



GUIDELINE

FOR ANONYMOUS AND VOLUNTARY **HIV** SCREENING

AIDS/STD Section
Department Of Public Health
Ministry Of Health, Malaysia



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We would like to express our highest gratitude and thanks for the contributions made by those involved in the preparation of this guide book.

Foreword

Generally there are three ways by which HIV can be prevented from spreading to couples through sex. First, to assume that all sex couples are HIV carriers and to use condom each time when performing sexual intercourse. With a breakthrough rate of 10%, reduction in risk as a result of the use of condom, is expected around 90%. However, many has considered the effectiveness of using condom is just around 70% only. Possibility of clear reduction in the HIV virus spread has made the WHO and other International organizations to choose condom as the main prevention method. Secondly, which is the method that had always been generally discussed is the use of vaccine. Until the present day, it is still being researched. Although in future the suitable vaccine will be produced, its effectiveness is expected to be around 60%, (equal to the vaccine for Cholera) to 95% (equal to the vaccine for Measles). The third method, which seems to be giving high hopes, is the voluntary HIV test. Depending on the sensitivity of the test and the “window period”; this strategy will be able to reduce the risk of spread between 95% - 99% if they use the HIV infection status information to avoid sexual intercourse.

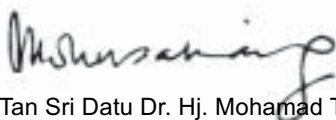
The voluntary HIV test which is supported by counseling should be part of our main respond in our efforts to tackle AIDS.

At the individual level, the test process will give the opportunity to obtain “informed consent” and to give information regarding the disease, its prevention method and support to new patients. At the programme level, it is the main component in creating an environment that is supportive to the people that are most vulnerable to participate in our prevention and control efforts.

I would like to record my appreciations to all those involved, with all the cooperation and commitment in combating the HIV/AIDS problem in this country.

I would also like to express my highest appreciations and thanks to the officers of the Ministry of Health for their contributions in the preparation of this Guide Book. It is our hope that this Guide Book will be used by members in the implementation of the “Anonymous and Voluntary HIV Screening programme in the whole country.

Thank you.



Tan Sri Datu Dr. Hj. Mohamad Taha bin Arif
Director General of Health
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“ ANONYMOUS AND VOLUNTARY HIV SCREENING ” PROGRAMME

1. INTRODUCTION

HIV/AIDS is a disease that infects someone only once in his life and there is no remedy to it. Preventive steps such as not performing sexual intercourse before marriage, not taking drugs and not performing sexual intercourse with people whom are not their life partners are steps that could prevent the spread of HIV. However, the spread of this disease could be prevented if a person knows that he is infected by HIV and he takes the necessary steps to prevent it from spreading to other people.

Through this Anonymous and Voluntary HIV Screening programme, an individual could know the HIV status within 15 minutes by using the “rapid test” method. An individual does not have to disclose his/her personal details including his/her name and address when undergoing this test. Only information relating to age, race, sex and risks habits will be taken from individuals when undergoing this “anonymous” test. This service is provided at all government health clinics every working day during office hours.

For individuals whom had been confirmed infected by HIV, all personal information relating to the patient will be handled confidentially by respective officers only. Patient will be referred for further care through a service package that covers counseling, follow-up checks and treatment that will be provided at Health Clinics and also Hospitals.

2. OBJECTIVE

- i. To provide a simple, quick anonymous and confidential HIV screening to the society.
- ii. To encourage individual with risks to come forward and undergo the test for early screening and prevention.
- iii. To provide a service package that covers counseling, treatment and follow-up care for those found positive.

3. IMPLEMENTATION

a. Target group

This service is open to all individuals who feel that he/she has the possibility of being infected by HIV.

- i. Those who has partners infected by HIV.
- ii. Drug Addicts.
- iii. Sex Workers.
- iv. Homosexuals and their partners.
- v. Those who had been sharing needles to inject drugs.
- vi. Those who has drug addicts as their partners.
- vii. Those who have been having sexual intercourse with sex workers.
- viii. Those who had multiple sex partners.
- ix. Those who had sexual intercourse with the above.

b. Facilities to undergo the test

All Health Clinics operated by the State Health Departments.

c. Method of the Test

Rapid test method will be used for HIV screening. If the test result is “reactive”, then the blood sample of the individual will be taken and sent to the HIV Screening Centre (Hospital Laboratory) for confirmation test.

