HIV Prevention in the United States: The Role of Hospitals

Literature Resources on Emergency Department HIV Testing


   *Study examines the effectiveness of a referral-based outpatient HIV testing system for patients referred from the ED. Only 11% of referred patients followed up by arriving at the HIV clinic and completing pretest counseling. Study calls for changes in the structure of referral systems, or the use of point-of-care testing (ie rapid test).*


   *Studies multiple EDs to recommend routine screening for high-risk patients or high-risk populations.*


   *Recommends risk-targeted approach to ED-based HIV testing – cost-effective and practical solution.*


   *Peckler offers weak response to Rothman’s recommendation for emergency department HIV testing. Rothman responds with succinct arguments and strengthens his defense.*


   *ED health care profs. frequently fail to provide HIV counseling, testing, and/or referral for patients with suspected STD.*

   *Important finding: twenty-seven percent of respondents indicated HIV testing was not available in their ED despite all hospital laboratories reporting HIV testing capability.*

Point of care rapid testing in the ED is feasible and provides patients with timely results. Entry into HIV care may be facilitated when testing, results, and referral are all provided during one visit.


Rapid testing improves client receipt of results, and is well received by patients. Point-of-care rapid testing is feasible. Implications: STD prevention programs should consider establishing linkages with EDs to foster HIV testing.


Article describes research done by Brabara M. Gripshover and Michelle Kucia, presented at IDSA conference, that shows HIV testing in EDs to identify HIV infection in ethnic minorities.


Discussion of the role and potential of emergency departments in preventive services. (no specific mention of HIV)


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Emergency departments are encouraged to anticipate the probable demands for nonoccupational HIV postexposure prophylaxis (PEP) by establishing protocols for its rapid provision and ensuring proper follow-up care.


*Study examined rate of previously undiagnosed HIV cases among patients presenting to an urban ED, also assesses the feasibility of routinely offering voluntary HIV testing in this setting. Concludes that an ED may be an important setting for routinely offering HIV testing, especially for patients who have not been previously tested for HIV.*


*Finds that academic EDs do not routinely test for HIV in patients suspected of having an STD and have variable testing practices and policies regarding other possible HIV exposures.*


*Rapid testing in the sample EDs were well-accepted and detected a significant number of new HIV infections earlier than might have otherwise been, particularly among patients sent home. The rapid test is best performed on-site and is very sensitive. These results imply that some EDs could play a major role in the national strategy of early HIV detection.*