HIV Counseling, Testing, and Referral Checklist

Procedures at a Glance

- Notify the pregnant individual that an HIV test will be administered as part of the routine prenatal blood tests, unless she declines to be tested.

- Provide pretest counseling. (See Item #8: Pretest Counseling Guidelines)

- Document verbal voluntary informed consent or declination of the test in the pregnant individual’s medical record. (See Item #7: Frequently Asked Questions)

- Offer an HIV test in the third trimester to a pregnant individual with unknown HIV status or who is at high-risk for acquiring HIV. (See Item #7: Frequently Asked Questions)

- In labor and delivery, offer:
  - A rapid HIV test to a pregnant individual with unknown or undocumented HIV status; and
  - Antiretroviral prophylaxis prior to receiving the results of a confirmatory test if the rapid HIV test is positive.

- Notify the pregnant individual of the test result, regardless of the result.

- Refer HIV positive pregnant individuals for treatment and supportive services, including case management.
  - Providers should also:
    - Consult with an infectious disease specialist and/or obstetrician experienced in prenatal HIV management.
    - Discuss actions recommended to prevent transmission to the fetus, including antiretroviral medication, delivery methods, and the risks of breast-feeding once the infant is born.

- Discuss partner notification with your patient.

- Report any patient in your care with a diagnosis of HIV or AIDS within 48 hours of diagnosis to the local health officer.
  - Newborn infants whose mothers are HIV positive are to be reported as perinatal HIV exposures within 48 hours of infant birth.