d. Testing procedure

- i. Any individual who wishes to undergo this HIV “Anonymous” test will have to visit any Government Health Clinic.
- ii. Does not have to register at the Registration Counter. The particular individual can straight away go and see any Officer on-duty and request for a HIV “Anonymous” test to be carried out.
- iii. Pre-Test Counseling will be given by the Medical Officer/Assistant Medical Officer. In case the result of the Rapid Test is not reactive, then the individual will be given an explanation on the “window period” (Post Test Counseling) and will be given an advice to repeat the test six (6) months after the date of the screening. The particular individual will be given an option either to make an appointment or to go straight to the Health Clinic.
- iv. In case the result of the rapid test is reactive, then the individual will be given advice and consent will be obtained from him/her to conduct a confirmation test.

e. The HIV Confirmation Procedure

- i. The HIV confirmation test will be conducted under strict confidentiality. Only the Medical Officer/Assistant Medical Officer whom is conducting the test will know the personal details of the individual concerned.
- ii. The Medical Officer/Assistant Medical Officer will fill in the HIV confirmation test application form (HIV-97) which will be sent together with the blood sample (5 mls) which has been filled in the plain bottle.
- iii. The blood sample will be sent straight to the HIV Screening Centre which has been determined for a particular district.

f. Testing at the HIV Screening Centre (Hospital)

- i. All blood samples received by the HIV Screening Centre will be registered for the purpose of identification.
- ii. Result of the test will have to be recorded in the Computer and will also have to be written in the HIV-97 form.
- iii. The Original copy of the HIV-97 form will have to be returned to the Medical Officer/Assistant Medical Officer requesting the test. Results will have to be obtained within two (2) weeks. If no results are received, then the Medical Officer/Assistant Medical Officer requesting the test will have to make a follow-up.

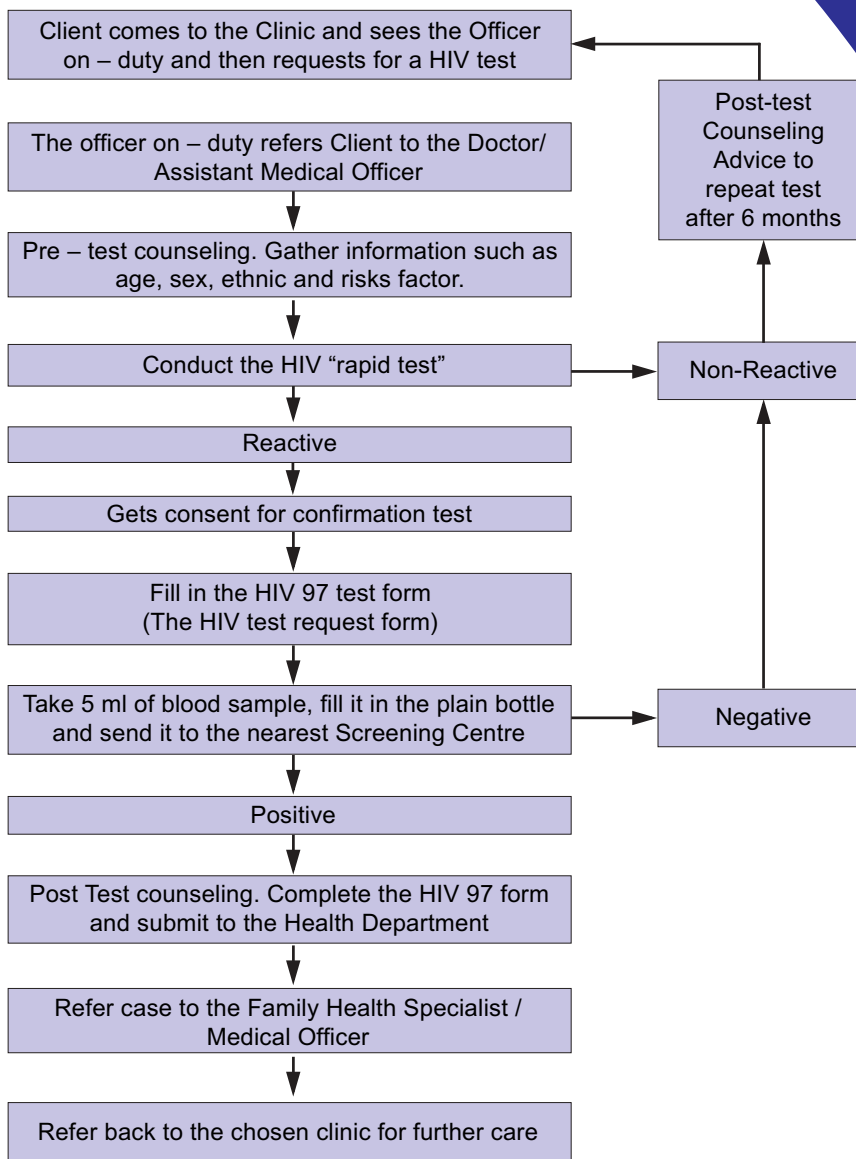
g. Giving the results of the HIV Confirmation Test

