

Appendix 4-A

Talking with Your Patients about Behavioral Risk Factors for HIV and AIDS

TALKING WITH YOUR PATIENTS ABOUT BEHAVIORAL RISK FACTORS FOR HIV AND AIDS

Patients may be uncomfortable disclosing personal risk factors and hesitant to respond to questions about sensitive issues, such as sexual behaviors and illicit drug use. However, evidence suggests that when asked patients will often discuss behaviors that increase their risk of acquiring HIV. Evidence also suggests that some patients have greater confidence in their clinician's ability to provide high-quality care when asked about sexual and STD history during the initial visits. Of course, the more comfortable you are with discussing these issues the more comfortable your patients will be.

Below are some ideas for talking with your patients about these subjects.

Put your patients at ease.

- Reassure your patients that their responses will remain confidential.
- Let them know that you ask all of your patients these types of questions.
- Tell them that the information they provide about their sexual and drug-use behaviors will help you provide the best possible care.
- Use open-ended questions to avoid simple "yes" or "no" responses. This encourages patients to discuss personal risks and the circumstances in which risks occur. Open-ended questions also help you gather enough detail to understand potential transmission risks and make more meaningful recommendations for prevention of secondary transmission.
- Respect a patient's choice to not answer a question. This increases the chance that she/he will provide the information at a later date.

At the end of the session,

- Summarize the patient's responses to make certain that both you and your patient understand what was said.
- Encourage the patient to ask questions about any issues he or she might not have understood, and, if needed, schedule a follow-up appointment.

Some things to remember when speaking with your patients about risk factors:

Honest responses may be more forthcoming if the question is worded in such a way to "normalize" the behavior:

- "Some people inject drugs. Have you ever done that?"
- "Some people have anal intercourse. Have you ever done that?"
- "Some people exchange sex for drugs or money. Have you ever done that?"

Labels can be misleading.

- Some men do not consider themselves "gay" if they practice same sex anal insertive intercourse, but their receptive partners may be considered to be "gay".
- The question, "Are you a homosexual?" may be answered with "no" by a person who has had only a few same sex encounters or who considers him/herself to be bisexual.
- Describe behaviors instead of assigning labels to the behavior. Use terms "drug user", "men who have sex with men", "women who have sex with women", or "sex worker".

Source:

Gerbert B, Bronstone A, Pantilat S, et al. When asked, patients tell: disclosure of sensitive health-risk behaviors. *Med Care* 1999;37:104--11. MountainPlains AIDS Education and Training Center

Printed in the USA. April 2005.

SECTION III-Please answer these questions only if you had a sex partner of the opposite sex before you found out you were HIV positive:	Yes	No	Do not know
14. Before you found out you were HIV positive, did you have a sexually transmitted disease, such as chlamydia, gonorrhea, herpes or syphilis?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Before you found out you were HIV positive, did you trade money, drugs or gifts for sex?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Before you found out you were HIV positive, did you use crack, cocaine or crystal meth?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Did you have more than one sex partner in the year before you found out you were HIV positive?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please fill out the patient information below:

Last name: _____ First name: _____ Middle initial: _____

Date of birth: month ____ day ____ year _____

Sex: Male _____ Female _____

Are you transgendered? If yes, please check one: Male to female _____ Female to Male _____

Provider Information (to be completed by medical staff)

Provider's Name: _____

Facility Name: _____
(Your current location)

PROVIDER-ADMINISTERED QUESTIONNAIRE

The questions below are provided as a guide to obtaining complete risk factor information for HIV/AIDS cases. The guide roughly follows the Centers for Disease Control and Prevention's (CDC) criteria for reporting HIV risk factors. Most of the CDC risk factor criteria are straightforward. In cases of heterosexual contact, the CDC requires that the risk factors of the sex partner be reported. If your patient had heterosexual sex, please ask the questions in all sections.

SECTION I—Questions for all patients before they found out they were HIV positive:	Yes	No	Do not know
1. Did you have sex with a male?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Did you have sex with a female?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Did you use needles to inject heroin, cocaine, steroids or any other drug that was not prescribed by a doctor?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. The following are currently unlikely ways to get HIV. I would like to know if you have had any of the following happen to you since February, 1985. <i>Please check all that apply:</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> transfusion of blood or blood products		<input type="checkbox"/> hemophilia or other bleeding disorder	
<input type="checkbox"/> organ/tissue transplant		<input type="checkbox"/> artificial insemination	
5. Did you work in a health care or laboratory setting where you might have been exposed to human blood or other body fluids? If you checked yes, please state your occupation _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. How do you think you got infected with HIV? _____			
SECTION II—Questions only for patients who had a sex partner of the <u>opposite sex</u> before they found out they were HIV positive:	Yes	No	Do not know
7. Before you found out you were HIV positive, did any of your opposite sex partners use needles to inject heroin, cocaine, steroids or any other drug that was not prescribed by a doctor?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Women only: Before you found out you were HIV positive, did any of your male sex partners have sex with other men?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Before you found out you were HIV positive, did any of your sex partners receive a transfusion of blood/blood products or organ/tissue transplant before they found out they had HIV or AIDS?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Before you found out you were HIV positive, did any of your opposite sex partners have hemophilia or any other bleeding disorder?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Before you found out you were HIV positive, did any of your opposite sex partners have HIV or AIDS?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Before you found out you were HIV positive, were any of your opposite sex partners born outside of the United States? If yes, where _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Before you found out you were HIV positive, did any of your opposite sex partners live or work outside the U.S.? If yes, where _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SECTION III-Questions only for patients who had a sex partner of the <u>opposite sex</u> before they found out they were HIV positive:	Yes	No	Do not know
14. Before you found out you were HIV positive, did you have a sexually transmitted disease, such as chlamydia, gonorrhea, herpes or syphilis?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Before you found out you were HIV positive, did you trade money, drugs or gifts for sex?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Before you found out you were HIV positive, did you use crack, cocaine or crystal meth?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Did you have more than one sex partner in the year before you found out you were HIV positive?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please fill out the patient information below:

