

# Alaska

## Introduction and Table of Contents

April 8, 2011

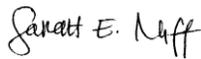
To the Reader:

The *Compendium of State HIV Testing Laws* describes key state HIV testing laws and policies. Each state's HIV testing laws are unique and many have undergone revision or supplementation since the release of the [CDC's 2006 HIV testing recommendations](#). The *Compendium* is designed to help clinicians understand HIV testing laws and to implement sound HIV testing policies. It should not, however, be used as an official legal document.

The NCCC provides clinical consultation for healthcare providers as part of the HRSA [AIDS Education and Training Centers](#) program. Clinicians with questions about HIV testing are encouraged to call the *National HIV Telephone Consultation Service (Warmline)* at (800) 933-3413. The Warmline also provides advice on HIV management, including antiretroviral treatment. Other NCCC consultation services include: the National Clinicians' Post-Exposure Prophylaxis Hotline ([PEPLine](#)) at (888) 448-4911 for advice on managing occupational exposures to HIV and hepatitis; and the National Perinatal Consultation and Referral Service ([Perinatal HIV Hotline](#)) at (888) 448-8765 for consultation on preventing mother-to-child transmission of HIV.

We update the *Compendium* periodically, but it is beyond the scope of the project to perform updates and verification concurrent with all changes. We encourage readers to send updates (with citations when possible) and comments to Sarah Neff at [neffs@nccc.ucsf.edu](mailto:neffs@nccc.ucsf.edu).

Thank you,



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Director of Research and Evaluation

&



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The Warmline, PEPLine, and Perinatal Hotline are part of the National HIV/AIDS Clinicians' Consultation Center (NCCC) based at San Francisco General Hospital/ UCSF. The NCCC is a component of the **AIDS Education and Training Centers (AETC) Program** funded by the Ryan White CARE Act of the **Health Resources and Services Administration (HRSA)** HIV/AIDS Bureau in partnership with the **Centers for Disease Control and Prevention (CDC)**.

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## Definitions and Helpful Resources

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### Definitions Commonly Used Nationally

- **Anonymous Testing** – Patient’s name is not recorded with test results.
- **Confidential** – Patient’s name is recorded with test results.
- **HIV Prevention Counseling** – Refers to an interactive process of assessing risk, recognizing specific behaviors that increase the risk for acquiring or transmitting HIV and developing a plan to take specific steps to reduce risks.<sup>1</sup>
  - **Pre-test counseling** can include: (1) discussing HIV, risk factors and prevention methods; (2) explaining the meaning of positive and negative test results and their implications; (3) assessing the patient’s personal and social supports; (4) determining the patient’s readiness to cope with test results; (5) discussing disclosure of test results to others; and (6) advising the patient if reporting positive test results to health authorities is required.
  - **Post-test counseling** can include: (1) informing the patient of the results and meaning of the test results; (2) providing education about avoiding risks of sexual and injection drug exposures; and, for patients who test positive, (3) assessing the impact of test results for the patient and family; (3) explaining treatment options; (4) discussing partner counseling and disclosure of test results to others; and (5) initiating a support and treatment plan.
- **General Consent** – Consent for HIV screening is included in the general medical consent.
- **HIV** – Human Immunodeficiency Virus.
- **Informed Consent** – A process of communication between patient and provider through which an informed patient can choose whether to undergo HIV testing or decline to do so. Elements of informed consent typically include providing oral or written information regarding HIV, the risks and benefits of testing, the implications of HIV test results, how test results will be communicated, and the opportunity to ask questions.<sup>1</sup>
- **Name-based reporting** – Cases are reported by patient name (required in all states except HI and VT).
- **Opt-in** – Patients typically are provided pre-HIV test counseling and must consent specifically to an HIV-antibody test, either orally or in writing.<sup>2</sup>
- **Opt-out** – Performing HIV screening after notifying the patient that: the test will be performed; and the patient may elect to decline or defer testing. Assent is inferred unless the patient declines testing.<sup>1</sup>
- **Routine Testing** – HIV screening that is performed routinely during health-care encounters.
- **Rapid Testing** – Testing with any of the six FDA-approved rapid HIV tests that produce results in 30 minutes or less.<sup>3</sup>
- **Specific Consent** – Consent for the HIV screening is separate from the general medical consent.

