

Routine Prenatal HIV and STD Testing

Test Guidance and Referral Resources



Ending
the
HIV
Epidemic

About Universal HIV Screening and Testing in Pregnancy

- All HIV testing must be voluntary and no person should be tested without their knowledge.
- No additional process or written documentation of informed consent beyond what is required for other routine prenatal tests is required for HIV testing.
- For patients who test negative and either request HIV pre-exposure prophylaxis (PrEP) or may be at elevated risk of HIV acquisition during pregnancy, discuss and offer PrEP. PrEP is not contraindicated during pregnancy or while breast/chestfeeding an infant.
- Clinicians should refer patients who test positive for HIV to a Perinatal HIV Specialty program (see "[Perinatal HIV Specialty Centers Guide](#)") for initiation of antiretroviral therapy (ART) and coordination with a high-risk OB team.
- When a patient presents with symptoms suggestive of acute HIV infection, the clinician should perform an HIV test immediately, even if a previous HIV screening test result during the current pregnancy was non-reactive.
 - For evaluation of acute HIV, obtain a plasma HIV RNA test in conjunction with an HIV antigen/antibody combination immunoassay.

How to Test for HIV and Common STDs:

HIV Testing

- Instrumented, lab-based 4th generation combined ANTIGEN/ANTIBODY screen preferred
- Repeat testing in 3rd trimester if at elevated risk

Syphilis

- Order TREPONEMAL TEST (TP-PA, EIA, CIA)
- If positive, NON-TREPONEMAL TEST (RPR or VDRL) should be sent as reflex test or by provider order

Gonorrhea (GC)

- Testing from urine and/or vaginal/cervical site
 - Strongly consider self-collected throat and rectal swabs for NAAT testing

Chlamydia (CT)

- Testing from urine and/or vaginal/cervical site
- Strongly consider self-collected rectal swab for NAAT testing
 - If positive, order test of cure 4 weeks after treatment and retest within 3 months

**TP-PA=Treponema pallidum particle agglutination assay; EIA=enzyme immunoassay; CIA=chemiluminescence immunoassay; NAAT=nucleic acid amplification testing

Assistance and Referrals for POSITIVE HIV and STD Testing

Positive HIV Testing	Call DHSP Linkage and Reengagement Program (LRP) Warmline within one business day of new HIV test result <ul style="list-style-type: none"> • Important linkage to HIV services 	(213) 639-4288 Monday to Friday 8:00 AM – 5:00 PM
Positive Syphilis Testing	Call DHSP Clinical Guidance and Nursing Warmline for assistance with syphilis result interpretation, titer history, and treatment guidance.	(213) 368-7441 Monday to Friday 8:00 AM – 5:00 PM

For questions related to Perinatal HIV Surveillance and Prevention Activities, contact Azita Naghdi at (323) 893-9095 or anaghdi@ph.lacounty.gov.

