

Dear Chief Executive

Our ref: H19/54139-1

### **Testing for HIV in Emergency Departments**

It is important that all patients who present to Emergency Departments (ED) with a [fever of unknown origin](#) or undiagnosed viral illness are tested for HIV, irrespective of the presence of HIV risk factors.

### **Making HIV testing simpler**

ED clinicians have identified barriers to testing for HIV, including concerns about how to manage HIV results and now outdated requirements to obtain written informed consent for testing.

These barriers to HIV testing in patients where it is clinically indicated have been removed because:

- no special consent is required before ordering HIV testing.
- ED staff can rely on the [HIV Support Program](#) to co-ordinate patient follow up.

### **Sexual health services follow up all positive HIV test results**

ED clinicians do not need to inform a patient of their positive HIV test result, as this is a role for your LHD sexual health service and HIV clinicians. The NSW [HIV Support Program](#) will coordinate patient follow-up in this way:

1. Laboratory notifies positive HIV result to a HIV Surveillance Officer
2. HIV Surveillance Officer notifies LHD HIV clinician (HIV Support Program coordinator)
3. LHD HIV clinician contacts the doctor who ordered the test to obtain any further useful information and to arrange follow up for the patient.

LHDs can also implement local processes so that all ED HIV positive pathology results go directly to the sexual health service for follow-up. This already occurs in some LHDs.

### **Pre and post-test counselling for HIV is no longer required**

Informed consent for HIV testing is now the same as obtaining consent for any pathology testing.

### **Consider HIV testing in the absence of obvious risk factors**

The [indications for HIV testing](#) are broad. Patients may not disclose HIV risk factors – including among some men who identify as heterosexual, have a female partner/s and children but who have sex with men.

### **Missing an HIV diagnosis creates clinical and public health risks**

Early diagnosis and treatment reduces morbidity and mortality associated with HIV infection for patients. There are also population health benefits to early diagnosis; every missed diagnoses increases the likelihood of HIV transmission to others as treatment results in suppressed viral load and prevents transmission.

Simplified HIV testing should make it easier for ED physicians to improve the quality of their clinical interaction with patients by ensuring HIV testing is performed wherever indicated.

**Please ensure that clinical staff are aware of this information**

Please circulate this information to all ED Directors, Physicians and Nurse Consultants.

Some hospitals have developed local HIV testing guidelines, brochures for patients and testing flowcharts to assist clinical staff, an example is attached for your reference. More information on who to test can be found at: [www.health.nsw.gov.au/endinghiv/Pages/health-professionals.aspx](http://www.health.nsw.gov.au/endinghiv/Pages/health-professionals.aspx)

For more information contact the NSW Health Communicable Diseases Branch on (02) 9391 9195 and ask to speak with an HIV Surveillance Officer.

Yours sincerely



Dr Kerry Chant PSM  
**Chief Health Officer**  
**Deputy Secretary Population and Public Health**