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Required and recommended prenatal screening for HIV and STDs

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Fact Sheet

South Carolina Department of Health and Environmental Control • www.scdhec.gov

Required and Recommended Prenatal Screening for HIV and STDs

Prenatal Screening

- ❖ All pregnant women should receive the following tests at the **first prenatal** visit with each pregnancy:
 - *Syphilis*: Rapid Plasma Reagin (RPR) is required by [S.C. Law \(44-29-120\)](#).
 - *HIV*: Unless the woman is known to be positive, HIV screening should be offered as an opt-out test and as part of the general patient consent statement. Document results or opt-out in the chart.
 - *Hepatitis B*: Test for Hepatitis B surface antigen (HBsAg), even for those with a positive Hepatitis B core antibody.
 - *Chlamydia and Gonorrhea*: Screen all pregnant women under 25 years of age and those over 25 years of age with risk factors (new partner or multiple partners at the time of screening).
 - *Bacterial Vaginosis (BV)*: Evaluate pregnant women (including asymptomatic women) for BV if they are at high risk for preterm labor (those who have had a previous preterm delivery).

- ❖ Pregnant women with any of the risk factors listed below should be re-screened for Syphilis, Chlamydia, Gonorrhea, and Hepatitis B during the **third trimester** (28–32 weeks).*

*(Note: In addition to women with risk factors, the Centers for Disease Control and Prevention (CDC) recommends women under 25 years of age be tested for Chlamydia in the third trimester even if tested in the first trimester, and recommends all pregnant women infected with Chlamydia be re-tested at least three weeks after treatment.)

Risk Factors

- HIV infected partner or partner at risk for HIV
- Illicit drug use
- History of Sexually Transmitted Diseases during this pregnancy or one year prior to pregnancy
- New or multiple sex partners during pregnancy
- Exchanges sex for money or drugs
- Signs or symptoms of acute HIV infection, primary syphilis or other STD

- ❖ All pregnant women should be re-screened for HIV in the third trimester.

Labor and Delivery Screening


- ❖ All women with undocumented or unknown HIV, RPR, or Hepatitis B status should receive syphilis (RPR), hepatitis B (HBsAg), and rapid HIV screening at delivery.
- ❖ Women who have been treated for syphilis within one year of pregnancy should receive an RPR at delivery.

REPORT ALL POSITIVE TESTS TO YOUR LOCAL HEALTH DEPARTMENT.

Sources

1. Sexually Transmitted Diseases Treatment Guidelines, 2010. <http://www.cdc.gov/std/treatment/2010/default.htm>
2. MMWR, Revised Recommendations for HIV Screening of Pregnant Women, Sep 22, 2006. <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5514a1.htm>
3. MMWR, A Comprehensive Immunization Strategy to Eliminate Transmission of Hepatitis B Virus Infection in the United States, Dec 23, 2005. <http://www.cdc.gov/mmwr/PDF/rr/rr5416.pdf>

Required and Recommended Prenatal Screening for HIV and STDs

Screening for STDs during Pregnancy: Recommendations & Guidelines			
	Prenatal Screening		Labor and Delivery Screening
	First Trimester	Third Trimester	L&D
Syphilis	Required by S.C. State Law S.C. Law (44-29-120) .	Yes, if risk factors present	Yes, If treated for Syphilis within one year of L&D
HIV	Unless the woman is known to be positive, HIV screening should be offered as an opt-out test and as part of the general patient consent statement.	Recommended for all pregnant women	Yes, if status unknown or undocumented
Hepatitis B	Test for Hepatitis B surface antigen (HBsAg), even for those with a positive Hepatitis B core antibody.	Yes, if risk factors present	Yes, if status unknown or undocumented
Chlamydia	Screen all pregnant women under 25 years of age and those over 25 years of age with risk factors	Yes, if risk factors present	Yes, if status unknown or undocumented
Gonorrhea	Screen all pregnant women under 25 years of age and those over 25 years of age with risk factors (new or multiple partners at time of screening)	Yes, if risk factors present	Yes, if status unknown or undocumented
Bacterial Vaginosis	Evaluate pregnant women (including asymptomatic women) for BV if they are at high risk for preterm labor	Yes, if risk factors present	Yes, if status unknown or undocumented

This fact sheet is available at: www.scdhec.gov/stdhiv