

American Pharmacists AssociationHouse of Delegates – National Harbor, Maryland

To be completed by the Office of the Secretary of the House of Delegates

Item No.: 9

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NEW BUSINESS

(To be submitted and introduced by Delegates only)

Introduced by: Matt Lacroix, PharmD, MS, BCPS
(Name)

2/19/2020	Rhode Island Delegation	
(Date)	(Organization)	

Subject: HIV testing in Pregnant Women

Motion: To amend existing APhA Policy 1996 HIV Testing in Pregnancy to read as follows:

1996 HIV Testing in Pregnant Women

APhA encourages pharmacists to provide pharmaceutical care to women, including education about the availability and benefits of opt-out HIV testing in prenatal and perinatal care, to decrease the risk of HIV transmission to unborn children and between partners. APhA encourages pharmacists to provide education about the availability and benefits of opt-out HIV testing in prenatal and perinatal care, including offering and/or performing testing to the patients and their partners.

Background:

The exact changes to the existing 1996 HIV Testing in Pregnant Women policy are shown below with new language underlined and removed language struck through and bolded:

1996 HIV Testing in Pregnant Women

APhA encourages pharmacists to provide pharmaceutical care to women, including education about the availability and benefits of <u>opt-out</u> HIV testing in <u>pregnancy prenatal and perinatal care</u>, to decrease the risk of HIV transmission to unborn children <u>and between partners</u>. APhA encourages pharmacists to provide education about the availability and benefits of <u>opt-out</u> HIV testing in <u>pregnancy prenatal and perinatal care</u>, including offering and/or performing testing to the patients and their partners.

The Centers for Disease Control and Prevention (CDC) the US Department of Health and Human Services HHS Panel on Treatment of Pregnant Women with HIV Infection and Prevention of Perinatal Transmission,

and the Committee on Obstetric Practice HIV Expert Work Group of the American College of Obstetricians and Gynecologists (ACOG) all support opt-out HIV testing of as a routine part of prenatal care, and as early as possible in pregnancy. Existing APhA policy supports pharmacist-performed point-of-care testing and clinical services.

References:

- I. Branson BM, Handsfield HH, Lampe MA, et al. Revised recommendations for HIV testing of adults, adolescents, and pregnant women in health-care settings. MMWR Recomm Rep 2006;55(RR-14):1–17; quiz CE1-4.
- 2. ACOG Committee Opinion No. 752 Summary: Prenatal and Perinatal Human Immunodeficiency Virus Testing. Obstet Gynecol 2018;132(3):805–6.
- 3. Panel on Treatment of Pregnant Women with HIV Infection and Prevention of Perinatal Transmission. Recommendations for Use of Antiretroviral Drugs in Transmission in the United States. Available at http://aidsinfo.nih.gov/contentfiles/lyguidelines/ PerinatalGL.pdf. Accessed (19 February 2020).

Related APhA Policies:

1996 HIV Testing in Pregnant Women

APhA encourages pharmacists to provide pharmaceutical care to women, including education about the availability and benefits of HIV testing in pregnancy to decrease the risk of HIV transmission to unborn children. APhA encourages pharmacists to provide education about the availability and benefits of HIV testing in pregnancy.

(Am Pharm NS36(6):395 June 1996) (Reviewed 2005) (Reviewed 2009)(Reviewed 2014)(Reviewed 2019)

2005, 1993 **HIV Testing**

- I. APhA opposes mandatory HIV testing of pharmacists, student pharmacists, and pharmacy personnel.
- 2. APhA supports voluntary and confidential HIV testing of pharmacists, student pharmacists, and pharmacy personnel, to facilitate early detection and disease intervention.
- 3. APhA supports training designed to foster compliance with infection control procedures outlined in current Centers for Disease Control and Prevention (CDC) guidelines for universal precautions and OSHA standards for blood-borne pathogens.
- 4. APhA encourages the development of support networks to assist HIV-positive health care professionals and students.

(Am Pharm NS33(7):54 July 1993) (JAPhA NS45(5):556 September/October 2005) (Reviewed 2009)(Reviewed 2014)(Reviewed 2019)

2016 Point-of-Care Testing

- I. APhA recognizes the value of pharmacist-provided, point-of-care testing and related clinical services, and it promotes the provision of those tests and services in accordance with the Joint Commission of Pharmacy Practitioners Pharmacists' Patient Care Process.
- 2. APhA advocates for laws, regulations, and policies that enable pharmacist-provided, point-of-care testing and related clinical services that are consistent with the pharmacists' role in team-based care.

- 3. APhA opposes laws, regulations, and policies that create barriers to the tests that have been waived by the Clinical Laboratory Improvement Amendments (CLIA) and that are administered and interpreted by pharmacists.
- 4. APhA encourages use of educational programming and resources to facilitate practice implementation of pharmacist-provided, point-of-care testing and related clinical services.
- 5. APhA supports patients taking active roles in the management of their health, including their ability to request and obtain pharmacist-provided, point-of-care tests and related clinical services.
- 6. APhA advocates for access to, coverage of, and payment for both pharmacist-provided, point-of-care tests and any related clinical services.

(JAPhA 56(4); 369 July/August 2016)(Reviewed 2018)(Reviewed 2019)