

Patient Understanding of HIV and Hepatitis C Virus Testing in an Emergency Department with an Integrated Testing Program

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BACKGROUND

- We implemented ED triage nurse rapid HIV HCV screening, in parallel with physician diagnostic testing. Testing was integrated into regular ED processes.
- Little is known regarding patient understanding of test completion. For example, are some patients tested without their knowledge while others falsely believe they were tested?

OBJECTIVE

- To determine the proportion of patients who understood whether or not testing for HIV and/or HCV was performed during their ED visit.

METHODS

- Two month cross-sectional study.
- Enrolled patients at the conclusion of their ED visit during specified study hours.
- Patients reported the details of their experience with HIV and/or HCV testing.
- Responses were compared to visit level data recorded in the electronic medical record.
- Descriptive statistics were used to determine if patients were able to accurately report if they were tested or not for HIV and/or HCV.
- The study received institutional review board approval, all patients provided written informed consent.

PRIMARY OUTCOME

- How often patients understand whether or not they were tested for HIV and/or HCV at the conclusion of their ED visit.

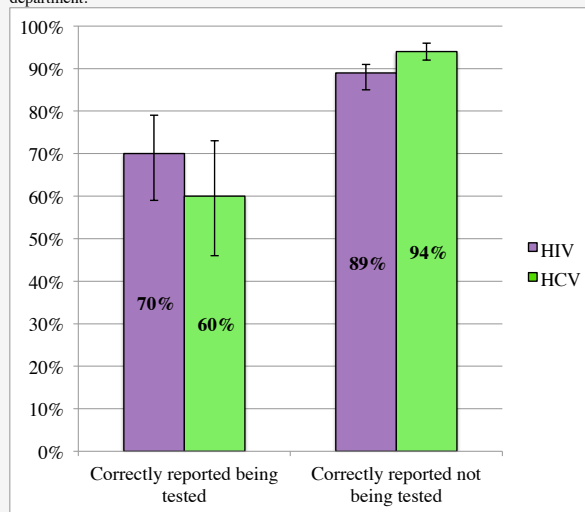
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RESULTS

- 1,040 patients assessed for eligibility, 601 eligible, and 492 participated in the study.

| | All patients (n = 492) | Patients tested for HCV (n = 56) | Patients tested for HIV (n = 98) |
|-------------------------|------------------------|----------------------------------|----------------------------------|
| Age, mean (SD), y | 44 (15) | 49 (13) | 41 (15) |
| Gender, No. (%) | | | |
| Female | 228 (46) | 23 (41) | 46 (47) |
| Race/Ethnicity, No. (%) | | | |
| Black | 248 (50) | 25 (45) | 43 (44) |
| Hispanic | 104 (21) | 9 (16) | 25 (26) |
| White | 76 (15) | 14 (25) | 18 (18) |
| Asian | 33 (7) | 4 (7) | 7 (7) |
| Language, No. (%) | | | |
| English | 427 (87) | 49 (88) | 83 (85) |
| Insurance, No. (%) | | | |
| Medicaid | 394 (80) | 41 (73) | 77 (79) |
| Medicare | 43 (9) | 10 (18) | 8 (8) |
| Private | 19 (4) | 2 (4) | 4 (4) |
| Uninsured/Self-pay | 32 (7) | 2 (4) | 8 (8) |

FIGURE. Patient understanding with regard to HIV and HCV testing in the emergency department.*



*Error bars represent 95% confidence intervals.

RESULTS

| | HIV Test n = 98 | HCV Test n = 56 |
|---|-----------------|-----------------|
| Screening tests performed, No. (%) | 77 (79) | 42 (75) |
| Screening test performed without patient knowledge, No. (%) [*] | 31 (40) | 16 (38) |
| Diagnostic tests performed, No. (%) | 21 (21) | 14 (33) |
| Diagnostic test performed without patient knowledge, No. (%) [‡] | 15 (71) | 11 (79) |
| Positive rapid tests, No. (%) | 1 (1) | 7 (13) |

^{*}Percentage based on number of screening tests performed for HIV and HCV respectively.
[‡]Percentage based on number of diagnostic tests performed for HIV and HCV respectively.

- Over 80% of patients would accept future HIV and/or HCV testing in the ED.
- 50% of HIV tests and 32% of HCV tests were available at time of discharge.
- Patients reported being disclosed their test results 5% of the time.

LIMITATIONS

- Generalizability
- Survey not validated
- Unable to determine factors associated with patient understanding

CONCLUSIONS

- Although most ED patients correctly reported whether or not testing was performed, there were many who did not.
- Such misunderstanding may pose medico-legal risks, lead to false reassurances, promote high risk behaviors, and affect future test acceptance.
- These findings are an important adjunct to traditional methods of program evaluation.
- Strategies to improve communication require evaluation and attention.