

HIV and Opportunistic Infections Guidelines

HIV Testing Guidelines

[Revised Recommendations for HIV Testing of Adults, Adolescents, and Pregnant Women in Health Care Settings](#) (U.S. Centers for Disease Control and Prevention [CDC]) – These guidelines, published in 2006, recommend that all persons between 13 and 64 years old should be screened for HIV at least once, and that persons at higher risk for HIV infection should be screened at least annually. The health care settings covered by these recommendations include hospital emergency departments, urgent care clinics, inpatient services, substance abuse treatment clinics, public health clinics, community clinics, correctional health care facilities, and primary care settings.

[Recommendations for HIV Screening of Gay, Bisexual, and Other Men Who Have Sex with Men – United States, 2017](#) (CDC) – These recommendations are based on a literature review concerning the optimal frequency for HIV testing in gay, bisexual, and other men who have sex with men (MSM). CDC concluded that sexually active MSM should be screened at least annually for HIV, and that more frequent HIV screening may be considered based on individual risk factors, local HIV epidemiology, and local policies.

[Laboratory Testing for the Diagnosis of HIV Infection: Updated Recommendations](#) (CDC) – This document updates recommendations for HIV testing by laboratories in the U.S., and provides guidance on reporting test results to persons ordering HIV tests and to public health authorities.

HIV Prevention Guidelines

[Recommendations for HIV Prevention with Adults and Adolescents with HIV in the United States, 2014](#) (CDC, Health Resources and Services Administration, and National Institutes of Health) – These recommendations cover a wide range of topics, including: the context of prevention with persons with HIV; linkage to and retention in HIV medical care; antiretroviral treatment (ART) for care and

prevention; ART adherence; risk screening and risk-reduction interventions; HIV partner services; sexually transmitted disease preventive services; reproductive health care for women and men; HIV prevention related to pregnancy; services for other medical conditions; social factors that influence HIV transmission; and quality improvement and program monitoring and evaluation.

[Antiretroviral Therapy to Prevent Sexual Transmission of HIV \(Treatment as Prevention\)](#) (U.S. Department of Health and Human Services [HHS]) – This section of the [Guidelines for the Use of Antiretroviral Agents in Adults and Adolescents Living with HIV](#) was last updated in December 2019. It includes an expert panel’s recommendations on the use of ART to prevent sexual transmission of HIV; a summary of research on HIV treatment as prevention (TasP); information about viral load testing, ART adherence, and managing viral load “blips”; guidance on integrating the principles of TasP into HIV care; and an extensive list of references.

[Final Recommendation Statement: Prevention of Human Immunodeficiency Virus \(HIV\) Infection: Preexposure Prophylaxis](#) (U.S. Preventive Services Task Force) – This is the Task Force’s most recent guidance on preexposure prophylaxis (PrEP), including risk assessment of persons who may be candidates for PrEP, medications used for PrEP, adherence, and medical monitoring.

[Preexposure Prophylaxis for the Prevention of HIV Infection in the United States – 2017 Update: A Clinical Practice Guideline](#) (U.S. Public Health Service [USPHS]) – This document reviews scientific evidence on the safety and efficacy of daily oral PrEP. It also includes guidance on recommended sexually transmitted disease screening, hepatitis C testing, and HIV testing for patients being prescribed PrEP.

[Preexposure Prophylaxis for the Prevention of HIV Infection in the United States – 2017 Update: Clinical Providers’ Supplement](#) (USPHS) – This supplement includes an HIV risk index for assessing persons who inject drugs for PrEP, clinical guidance for transitioning people to PrEP after a course of nonoccupational postexposure prophylaxis (nPEP), and clinical guidance for transitioning people to ART if they acquire HIV infection while being prescribed PrEP.

[Updated Guidelines for Antiretroviral Postexposure Prophylaxis After Sexual, Injection Drug Use, or Other Nonoccupational Exposure to HIV – United States, 2016](#) (CDC) – These are the most recent U.S. guidelines on postexposure

prophylaxis (PEP) use after nonoccupational exposures. These include guidance on evaluating people seeking care after a possible exposure to HIV, recommended lab tests to be performed before prescribing PEP, recommended drug regimens for PEP, and additional considerations, such as providing adherence support and HIV prevention counseling.

[Updated U.S. Public Health Service Guidelines for the Management of Occupational Exposures to HBV, HCV, and HIV and Recommendations for Postexposure Prophylaxis](#) (USPHS) – Published during 2013, this is the USPHS’s most recent PEP guidance for occupational exposures to HIV and viral hepatitis. It emphasizes the importance of primary prevention strategies, prompt reporting and management of occupational exposures, adherence to recommended PEP regimens, and careful monitoring for treatment side effects and any signs of HIV infection.