### Helpful Resources

**CDC Recommendations and Guidelines:** <http://www.cdc.gov/hiv/topics/testing/guideline.htm>

**Emergency Department Implementation Guide:** <http://edhivtestguide.org/>

**Prenatal HIV Testing Website:** <http://www.cdc.gov/hiv/topics/perinatal/1test2lives/>

**For questions or comments about the compendium, contact NCCC:** [neffs@nccc.ucsf.edu](mailto:neffs@nccc.ucsf.edu)

**Clinicians with questions about HIV testing can call the Warmline at 800-933-3413.**

<sup>1</sup> Revised Recommendations for HIV Testing of Adults, Adolescents, and Pregnant Women in Health-Care Settings. MMWR Recomm Rep. 2006 Sep 22;55(RR-14):1-17; quiz CE1-4. <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5514a1.htm>

<sup>2</sup> <http://www.cdc.gov/mmwr/PDF/wk/mm5145.pdf>

<sup>3</sup> <http://www.cdc.gov/hiv/topics/testing/resources/factsheets/rt-lab.htm>

# Alaska

## A Quick Reference Guide for Clinicians to Alaska HIV Testing Laws

April 8, 2011

This Quick Reference Guide for clinicians is a summary of relevant Alaska state HIV testing laws. Note that if a section in this Quick Reference Guide reads “no specific provisions were found,” provisions actually might exist for this topic within the state’s statutes, codes, or rules and regulations, but probably are not essential to clinicians.

For a more complete synopsis of Alaska HIV testing laws, please refer to the section of the Compendium that follows this Quick Reference Guide.

### Informed Consent

- No specific provisions regarding informed consent were found.

### Counseling

- Post-test counseling (regarding measures for preventing transmission and the need for treatment) is required for individuals who have been or may have been exposed.

### Provisos of Testing

- **Anonymous**
  - No specific provisions regarding anonymous testing were found.
- **Rapid**
  - No specific provisions regarding rapid testing were found.
- **Routine**
  - No specific provisions regarding routine testing were found.

### Disclosure

- No specific provisions regarding the notification of partners or contacts were found.

### Minor/Adolescent Testing

- Minors may consent to medical services, HIV not explicitly included.

# Alaska

## ***Perinatal Quick Reference Guide:***

### **A Guide to Alaska Perinatal HIV Testing Laws for Clinicians**

April 8, 2011

This Perinatal Quick Reference Guide for clinicians is a summary of relevant Alaska perinatal state HIV testing laws. Note that if a section in this Quick Reference Guide reads “no specific provisions were found,” provisions actually might exist for this topic within the state’s statutes, codes, or rules and regulations, but probably are not essential to clinicians.

For a more complete synopsis of Alaska HIV testing laws, please refer to the corresponding section of the *State HIV Testing Laws Compendium* ([www.nccc.ucsf.edu](http://www.nccc.ucsf.edu)), “Testing of pregnant women and/or newborns.”

#### **Prenatal**

- **Initial visit**
  - No specific provisions regarding initial visit prenatal testing were found.
- **Third trimester**
  - No specific provisions regarding third trimester prenatal testing were found.

#### **Labor & Delivery**

- No specific provisions regarding labor & delivery testing were found.

#### **Neonatal**

- No specific provisions regarding neonatal testing were found.

#### **Other**

- N/A

# Alaska

## State Policies Relating to HIV Testing, 2011

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#### Alaska Statutes [AS]

<b>Title 18: Health, Safety, and Housing</b> .....	Pages 3-11
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#### Alaska Administrative Code [AAC]

<b>Title 4: Education and Early Development</b> .....	Page 13
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	Policy Category	Type	Section Code(s)
RESTRICTIONS/MANDATED TESTING	Restrictions on use of HIV test	No related laws found	
	Mandatory testing within the criminal justice system	Persons charged with a sex offense	AS §18.15.300 AS §18.15.310 AS §18.15.320
		Juveniles charged with a sex offense	AS §18.15.300 AS §18.15.310 AS §18.15.320
		Potential transmission to victims	AS §18.15.300 AS §18.15.310
		Occupational exposure – law enforcement officers	AS §18.15.400 AS §18.15.450
		Consent required; exceptions in cases of threats to public health, death of offender or prisoner	AS §18.15.410 AS §18.15.420
	Mandatory testing outside of the criminal justice system	Exposed individuals who pose significant risk to public health	AS §18.15.375
PRE-TESTING	Mandatory offering of HIV/AIDS information and/or testing	Free testing must be offered to sex offense victims	AS §18.15.310
	Informed consent	Consent required for epidemiological investigations – not specified written vs. verbal	AS §18.15.375
	Counseling requirements	Post-test counseling (regarding measures for preventing transmission and the need for treatment) is required for individuals who have been or may have been exposed.	AS §18.15.380

