Florida Administrative Code

64D-3.042 STD Testing Related to Pregnancy.

(1) Practitioners attending a woman for prenatal care shall cause the woman to be tested for chlamydia, gonorrhea, hepatitis B, HIV and syphilis as follows:

(a) At initial examination related to her current pregnancy; and again.

(b) At 28 to 32 weeks gestation.

(2) Exceptions to the testing outlined in subsection (1), above, are as follows:

(a) A woman, who tested positive for hepatitis B surface antigen (HbsAg) during the initial examination related to her current pregnancy, need not be re-tested at 28-32 weeks gestation.

(b) A woman, with documentation of HIV infection or AIDS need not be re-tested during the current pregnancy.

(3) Women who appear at delivery or within 30 days postpartum with:

(a) No record of prenatal care, or

(b) Prenatal care with no record of testing;

(c) Prenatal care with no record of testing after the 27th week of gestation shall be considered at a high risk for sexually transmissible diseases and shall be tested for hepatitis B surface antigen (HBsAg), HIV and syphilis prior to discharge.

(4) Emergency Departments of hospitals licensed under Chapter 395, F.S., may satisfy the testing requirements under this rule by referring any woman identified as not receiving prenatal care after the 12th week of gestation, to the county health department.

(a) The referral shall be in writing; and,

(b) A copy shall be submitted to the county health department having jurisdiction over the area in which the emergency department is located.

(5) Prior to any testing required by this rule, practitioners shall:

(a) Notify the woman which tests will be conducted;

(b) Inform the woman of her right to refuse any or all tests;

(c) Place a written statement of objection signed by the woman each time she refuses required testing in her medical record specifying which tests were refused. If the woman refuses to sign the statement, the provider shall document the refusal in the medical record. No testing shall occur for the infections specified in the refusal statement of objection.

(6) Women who had a serologic test for syphilis during pregnancy that was reactive, regardless of subsequent tests that were non-reactive shall be tested as soon as possible at or following delivery.

(7)(a) Specimens shall be submitted to a laboratory certified by the Centers for Medicare and Medicaid Services under the federal Clinical Laboratory Improvement Amendments and the federal rules adopted thereunder to perform tests for chlamydia, gonorrhea, hepatitis B surface antigen (HBsAg), HIV and syphilis.

(b) The practitioner submitting the specimens for testing to a certified laboratory shall state that these specimens are from a pregnant or postpartum woman.

(8) Practitioners required by law to prepare birth and stillbirth certificates shall document on the certificate if chlamydia, gonorrhea, hepatitis B, HIV, syphilis infections or genital herpes or genital human papilloma virus were present and/or treated during this pregnancy.

(9) Nothing in this rule shall prohibit a practitioner from testing these women for other sexually transmissible diseases in accordance to prevailing national standards, community disease distribution or the professional judgment of the practitioner.

Rulemaking Authority 381.003(2), 384.25, 384.33 FS. Law Implemented 381.0011, 381.003(1)(c), 381.004(3), 384.31 FS. History–New 11-20-06, Amended 3-9-20.