


Test paper - Recommendations on HIV Testing in Hong Kong

(November 2024, SCAS)

The iContinuing Education (iCE) on HIV/AIDS is an initiative of Special Preventive Programme, Department of Health. This programme aims at providing a selection of free, regularly updated continuing education activities on HIV/AIDS and its related subjects for doctors, nurses, other health professionals and workers.

	College/ Programme/ Accreditor	CME/ CPD/ CNE/ CEM Point
CME/CPD Accreditation	MCHK CME Programme for Practising Doctors who are not taking CME Programme for Specialists	1 (Accredited by DH)
	The Dental Council of Hong Kong	1
	Medical Laboratory Technologists Board	Pending
	Other colleges*	0.5-1*
CNE/ CEM Accreditation	-	1
Validity Period	02 October 2025 - 31 December 2025	
*Details of CME accreditation for specialists, please refer to International Network for Continuing Medical Education and Continuous Professional Development . Please contact respective authorities directly for CME/CPD accreditation if it is not on the list.		

Assessment

The iCE programme consists of two parts: (1) reading an article or educational material, and (2) answering multiple choice questions. Each programme is expected to take approximately one hour.

Submit the completed answer sheet during the specified validity period by email to rrc@dh.gov.hk.

1. Which of the following is FALSE regarding HIV late presenters?

- In Hong Kong, proportion of late presenters among newly reported cases has been increasing from 2014 to 2023
- Late presenters are at an increased risk of opportunistic infections
- Late presenters tend to achieve immune recovery more slowly
- Men having sex with men (MSM) is an epidemiological factor associated with late HIV presentation in Hong Kong
- In Hong Kong, late presenters refer to those with a very low presenting CD4 count (less than 200 cells/mm³) or those who have already progressed to AIDS at the time of HIV diagnosis

2. In Hong Kong, HIV testing is incorporated as a part of integral clinical care with an “opt-out” approach in the following services, except:

- People diagnosed with tuberculosis
- Attendees of methadone clinics
- Attendees of cervical screening service
- Attendees of sexual health service
- Pregnant women at antenatal checkup

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3. Which of the following is a confirmatory test for HIV infection?

- a. Oral fluid-based HIV self-test
- b. Blood-based (fingerprick) HIV self-test
- c. HIV-1/HIV-2 differentiation immunoassay
- d. HIV antigen/antibody combination assay (also known as combo test or fourth generation test)
- e. None of the above

4. Which of the following is NOT a behavioural risk factor of HIV infection?

- a. Sharing the same household with a person living with HIV
- b. An individual who uses psychostimulants (e.g. methamphetamine) during sexual activities
- c. An individual originated from areas of high HIV prevalence
- d. An individual who receives money or goods in exchange for sexual services
- e. An individual whose sex partner(s) have multiple sex partners

5. In someone with newly diagnosed HIV infection, which of the following is/are an AIDS-defining condition?

- a. A middle-aged man diagnosed with pulmonary tuberculosis with a presenting CD4 count of 360 cells/uL.
- b. A middle-aged man presented with esophageal candidiasis
- c. A young man admitted to the hospital for the first episode Salmonella bacteremia
- d. A young man presents with acute tonsillitis with rashes and generalised lymphadenopathy
- e. All of the above

6. Which of the following action(s) is/are appropriate if a client attending your clinic for HIV testing was tested positive with a confirmatory test?

- a. Refer him/her to HIV clinic for comprehensive care as soon as possible
- b. Explain to him/her that HIV is a manageable chronic condition and the benefits of early treatment initiation
- c. Report anonymously to the HIV/AIDS voluntary reporting system using the HIV/AIDS report form (DH2293)
- d. Deliver the positive test result face-to-face in a place where privacy can be ensured
- e. All of the above

7. Which of the following HIV prevention strategy can associate with long-acting early viral inhibition (LEVI) syndrome?

- a. Taking on demand TDF/FTC as pre-exposure prophylaxis
- b. Suboptimal drug adherence to daily TAF/FTC as pre-exposure prophylaxis
- c. Using injectable cabotegravir as pre-exposure prophylaxis
- d. Failed to be started on antiretroviral for post-exposure prophylaxis within 72 hours following an episode of blood or body fluid exposure
- e. Poor adherence to antiretroviral for post-exposure prophylaxis with multiple missed dose

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8. Which of the following individuals should be offered with HIV test?

