INSTRUCTIONS FOR STD/HIV/HEPATITIS RISK QUESTIONNAIRE [New York State Department of Health-For use with DOH-4336 (4/05)]

The following is a summary of how to use the new integrated risk questionnaire for STD, HIV, and hepatitis A, B, and C. The risk questionnaire is designed to assess at-risk clients within your clinic and determine the services they should receive. This form is designed to be self-administered. Once the client has completed the form, it should then be reviewed by the clinic staff to determine the services the client should receive. In addition to screening, testing, and/or vaccine services, all clients should be offered appropriate counseling and educational materials tailored to their specific risks.

I. HEPATITIS A VACCINE

WHO SHOULD BE OFFERED HEPATITIS A VACCINE?

The HAV vaccine should be offered to clients that meet the following criteria:

- Men having sex with men (MSM)
- Persons at increased risk due to their sexual practices
- Injecting and non-injecting drug users
- HIV patients
- o Individuals with chronic liver disease including hepatitis B and C
- Travelers to high or intermediate risk countries
- Persons living in high prevalence communities

PRE-VACCINATION SCREENING

Routine pre-vaccination screening for those requesting HAV vaccination is not recommended.

The decision to perform pre-vaccination screening should be based on the prevalence of immunity, the cost of testing and vaccination, and the likelihood that testing will interfere with initiating vaccination. Persons for whom prevaccination screening will likely be most cost-effective include:

- Adults who were either born in or lived for extensive periods in geographic areas that have a high endemicity of HAV infection (Central and South America, Africa, and Asia)
- Older adolescents and adults in certain population groups (i.e., American Indians, Alaskan Natives, and Hispanics)
- Adults in certain groups that have a high prevalence of infection (e.g., injecting drug users)
- Adults over 40 years of age

Of course, anyone requesting hepatitis A testing should be tested.

POST VACCINATION SCREENING

Post vaccination serology is not routinely recommended because of the high rate of vaccine response.

A WORD ABOUT TWINRIX®

Patients 18 years of age and older in the following risk groups are candidates for TWINRIX[®] vaccination:

- Men who have sex with men (MSM)
- Persons at increased risk due to their sexual practices
- Injecting drug users
- HIV patients
- Patients with chronic liver disease such as cirrhosis, chronic hepatitis C, and autoimmune hepatitis

Note: Patients with known immunity to HBV should be offered monovalent hepatitis A vaccine. Patients under the age of 18 should be vaccinated with appropriate monovalent vaccines.

II. HEPATITIS B VACCINE

WHO SHOULD BE OFFERED HEPATITIS B VACCINE?

All clinic clients should be considered for hepatitis B vaccine unless they are already infected or have been previously vaccinated.

PRE-VACCINATION SCREENING

Routine pre-vaccination screening for those requesting HBV vaccination is not recommended.

According to CDC, the decision to screen potential vaccine recipients for prior infection depends on the cost of vaccination, the cost of testing for susceptibility, and the expected prevalence of immune persons in the group. Screening may be cost-effective and should be considered in groups with a high risk of HBV infection (HBV prevalence > 25%- 30%) such as:

- o MSM,
- Injection drug users,
- o Prison inmates,
- o Alaskan natives,
- Pacific Islanders,
- Children of immigrants from endemic countries
- Family members of HBsAg carriers.

Screening is usually not cost-effective for groups with a low expected prevalence of HBV serologic markers such as health care professionals in their training years. Serologic testing is not recommended before routine vaccination of infants and children.

Of course, anyone requesting hepatitis B testing should be tested.

NOTE: The decision to screen should be made on a case-by-case basis taking into account all the risk factors of the client. In addition, pre-vaccination screening is not routinely recommended if your clinic is receiving hepatitis vaccine from the state health department, unless you have identified a population with documented HBV prevalence > 25%- 30%.

POST VACCINATION SCREENING

Post vaccination serology is not routinely recommended following vaccination except in the following groups:

- Infants born to HBsAg + women
- Dialysis patients
- Immune-compromised persons
- Health care workers who have contact with patients or blood and are at ongoing risk for injuries with sharp instruments or needle sticks
- Sex partners of persons with chronic HBV infection

IMPORTANT: If a client states they have already begun the series of three shots, but cannot recall the date of their last shot, it is not necessary to begin the series over again. Just continue where they left off. Clients should be reminded that they are not fully protected against hepatitis B until they have received all three vaccines; therefore, they should be encouraged to complete the series. The clinic should employ a mechanism to remind clients of the date of their next doses.

III. HEPATITIS C TESTING

WHO SHOULD BE OFFERED HEPATITIS C TESTING?

Hepatitis C testing should be offered to clients that meet the following criteria

- Injecting drug users
- Recipients of clotting factors made before 1987
- Hemodialysis patients
- Recipients of blood/solid organs before 1992
- Individuals with undiagnosed liver disease
- Infants born to infected mothers (after 12 months of age)
- Healthcare workers after a known exposure
- Individuals with tattoos and/or body piercing
- o Individuals with multiple sexual partners
- Individuals whose steady sex partner is HCV (+)
- HIV patients

In addition, anyone requesting HCV testing should receive testing.

IV. HIV TESTING

WHO SHOULD BE OFFERED HIV TESTING?

HIV testing should be offered to clients that meet the following criteria:

- Injecting drugs users
- o Individuals who have had unprotected sex with someone with HIV
- Men who have sex with men (MSM)
- Individuals who have ever been diagnosed with or treated for an STD, hepatitis or TB
- Pregnant women
- Babies born to infected women
- Health care workers with known occupational exposure

In addition, anyone requesting HIV testing should be tested.