		Mandated offering of free counseling to sex offense victims	AS §18.15.310
		Mandated offering of post-test counseling to sex offenders with HIV positive results	AS §18.15.310
	Anonymous testing	No related laws found; anonymous testing available	
POST-TESTING	Disclosure/confidentiality	Test results as confidential	AS §18.15.310 AS §18.15.440
		Exceptions to confidentiality	AS §18.15.310
		Disclosure of HIV status of sex offender to victim	AS §18.15.300
	Reporting	Name-based reporting	7 AAC 27.005 7 AAC 27.007
OTHER	Testing of pregnant women and/or newborns	Midwives must recommend HIV testing to pregnant women	12 AAC 14.500
	Testing of minors/adolescents	Minors may consent to medical services if parent or guardian is unable or unwilling	AS §25.20.025
	Rapid HIV testing	No related laws found	
	Training and education of health care providers	No related laws found	

### Recommended Resources

#### Alaska Legislature

<http://www.legis.state.ak.us/folhome.htm>

#### Alaska Administrative Code

<http://touchngo.com/lglcntr/akstats/aac.htm>

#### Health and Social Services, State of Alaska

<http://www.hss.state.ak.us/>

<b>Title 18: Health, Safety, and Housing</b>
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AK Title 18 Code §	Code Language
§18.15.300	<p><b>Order for blood test; disclosure of results</b></p> <p>(a) A defendant charged in a criminal complaint, indictment, presentment, or information filed with a magistrate or court with a violation of AS 11.41.410 -- 11.41.450 that includes sexual penetration as an element of the offense, or a minor with respect to whom a petition has been filed in a juvenile court alleging a violation of AS 11.41.410 -- 11.41.450 that includes sexual penetration as an element of the offense, may be ordered by a court having jurisdiction of the complaint, indictment, information, presentment, or juvenile petition to submit to testing as provided in AS 18.15.300 -- 18.15.320.</p> <p>(b) An alleged victim listed in the complaint, indictment, information, presentment, or juvenile petition, the parent or guardian of an alleged victim who is a minor or incompetent, or the prosecuting attorney on the behalf of an alleged victim, may petition the court for an order authorized under this section.</p> <p>(c) Upon receipt of a petition filed under (b) of this section, the court shall determine if (1) probable cause exists to believe that a crime for which a test may be ordered under (a) of this section has been committed, and (2) probable cause exists to believe that sexual penetration took place between the defendant or minor and the alleged victim in an act for which the defendant or minor is charged under (a) of this section. In making the determination, the court may rely exclusively on the evidence presented at a grand jury proceeding or preliminary hearing.</p> <p>(d) If the court finds probable cause exists to believe that (1) a crime for which a test may be ordered under (a) of this section has been committed, and (2) sexual penetration described in (c)(2) of this section took place, the court shall order that the defendant or minor provide two specimens of blood for testing as provided in AS 18.15.300 -- 18.15.320.</p> <p>(e) Copies of the blood test results shall be provided to the defendant or minor, each requesting victim, the victim's designee or, if the victim is a minor or incompetent, the victim's parents or legal guardian. If the defendant or minor is being incarcerated or detained at the time of the blood test or thereafter, the blood test results shall be provided to the officer in charge and the chief medical officer of the facility in which the defendant or minor is incarcerated or detained, including an incarceration or detention ordered as a result of conviction or judgment of delinquency or child in need of aid for an act for which the defendant or minor is charged under (a) of this section.</p> <p>(f) A court may not order a test under this section</p> <ol style="list-style-type: none"> <li>(1) before seven days after the defendant or minor's arrest;</li> <li>(2) after the entry of a disposition favorable to a defendant; or</li> <li>(3) if the defendant is convicted or adjudicated delinquent or in need of</li> </ol>

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	<p>aid, after 90 days after the issuance of the judgment and sentence or of the judgment in a juvenile action.</p> <p>(g) In this section,            (1) "disposition favorable to the defendant" means an adjudication by a court other than a conviction, or if the defendant is a minor not being prosecuted as an adult, that the minor is not adjudicated delinquent or a child in need of aid, for an offense for which a blood test could be ordered under this section;            (2) "sexual penetration" has the meaning given in AS 11.81.900(b).</p>
§18.15.310	<p><b>Testing; test results</b></p> <p>(a) The withdrawal of blood for a test under AS 18.15.300 -- 18.15.320 shall be performed in a medically approved manner. Only a physician or physician assistant licensed under AS 08.64, registered nurse, licensed practical nurse, or certified emergency medical technician may withdraw blood specimens for the purposes of AS 18.15.300 -- 18.15.320.</p> <p>(b) The court shall order that the blood specimens withdrawn under AS 18.15.300 -- 18.15.320 be transmitted to a licensed medical laboratory and that tests be conducted on them for medically accepted indications of exposure to or infection by the human immunodeficiency virus (HIV) and other sexually transmitted diseases for which medically approved testing is readily and economically available as determined by the court.</p> <p>(c) Copies of test results that indicate exposure to or infection by HIV or other sexually transmitted diseases shall also be transmitted to the department.</p> <p>(d) The test results shall be provided to the designated recipients with the following disclaimer:</p> <p>"The tests were conducted in a medically approved manner but tests cannot determine exposure to or infection by HIV or other sexually transmitted diseases with absolute accuracy. Persons receiving this test result should continue to monitor their own health and should consult a physician as appropriate."</p> <p>(e) The court shall order all persons, other than the test subject, who receive test results under AS 18.15.300 -- 18.15.320 to maintain the confidentiality of personal identifying data relating to the test results except for disclosures by the victim, or if the victim is a minor or incompetent by the victim's parents or legal guardian, as</p> <p>(1) is necessary to obtain medical or psychological care or advice or to ensure the health of the victim's spouse, immediate family, persons occupying the same household as the victim, or a person in a dating, courtship, or engagement relationship with the victim;            (2) is necessary to pursue civil remedies against the test subject; or            (3) otherwise permitted by the court.</p>

