

HIV Prevention: Partner Services Interventions to Increase HIV Testing

Summary Evidence Table

This table outlines information from the studies included in the Community Guide systematic review of Partner Services Interventions to Increase HIV Testing. It details study quality, population and intervention characteristics, and study outcomes considered in this review. Complete references for each study can be found in the Included Studies section of the review summary.

Abbreviations Used in This Document:

CDC: Centers for Disease Control and Prevention
CI: confidence interval
DIS: Disease Intervention Specialist
FSU: Field Service Unit
IDU: people with injection drug use
HIV: Human Immunodeficiency Virus

MSM: gay, bisexual, and other men who have sex with men
NR: not reported
SES: socioeconomic status
STD: sexually transmitted disease
STI: sexually transmitted infection

Type of Referral:

Provider referral: trained health department personnel notify partners

Self-referral (also known as client or patient referral): patient accepts full responsibility for notifying partners and refers them to appropriate services

Third-party referral: professionals other than health department staff (e.g., HIV counselors or clinicians) notify partners

Outcomes and Formula Used in This Review:

Partner index ratio: number of partners identified/ number of index patients interviewed

Percent (%) partners notified: $(\text{number of partners notified} / \text{number of partners identified}) \times 100$

Percent (%) partners tested, all notified: $(\text{number of partners tested} / \text{number of partners notified}) \times 100$

Percent (%) partners tested, among HIV- or unknown: $(\text{number of partners tested} / \text{number of partners notified previously tested HIV negative or with unknown HIV status}) \times 100$

Percent (%) partners tested positive: $(\text{number of partners tested positive for HIV infection} / \text{number of partners tested}) \times 100$

NNTI_{new}: number of index patients needed to be interviewed to identify one newly diagnosed partner

$(\text{number of index patients interviewed} / \text{number of partners newly tested positive for HIV infection}) \times 100$

NNTI_{any}: number of index patients needed to be interviewed to identify one partner with HIV infection (partners previously tested positive for HIV infection + partners newly tested positive for HIV infection)

$(\text{number of index patients interviewed} / \text{number of partners with HIV infection}) \times 100$

Notes:

- Suitability of design includes three categories: greatest, moderate, or least suitable design. [Read more](#) >>
- Quality of Execution – Studies are assessed to have good, fair, or limited quality of execution. [Read more](#) >>
- Race/ethnicity of the study population: The Community Guide only summarizes race/ethnicity for studies conducted in the United States.
- Final Effect estimates greater than zero are rounded to the nearest tenth; estimates less than zero are rounded to the nearest hundredth.

Study	Intervention Characteristics	Population Characteristics	Results
<p>Author, Year: Ahrens et al., 2007</p> <p>Study Design: Pre-post only</p> <p>Suitability of Design: Least</p> <p>Quality of Execution: Fair</p>	<p>Location: San Francisco, California, US</p> <p>Urbanicity: urban</p> <p>Setting: San Francisco Department of Public Health (SFDPH) STD Prevention and Control Section</p> <p>Type of Referral: Provider referral by trained SFDPH staff Self-referral available if index patients chose the option</p> <p>Notification Delivery Methods: NR</p> <p>Additional Services Offered: San Francisco partner services program offers an array of services to HIV-infected individuals: counseling sessions; referrals to social service, mental health, and substance abuse treatment agencies; linkage to HIV primary care</p> <p>Named partners were offered fast-tracked STD/HIV medical evaluation, including HIV testing at municipal STD clinics</p> <p>Comparison: Partner services vs. no service Index patients with acute vs. non-acute vs. long-standing HIV infection</p>	<p>Eligibility Criteria: Index patients: persons diagnosed at STD clinic with acute or nonacute HIV infection Partners: sexual or needle sharing partners, and persons within the index cases' social and sexual network</p> <p>Sample Size: Index patients: 763 Index patients interviewed: 607 Identified partners: 8263</p> <p>Demographics: Index patients: <i>Age:</i> NR <i>Sex:</i> 96% male; 3% female; 1% transgender <i>Race/Ethnicity:</i> 54% white; 13% Black/African American; 8% Asian/Pacific Islander; 1% American Indian/Alaska Native; 23% Hispanic/Latino; 1% unknown <i>Transmission category:</i> NR <i>SES:</i> NR <i>Education:</i> NR <i>Insurance:</i> NR</p>	<p>How Ascertained: Notification outcomes recorded using standard CDC disposition codes Partner HIV status outcomes were determined by staff investigation of SFDPH HIV testing records, self-report from the partner, or self-report from the index patient about the partner</p> <p>Intervention Duration: 36 months</p> <p>Results: Overall: Partner index ratio: 13.6 % partners notified: 6.8% % partners tested, all notified: 39.1% % partners tested, among HIV- or unknown: 96.9% % partners tested positive: 10.6% NNTInew: 26.4 NNTIany: 1.7</p> <p>Acute HIV infection: % partners notified: 60% % partners tested, all notified: 44.4% % partners tested, among HIV- or unknown: 100% % partners tested positive: 25%</p> <p>Non-acute HIV infection: % partners notified: 64.6% % partners tested, all notified: 54.3%</p>

