Appendix a: Classification of settings and populations for routine HIV testing (adapted from

national testing guidelines, BHIVA 2008) [6]

| Parsons disapped with a | Tuboraulogia |
|---------------------------|--|
| Persons diagnosed with a | Tuberculosis |
| disease indicative of HIV | Pneumocystis |
| infection | Cerebral toxoplasmosis |
| | Primary Cerebral Lymphoma |
| | Cryptococcal meningitis |
| | Progressive multifocal leucoencephalopathy |
| | Kaposi's sarcoma |
| | Persistent cryptosporidiosis |
| | Non-Hodgkin's Lymphoma |
| | Cervical Cancer |
| | Cytomeglovirus retinitis |
| | Bacterial pneumonia |
| | Aspergillosis |
| | Aseptic meningitis/encephalitis |
| | Cerebral abscess |
| | Space occupying lesion of unknown cause |
| | Guillain-Barré syndrome |
| | Transverse myelitis |
| | Peripheral neuropathy |
| | Dementia |
| | Leucoencephalopathy |
| | Severe or recalcitrant seborrhoeic dematitis |
| | Severe or recalcitrant psoriasis |
| | Multidermatomal or recurrent herpes zoster |
| | Oral candidiasis |
| | Oral hairy leukoplakia |
| | Chronic diarrhoea of unknown cause |
| | Weight loss of unknown cause |
| | Salmonella, shigella or campylobacter |
| | Hepatitis B infection |
| | Hepatitis C infection |
| | Anal cancer or anal intraepithelial dysplasia |
| | |
| | Lung cancer Seminoma |
| | |
| | Head and neck cancer |
| | Hodgkin's lymphoma |
| | Castleman's disease |
| | Vaginal intraepithelial neoplasia |
| | Cervical intraepithelial neoplasia (Grade 2 or above) |
| | Any unexplained blood dyscrasia including: |
| | Thrombocytopenia |
| | Neutropenia |
| | Lymphopenia |
| | Infective retinal disease including herpesviruses and toxoplasma |
| | Any unexplained retinopathy |
| | Lymphadenopathy of unknown cause |
| | Chronic parotitis |
| | Lymphoepithelial parotid cysts |
| | Mononucleosis-like syndrome (primary HIV infection) |
| | Pyrexia of unknown origin |
| | Any lymphadenopathy of unknown cause |
| | Any sexually transmitted infection |
| Persons attending a | Termination of pregnancy services |
| service where routine HIV | Drug dependency programmes |
| screening is undertaken | All patients presenting for healthcare where HIV prevalence |

| antenatal services) | All men and women registering in general practice where diagnosed HIV prevalence in the local population exceeds 2 in 1000 population All general medical admissions where diagnosed HIV prevalence in |
|---------------------|--|
| | the local population exceeds 2 in 1000 population |

Appendix b: Characteristics of Studies Included: Methods, Measures and Testing Levels

| Author | Risk group Setting (diagnosed HIV prevalence per 1,000 population 15-59 year olds) * | | Methods | Number eligible to test | Number offered test | Number tested | Number testing positive |
|--|---|---|--|-------------------------------|---------------------------|------------------|-------------------------------|
| Persons diagnosed with a disease ind | icative of HIV infection | | | | | | |
| Gupta, N.D. & Lechelt, M. (2011) [1] | Inpatients with indicator diseases (tuberculosis, hepatitis B, hepatitis C, cervical intraepithelial neoplasia (grade I/II), lymphoma, anal cancer, seminoma, aspergillosis or Castleman's disease) | South-west Essex (1.28) | Electronic record audit of attendees attending one secondary care hospital | 557 | 33 | 33 | Not reported |
| Thomas William, S., et al. (2011) [2] Patients with in disease (tubero | | Birmingham and Solihull (Birmingham East & North; 1.5, Heart of Birmingham; 3.29, South Birmingham; 1.66; Solihull; 0.58) | Retrospective audit | 194 | Not reported | 91 | Not reported |
| Hsu, D., et al. (2012) [3] | Primary care patients presenting with glandular fever-like illness | South London (Lambeth 13.28, Southwark; 10.29) | Retrospective audit of patients attending 72 primary care clinics | 1045 | Not reported | 118 | 3 |
| Page, I., et al. (2011) [4] | Patients with indicator disease (tuberculosis, hepatitis B, hepatitis C, lymphoma) | Blackpool (3.41) | Retrospective audit of patients attending one secondary care hospital | 156 | Not reported | 32 | Not reported |
| Thomson-Glover, R., et al. (2011) [5] | Patients with indicator disease (hepatitis B, hepatitis C, candida | Warrington (0.6) | Case-note audit of patients attending two secondary care hospitals | 249 | Not reported | 15 | 0 |