<b>AK Title 18 Code §</b>	<b>Code Language</b>
	<p>(f) The specimens and the results of tests ordered under AS 18.15.300 -- 18.15.320 are not admissible evidence in a criminal or juvenile proceeding.</p> <p>(g) A person performing testing, transmitting test results, or disclosing information under AS 18.15.300 -- 18.15.320 is immune from civil liability for an act or omission under authority of AS 18.15.300 -- 18.15.320. However, this subsection does not preclude liability for a grossly negligent or intentional violation of a provision of AS 18.15.300 -- 18.15.320.</p> <p>(h) If the results of a blood test conducted under AS 18.15.300 indicate exposure to or infection by HIV or other sexually transmitted diseases for which testing was conducted, the department shall provide</p> <ul style="list-style-type: none"> <li>(1) free counseling and free testing to a victim for HIV and other sexually transmitted diseases reasonably communicable through the offense; and</li> <li>(2) counseling to the alleged perpetrator or defendant upon request of the alleged perpetrator or defendant. The department shall provide referral to appropriate health care facilities and support services at the request of the victim.</li> </ul> <p>(i) In this section,</p> <ul style="list-style-type: none"> <li>(1) "AIDS" means acquired immunodeficiency syndrome or HIV symptomatic disease;</li> <li>(2) "counseling" means providing a person with information and explanations relating to AIDS and HIV that are medically appropriate for that person, including all or part of the following: <ul style="list-style-type: none"> <li>(A) accurate information regarding AIDS and HIV;</li> <li>(B) an explanation of behaviors that reduce the risk of transmitting AIDS and HIV;</li> <li>(C) an explanation of the confidentiality of information relating to AIDS diagnoses and HIV tests;</li> <li>(D) an explanation of information regarding both social and medical implications of HIV tests;</li> <li>(E) disclosure of commonly recognized treatment or treatments of AIDS and HIV;</li> </ul> </li> <li>(3) "HIV" means the human immunodeficiency virus.</li> </ul>
§18.15.320	<p><b>Cost of performing test; reimbursement</b></p> <p>(a) The cost of performing a blood test under AS 18.15.300 shall be paid by the department.</p> <p>(b) If a defendant for whom a blood test has been ordered under AS 18.15.300 is convicted of an offense for which the defendant was charged, and for which a blood test could be ordered under AS 18.15.300, the court shall order the defendant to reimburse the department for the cost of the test and may order the Department of Corrections to deduct the amount of the test from any pay the inmate receives under AS 33.30.201.</p>

AK Title 18 Code §	Code Language
§18.15.375	<p><b>Epidemiological investigation.</b></p> <p>(a) The department may investigate conditions of public health importance in the state through methods of epidemiological investigation. The department may also ascertain the existence of cases of illness or other conditions of public health importance, investigate potential sources of exposure or infection and ensure that they are subject to proper control measures, and determine the extent of the disease outbreak, epidemic, risk to health and safety, or disaster.</p> <p>(b) Investigations under this section may include identification of individuals who have been or may have been exposed to or affected by a condition of public health importance, interviewing and testing those individuals, examining facilities or materials that may pose a threat to the public health, and interviewing other individuals. In conducting the investigations the department may</p> <ol style="list-style-type: none"> <li>(1) identify all individuals thought to have been exposed to any agent that may be a potential cause of the disease outbreak, epidemic, or disaster;</li> <li>(2) interview, test, examine, or screen an individual where needed to assist in the positive identification of those exposed or affected or to develop information relating to the source or spread of the disease or other condition of public health importance; and</li> <li>(3) inspect health care records maintained by a health care provider.</li> </ol> <p>(c) When testing, screening, or examining an individual under this section, the department shall adhere to the following requirements:</p> <ol style="list-style-type: none"> <li>(1) the department may not require the testing, examination, or screening of an individual without the consent of the individual or the individual's legal guardian, except as otherwise provided in this section or other law;</li> <li>(2) the department may require testing, examination, or screening of a nonconsenting individual only upon an order of a state medical officer, and only upon a finding that the individual has or may have been exposed to a contagious disease that poses a significant risk to the public health; the order must be personally served on the person to be tested, examined, or screened within a reasonable period of time before the testing, examination, or screening is to take place;</li> <li>(3) the department shall obtain an ex parte order in accordance with (d) of this section if the individual to be tested, examined, or screened objects to the state medical officer's order;</li> <li>(4) a health care practitioner shall perform an examination under this section; the individual to be examined may, under conditions specified by the state medical officer, choose the health care practitioner who will perform the examination;</li> <li>(5) a testing, examination, or screening program shall be conducted for the sole purpose of identifying a condition of public health importance that poses a threat to the public health and may be avoided, cured, alleviated, or made less contagious through safe and effective treatment, modifications in individual behavior, or public health intervention;</li> </ol>