- i. On the appointment date that has been fixed i.e. 2 weeks after the blood sample had been taken; the particular individual is required to see the Medical Officer/Assistant Medical Officer in order for him/her to know the result of the test and for post-test counseling.
- ii. For the HIV NEGATIVE test result, he/she will be given an appointment within a period of six (6) months for repeat test.
- iii. For the HIV POSITIVE test result, he/she will be informed and will be given a post-test counseling by the Medical Officer. He will be referred to any Health Clinics providing HIV treatment and care chosen by him/her. Care will include counseling services, medical care and treatment.

h. Reporting cases to the District Health Officer

- i. It is the responsibility of the Medical Officer or the Assistant Medical Health Officer (requesting for the HIV confirmation test) to report all HIV Positives to the District Health Officer.
- ii. All information required by the HIV-97 form will have to be completed and then submitted to the District Health Officer in “CONFIDENTIAL” (Stamped).

FLOW CHART OF THE “ ANONYMOUS AND VOLUNTARY HIV SCREENING ”



MONTHLY “RETURN” OF “ ANONYMOUS AND VOLUNTARY HIV SCREENING ”

(To be completed by the Health Clinic and submitted to the Health Department)

MONTH : _____ YEAR : _____ CLINIC : _____

Age	N/Reactive	Reactive	Positive
13 – 19 years old			
20 – 29 years old			
30 – 39 years old			
40 – 49 years old			
> 49 years old			
Race			
Malay (M)			
Chinese (C)			
Indian (I)			
Sarawak Bumiputra (BSW)			
Sabah Bumiputra (BSB)			
Others (O)			
Sex			
Male (M)			
Female (F)			
Risks Habits / Characters			
Homosexual/bisexual (HB)			
Heterosexual (HS)			
Sharing of injection Needles (SN)			
Others (O)			
Total			

PHONE LINES OF STATE AIDS OFFICER

STATE	TELEPHONE	FACSIMILE
JOHORE HEALTH DEPARTMENT	07-2245188	07-2232603
MALACCA HEALTH DEPARTMENT	06-2828344	06-2864761
N.SEMBILAN HEALTH DEPARTMENT	06-7625231	06-7638543
SELANGOR HEALTH DEPARTMENT	03-55186001	03-55126695
PERAK HEALTH DEPARTMENT	05-2533489	05-2423137
KEDAH HEALTH DEPARTMENT	04-7335533	04-7314936
PENANG HEALTH DEPARTMENT	04-2625533	04-2613508
PERLIS HEALTH DEPARTMENT	04-9773333	04-9760764
KELANTAN HEALTH DEPARTMENT	09-7483288	09-7441333
TERENGGANU HEALTH DEPARTMENT	09-6222866	09-6235001
PAHANG HEALTH DEPARTMENT	09-5161366	09-5135526
SARAWAK HEALTH DEPARTMENT	082-256566	082-424959
SABAH HEALTH DEPARTMENT	088-716535	088-217740
W. PERSEKUTUAN HEALTH DEPARTMENT	03-26938742	03-26938760
DBKL HEALTH DEPARTMENT	03-92845166	03-92857295

HEALTH CLINICS PROVIDING HIV TREATMENT AND CARE

STATE	NAME OF CLINIC
Perlis	<ol style="list-style-type: none"> 1. KK Beseri 2. KK Arau
Kedah	<ol style="list-style-type: none"> 3. KK Bandar Alor Setar 4. KK Bandar Sungai Petani 5. KK Kuah 6. KK Changlun 7. KK Merbok 8. KK Gua Cempedak 9. KK Sik 10. KK Pendang 11. KK Padang Serai 12. KK Kupang
Penang	<ol style="list-style-type: none"> 13. KK Tasik Gelugor, Seberang Prai Utara 14. KK Berapit, Bkt Mertajam, S. Prai Tengah
Perak	<ol style="list-style-type: none"> 15. KK Lintang, Kuala Kangsar 16. KK Changkat Jering, Larut Matang
Selangor	<ol style="list-style-type: none"> 17. KK Semenyih 18. KK Cheras Bt. 9 19. KK Rawang 20. JPL Sg. Buluh 21. KK Salak 22. KK Kelana Jaya 23. KK Seri Kembangan 24. KK Teluk Panglima Garang 25. KK Teluk Datok