| | stomatitis) | | | | | | |
|--------------------------------------|---|--|---|------|-----------------|------|-----------------|
| Thorburn, F. (2012) [6] | Patients with indicator disease (diagnosed with tuberculosis) | Glasgow (1.7) | Retrospective case-note review of TB patients attending one tertiary care clinic | 338 | Not reported | 221 | 9 |
| Vas, A., et al. (2012) [7] | Patients with indicator disease (tuberculosis, hepatitis B, hepatitis C) | Manchester (5.22) | Retrospective case-note review of patients attending one secondary care hospital | 91 | 13 | 9* | Not reported |
| Byrne, L., <i>et al</i> . (2011) [8] | Patients admitted to acute medical unit with community-acquired pneumonia | London (Newham; 8.12, Tower Hamlets; 5.94) | Retrospective case-note review of patients attending one acute medical admissions unit | 43 | Not reported | 17 | 2 |
| Manavi, K., Gautam, N. (2012) [9] | Patients diagnosed with clinical indicator conditions as specified in UK HIV testing guidelines | Birmingham (3.29) | Retrospective case note review of patients attending one secondary care hospital | 967 | Not reported | 97 | 1 |
| Dodd, M. et al (2013) [10] | Patients with an HIV indicator illness in the presenting complaint or past medical history. | Sheffield (1.4) | Retrospective case note review of patients in one General Intensive Care Unit | 307 | Not reported | 45 | 3 |
| Persons attending recommended te | sting settings in high prevale | ence areas | | | | | |
| Burns, F., et al. (2012) [11] | Acute medical admissions | London (5.24) | Prospective, consecutive HIV test offer to patients attending one acute medical admissions unit | 606 | 282 | 135 | 3 |
| Chan, S.Y., et al. (2011) [12] | Acute medical admissions | Croydon (4.45) | Prospective offer of HIV test to patients attending one acute medical admissions unit | 101 | 101 | 84 | 0 |
| Rayment, M., et al. (2012) [13] | Acute Care unit and Dermatology outpatient clinic | London (City and Hackney (8.25) | Prospective study of patients attending one acute care unit | 1223 | 548 | 384 | 4 |
| Perry, N., <i>et al.</i> (2011) [14] | Acute medical admissions | Brighton & Hove PCT (7.57) | Prospective HIV test offer to patients attending one acute medical admissions unit | 3913 | 1553 | 1413 | 2 |
| Bryce, G., (2009) [15] | Patients newly registering with GP | Brighton & Hove PCT (7.57) | Prospective HIV test offer to patients attending nine primary | 2478 | Not reported | 1473 | 2 |