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	<p>(6) before testing, examination, or screening, the department shall explain to the individual or individual's legal representative the nature, scope, purposes, benefits, risks, and possible results of the testing, examination, or screening;</p> <p>(7) in conjunction with or directly after the dissemination of the results of the testing, examination, or screening, the department shall fully inform the individual or individual's legal representative of the results of the testing, examination, or screening.</p> <p>(d) A judicial officer may issue an ex parte order for testing, examination, or screening upon a showing of probable cause, supported by oath or affirmation, that the individual has or may have been exposed to a contagious disease that poses a significant risk to the public health. The court shall specify the duration of the ex parte order for a period not to exceed five days. To conduct the testing, examination, or screening of an individual who is not being detained under an order of isolation or quarantine, the court may order a peace officer to take the individual into protective custody until a hearing is held on the ex parte petition if a hearing is requested.</p> <p>(e) The individual subject to the ex parte order must be given, with the petition and order, a form to request a hearing to vacate the ex parte order. If a hearing is requested to vacate the ex parte order, the court shall hold the hearing within three working days after the date the request is filed with the court. The public shall be excluded from a hearing under this subsection unless the individual subject to the ex parte order elects to have the hearing open.</p>
§18.15.380	<p><b>Medical treatment.</b></p> <p>(a) A health care practitioner or public health agent who examines or treats an individual who has or may have been exposed to a contagious disease shall instruct the individual about the measures for preventing transmission of the disease and the need for treatment.</p> <p>(b) The department may administer medication or other medical treatment, including the use of directly observed therapy where appropriate, to a consenting individual who has or may have been exposed to a contagious disease.</p> <p>(c) An individual has the right to refuse treatment and may not be required to submit to involuntary treatment as long as the individual is willing to take steps outlined by the state medical officer to prevent the spread of a communicable disease to others. However, an individual who exercises the right to refuse treatment under this subsection may be responsible for paying all costs incurred by the state in seeking and implementing a quarantine or isolation order made necessary by a refusal of treatment by the individual. The department shall notify an individual who refuses treatment under this subsection that the refusal may result in an indefinite period of quarantine or isolation and that the individual may</p>

AK Title 18 Code §	Code Language
	be responsible for payment of the costs of the quarantine or isolation.
§18.15.400	<p><b>Bloodborne pathogen testing of prisoners and correctional officers; required disclosures to and consent of prisoners and correctional officers</b></p> <p>(a) When requested by a correctional officer who may have received a significant exposure from a prisoner, the department shall follow the testing procedures of AS 18.15.400 -- 18.15.450 if</p> <ol style="list-style-type: none"> <li>(1) a physician licensed under AS 08 determines that a significant exposure to the correctional officer has occurred;</li> <li>(2) the physician for the correctional officer needs the prisoner's bloodborne pathogens test results to begin, continue, modify, or discontinue treatment in accordance with the most current guidelines of the United States Public Health Service, because of possible exposure to a bloodborne pathogen; and</li> <li>(3) the correctional officer consents to providing a blood sample for testing for a bloodborne pathogen.</li> </ol> <p>(b) Before employing the testing procedures of AS 18.15.400 -- 18.15.450 or disclosing any information about the prisoner or correctional officer, the department shall inform the</p> <ol style="list-style-type: none"> <li>(1) prisoner that <ol style="list-style-type: none"> <li>(A) the prisoner's bloodborne pathogens test results, without the prisoner's name or other uniquely identifying information, shall be reported to the correctional officer if requested and that test results collected are for medical purposes and may not be used as evidence in any criminal proceedings or civil proceedings;</li> <li>(B) the prisoner may refuse to provide a blood sample and that the prisoner's refusal may result in a request for a court order to require the prisoner to provide a blood sample; and</li> <li>(C) the department will advise the correctional officer of the confidentiality requirements and penalties before the officer's health care provider discloses any test results;</li> </ol> </li> <li>(2) correctional officer of the confidentiality requirements of AS 18.15.440 and that the correctional officer may be subject to penalties for unauthorized release of test results about the prisoner.</li> </ol> <p>(c) If the disclosures have been made, the department shall ask the prisoner if the prisoner has ever had a positive test for a bloodborne pathogen. The department shall disclose the prisoner's existing bloodborne pathogens test results to the correctional officer without the prisoner's name or other uniquely identifying information.</p>

