



# STATE OF NEW YORK DEPARTMENT OF HEALTH

Corning Tower The Governor Nelson A. Rockefeller Empire State Plaza Albany, New York 12237

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Commissioner

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**TO:** Hospitals, Diagnostic and Treatment Centers, Local Health Departments,  
Regional Office Directors

**FROM:** NYSDOH, AIDS Institute

**HEALTH ADVISORY: OSHA Requirement for Rapid HIV Antibody Testing**

Please distribute immediately to: Medical Director, Infection Control,  
Hospital Epidemiologist, Clinical Laboratory Director, Employee Health

Since 2003, the national Centers for Disease Control and Prevention (CDC) has promoted adoption of rapid tests for HIV in medical care settings.<sup>1</sup> In 2005, the CDC published “Updated U.S. Public Health Service Guidelines for the Management of Occupational Exposures to HIV and Recommendations for Postexposure Prophylaxis” that highlighted the use of rapid test technologies to test source patients after exposure of health care workers.<sup>2</sup>

According to the Centers for Disease Control and Prevention (CDC), the use of rapid HIV testing could result in decreased use of Postexposure Prophylaxis (PEP), sparing personnel from unnecessary anxiety and the adverse effects of antiretroviral PEP. As noted by CDC:

Rapid HIV testing of source patients can facilitate making timely decisions regarding use of HIV PEP after occupational exposures to sources of unknown HIV status.<sup>2</sup>

Consistent with CDC’s recommendations, the U.S. Department of Labor, Occupational Safety and Health Administration (OSHA) has issued an interpretation that it is a violation of 29 CFR 1910.1030 for a medical facility subject to OSHA authority not to perform rapid HIV antibody testing on a source individual after an exposure to blood borne pathogens.<sup>3</sup>

The blood borne pathogens standard states that “the source individual’s blood shall be tested as soon as feasible” after an exposure incident and after consent is obtained. Rapid HIV testing can usually confirm HIV-negative status in less than an hour after blood is drawn from a source individual. Obtaining results from standard enzyme immunoassay testing can take much longer. Therefore, OSHA has determined that failure to use rapid HIV testing when testing after exposure to blood borne pathogens would usually be considered a violation of 29 CFR 1910.1030(f)(3)(ii)(A).<sup>4</sup>

Information on rapid HIV testing, including guidance for licensed Article 28 facilities, is available on the NYS Department of Health's web site at <http://www.nyhealth.gov/diseases/aids/testing/rapid/index.htm> and on CDC's web site at: <http://www.cdc.gov/hiv/topics/testing/rapid/index.htm>. The NYSDOH AIDS Institute Clinical Guideline "HIV Prophylaxis Following Occupational Exposure" is available at: <http://www.hivguidelines.org/Content.aspx>

Questions about rapid testing may be directed to the AIDS Institute at 518/474-3671 and by sending an email to: [hivprev@health.state.ny.us](mailto:hivprev@health.state.ny.us)

## References

1. USDHHS. CDC. "Advancing HIV Prevention: New Strategies for a Changing Epidemic — United States, 2003." MMWR 52 (15); 329-332. Available at: <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5215a1.htm>
2. USDHHS. CDC. "Updated U.S. Public Health Service Guidelines for the Management of Occupational Exposures to HIV and Recommendations for Postexposure Prophylaxis." MMWR 54(RR09);1-17. Available at: <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5409a1.htm>
3. USDOL. OSHA. Safety and Health Topics: Bloodborne Pathogens and Needlestick Prevention. Standard Interpretation Available at: <http://www.osha-slc.gov/SLTC/bloodbornepathogens/index.html>
4. USDOL. OSHA. Standard Interpretation: Standard Number 1910.1930; 1910.1030(f)(3)(ii)(A) 01/08/2007 - Use of rapid HIV antibody testing on a source individual after an exposure incident. Available at: [http://www.osha.gov/pls/oshaweb/owadisp.show\\_document?p\\_table=INTERPRETATIONS&p\\_id=25619](http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=INTERPRETATIONS&p_id=25619)