STATE	NAME OF CLINIC
	26. KK Kuala Selangor 27. KK Serendah 28. KK Bukit Kuda 29. KK Pandamaran 30. KK Sungai Besar
N. Sembilan	31. KK Seremban 32. KK Jelevu 33. KK Tampin 34. KK Port Dickson 35. KK Kuala Pilah 36. KK Bahau 37. KK Nilai
Malacca	38. KK Air Molek 39. KK Masjid Tanah 40. KK Merlimau 41. KK Selandar 42. KK Bukit Baru 43. KK Alor Gajah
Johore	44. KK Batu Pahat, Batu Pahat 45. KK Rengit, Batu Pahat 46. KK Air Hitam, Batu Pahat 47. KK Parit Raja, Batu Pahat 48. KK Yong Peng, Batu Pahat 49. KK Sri Medan, Batu Pahat 50. KK Tongkang Pecah, Batu Pahat 51. KK Bagan, Batu Pahat 52. KK Pt Sri Merlong, Batu Pahat 53. KK Kg Kenangan Dato Onn, Batu Pahat 54. KK Pt Yaani, Batu Pahat.

STATE	NAME OF CLINIC
	55. KK Senggarang, Batu Pahat.
	56. KK Sri Gading, Batu Pahat
	57. KK Pt Sulong, Batu Pahat.
	58. KK Rumah Pangsa Jl Lumba Kuda, J.Bharu
	59. KK Taman Tun Aminah, J.Bharu
	60. KK Kulai, J.Bharu
	61. KK Masai, J.Bharu
	62. KK Tampoi, J.Bharu
	63. KK Kg Majidee, J.Bharu
	64. KK Ulu Tiram, J.Bharu
	65. KK Gelang Patah, J.Bharu
	66. KK Larkin, J.Bharu
	67. KK Pasir Gudang, J.Bharu
	68. KK Tmn Sri Tebrau, J.Bharu
	69. KK Paloh, Kluang.
	70. KK Renggam, Kluang.
	71. KK Kahang Bt 22, Kluang
	72. KK Spg Renggam, Kluang
	73. KK Kahang Timur, Kluang
	74. KK Layang-Layang, Kluang
	75. KK Ulu Belitong, Kluang
	76. KK Bandar Mas, Kota Tinggi.
	77. KK Bandar Sening, Kota Tinggi
	78. KK Bandar Tenggara, Kota Tinggi
	79. KK Lok Heng (Felda) Kota Tinggi
	80. KK Tg Sedili, Kota Tinggi
	81. KK Air Tawar II (Felda), Kota Tinggi
	82. KK Sg Rengit, Kota Tinggi
	83. KK Bkt Waha, Kota Tinggi
	84. KK Bkt Besar, Kota Tinggi
	85. KK Pengerang, Kota Tinggi

STATE	NAME OF CLINIC
	86. KK Kuala Sedili Besar, Kota Tinggi
	87. KK Bandar Penawar, Kota Tinggi
	88. KK Tengaroh II, Mersing.
	89. KK Endau, Mersing.
	90. KK Jemaluang, Mersing.
	91. KK Tenglu, Mersing.
	92. KK Mersing Kanan, Mersing.
	93. KK Pt Jawa, Muar.
	94. KK Sagil, Muar
	95. KK Lenga, Muar
	96. KK Bkt Pasir, Muar
	97. KK Sg Mati, Muar
	98. KK Pagoh, Muar
	99. KK Paya Mas, Muar
	100. KK Bakri, Muar
	101. KK Pt Bakar, Muar
	102. KK Bt 15 Air Hitam, Muar
	103. KK Gersik, Muar
	104. KK Pt Yusof, Muar
	105. KK Bkt Gambir, Muar
	106. KK Sri Menanti, Muar
	107. KK Kg Kenangan Tun Dr Ismail, Muar
	108. KK Pekan Nenas, Pontian.
	109. KK Benut, Pontian.
	110. KK Ayer Baloi, Pontian.
	111. KK Serkat, Pontian.
	112. KK Kayu Ara Pasong, Pontian.
	113. KK Pekan Penerok, Pontian.
	114. KK Pt Hj Ismail, Pontian.
	115. KK Jln Alsagoff, Pontian.
	116. KK Segamat, Segamat.

STATE	NAME OF CLINIC
	117. KK Pekan Air Panas, Segamat. 118. KK Labis, Segamat. 119. KK Bekok, Segamat. 120. KK Pemanis (felda) Segamat. 121. KK Chaah, Segamat. 122. KK Buloh Kasap, Segamat. 123. KK Batu Anam, Segamat. 124. KK Jementah, Segamat.
Pahang	125. KK Jaya Gading 126. KK Jerantut 127. KK Benta, Lipis
Terengganu	128. KK Marang 129. Poliklinik Dungun 130. KK Batu Rakit
Kelantan	131. KK Pengkalan Chepa 132. KK Jeli
Sabah	133. KK Luyang, Kota Kinabalu
Sarawak	134. Poliklinik Jalan Masjid Kuching 135. Poliklinik Jalan Oya Sibu



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