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§ 18.15.410	<p><b>Consent for testing; court order for testing; exception.</b></p> <p>(a) When a public safety officer has made a request under AS 18.15.400, except as provided in (b) or (c) of this section or in AS 18.15.420, before collecting and testing the blood of an adult or juvenile offender or a prisoner, the employing agency shall first obtain the consent of the adult offender or prisoner or the adult or juvenile offender's or prisoner's representative if the adult or juvenile offender or prisoner is unable to provide the consent.</p> <p>(b) Consent of an adult or juvenile offender's or a prisoner's representative is not required if the employing agency has made reasonable efforts to locate the adult or juvenile offender's or prisoner's representative and the representative cannot be found within 24 hours after a significant exposure. If testing of available blood occurs without consent because the adult or juvenile offender or prisoner is unconscious or unable to provide consent, and a representative cannot be located, the employing agency shall provide the information required in <a href="#">AS 18.15.400</a> to the adult or juvenile offender, prisoner, or representative whenever it is possible to do so.</p> <p>(c) If an adult or juvenile offender or a prisoner dies before an opportunity to consent to blood collection or testing, consent is not required, and the adult or juvenile offender's or prisoner's blood may be collected and tested.</p> <p>(d) If the adult or juvenile offender or prisoner or the adult or juvenile offender's or prisoner's representative, if appropriate, consents and a sample of the adult or juvenile offender's or prisoner's blood</p> <ol style="list-style-type: none"> <li>(1) is available, the employing agency shall have the blood tested for bloodborne pathogens;</li> <li>(2) is not available, the employing agency shall collect a sample and have the blood sample tested for bloodborne pathogens.</li> </ol> <p>(e) The employing agency may not withhold care or treatment on the requirement that the adult or juvenile offender or prisoner consent to testing for bloodborne pathogens.</p>
§ 18.15.420	<p><b>Testing without consent.</b></p> <p>(a) When a public safety officer has made a request under AS 18.15.400, the employing agency shall file a petition in the superior court for a court order requiring the adult or juvenile offender or prisoner to provide a blood sample for testing for bloodborne pathogens. The employing agency shall serve the petition on the adult or juvenile offender or prisoner at least 48 hours before a hearing on the petition. The petition must include the following information supported by affidavit:</p> <ol style="list-style-type: none"> <li>(1) a statement that the employing agency followed the procedures in <a href="#">AS 18.15.400</a> - 18.15.450 and attempted to obtain bloodborne pathogens test results according to those sections;</li> </ol>

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	<p>(2) a statement that</p> <p>(A) the public safety officer and employing agency have documented the officer's exposure to blood or body fluids during performance of the officer's work duties;</p> <p>(B) the employing agency has asked the adult or juvenile offender or prisoner to consent under <a href="#">AS 18.15.410</a>, and the adult or juvenile offender or prisoner does not consent;</p> <p>(C) the employing agency has provided the public safety officer and the adult or juvenile offender or prisoner with the disclosures required under <a href="#">AS 18.15.400</a>; and</p> <p>(D) the employing agency has informed the public safety officer of the confidentiality requirements of <a href="#">AS 18.15.440</a> and the penalties for unauthorized release of adult or juvenile offender or prisoner information;</p> <p>(3) a statement that a physician licensed under AS 08 and knowledgeable about the most current recommendations of the United States Public Health Service has determined that a significant exposure has occurred to the public safety officer; and</p> <p>(4) a statement that a physician has documented that the public safety officer has provided a blood sample and consented to testing for bloodborne pathogens, and bloodborne pathogens test results are needed for beginning, continuing, modifying, or discontinuing medical treatment for the public safety officer.</p> <p>(b) A court shall order an adult or juvenile offender or a prisoner to provide a blood sample for bloodborne pathogen testing if the court finds that</p> <p>(1) there is probable cause to believe that a significant exposure to the public safety officer from the adult or juvenile offender or prisoner has occurred;</p> <p>(2) a licensed physician for the public safety officer needs the test results for beginning, continuing, modifying, or discontinuing medical treatment for the public safety officer; or</p> <p>(3) a compelling need for the testing and test results exists; in making this finding, the court shall consider the need for the test against the privacy or other interests of the adult or juvenile offender or prisoner.</p> <p>(c) The court may impose appropriate safeguards against unauthorized disclosure by specifically identifying the persons to have access to the test results and the uses of the test results when ordering a test under (b) of this section.</p> <p>(d) After testing is completed under this section, the employing agency shall inform the adult or juvenile offender or prisoner whose blood was tested of the results. The employing agency shall inform the public safety officer's physician of the adult or juvenile offender's or prisoner's test results without the adult or juvenile offender's or prisoner's name or other uniquely identifying information.</p>