Last name: _____ First name: _____ Middle initial: _____

Date of birth: month ___ day ___ year _____

Sex: Male _____ Female _____

Are you transgendered? If yes, please check one: Male to female _____ Female to Male _____

Provider Information

Your Name: _____
(Health Professional who is completing this form)

Facility Name: _____
(Your current location)

Printed in the USA. April 2005.

Appendix 4-F

Q's and A's about Reporting Individual Risk Factors—For Provider/Field Staff

Q: Why is it important to collect risk factor information on each diagnosed case of HIV or AIDS and forward this information to my state health department?

A: Complete risk factor information accompanying each reported case of HIV helps CDC and the states accurately and efficiently allocate prevention resources. Yet CDC has noted a decline in risk factor information accompanying states' reported cases of HIV. In fact, the number of cases forwarded to CDC without complete risk factor information has doubled in the past decade. In this era of level or declining funding for HIV/AIDS prevention [and treatment?], it is critical that we work more effectively with fewer resources. To do this, we must construct an accurate picture of the numbers of cases attributable to each known HIV risk factor.

Q: If I am interviewing a patient newly diagnosed with HIV or AIDS, and that person answers “yes” to one of the risk factor questions, what should I do?

A: Check the Yes box next to that question. But do not stop there. Continue the interview, working your way through all the risk factor questions to see if you can elicit any other risk factors. In some cases, a patient will present with more than one risk factor. Capturing all the applicable risk factor information associated with each diagnosed case of HIV or AIDS is critical to building an accurate picture of the impact of the epidemic in various communities.

Q: My female patient newly diagnosed with HIV says that she has had multiple heterosexual partners, but she does not know about the drug use or sexual histories of these partners. Would her risk factor be “heterosexual contact”? If not, why?

A: A female with multiple heterosexual partners is not classified as “heterosexual contact” because that does not explain if those sex partners included people who are HIV-positive or who engage in behaviors that put them at higher risk for HIV (including injection drug use or male-male sexual contact). Instead, you would note that the patient has had sex with a male and check the “Unknown” box for all other questions regarding sex partners. Do not leave these boxes blank.

To be classified as a heterosexual contact case, a patient must have had heterosexual contact with one of the following:

- Intravenous/injection drug user
- Bisexual male (for a female only)
- Person with hemophilia/coagulation disorder
- Transfusion recipient with documented HIV infection
- Transplant recipient with documented HIV infection
- Person with AIDS or documented HIV infection, risk factor not specified.

Q: What box do I check if I am interviewing a patient newly diagnosed with HIV or AIDS and that person cannot or will not answer one of the questions on the form (sex with any of the sexes listed on the form; sex with users of illicit or nonprescription drugs; sex with a male who has sex with men; diagnosis with HIV or AIDS after receiving a transfusion, clotting factor, organ transplant, or artificial insemination after March 1985; worked in a health care or laboratory setting; had other exposure to human blood or body fluids)?

A: If the patient cannot or will not answer a question, check the Unknown box next to each category after asking the question. Do not leave any category with all blank boxes. But do not stop there. Continue the interview, asking the patient about any other possible risk factors.

Q: Because of constraints (for example, patient volume, off-site laboratory forwards HIV test results, or discomfort with talking to patients about sex and drug use), I am often not able to get risk factor information on my patients diagnosed with HIV or AIDS. Are there tools that can help me?

A: Yes. Contact your state health department for newly developed tools/materials that were created to help providers document risk factors of newly diagnosed HIV patients.

Q: I have a case of HIV to report to the state, but I don't have risk factor information. What should I do?

A: Your state health department surveillance program may follow up with your office on a case if it is reported without a risk factor. If no risk factor is found after follow-up, the case is called a case without an identified risk factor and reported to the CDC as such.

Q: How do the state health department and CDC use these data? What if I come up with more than one risk factor from a patient newly diagnosed with HIV or AIDS; how are they counted?

A: The health department will tabulate cases to examine the distribution of risk factors among cases. Providers should document all known risk factors. The states and CDC count each person as one case. When CDC receives a case report from a state, it puts all reported risk factors into a hierarchy, a summary of which follows. Even though an individual can have multiple risk factors, he or she will be classified into only one of the following categories. It is this category that is the most likely mode of transmission for a particular person.

The current transmission categories CDC uses are

- Male-to-male sex (MSM)
- Injection drug use (IDU), which includes only nonprescription drugs
- MSM + IDU, which is a category for men who have sex with men and also inject drugs.
- Hemophilia/coagulation disorder
- Heterosexual contact with high-risk individuals
- Blood, blood component, or transplant recipient
- Others/Not reported/not identified