Dear Colleague:

You are receiving this letter because your facility conducts rapid HIV testing. The health department has developed guidance to assist you with those circumstances that require additional HIV testing including circumstances in which you suspect acute HIV-1 or HIV-2 infection. While changes to the HIV laboratory algorithm for confirmation of HIV diagnosis are anticipated later in 2012, these are unlikely to affect point-of-care testing. For additional information on acute HIV-1 infection or HIV-2 infection, please refer to the 2009 DOHMH Health Alert #4 and #28, respectively (see footnote).

- Acute HIV-1 infection: assistance with
  Reporting 212-442-3388
  Contact (partner) notification 212-693-1419

- HIV-2 infection: assistance with diagnosis you can contact either
  Lucia Torian, PhD
  HIV Epidemiology and Field Services Program 347-396-7692
  Robert Pirillo
  Public Health Lab 212-447-2881/2864

We hope you find this information helpful. If you have specific questions related to this algorithm, please call us at 212-442-3388 and ask for Dr. Sabharwal or email cjain@health.nyc.gov. For additional information on HIV surveillance: http://home2.nyc.gov/html/doh/html/dires/hivepi.shtml.

We look forward to your continued support of HIV surveillance and partner services efforts in New York City.

Sincerely,

M. Monica Sweeney, MD, MPH

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Rapid HIV testing algorithm*  

Rapid HIV test  
Fingerstick or oral swab  

Negative  

HIV uninfected – most likely.  
Retesting/further testing may be indicated based on the:  
- Patient's risk behavior (i.e., men who have sex with men)  
- Time interval from most recent exposure (e.g., possible acute HIV infection)  

Preliminary positive  

Additional HIV testing needed to confirm preliminary positive status  

Conventional HIV antibody test (EIA and Western blot) is sent  

EIA + WB +  
CONFERMED CASE of HIV infection  

EIA negative  

EIA + WB negative or indeterminate  

Confirmatory Western blot only is sent  

WB negative or indeterminate  

WB positive  
CONFIRMED CASE of HIV infection  

Contradictory test results, please consider:  
1) Acute HIV-1 infection  
2) HIV-2  
3) Operator error with rapid test  
4) Quality issue with rapid test kit  

*This HIV testing algorithm is intended to provide guidance to practitioners in understanding when additional testing may be necessary to determine an individual’s HIV status. It does not supersede any laws or regulations regarding HIV testing. Any questions should be directed to the Surveillance call-line 212-442-3388. (Rev 10/2011)