AK Title 18 Code §	Code Language
§ 18.15.440	<p><b>Confidentiality; penalties for unauthorized disclosure; immunity</b></p> <p>(a) Bloodborne pathogens test results of an adult or juvenile offender or a prisoner are confidential and may not be disclosed except as provided in AS 18.15.400 -- 18.15.450 and as needed for the treatment or medical care of an adult or juvenile offender or a prisoner specific to a bloodborne pathogen-related illness.</p> <p>(b) An adult or juvenile offender or a prisoner may bring a civil action against a person who knowingly, in violation of AS 18.15.400 -- 18.15.450, releases the adult or juvenile offender's or prisoner's name or other uniquely identifying information with the test results or otherwise releases the test results.</p> <p>(c) The employing agency, a physician, and designated health care personnel are immune from liability in any civil, administrative, or criminal action relating to the disclosure of test results of an adult or juvenile offender or a prisoner to a public safety officer and the testing of a blood sample from an adult or juvenile offender or a prisoner for bloodborne pathogens if a good faith effort has been made to comply with AS 18.15.400 -- 18.15.450.</p>
§ 18.15.450	<p><b>Definitions for AS 18.15.400 -- 18.15.450</b></p> <p>In AS 18.15.400 -- 18.15.450,</p> <p>(1) "bloodborne pathogens" means pathogenic microorganisms that are present in human blood and can cause disease in humans; these pathogens include hepatitis B virus (HBV), hepatitis C virus (HCV), and human immunodeficiency virus (HIV);</p> <p>(2) "correctional officer" means an employee of the Department of Corrections or of an agent or contractor of the department working in a correctional facility;</p> <p>(3) "department" means the Department of Corrections;</p> <p>(4) "prisoner" has the meaning given in AS 33.30.901;</p> <p>(5) "significant exposure" means contact likely to transmit a bloodborne pathogen, in a manner supported by the most current guidelines and recommendations of the United States Public Health Service at the time an evaluation takes place, that includes</p> <p>(A) percutaneous injury, contact of mucous membrane or nonintact skin, or prolonged contact of intact skin; and</p> <p>(B) contact, in a manner that may transmit a bloodborne pathogen, with blood, tissue, or potentially infectious body fluids.</p>

<b>Title 25: Marital and Domestic Relations</b>
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AK Title 25 Code §	Code Language
§25.20.025	<p><b>Examination and treatment of minors.</b></p> <p>(a) Except as prohibited under AS 18.16.010 (a)(3),</p> <p>(1) a minor who is living apart from the minor's parents or legal guardian and who is managing the minor's own financial affairs, regardless of the source or extent of income, may give consent for medical and dental services for the minor.</p> <p>(2) a minor may give consent for medical and dental services if the parent or legal guardian of the minor cannot be contacted or, if contacted, is unwilling either to grant or withhold consent; however, where the parent or legal guardian cannot be contacted, or if contacted, is unwilling either to grant or to withhold consent, the provider of medical or dental services shall counsel the minor keeping in mind not only the valid interests of the minor but also the valid interests of the parent or guardian and the family unit as best the provider presumes them;</p> <p>(3) a minor who is the parent of a child may give consent to medical and dental services for the minor or the child;</p> <p>(4) a minor may give consent for diagnosis, prevention or treatment of pregnancy, and for diagnosis and treatment of venereal disease;</p> <p>(5) the parent or guardian of the minor is relieved of all financial obligation to the provider of the service under this section.</p> <p>(b) The consent of a minor who represents that the minor may give consent under this section is considered valid if the person rendering the medical or dental service relied in good faith upon the representations of the minor.</p> <p>(c) Nothing in this section may be construed to remove liability of the person performing the examination or treatment for failure to meet the standards of care common throughout the health professions in the state or for intentional misconduct.</p>

**Alaska Administrative Code – Title 4: Education and Early Development**

<b>Title 4 AAC</b>	<b>Code Language</b>
4 AAC 06.150	<b>Confidentiality of AIDS information</b>  A school district or a school district employee with information that a student or employee of the district has acquired immune deficiency syndrome (AIDS) or the human immunodeficiency virus (HIV) shall keep that information confidential except from public health officials and district personnel who need the information in order to make an informed decision under 4 AAC <a href="#">06.060(a)</a> , 4 AAC <a href="#">06.140</a> , or <a href="#">AS 14.30.180</a> - <a href="#">AS 14.30.350</a> .

