

HIV, STIs, Viral Hepatitis and LTBI Routine Screening Toolkit

HIV, STIs, viral hepatitis and latent TB infection (LTBI) screening

Every year, millions of Americans are diagnosed with Human immunodeficiency virus (HIV), sexually transmitted infections (STIs), viral hepatitis or tuberculosis (TB), and tens of thousands die from their infection. Most of these infections share commonalities, from modes of transmission to demographic, social and economic conditions that increase risk.

The asymptomatic nature of HIV, STIs, hepatitis C (HCV) and latent tuberculosis infection (LTBI) makes it difficult for a patient to understand their risk, the disease incidence in their population as well as make it difficult for them to seek the testing needed. Persons unaware of their health status cannot take advantage of the treatment needed to improve their health and can unknowingly transmit the virus to other individuals.

While significant progress has been made in diagnosing and treating individuals with these infections, routine screening and early detection are critical to ensure individuals receive the appropriate treatment and lower the risk of transmission of these infectious diseases.

What is routine screening?

By routine screening, we mean implementation of the Centers for Disease Control and Prevention (CDC) and U.S. Preventive Services Task Force (USPSTF) evidence-based preventive service guidelines and recommendations, including testing patients without symptoms based on patient characteristics or reported behaviors that would indicate screening is recommended. The American Medical Association (AMA), as reflected in policy, supports the adoption and implementation of evidence-based preventive screenings guidelines.

This toolkit was developed with input from health care professionals and was designed for clinicians working in community health centers, with the focus on those practice leaders and champions who are looking to optimize routine screening practices for these infectious diseases.

Implementing an effective routine screening program

To implement an effective routine screening program, there are several critical considerations that need to be understood and addressed to achieve successful routine screening practices.

- **Infectious disease testing is often considered separate from routine care.** Community health centers serve communities with a variety of health needs. While screenings for blood pressure and cholesterol may be considered routine, screenings for infectious diseases may not. Conducting infectious disease testing separate from regular routine care may reduce the likelihood people receive needed tests.
- **Care is often complaint based.** When time pressed and being evaluated on patient satisfaction, oftentimes, it is the patient's most immediate complaints that drive the appointment. Frequently, routine infectious disease screening is not front of mind when a patient comes in unless the complaint is related to symptoms of HIV, STIs, viral hepatitis or LTBI.
- **Confusion over what “routine” means prevails.** Clinicians often undertake testing only when a patient presents with certain risk factors associated with HIV, STIs, viral hepatitis or LTBI. While these risk factors may be included in routine screening guidelines, oftentimes other people in need of routine screening are overlooked and not all people recommended for routine screening are being tested.
- **Stigma and fear profoundly affect patients and clinicians.** HIV, STIs, viral hepatitis and LTBI carry a stigma, and screening for these conditions comes with a fear of knowing one's status—particularly with HIV. Clinicians, while aware of this, sometimes need help communicating and working with patients to normalize screening and counseling on results.

How to use the Routine Screening Toolkit

This toolkit is organized across the screening continuum and offers helpful resources and best practices from the AMA, CDC and other organizations to overcome the considerations outlined above. The resources include a mix of both implementation and training-related materials for the care team. It is flexible, allowing you to follow along throughout the continuum to help improve your overall screening and testing approach or narrow in and focus on a specific stage where you may need additional guidance and support.



