



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.