

**TITLE: HIV /Serologic Testing of Pregnant Women in Prenatal Clinic**

**PURPOSE:** To provide guidelines for testing, specimen collection, results reporting and follow-up referral for HIV in pregnant patients presenting for services in prenatal clinic.

**POLICY:**

1. All obstetrical patients will have their HIV status evaluated.
2. Routine HIV testing (EIA or other FDA approved HIV screening test) shall be offered to all women presenting for obstetrical care (at first prenatal visit ) at the time initial laboratory study specimens (including syphilis and Hepatitis B screenings) are obtained. Women will be given printed information on HIV and AIDS (available on State website below). HIV testing shall be included in the General consent and the woman will be tested unless she objects (Opt-out). Women who refuse will be referred for anonymous testing.
3. Routine HIV testing shall be offered to all pregnant women in their third trimester. HIV testing will be done between 32-36 weeks gestation preferably when GBS test is performed.
4. All HIV screening tests (EIA) reported as POSITIVE will be submitted for Western Blot ( or other FDA approved confirmatory test).
5. All HIV testing results shall be given to the patient in a private setting by the physician or Certified Nurse Midwife (CNM) providing care.
6. Known HIV positive patients do not require repeat testing for HIV.
7. All identified HIV positive women will be referred to \_\_\_\_\_ for follow-up care and case management.
8. HIV testing may NOT be performed if the patient refuses testing.
9. HIV testing is included in the general "Consent for Medical Treatment".

Attachment : DHHS required handouts available from:

<http://www.dshs.state.tx.us/hivstd/info/edmat/4-206.pdf> (English)

<http://www.dshs.state.tx.us/hivstd/info/edmat/4-206a.pdf> (Spanish):