| | | | care clinics | | | | |
|------------------------------------|--|--|--|--------|-------------------|------|-----------------|
| Ashby, J., et al. (2012) [16] | Polyclinic attendees in high prevalence area | West London (Kensington & Chelsea; 8.3, Hammersmith & Fulham; 8.5, Westminster; 7.01) | Prospective study of patients attending one polyclinic | 302 | 93 | 71 | 0 |
| Ellis, S., et al. (2011) [17] | Acute medical admissions | Newcastle Upon Tyne (1.61) | Prospective audit of patients attending one acute medical admissions unit | 3645 | 478 | 396 | 2 |
| Rudran, B., et al. (2011) [18] | Acute medical admissions | Bournemouth and Poole (2.32) | Retrospective case-note review of patients attending one acute medical admissions unit | 198 | 3 | 3 | Not reported |
| Leber, W., et al. (2012) [19] | Patients newly registering with GP | Hackney (8.25) | Cluster randomised control trial of patients attending 40 primary care units | 28274 | 6607 | 3213 | 7 |
| Bassett, D., et al. (2012) [20] | Acute medical admissions | Manchester (5.22) | Prospective case-note review of patients attending one acute medical admissions | 429 | 134 | 117 | Not reported |
| Rosenvinge, M., et al. (2010) [21] | Women attending termination of pregnancy services | Wandsworth (4.91) | Retrospective review of HIV testing of patients who attended two termination of pregnancy clinic | 870 | 844 | 702 | 1 |
| Garrard, N., et al. (2010) [22] | Women attending termination of pregnancy service | Southwark (10.39) and Lambeth (13.28) | Prospective, consecutive test offer to patients attending one termination of pregnancy clinic | 2,831 | Not reported | 972 | 5 |
| Barbour, A., et al. (2012) [23] | Patients admitted to acute medical admissions | Croydon (4.45) | Prospective intervention at one acute medical unit | 3709 | Not reported** | 1390 | 7 |
| Rycroft, J., et al. (2012) [24] | Acute medical admissions | Greenwich (5.58) | Retrospective audit of patients who attended one acute medical admissions | 970 | Not reported | 43 | 3 |
| Page, I., et al. (2011) [4] | Acute medical admissions | Blackpool (3.41) | Retrospective audit of patients who attended one secondary care hospital | 13,999 | Not reported | 72 | Not reported |

| French, S., et al. (2012) [25] | Patients newly registering with GP | Southwark (10.39), Lewisham (7.03), Lambeth (13.28) | Prospective study of patients attending 13 primary care clinics | 16,241 | 6405 | 3229 | 12 |
|------------------------------------|------------------------------------|---|---|--------|-----------------|------|----|
| French, S., et al. (2012) [25] | Patients newly registering with GP | Southwark (10.39), Lewisham (7.03), Lambeth (13.28) | Prospective study of patients attending 5 primary care clinics | 6275 | 4925 | 905 | 11 |
| Tillet, S., et al. (2012) [26] | Acute medical admissions | Tower Hamlets (5.94) | Prospective study of patients attending one secondary care hospital | 1596 | Not reported | 241 | 2 |
| Griffin, A., et al. (2011) [27] | Patient newly registering with GP | Manchester (5.22) | Prospective study of patients attending one primary care clinic | 457 | Not reported | 303 | 2 |
| Palfreeman, A., et al. (2013) [28] | Patients attending admitted to AMU | Leicester (3.22) | Prospective study of patients admitted to AMU | 17226 | Not reported | 2542 | 29 |

^{*} reported for patients diagnosed with TB only. ** 77 test refusals were reported. Additional data regarding testing strategy (opt-in vs. opt-out), service model (standard care vs. specific staff training vs. GUM/Health advisor-led testing), and type of HIV test (POCT vs. 4th generation serology).

Appendix c: Supplementary data tables for studies identified by group

| Study | Title | Article | Primary testing outcome | Exclusions | Time period (duration) | Population | Number of centres | Type of centre | Measure/reporti ng method | |
|---|--|--------------------------|--|----------------------------|---|---|-------------------|-------------------------|-------------------------------|--|
| Persons | Persons diagnosed with a disease indicative of possible HIV infection | | | | | | | | | |
| Gupta, N.D. & Lechel t, M. (2011) | Assessment of the implementation and knowledge of the UK national guidelines for HIV testing (2008) in key conditions at | Yes - Audit Report | Electronic department al record or HIV testing and Electronic pathology records | Non- verifiable data | August 2009 – June 2012 (11 months) | Inpatients at Basildon & Thurrock Hospital | 1 | Secondary care hospital | Electronic record of HIV test | |