<b>Alaska Administrative Code – Title 7: Health and Social Services</b>	
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<b>Title 7 AAC</b>	<b>Code Language</b>
7 AAC 27.005	<p><b>Reporting by health care providers</b></p> <p>(a) A health care provider who prescribes for or attends a person with one or more of the following infections or diseases must report any of the following infections or diseases of public health significance, if diagnosed or suspected by the health care provider:</p> <p>(b) In addition to the immediate reporting requirement of (a) of this section, a health care practitioner who diagnoses or suspects a diagnosis of one or more of the following diseases or other conditions of public health importance must report the information to the division of public health in the department in a manner set out in (c) of this section:  (18) human immunodeficiency virus (HIV) infection</p> <p>(c) To meet the reporting requirements of (b) of this section, the health care practitioner must submit a report to the division orally, electronically, or on a form provided by the division within five working days after first discovering or suspecting the existence of the disease or other condition. Each report must give the name, address, date of birth, sex, ethnicity, and race of the person diagnosed as having the reported disease or other condition and the name and address of the health care practitioner reporting the disease or other condition.</p> <p>(d) A health care provider who attends an individual affected by an outbreak or unusual incidence of a disease or condition known or suspected to be related to exposure to environmental toxic or hazardous material must report the disease or other condition to the division in the manner set out in (c) of this section.</p>
7 AAC 27.007	<p><b>Reporting by laboratories</b></p> <p>(a) An infectious agent listed in this subsection constitutes a public health emergency requiring immediate reporting. A public, private, military, hospital, or other laboratory performing serologic, immunologic, microscopic, biochemical, or cultural examinations or tests in this state or on samples obtained within this state must immediately report evidence of human infection caused by the following agents by telephone directly to a public health agent in the department when the infectious agent is identified or suspected by the laboratory. The following infectious agents must be reported under this section:</p> <p>(b) In addition to the immediate reporting requirements of (a) of this section, a public, private, military, hospital, or other laboratory performing serologic, immunologic, microscopic, biochemical, or cultural examinations or tests in this state or on samples obtained within this state must report evidence of human infection caused by the following agents at the time of identification or suspected identification to the division of public health in the department:  (22) human immunodeficiency virus (HIV)</p>

<b>Title 7 AAC</b>	<b>Code Language</b>
	<p>(c) To meet the reporting requirements of (b) of this section, a public, private, military, hospital, or other laboratory must submit a report to the division orally, electronically, or on a form provided by the division or on a legible copy of the original laboratory report form within five working days after the examination or test is performed. Each notification must give the date and result of the examination or test performed, the name or identification code sufficient to identify the patient to the health care provider, and, if available, the date of birth, sex, race, and ethnicity of the patient from whom the specimen was obtained and the name and address of the health care provider for whom the examination or test was performed.</p> <p>(d) When acting on the basis of information received from a report made under this section, the public health agent shall first attempt to contact the health care provider for whom the examination or test was performed before contacting the patient directly.</p>

**Alaska Administrative Code – Title 12: Professional and Vocational Regulations**

<b>Title 12 AAC</b>	<b>Code Language</b>
12 AAC 14.500	<p><b>Prenatal care</b></p> <p>(b) At the initial prenatal visit, the certified direct-entry midwife shall recommend that the client undergo a physical examination as required in <a href="#">AS 08.65.140</a> to screen for health problems that could complicate the pregnancy or delivery and that includes a review of the laboratory studies required in (c) of this section. The certified direct-entry midwife shall obtain a signed written consent from the client reflecting the client's informed choice regarding the recommended physical examination and retain the consent in the client's record.</p> <p>(2) recommend the following laboratory tests:</p> <ul style="list-style-type: none"><li>(A) test for tuberculosis; and</li><li>(B) test for hepatitis and human immune deficiency virus (HIV).</li></ul>

**Alaska Administrative Code – Title 22: Department of Corrections**

<b>Title 22 AAC</b>	<b>Code Language</b>
22 AAC 05.121	<p><b>Prisoner responsibility for health care services</b></p> <p>(c) The department will not pursue payment by a prisoner for the following inspections, examinations, or testing required by state regulation or necessary to protect the health or safety of the general prisoner population or others:</p> <ul style="list-style-type: none"><li>(1) inspection upon initial admission provided under 22 AAC <a href="#">05.005</a>;</li><li>(2) a physical examination under 22 AAC <a href="#">05.120(b)</a>;</li><li>(3) testing for pregnancy, HIV, AIDS, tuberculosis, sexually transmitted diseases, or other communicable diseases.</li></ul>