[Interim Statement Regarding Potential Fetal Harm from Exposure to Dolutegravir – Implications for HIV Post-Exposure Prophylaxis](#) (CDC) – This document provides guidance cautioning against the use of PEP regimens that contain the antiretroviral drug dolutegravir for women in the early weeks of pregnancy and for nonpregnant women of childbearing potential who are not using an effective birth control method.

Antiretroviral Treatment Guidelines

[Guidelines for the Use of Antiretroviral Agents in Adults and Adolescents Living with HIV](#) (HHS) – These guidelines provide detailed recommendations on: baseline evaluation of persons diagnosed with HIV; laboratory testing; treatment goals; starting ART; treatment as prevention; what drugs to start ART with; what not to use; management of the treatment-experienced patients; special patient populations; treating patients with coinfections; limitations to ART safety and efficacy; and drug-drug interactions.

[Guidelines for the Use of Antiretroviral Agents in Pediatric HIV Infection](#) (HHS) – These guidelines focus on infants, children, and adolescents in early to mid-puberty with HIV. They provide detailed recommendations on: maternal testing and identifying perinatal HIV exposure; HIV diagnosis in infants and children;

clinical and laboratory monitoring; when to start treatment; what to start treatment with; management of perinatal HIV exposure; special considerations when using ART in adolescents; ART adherence; managing medication toxicity or intolerance; and managing children receiving ART.

[Recommendations for the Use of Antiretroviral Drugs in Pregnant Women with HIV Infection and Interventions to Reduce Perinatal HIV Transmission in the United States](#) (HHS) – These guidelines provide detailed recommendations on: maternal HIV testing and identification of perinatal HIV exposure; the use of PrEP to reduce HIV risk during periconception, antepartum, and postpartum periods; preconception counseling and care for women with HIV; antepartum and intrapartum care and postpartum follow-up; providing counseling and care to women with HIV who breastfeed; and providing care to infants born of women with HIV.

Opportunistic Infections Guidelines

[Guidelines for the Prevention and Treatment of Opportunistic Infections in Adults and Adolescents with HIV](#) (HHS) – These guidelines provide specific recommendations for the prevention and treatment of more than 20 infectious diseases that occur with greater frequency among persons with HIV. They also include a recommended immunization schedule for adults and adolescents with HIV.

[Guidelines for the Prevention and Treatment of Opportunistic Infections in HIV-Exposed and HIV-Infected Children](#) (HHS) – These guidelines, which focus on pediatric patients, provide detailed recommendations on the prevention and treatment of more than 20 infectious diseases that occur with greater frequency among persons with HIV. Guidance is also provided on the immunization of children and adolescents with HIV for vaccine-preventable diseases.

COVID-19 and HIV Guidance

[Interim Guidance for COVID-19 and Persons with HIV](#) (HHS) – This document “reviews special considerations regarding COVID-19 for people with HIV and their health care providers in the United States.” It includes general guidelines for all

persons with HIV, as well as specific recommendations for people with HIV who have symptoms but have not been diagnosed with COVID-19, have been exposed to SARS-CoV-2 (the virus responsible for COVID-19), or who develop COVID-19 and are being cared for at home or in a hospital setting.

[Special Considerations in People with HIV](#) (National Institutes of Health) – This section of the [NIH COVID-19 Treatment Guidelines](#) includes specific recommendations concerning the prevention, diagnosis, laboratory testing, and management of COVID-19 in persons with HIV, as well as the management of HIV in persons with COVID-19. It also has information about the clinical presentation and clinical outcomes of COVID-19 in people with HIV.

Other Guidance and Recommendations

[Update to CDC's U.S. Medical Eligibility Criteria for Contraceptive Use, 2010: Revised Recommendations for the Use of Hormonal Contraception Among Women at High Risk for HIV Infection or Infected with HIV](#) (CDC) – These recommendations provide guidance on the use of hormonal contraceptives, including combined hormonal contraceptives, progestin-only pills, depot medroxyprogesterone acetate (DMPA), and implants. There is also updated information on the use of progestin-only injectables for women at high risk for HIV infection.

[Guidance for Non-HIV-Specialized Providers Caring for Persons with HIV Who Have been Displaced by Disasters \(such as a Hurricane\)](#) (HHS) – This document “provides guidance to health care providers attending to the medical needs of adults and children with HIV who have been displaced from disaster areas and who have not yet secured HIV care in the areas where they have relocated.” It includes recommendations concerning the initial assessment of displaced persons with HIV, and strategies for managing ART, preventing and treating opportunistic infections, providing immunizations when needed, and caring for pregnant women, persons on methadone maintenance therapy, and children with HIV.