| | a UK district general hospital | | | | | | | | |
|--|---|-------------------------------------|---|--|---|---|----|-------------------------|---|
| Thom as Willia m, S., et al. (2011) | Changes in HIV testing rates among patients with tuberculosis in a large multiethnic city in the UK | Yes - Audit Report | Laboratory database record of HIV test | <18 years, private patients, chemoproph ylaxis patients, non- tuberculosis mycobacteria , diagnosis outside catchment area | September 2008 – March 2009 (6 months) | Patients registered on the Birmingham Tuberculosis aftercare register | >1 | Various | Laboratory record of HIV test |
| Hsu, D., et al. (2012) | Diagnosing HIV infection in patients presenting with glandular feverlike illness in primary care: are we missing primary HIV infection? | Yes - Short Commu nication | Record of HIV test | Not reported | April 2009 - June 2010 (14 months) | Primary care patients in Lambeth and Southwark | 72 | Primary care clinics | Laboratory record of HIV test request |
| Page, I., et al. (2011) | The impact of new national HIV testing guidelines at a district general hospital in an area of high HIV seroprevalence | Yes - Paper | Laboratory record of HIV test | HIV test requests from GUM clinics | October 2008 – September 2009 | Inpatients in Blackpool | 1 | Secondary care hospital | Laboratory record of HIV test |

| Thom son- Glover , R., et al. (2011) | Diagnosing HIV in non-GUM secondary care settings | No - Abstract | Record of HIV test | not reported | November 2009 - April 2010 (6 months) | inpatients Warrington & Halton hospitals | 2 | Secondary care hospitals | Record of HIV test |
|---|---|-------------------|-----------------------------------|---|--|--|---|-------------------------------|---|
| Thorb urn, F. (2012) | The impact of a multi-disciplinary meeting on the rates of HIV in testing in TB patients | No - Abstract | Record of HIV test offer | not reported | 2010 - 2011 (duration not reported) | Tuberculosis patients attending virology centre in Glasgow | 1 | Tertiary care clinic | Laboratory record of HIV test administration |
| Vas, A., et al. (2012) | HIV testing and in TB and Hepatitis services in a district general hospital | No - Abstract | Record of HIV test | not reported | 2009 (duration not reported) | Indicator disease patients in a Manchester hospital | 1 | Secondary care hospital | Record of HIV test administration |
| Byrne, L., <i>et</i> <i>al.</i> (2011) | HIV specialists must lead the way to make HIV testing truly routine | No- Abstract | Record of HIV test | , <18, non- medical specialty, underlying chronic lung disease, hospital- acquired pneumonia | February - April 2010 (3 months) | Patients admitted with community- acquired pneumonia | 1 | Acute medical admissions unit | Case-note record of HIV test administration |
| Persons | attending services | where rout | ine HIV scree | ning should be | undertaken | | | | |
| Chan, S.Y., et al. (2011) | Acceptance of HIV testing in medical inpatients: A local acceptability study | Miscella neous | Consent to have an HIV test | <15 and >59 years, total time admitted <24 hours, assessed as unable to consent, known to be HIV-positive | September 2009 (2 weeks) | Acute medical admissions in Croydon | 1 | Acute medical admissions unit | Offer and acceptance of HIV test |

| Raym ent, M., et al. (2012) | HIV Testing in Non-Traditional Settings - the hints study: A multi-centre observational study of feasibility and acceptability. | Article | Offer of HIV test to eligible individual | <16, >65 years, known HIV positive, not accessing healthcare for the first time in testing period, not able to consent | January – September 2010 (12 weeks each site) | Patients attending primary and secondary healthcare services in 4 London centres | 4 | Acute care units, Dermatology OPD | Administration of HIV oral fluid or 4 th generation HIV serology |
|---|---|----------|---|---|--|---|---|-----------------------------------|--|
| Perry, N. et al. (2011) | HIV testing in acute general medical admissions must be universally offered to reduce undiagnosed HIV | Abstract | Record of HIV test | <16 and >79 years, known HIV positive | August 2009 – January 2010 (5 months) | Acute medical admissions in Brighton | 1 | Acute medical admissions unit | HIV test result |
| Bryce, G. (2009) | A study to assess the acceptability, feasibility and cost- effectiveness of universal HIV testing with newly registering patients (aged 16- 59) in primary care | Abstract | Acceptance of HIV test offer | <16 and >59 years | May - November 2010 (4 months) | Patients attending primary care services in Brighton | 9 | Primary care clinics | HIV POCT test |
| Ashby , J., et al. (2012) | HIV testing uptake and acceptability in an inner city polyclinic | Article | Acceptance of HIV test offer | <16, >65 years, unable to consent | 2011 dates not specified (random 4- hour duration over a 4 week period) | Polyclinic attendees in west London | 1 | Polyclinic | Rapid point-of- care HIV test |

