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Dear Colleague:

The evolution and management of HIV disease has changed over the years, as has public perception, to mirror many chronic diseases. As such, CDC and other experts recommend that HIV testing and screening be included as a routine test, particularly during pregnancy. Therefore, Rhode Island has revised its laws and regulations to consider HIV testing as a routine test.

Rhode Island law is based on the most current guidelines issued by the CDC entitled "Recommendations for HIV Counseling, Testing and Referral of Adults, Adolescents and Pregnant Women in Health Care Settings", issued in 2006. In accordance with Chapter 170 of the General Laws of Rhode Island enacted in July 2007, every prenatal care provider and family planning physician is now required to screen all women for HIV, to promote earlier detection and treatment.

Key highlights of Rhode Island's law include the following:


- HIV testing shall be included in the routine panel of prenatal screening tests for all pregnant women, unless testing is declined (opt out screening) as it may be declined with other tests.
- HIV screening shall be voluntary and undertaken only with the individual's knowledge and an understanding that HIV testing will be performed, as is true with all other screening tests.
- No person shall order an HIV test without first providing information and counseling to the woman and obtaining the oral consent of the woman to be tested, as is done with other tests ordered for patients.
- Repeat testing in the third trimester, preferably <36 weeks, is recommended if determined by the physician.

In addition to the requirements contained in Rhode Island's law, the intent of the law is consistent with CDC's specific recommendations:

- Test all women for HIV as early as possible during each pregnancy.
- No additional written documentation of informed consent beyond what is required for other routine prenatal tests should be required for HIV testing.
- When a patient declines an HIV test, this decision should be documented in their medical record.
- Women who decline the test early in prenatal care should be encouraged to be tested at a subsequent visit.
- Rapid HIV testing should be performed for all women in labor without documentation of HIV test results during pregnancy unless they decline.
- Immediate initiation of appropriate antiretroviral prophylaxis should be recommended to women on the basis of a reactive rapid test result without waiting for the result of a confirmatory test.
- When the mother's HIV status is unknown immediately postpartum, rapid testing of the newborn, as soon as possible after birth, is recommended so antiretroviral prophylaxis can be offered to HIV-exposed infants
- The benefits of neonatal antiretroviral prophylaxis are best realized when it is initiated \leq 12 hours after birth.

The enclosed Patient Information Sheet has been developed by the Department of Health for use in informing patients about HIV testing during pregnancy. For reference, we have also included the law. The Patient Information Sheet is available on the Department of Health Website in English and will soon be available in Spanish, French and Portuguese.

Sincerely,


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