

BP-A492_HIV-POST-TEST COUNSELING (POSITIVE)

This session is to inform you of your recent HIV test results and understand what your test results mean.

Your recent testing for evidence of infection with the human immunodeficiency virus (HIV) has returned, and the results are **positive**. This indicates that you are infected with the virus. This virus is associated with the disease known as AIDS.

Commonly asked questions are listed below:

1) **Could the lab have made a mistake?**

It is possible. However, with the current testing process used to confirm your results, this is very unlikely. The laboratory repeatedly rechecks the blood using two different tests in which there is little room for error. If you have any other concerns you should discuss this with your health care provider.

2) **Will any one else know or be told my test results?**

Your test results are confidential. No one else is informed, except on a "need to know" basis, such as your doctor, the state health department when required by State law, and the psychologist. No one else outside of the Bureau of Prisons or health department can be given your test results unless you authorize a release of information.

3) **Does this mean I have AIDS now?**

Not necessarily. The disease known as AIDS is the last stage of infection with the HIV. There are three stages as follows:

Acute Infection - A person who has recently been infected with HIV has "acute" infection, that is frequently associated with symptoms, such as fever, swollen glands, and sore throat. You may however be recently infected and never fell sick. As acute HIV infection resolves, antibodies to HIV develop, resulting in a positive HIV antibody test.

Asymptomatic Infection - Once a person is infected with HIV, with a positive antibody test, they remain relatively healthy without major symptoms or medical problems for many years. Persons who are asymptomatic can still spread the virus to others. Even though a person feels well, evaluation by a health care provider is important to determine what medical treatment is indicated.

AIDS - AIDS is the last stage of HIV infection and is associated with a severely weakened immune system (the part of the body that fights off infections or germs). Without treatment, a person with HIV infection will, on average, develop AIDS 10 years after being infected. Some persons develop AIDS much sooner (e.g. within several years) and some persons develop AIDS much later. Eventually nearly all persons infected with HIV will develop AIDS. Persons with AIDS are at risk of developing life threatening infections and will die without drug therapy.

HIV infects and destroys certain cells in the body that help a person fight off germs. One of the major cells affected by HIV is called a CD4-positive T-lymphocyte. Normally a person has approximately 1,000 CD4+ T-cells/mm³ in their blood, but with AIDS these cells are reduced to < 200 CD4+ T-cells/mm³. Persons with < 200 CD4+ T-cells/mm³ in their blood are at risk for life-threatening infections, since their body's ability to fight germs has been severely weakened.

Drug treatment for HIV infection and preventive measures for associated infections have significantly improved. Although there is no cure for HIV infection, persons with HIV infection are living longer and healthier lives. The effectiveness of drug therapy for HIV infection is monitored by measuring the amount of virus in a person's blood, a test termed, "viral load";

the health of a person's immune system is determined by measuring the number of CD4+ T-cells in the blood.

Drug therapy for HIV infection can significantly delay the progression to AIDS and prevent life-threatening problems from occurring. Taking medications as prescribed is critical for drug treatment to be maximally effective.

4) **How did I get the HIV infection?**

Infection with this virus occurs as a result of engaging in "high-risk" behaviors.

5) **What are "high-risk" behaviors?**

These are behaviors that make you more likely to contract infection with the virus. High-risk activities are listed below:

- a) Having sex with partners at risk - Having unprotected sexual contact with partners: (1) who are infected or you are uncertain as to whether they are infected, (2) who inject drugs (3) who have received a blood transfusion, organ transplant or artificial insemination from a person with documented HIV infection.
- b) Sharing equipment - Sharing injection (IV) needles, tattoo equipment, razors or other items contaminated with an infected person's blood. If the equipment has been in contact with another person's blood it can come transferred to your body from the equipment.
- c) Contact from a work injury - Work-related contact with blood or other contaminated body fluids that were taken into your skin, eyes, nose or mouth.
- d) Receiving a blood transfusion or organ transplant - This risk has been dramatically reduced since accurate screening tests for HIV became available in 1985.

6) **Can I spread the infection to other people like my sexual partner or my children?**

Studies have shown that children of AIDS patients are no more at risk for developing this disease than any one else. Basically, the normal activities of daily home life, such as kissing your children, using the same eating utensils, sharing the same bathroom facilities, etc., are not risk factors for spreading this illness. You can spread infection to your unborn child by becoming pregnant or making your female partner pregnant.

You can spread HIV infection through sexual contact with a male or female partner. Discuss with your physician what means you may want to use to prevent this spread. The safest prevention is to abstain from sex. The next best means is to use barrier protection during sexual intercourse with a condom or "rubber." This is not a foolproof measure, since condoms sometimes tear or leak.

You should strongly consider discussing your HIV infection with anyone with whom you've had unprotected sex or engaged in high risk behaviors in the past, so they can take steps to be tested for HIV infection and receive treatment.

To best protect those around you who may come in contact with your blood or body fluids, you should refrain from:

- a) having any unsafe sexual activity with men or women.
- b) having any sexual activity with a man or woman without discussing your HIV infection.
- c) sharing any needles or injection drug use equipment with others.
- d) sharing personal hygiene items with others that may be contaminated with blood such as razors or toothbrushes.
- e) donating any blood or organs.

Also, think carefully about the risk of passing HIV infection to an unborn child should you or your sexual partner consider pregnancy.

If you have used illegal drugs or had problems with alcohol abuse seek advice on drug treatment programs available during incarceration and upon release from health care staff, social workers, psychology staff, or drug counselors. Do not smoke tobacco since this may further weaken your immune system. Most importantly seek support to deal with the emotions and feelings that you are experiencing, by discussing your concerns with your health care provider, psychology or social work staff, or pastoral counselors.

7) What do I do now with respect to medical care?

Your physician will conduct a baseline evaluation and obtain blood tests to determine the stage of your infection. He or she will then advise you as to what medical treatments are recommended.

Inmate Name	Register #	Date
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(Signature and Retention in Medical Record)

Replaces BP-S492.061 of OCT 1995