| Ellis, S., et al. (2011) | Offering HIV testing in an acute medical admissions unit in Newcastle upon Tyne | Clinical Medicin e research | Record of HIV test | <18 years, no capacity for consent | September - October 2009 (11 weeks) and January - March 2010 (6 weeks) | Acute medical admissions in Newcastle | 1 | Acute medical admissions unit | HIV test offer and administration |
|--|---|--------------------------------------|---|--|--|--|----|-------------------------------|---|
| Rudra n, B., <i>et al.</i> (2011) | HIV testing in acute medical admissions | Abstract | Record of HIV test | not reported | 2010 - exact date not specified (1 week) | Acute medical admissions in Bournemouth | 1 | Acute medical admissions unit | Hospital or laboratory database record of HIV test |
| Leber, W., et al. (2012) | Can point-of-care HIV testing in primary care increase identification of HIV? The RHIVA 2 Cluster randomised control trial - update | Abstract | Offer of rapid point- of-care HIV test | <16 years, | May 2010 end date not specified | Patients attending primary care services in London | 40 | Primary care units | Administration of rapid point-of-care HIV test |
| Basse tt, D., et al. (2012) | Practical challenges implementing national HIV testing guidelines in general medical admissions | Abstract | Record of HIV test | not reported | July 2011 (two weeks) | Acute medical admissions in central Manchester | 1 | Acute medical admissions | Record of HIV test administration |

| Rosen vinge, M., et al. (2010) | A successful uptake of HIV testing in south London termination of pregnancy services | Abstract | Record of consent for an HIV test | Known HIV positive, recent (< 6 months) HIV negative test, repeat attendance | April - December 2009 (9 months) | Women attending termination of pregnancy services in south London | 2 | Termination of pregnancy clinics | Paper and electronic record of HIV test administration |
|---|---|----------|-------------------------------------|--|--|---|---|----------------------------------|--|
| Garrar d, N., et al. (2010) | Opt-out HIV testing pilot in termination of pregnancy services - 11-month service evaluation | Abstract | HIV test recommend ation | not reported | November 2008 - September 2009 (11 months) | Women attending termination of Pregnancy services north London | 1 | Termination of pregnancy clinic | Documentation of HIV test result |
| Barbo ur, A., <i>et al.</i> (2011) | Opt-out HIV testing policy implemented as routine standard of care for acute medical admissions in a high prevalence area | Abstract | Record of HIV test | <16 and >79 years, | July 2011 – December 2011 (6 months) | Patients attending acute medical admissions in Croydon | 1 | Acute medical admissions | HIV testing |
| Rycrof t, J., et al. (2012) | HIV testing in the acute medical unit - setting the scene for universal opt-out testing | Abstract | Laboratory record of HIV test | Not reported | June & November 2011 (audited 2 weeks for each admissions cycle) | Patients attending acute medical admissions in south east London | 1 | Acute medical admissions | Record of HIV test in laboratory database |
| Page, I., et al. (2011) | The impact of new national HIV testing guidelines at a district general hospital in an area of high | Paper | Laboratory record of HIV test | HIV test requests from GUM clinics | October 2008 – September 2009 | Inpatients in Blackpool | 1 | Secondary care hospital | Laboratory record of HIV test |

| | HIV seroprevalence | | | | | | | | |
|--------------------------------|---|-------|-------------------------------------|--------------|---|--|---|----------------------------|-------------------------------------|
| Palfre eman, A., et al. (2013) | HIV testing for acute medical admissions: evaluation of a pilot study in Leicester, England | Paper | Laboratory record of HIV test | Not reported | September 2008 – August 2011 (36 months) | Patients admitted to AMU in Leicester | 1 | Secondary care hospital | Laboratory record of HIV test |

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