



GET TESTED

San Diego HIV Community Consortium

A guide for PLWH and providers to ensure that certain tests are completed.

Two weeks prior to your regularly scheduled Primary Care visit, make appointments with your other medical care providers so your primary care provider has up to date medical information.

Highlighted in red are guidelines specific to HIV, different from the general population guidelines.

CONDITION	DO YOU HAVE THIS CONDITION?	FREQUENCY	LAST TESTED Or reason not tested
Some conditions have dietary recommendations. Check with your nutritionist.			
Diabetes Look for frequent urination, fatigue, slow healing wounds, frequent infections, blurred vision, Numbness or tingling in hands and feet, dry mouth, Itch velvety patches on skin.		Yearly or with these symptoms: increased thirst, dry mouth, frequent urination, increased hunger, fatigue, blurry vision, slow healing sores and cuts, unexplained weight loss, Check blood glucose	
High Cholesterol Usually doesn't cause noticeable symptoms.		Yearly Check blood lipid panel Ask about statins	
High Blood Pressure Often no symptoms until dangerously high. Ask to check your blood pressure every medical visit.		At least yearly, or with these symptoms Severe headaches, nosebleeds fatigue, anxiety, vision problems, chest pain, difficulty breathing, irregular heartbeat, blood in urine.	
Kidney Disease (Chronic Kidney Disease - CKD) Symptoms can be subtle and absent in early stages, but with progression may include fatigue, swelling in hands and feet, changes in urination, shortness of breath, metallic taste in mouth.		Every 6 - 12 months or with these symptoms: Changes in urination frequency or volume, foamy or bubbly urine, blood in urine dry and itchy skin, puffy eyes, swollen ankles and feet, poor appetite, muscle cramping. Check blood and urine.	
Osteoporosis No symptoms in early stages. With progression these symptoms may appear: Fractures, loss of height, stooped posture, brittle nails, hearing loss, weak grip strength, hip pain, bruises easily, fatigue.		Age 50+ or with these symptoms: Loss of height, stooped posture recurring back pain, weakened grip strength, receding gums, brittle fingernails, Get Bone Density Test (DEXA)	
Anal/Cervical Cancer Look for red blood on toilet paper or in stool, changes in bowel habits, anal pain or discomfort, lump or growth near anus, anal discharge (mucus, blood, pus,) thin stools, swollen lymph nodes		Yearly for life (for men and women)	
Liver Cancer There may be no symptoms in early stages. Look for abdominal pain or swelling, jaundice, unexplained weight loss, and fatigue		Every 6-12 months for individuals with chronic hepatitis B or C co-infection and/or cirrhosis.	
COPD/Emphysema COPD is characterized by chronibronchitis and increased mucus production.		Screening for COPD/emphysema based on symptoms (e.g., cough, shortness of breath) and may involve spirometry as needed.	
Lung Cancer Lung cancer and COPD (including emphysema) share some common		Annual low-dose CT scan for adults aged 50-80 years who have a 20-pack year smoking history & currently smoke or quit 15 years ago or more. Calculation: Pack-years = (packs per day) × (years smoked) <ul style="list-style-type: none"> Someone who smoked 1 pack/day for 20 years = 20 pack-years 	

<p>symptoms like shortness of breath and coughing.</p> <p>Lung cancer can also cause chest pain, coughing up blood, and unexplained weight loss.</p> <p>Early detection of lung cancer is crucial, as symptoms often don't appear until later stages.</p>	<ul style="list-style-type: none"> Someone who smoked 2 packs/day for 10 years = 20 pack-years (same total exposure) <p>Someone who smoked half a pack/day for 40 years = 20 pack-years</p>	
<p>Breast Cancer</p> <p>New lump, thickening in the breast or armpit, changes in breast size/shape, skin changes like dimpling/redness, nipple discharge or inversion.</p>	<p>Monthly self-exams.</p> <p>Annual mammograms starting at age 40, depending on individual risk factors, family history.</p>	
<p>Colon Cancer</p> <p>Changes in bowel habits, rectal bleeding, abdominal discomfort, and unexplained weight loss, fatigue and weakness.</p>	<p>Begin age 45 (or earlier if increased risk). Colonoscopy is typically recommended every 5 years if normal. More frequent screening may be needed based on family history or previous findings.</p>	
<p>Prostate Cancer</p> <p>Often no symptoms in early stages. Symptoms include frequent urination, especially at night, difficulty starting or stopping urination, weak urine flow, and bladder doesn't completely empty.</p>	<p>Discuss with your doctor starting at age 40-45, depending on risk factors (e.g., family history, African ancestry). Frequency will depend on initial PSA levels and risk factors. Get PSA</p>	
<p>Frailty</p> <p>decreased physical reserve & increased vulnerability to stressors. Watch for unintentional weight loss, exhaustion, slow walking speed, weak grip strength, with sometimes muscle weakness, poor balance, and increased risk of falls.</p>	<p>Yearly for Adults over 65 and when these conditions are present. Ask about "Pull test"</p> <ul style="list-style-type: none"> Self-reported exhaustion. Decreased grip strength Unintentional weight loss > 4.5 kg in a year Slow walking speed. 	
<p>Cognitive Impairment</p> <p>Forgetting things, difficulty following conversations, trouble finding the right words, and challenges in making decisions or completing tasks.</p>	<p>Memory test yearly and if you have:</p> <ul style="list-style-type: none"> memory problems difficulty with language changes in judgment or decision-making universal screening for HIV-associated neurocognitive disorders (HAND) 	
<p>Psychological Disorders</p> <p>Trouble thinking, feeling, mood, behavior.</p>	<p>Yearly, & as needed. Screen for anxiety, depression, PTSD, eating disorders, psychosis</p>	
<p>STI testing (Sexually transmitted infections)</p>	<p>At initial HIV diagnosis, and every 3 months if at risk.</p>	