- a. An adult with a newly diagnosed acute hepatitis B infection
- b. A young man newly diagnosed with early latent syphilis
- c. A middle-aged gentleman with unexplained thrombocytopenia
- d. An elderly lady presents with a history of recurrent zoster infection
- e. All of the above

9. Which of the following is true about point-of-care (POCT) for HIV?

- a. POCT involves venipuncture to collect the blood specimen for testing
- b. Results of POCTs are typically available after 1 working day
- c. An individual with a positive POCT result should be started on antiretroviral therapy as soon as possible without the need of further testing
- d. A negative POCT on the day after an incident of exposure to HIV can safely declare an individual not infected
- e. The procedure of POCT and HIV self-testing is the same except that the users need to interpret the results by themselves in HIV self-testing

10. Which of the following message(s) should be conveyed to people newly diagnosed with HIV infection?

- a. HIV is a manageable chronic health condition that requires lifelong treatment
- b. Antiretroviral treatment should be initiated as early as possible to facilitate early viral suppression and restoration of the immune system
- c. People living with HIV who maintain an undetectable viral load while on antiretroviral therapy cannot transmit HIV to their sex partners
- d. Pregnant women diagnosed with HIV during antenatal care should be started on antiretroviral therapy as soon as possible for the benefit of restoring maternal health and to minimise the risk of mother-to-child transmission
- e. All of the above

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Please submit the completed answer sheet by email (rrc@dh.gov.hk) to Special Prevention Programme, Department of Health (DH) **on or before 31 December 2025**. The passing mark is 70%.

Name: _____

Email: _____

Registration No. _____

(please ✓ the appropriate box)

- ☐ Dental Council/ Medical Council of Hong Kong
☐ Nursing Council of Hong Kong
☐ Midwives Council of Hong Kong

Continuing Medical Education (CME) / Continuing Professional Development (CPD)

CME/CPD Programme Administrator for practising doctor who is not taking CME programme for specialists/ practising dentist who is not taking CPD programme for specialists (please ✓ the appropriate box)

- ☐ Department of Health
☐ Hong Kong Academy of Medicine
☐ Hong Kong Dental Association
☐ Hong Kong Doctors Union
☐ Hong Kong Medical Association

College for Specialists (please ✓ the appropriate box)

- ☐ Anaesthesiologists
☐ Emergency Medicine
☐ Ophthalmologists
☐ Paediatricians
☐ Psychiatrists
☐ Community Medicine
☐ Family Physicians
☐ Orthopaedic Surgeons
☐ Pathologists
☐ Radiologists
☐ Dental Surgeons
☐ Obstetricians and Gynaecologists
☐ Otorhinolaryngologists
☐ Physicians
☐ Surgeons

✧ Please contact respective authorities directly for CME/CPD accreditation if it is not on the list.

Continuing Nursing Education (CNE) / Continuing Education in Midwifery (CEM)

CNE/CEM points will be granted to Hong Kong nurses by DH.

Category (please ✓ the appropriate box)

- ☐ Enrolled Nurse
☐ Registered Nurse
☐ Midwife

Workplace (please ✓ the appropriate box)

☐ DH Nurses Clinic: _____ Service: _____

☐ Non-DH Nurses Hospital & ward: _____

Others (please specify): _____

✧ Records of CNE /CEM programmes will be kept for six years for the Nursing Council/ Midwives Council of Hong Kong's or participants' reference.

Answers (please answer in the space provided below)

1.		2.		3.		4.		5.	
6.		7.		8.		9.		10.	

Disclaimer: Participants are required to take the responsibility to ensure that the name and registration number provided are correct. The final accreditations will be at the discretion of Department of Health / individual college / association.

Personal Data Collection Statement

The personal data provided in this form will be used for record-keeping, statistical analysis and iContinuing Education purposes. Such data will be disclosed to the Department of Health and designated organisations/ colleges/ institutions for iContinuing Education.

In accordance with the Personal Data (Privacy) Ordinance, you have the rights to request access to or correction of personal data provided in this form. Any such request should be sent to rrc@dh.gov.hk.