Back et al. Arch Intern Med. 2007.*
- ◆ Public health disease intervention specialists (DIS) are available to provide results, linkage to care and other services for all newly reported HIV+ cases.

### FOLLOW-UP CARE

- ◆ Local and regional health authorities follow up on all newly reported HIV+ cases to ensure linkage to treatment, prevention counseling, and partner services.
- ◆ Treatment funding is available for eligible persons who test positive.\*\*

\*\* Texas HIV Medication Program  
[www.dshs.state.tx.us/hivstd/meds](http://www.dshs.state.tx.us/hivstd/meds)

The AMERICAN MEDICAL ASSOCIATION ETHICS POLICY states that a physician's duty to promote patient welfare and to improve the public's health are fostered by routinely testing their adult patients for HIV.  
[www.ama-assn.org/go/cejareports](http://www.ama-assn.org/go/cejareports)



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