

HIV / PRENATAL RISK ASSESSMENT INFORMED CONSENT

RISKY BEHAVIOR FOR CONTRACTING HIV/AIDS:

- male homosexual activity at any time since 1977
- blood transfusion between 1977 & 1985
- health care worker with occupational exposure to blood
- from high HIV infection rate areas (Central Africa, Haiti)
- sex with someone who is:
 - known to be infected with HIV
 - had blood transfusions between 1977 & 1985
 - from high HIV infection rate areas (Central Africa, Haiti)
- injection drug use at any time since 1977
- sex for money or drugs
- STDs including PID
- multiple partners
- -a male homosexual
- -an injection drug user
- -you are uncertain about their behaviors

ABOUT THE TEST:

The HIV test is looking for the antibodies to the HIV virus, not the virus itself. That is why if you were exposed recently the test may show up negative. The body has not yet had time to form antibodies to the virus. Usually it takes 6 weeks to 6 months AFTER the exposure before the antibodies will show up if you are infected. The test is not 100% accurate, as most screening tests are not. There may be some false positive results (the test says you are infected but you really are not) and some false negative results (the test says you are not infected when you really are). All pregnant women are recommended to have an HIV test. Anonymous testing is available.

BENEFITS TO TESTING:

- if positive, early intervention may delay onset of symptoms and prevent some illnesses
- relieves anxiety if negative
- can reinforce behavior changes that reduce risk and protect partner(s)
- if positive, there are treatments to greatly reduce the risk of transmission to the baby
- there are public funds available for HIV care to eligible infected women

RISKS TO TESTING:

- emotional stress from positive test
- decisions about whom to tell test results must be made
- HIV is a reportable infection
- disclosure of positive result might cause:
 - loss of or inability to obtain medical or life insurance
 - employment, housing, and other social and economic discrimination
- HIV infected health care workers who perform invasive procedures may be required to restrict practice.

YOU CAN BE TESTED ANONOMOUSLY AT THE HEALTH DEPARTMENT IF YOU CHOOSE

I have read and understood the above information and my questions have been answered to my satisfaction. I understand that if I have this test, the result will not be released to anyone unless I request this in writing. I hereby request to **HAVE** **NOT NAVE** (circle one) my blood tested for HIV.

Client Signature

Print Name

Date

I have received the pamphlet entitled “*Prenatal Risk Assessment Screening*” regarding testing for Down Syndrome, Trisomy 18, and Open Neural Tube Defects. I have read and understand the information contained in the above named pamphlet. I have had my questions answered. I realize there is no test that can guarantee a normal baby. I hereby request to **HAVE** **NOT HAVE** (circle one) the Prenatal Risk Screen drawn.

Client Signature

Print Name

Date