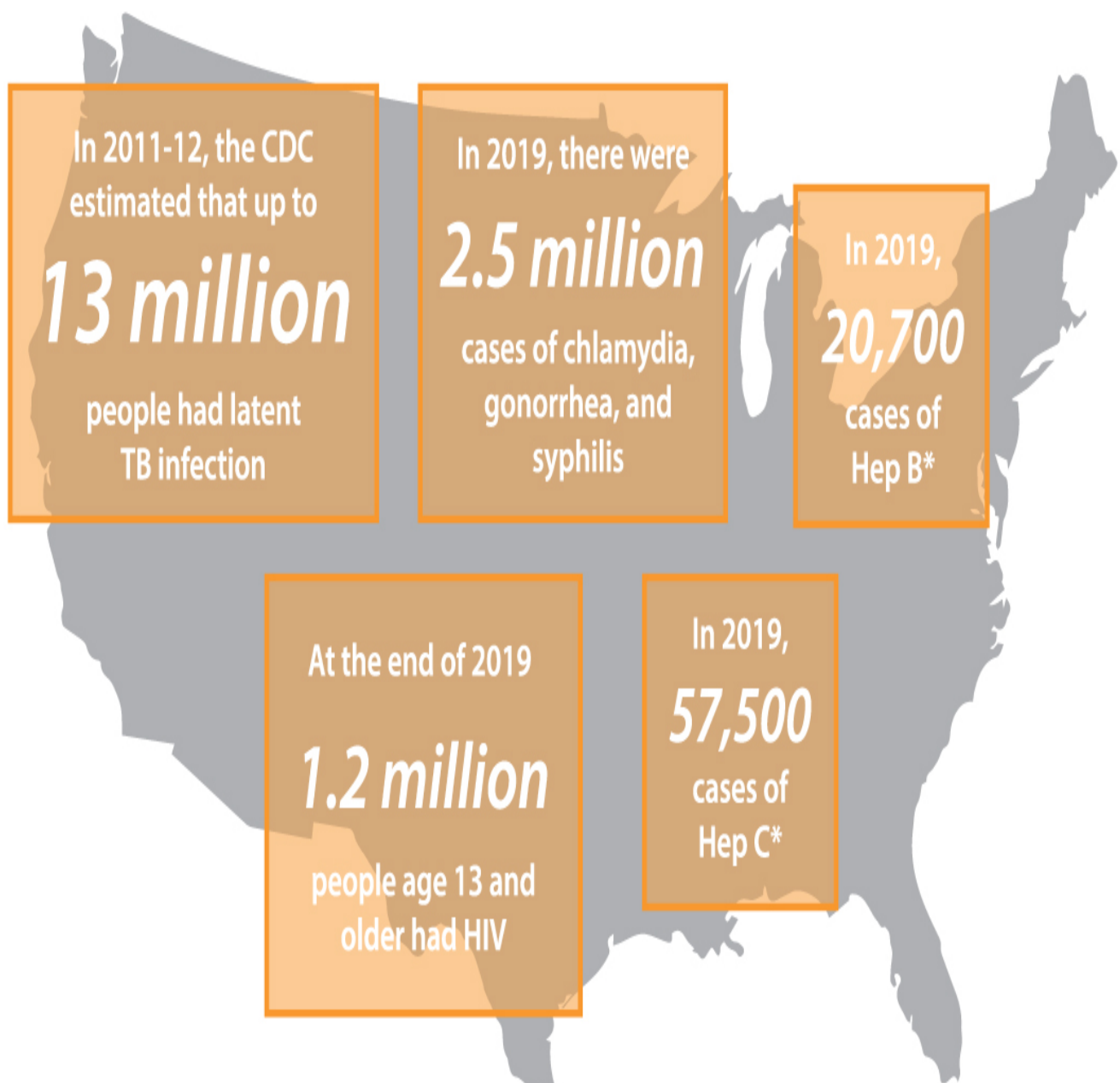
Impact by the numbers

Emergency departments and community-based health clinics are uniquely positioned to screen for HIV, viral hepatitis, STIs and LTBI among uninsured and underinsured at-risk populations. Together we can increase screening and reduce the number of new infections, but first we must understand the scale of the problem.

By the Numbers

Prevalence of HIV, Viral Hepatitis, STIs and LTBI in the U.S.

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Toolkit steps and materials

The HIV, STIs, Viral Hepatitis and LTBI Routine Screening Toolkit is organized across the screening continuum and offers helpful resources and best practices for the care team.

This effort is supported through a cooperative agreement with the Centers for Disease Control and Prevention's (CDC) National Center for HIV, Viral Hepatitis, STD, and TB Prevention (CDC-RFA-OT18-1802: *Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation's Health*).