INFORMED CONSENT FORM

Things to know about the test for antibodies to HIV (HUMAN IMMUNODEFICIENCY VIRUS)

WHAT IS HIV? HIV (Human Immunodeficiency

Virus) is a virus, which causes damage to a person's immune system, making it difficult for the body to fight off infections. In time, the body's defenses may become so damaged that it becomes extremely difficult or impossible for the body to protect itself against disease or even minor illnesses. AIDS (Acquired Immune Deficiency Syndrome) is the last phase in HIV disease, when the body is unable to fight disease or infection.

WE DO NOT KNOW THAT EVERYONE INFECTED WITH HIV WILL DEVELOP AIDS.

WHAT IS THE HIV ANTIBODY TEST? The HIV antibody test can be either an oral swab or blood test that can show if a person is infected with HIV. When a person is infected with the virus, the body's white blood cells normally start to fight the infection by making antibodies. It may take up to six months after infection for these antibodies to be detected in the blood. During this time, HIV can be transmitted.

WHO SHOULD HAVE THE HIV ANTIBODY

TEST? People who may be at high risk for HIV infection are encouraged to have the test. Persons at high risk are: men who have sex with men and their partners; injection drug users and their partners; people who sell sex for money, food or drugs; people who practice unprotected sex or have many sex partners; and, people who get blood transfusions or receive any blood products. Since 1985, however, all blood has been tested for HIV in the United States and the risk for getting HIV from blood or blood products is extremely low. A counseling and testing session will provide the opportunity to learn details about HIV infection and high-risk behaviors.

(PLEASE READ THE OTHER SIDE)

NameLast	Fir	st	M.I.		Patient #		Date Tested
Address							
Street			Apt. #	City	State	Zip Code	Phone #
Date of Birth	Race	Sex	Sex Marital Status		Risk Factor (Please Specify)		
Return Appt. Date & Time		Pre-Test Counseling by		Date Assigned for Follow-up if Test Positive at Site Other Than ACHD			
Elisa Test Result		Western Blot Test Results		Post-Test Counseling by			
			PATIENT (CONSENT			
I,				hereby	give consent	to the Alleg	heny County Health
Department, STD P	rogram, CIRCL	EONE	(1) <u>to pe</u>	erform the	oral swab HI	/ antibody	<u>test</u>
(2) to draw a blood	l sample and per	form the H	IIV antibod	test and	RPR for me.	This infor	rmation will be given
only to those people	le named by me	in writing.					
Signed		Witness		Date			

WHAT DOES A NEGATIVE HIV ANTIBODY TEST MEAN? A negative test result <u>can</u> mean that you are not infected with HIV. However, it may take up to six months for detectable antibodies to develop. If your behavior in the last six months has put you at risk for HIV infection, you should be tested again in three to six months to make sure that the results are truly negative.

WHAT DOES A POSITIVE HIV ANTIBODY

TEST MEAN? A positive test result means that <u>you</u> <u>are</u> infected with HIV. In the laboratory, three tests are performed, and the results of all three must be positive for you to be given a positive result. People with positive HIV test results are advised to stop all high-risk behaviors and are strongly urged to have follow-up medical care.

WHAT DOES AN INDETERMINATE HIV ANTIBODY TEST MEAN? An indeterminate test result means that it is impossible to get a clear negative or positive result. There may be many reasons for this, but it does not mean that the result will be positive in the future. The test should be repeated after a period of time.

WHAT IS INFORMED CONSENT? Informed consent means that you have been given information about HIV disease and the HIV antibody test and that you agree to be tested. All information about you and your test results will be kept private and confidential. Only you can agree to have your results released to a third party.

HOW DO I SCHEDULE AN APPOINTMENT TO RECEIVE MY TEST RESULTS? HIV test results are <u>not</u> given over the phone. You must schedule an appointment to receive your results in person. Please call the number listed below on the date shown.

TO SCHEDULE HIV TEST RESULTS, PLEASE CALL (412) 578- 8332 ON

 1. PRETEST COUNSELING INFORMATION (mark all that apply) REASON FOR VISIT SYMPTOMATIC FOR HIV/AIDS CLIENT REFERRAL 		2. SINCE 1978: ☐ SEX WITH MALE ☐ SEX WITH FEMALE ☐ USED INJECTING DRUGS ☐ SEX WHILE USING NON-INJ DRUGS
☐ PROVIDER REFERRAL		☐ SEX FOR DRUGS/MONEY ☐ STD DIAGNOSIS
☐ STD RELATED ☐ DRUG TRMT RELATED ☐ FAMILY PL RELATED ☐ PRENATAL/OB RELATED ☐ TB RELATED ☐ COURT ORDERED		SEXUAL RELATIONS WITH: IDU MAN WHO HAD SEX WITH A MAN PERSON WITH HIV/AIDS PERSON W/OTHER HIV/AIDS RISK
☐ IMMIGRATION/TRAVEL REQ☐ OCCUPATIONAL EXPOSURE		☐ CHILD OF WOMAN WITH HIV/AIDS ☐ HEMOPHILIA/BLOOD RECIPIENT ☐ HEALTH CARE EXPOSURE
☐ RETEST☐ REQUESTING HIV TEST☐ OTHER		☐ VICTIM OF SEXUAL ASSAULT☐ NO ACKNOWLEDGED RISK
☐ HEALTH INSURANCE PROVIDER☐ NONE	PREVIOUSLY TESTED Yes ☐ No ☐	
☐ SELF ☐ PUBLIC ASSIST.	DATE OF LAST TEST:	
☐ MILITARY/VA☐ EMPLOYER	RESULT:	