

Oral Presentation
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Rapid HIV Testing in an Emergency Department

Cook County Bureau of Health Services
Chicago, Illinois
Centers for Disease Control
and Prevention
(Cooperative Agreement #CCU516455)

Study Objectives

- Determine if rapid HIV testing (RT) is feasible and acceptable in a busy urban hospital emergency department (ED)
- Assess patient receipt of results
- Evaluate patient entry into care following a positive rapid HIV test

Study Methods

- Eligibility criteria
 - Age 18 - 60
 - Informed consent
 - Study staff on site
- Counseling
 - Pre & post-test script based on CDC 3/98 recommendation
 - HIV+ pts scheduled for evaluation when receive results
- Rapid test device
 - SUDS HIV- 1 Test, Abbott/Murex
 - Positive SUDS tests repeated in duplicate
 - All SUDS tests supplemented with EIA
 - WB performed on all SUDS+ and EIA+

Cook County Hospital Emergency Department

- Busiest emergency department in Chicago
- 120,000 patient visits/year
- January 2001 conventional HIV testing
- June 2001 rapid HIV testing

CCH-ED Procedure

Conventional HIV Testing (CT)

- ED providers perform pre-test counsel and obtain informed consent
- Blood drawn by ED nurse
- Specimen sent to hospital lab for EIA
- Patient directed to the CORE Screening Clinic for results in two weeks

Rapid Test Study ED Procedure

Three health educators responsible for:

- Pre-test counseling

- Obtaining written informed consent

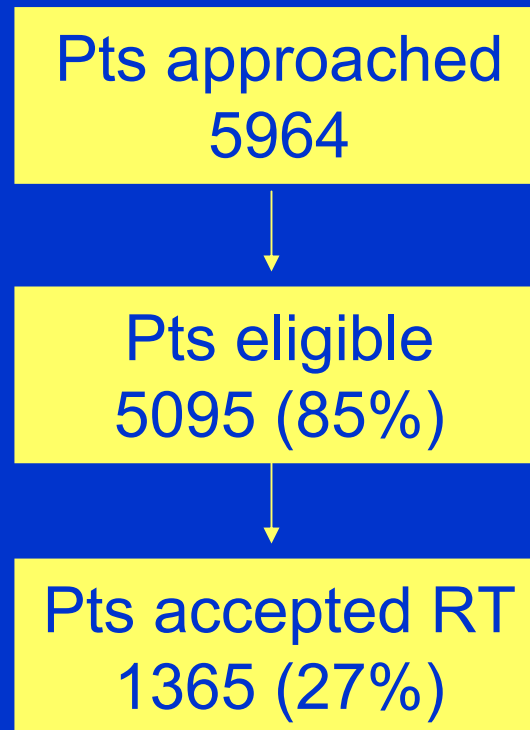
- Phlebotomy

- Rapid testing

- Result/Post-test counseling

Rapid Test Acceptance

June – December 2001



Receipt of results: RT vs CT

January – December 2001

	Rapid Testing	Conventional Testing
Pts. tested	1365	144
Pts. received results	1355 / 99.3%	34 / 24%
Time to receive results	< 2 hours	14.5 days

Counseling, Testing, Results

Mean times (minutes)

	Pretest Counsel	SUDS Testing	Result to Patient	Total
SUDS Negative (N=1303)	12.6	30.3	1.4	44.2
SUDS Positive (N=36)	14.4	43.0	35.9	94.1

Entry to Care: RT vs CT

January – December 2001

	Rapid Testing	Conventional Testing
Pts. tested	1365	144
Pts. positive	36 (2.6%)	13 (9%)
Pts. entered care	30 (83%)	10 (77%)
Median days test to visit	13.5 (range 4-113)	26.5 (range 10-319)

SUDS Performance

N=1365

Sensitivity	100.0%
Specificity	99.8%
PPV	92.3%
NPV	100.0%
Accuracy	99.8%

Conclusions

- Rapid HIV testing was well received by many patients
- Point-of-care rapid HIV testing in the ED is feasible
- Rapid testing increases the number of people who learn their results and may improve entry into care

Rapid HIV Study

- Robert A. Weinstein, MD, Principal Investigator
- Sabrina R. Kendrick, MD, Co-Principal Investigator
- David Withum, Dr.PH, CDC, Co-Investigator
- Bernard Branson, MD, CDC, Co-Investigator
- Eileen Couture, DO, Site Investigator
- Shayle Miller, MD, Site Investigator
- Rovonda Doty, Health Educator
- Regina Harden, Health Educator
- Bernice Wilson, Health Educator
- Carole Marsh, Data Entry

Rapid Test Acceptance STD Clinic & Cook County Jail

CORE
STD Clinic

CCJ
Female Intake

Approach

2641

3055

Eligible

2018 (76%)

2289 (75%)

Accept RT

1372 (68%)

988 (43%)