

New York State Department of Health
Emergency Responder Access to HIV-Related Information of Source Patient: Past and Present

Past	Present
<i>Disclosure of Patient HIV Status to Emergency Responder or Emergency Responder's Medical Provider</i>	
Disclosure to "Designated Officer" (DO) was <u>required</u> even without source patient authorization for release of information. Federal law requiring disclosure pre-empted NYS law requiring patient authorization.	Disclosure may be made pursuant to an: "Authorization for Release of Medical Information and Confidential HIV Related Information" (DOH-2557) <u>or</u> an "Informed Consent to Perform a Confidential HIV Test and Authorization for Release of HIV-related Information for Purposes of Providing Post-exposure Care to a Health Care Worker Exposed to a Patient's Blood or Body Fluids" (DOH-4054). Source patient authorization for release of information obviates the need to comply with provisions of Part 63.8(m).
<i>Designated Officer (DO)</i>	
Emergency response agency and hospital were required to have a DO to navigate the process and facilitate communication.	There is no DO requirement. An emergency response agency may maintain a DO to serve as a resource for blood borne pathogens, update policy and procedure, provide staff education, maintain hospital contact information and relationship and maintain records.
<i>Request Mechanism</i>	
Request was required to be made in writing.	Emergency responder contacts his/her personal health care provider or agency health care provider to apprise them of incident. Responder or health care provider contacts emergency department (ED)/clinic provider or patient's health care provider to request information. If there is any difficulty with this process, local health departments may be contacted for assistance.
<i>Response Time</i>	
Hospital had 48 hours to respond.	Respond as soon as possible (ASAP).
<i>Response Mechanism</i>	
The hospital DO reviewed medical record of source patient and shared information.	ED or source patient health care provider may verbally share information with emergency responder's health care provider.
<i>Source Patient HIV Testing</i>	
No requirement to test source patient.	Request that ED or private provider approach source patient for rapid HIV test ASAP so informed decision may be made for emergency responder's treatment. Use "Informed Consent to Perform a Confidential HIV Test and Authorization for Release of HIV-related Information for Purposes of Providing Post-exposure Care to a Health Care Worker Exposed to a Patient's Blood or Body Fluids" (DOH-4054) for obtaining source patient consent for HIV testing and for release of results.
<i>Emergency Responder</i>	
Emergency responder contacted DO, waited for answers and went to ED for own treatment.	Emergency responder must be HIV negative to receive HIV-related information without the source patient's authorization for release of HIV-related information.