VACCINATIONS (Pre-2025 CDC Recommendations)		
VACCINATION	FREQUENCY	LAST VACCINATED
Flu Vaccine	Annually	
Tdap-	Every 10 years Tetanus, diphtheria, pertussis (whooping cough)	
MMR – Measles, mumps, rubella	For all adults born after 1957 NEED CD4>200	
Hepatitis B -	Once	
Pneumococcus	Pneumovax twice 5 yrs apart. Ask about PCV 15,20 or 21.	
Covid 19	Annually	
Shingles (Shingrix)	Once (New version approved 2017)	
Chickenpox (Varicella)	Two doses 8 weeks apart for adults who do not have evidence of immunity NEED CD4>200	
HPV	Three doses over 6-12 months.]	
RSV	Once	
Polio	Once	
Meningococcus	Two doses 8 weeks apart, then every 5 years	
Travel Vaccines	By country: wwwnc.cdc.gov/travel/destinations/list	
MPox	If MSM with multiple partners	

**Dear Medical Provider,
March 2, 2026**

Thank you for considering this form to help organize preventive care during patient visits. It summarizes recommended immunizations, cancer screenings, and general health screenings for adults. Items highlighted in red reflect HIV-specific recommendations that differ from general guidelines.

The form was developed by reviewing guidance from nine expert bodies, with substantial agreement across most measures. Differences remain in several HIV-specific areas, including cancer screening, osteoporosis, cognitive health, statin therapy, and select vaccines.

As a person living with HIV for over four decades, I appreciate the value of preparation in supporting efficient, high-quality care. We hope this tool helps streamline annual visits and clinical decision-making.

We welcome your feedback at info@sdhivc.org or jerry@sdhivc.org.

Sincerely,

Jerry L. Turner

Chair, Science Branch

San Diego HIV Consortium

References

American Academy of HIV Medicine (AAHIVM). (2018). *Primary care guidelines for the management of persons infected with HIV*.

American College of Physicians (ACP). (2023). *Routine immunization of people living with HIV*. *Annals of Internal Medicine*.

American Academy of Family Physicians (AAFP). (2023). *Human immunodeficiency virus (HIV) and AIDS: Clinical recommendations*.

Centers for Disease Control and Prevention (CDC), Advisory Committee on Immunization Practices (ACIP). (2025). *Recommended adult immunization schedule*.

Department of Health and Human Services (DHHS). (2024). *Statin therapy in people with HIV*. Developed in collaboration with the American College of Cardiology, American Heart Association, and HIV Medicine Association.

Department of Health and Human Services / National Institutes of Health (DHHS/NIH). (2024). *Guidelines for the prevention and treatment of opportunistic infections in adults with HIV*.

European AIDS Clinical Society (EACS). (2025). *EACS Guidelines, Version 13.0*.

Horberg, M. A., et al. (2024). *Primary care guidance for providers who care for persons with HIV: 2024 update*. *Clinical Infectious Diseases*. (IDSA/HIVMA)

U.S. Preventive Services Task Force (USPSTF). (2024). *A and B recommendations*.

World Health Organization (WHO). (2021). *Consolidated guidelines on HIV, viral hepatitis and STI prevention, diagnosis, treatment and care*.

San Diego HIV Consortium (2026) <https://www.sdhivc.org/get-tested-project/>