

PARTNER NOTIFICATION PROTOCOL FOR PRACTITIONERS

Pursuant to Section 456.061, F.S., a practitioner regulated through the Division of Medical Quality Assurance of the Department of Health, acting reasonably and in good faith and following a perceived civil or ethical duty, shall not be civilly or criminally liable for advising the sex or needle-sharing partner(s) of a human immunodeficiency virus (HIV)-infected patient of the positive test result when done in accordance with the following protocol:

1. The patient who has tested positive for HIV must have disclosed to the practitioner the identity of a sex and/or needle-sharing partner(s). The practitioner has no duty to ask the identity of such partner(s) and has no authority to act on information from another source.
2. Before informing a sex and/or needle-sharing partner(s), the practitioner shall recommend that the patient notify his/her sex and/or needle-sharing partner(s) of the positive test result and avoid any sexual or drug activity likely to transmit the virus to others. The practitioner shall inform the patient of the availability of partner notification services offered by the Department of Health (DOH) county health departments. Care shall be taken to focus on the beneficial action the patient can take, now and in the future, to prevent others from transmitting or acquiring HIV.
3. If the HIV-infected patient refuses to inform his sex or needle-sharing partner(s) of the positive test result or to use the partner notification services offered by the DOH county health departments, the practitioner shall inform the patient of his/her intent to inform the sex and/or needle-sharing partner(s), if the name(s) of partner(s) have been voluntarily disclosed to the practitioner by the HIV-infected patient.
4. Practitioners shall note in the HIV-infected patient's medical record that the patient has been counseled to notify sex and/or needle-sharing partner(s). The practitioner shall document that the patient refused to notify partners.
5. The practitioner shall reveal the positive test result to the sex or needle-sharing partner(s) of an HIV-infected patient only in a private face-to-face meeting unless special circumstances justify an alternative, such as the exposed partner's inability to meet face-to-face with the practitioner.
6. The practitioner shall not disclose to anyone else the identity of the exposed partner. The name(s) of the partner(s) shall not be included in the HIV-infected patient's medical record.
7. A practitioner, acting in accordance with this protocol, shall not be held liable for disclosing the identity of an HIV-infected patient to his or her sex and/or needle-sharing partner(s). Nevertheless, in each partner notification, the practitioner shall consider the benefits of notifying the sex and/or needle-sharing partner(s) of an HIV-infected patient without disclosing the name of the HIV-infected patient.
8. After notifying a partner of his or her exposure to HIV, a practitioner shall inform the partner of available counseling and testing services, including anonymous and confidential testing programs conducted at DOH county health departments or other registered test sites. (For a

listing of registered test sites, visit

<http://esetappsdo2.doh.state.fl.us/DconAids/ClinicSearch.aspx>.) The practitioner shall discuss with the exposed partner(s) ways to prevent the spread of HIV. If providing counseling, the practitioner shall encourage, not pressure, partners to take the HIV antibody test. Practitioners also shall encourage partners to refer their own sex and/or needle-sharing partner(s) for counseling and voluntary testing even when they do not intend to be tested themselves.

Revised April 2012