Study	Intervention Characteristics	Population Characteristics	Results
			<p>% partners tested, among HIV- or unknown: 97.5% % partners tested positive: 12.6%</p> <p>Long-standing HIV infection: % partners notified: 59.7% % partners tested, all notified: 28.8% % partners tested, among HIV- or unknown: 96% % partners tested positive: 7.4%</p>
<p>Author, Year: Bergman et al., 2015</p> <p>Study Design: Pre-post only</p> <p>Suitability of Design: Least</p> <p>Quality of Execution: Fair</p>	<p>Location: Alberta, Canada</p> <p>Urbanicity: urban</p> <p>Setting: Alberta Health Services</p> <p>Type of Referral: Provider referral</p> <p>Notification Delivery Methods: NR</p> <p>Additional Services Offered: HIV testing for partners offered by partner notification nurse</p> <p>Comparison: Partner services vs. no service Comparison between different transmission categories</p>	<p>Eligibility Criteria: Index patients: all persons tested HIV positive within study period Partners: sexual, needle sharing, and perinatal contacts</p> <p>Sample Size: Index patients interviewed: 346 Identified partners: 642</p> <p>Demographics: Index patients: <i>Age, mean:</i> 37 <i>Sex:</i> 70% male; 30% female <i>Race/Ethnicity:</i> 57% white among males; 46% Black/African American among females <i>Transmission category:</i> 42% MSM; 14% IDU; 42% heterosexual contact; 3% other <i>SES:</i> NR <i>Education:</i> NR <i>Insurance:</i> NR</p>	<p>How Ascertained: Data obtained from local health services databases</p> <p>Intervention Duration: 44 months</p> <p>Results: Overall: Partner index ratio: 1.9 % partners notified: 53.9% % partners tested, all notified: 88.2% % partners tested positive: 6.6% NNTInew: 17.3 NNTIany: 3.1</p> <p>MSM: Partner index ratio: 2.6 % partners notified: 58.9% % partners tested, all notified: 89.0% % partners tested positive: 7.7% NNTInew: 9.6 NNTIany: 2.6</p> <p>IDU: Partner index ratio: 1.3 % partners notified: 48.4% % partners tested, all notified: 80.7% % partners tested positive: 16.0% NNTInew: 12.3 NNTIany: 2.3</p> <p>Heterosexual: Partner index ratio: 1.4 % partners notified: 46.6%</p>

Study	Intervention Characteristics	Population Characteristics	Results
			<p>% partners tested, all notified: 88.4% % partners tested positive: 1.2% NNTInew: 144 NNTIany: 4.5</p> <p>Other: Partner index ratio: 0.2 % partners notified: 50.0% % partners tested, all notified: 100% % partners tested positive: 0% NNTInew: 0 NNTIany: 4.5</p>
<p>Author, Year: Bocour et al., 2010</p> <p>Study Design: Cross-sectional</p> <p>Suitability of Design: Least</p> <p>Quality of Execution: Fair</p>	<p>Location: New York City, New York, US</p> <p>Urbanicity: urban</p> <p>Setting: NYC Department of Health and Mental Hygiene</p> <p>Type of Referral: Provider referral through FSU and DIS</p> <p>Notification Delivery Methods: NR</p> <p>Additional Services Offered: Field HIV testing offered</p> <p>Comparison: Index patients' race, ethnicity and sex</p>	<p>Eligibility Criteria: Index patients: all blacks and Hispanics who tested positive for HIV and referred to FSU during study period Partners: sexual partners</p> <p>Sample Size: Index patients: 1842 Index patients interviewed: 1385 Identified partners: 1107</p> <p>Demographics: Index patients: <i>Age group:</i> 3% aged 13-19; 20% aged 20-29; 22% aged 30-39; 32% aged 40-49; 17% aged 50-59; 6% aged 60+ <i>Sex:</i> 56% male; 44% female <i>Race/Ethnicity:</i> 65% Black/African American; 35% Hispanic/Latino <i>Transmission category:</i> Male: 16% heterosexual contact; 14% IDU; 31% MSM; 1% IDU and MSM; 38% unknown Female: 39% heterosexual contact; 7% IDU; 57% no identified category <i>SES:</i> 22% ever homeless <i>Education:</i> NR <i>Insurance:</i> NR</p>	<p>How Ascertained: NYC Department of Health and Mental Hygiene database</p> <p>Intervention Duration: 16 months</p> <p>Results: Blacks/African American: Partner index ratio: 1.3 % partners notified: 47.4% % partners tested, all notified: 37.7% % partners tested, among HIV- or unknown: 56.6% % partners tested positive: 12.5% NNTInew: 59.6 NNTIany: 7.4</p> <p>Hispanic/Latino: Partner index ratio: 1.1 % partners notified: 47.5% % partners tested, all notified: 44.0% % partners tested, among HIV- or unknown: 60.7% % partners tested positive: 23.1% NNTInew: 23.4 NNTIany: 6.3</p> <p>Male: Partner index ratio: 1.3 % partners notified: 49.4% % partners tested, all notified: 42.7%</p>

Study	Intervention Characteristics	Population Characteristics	Results
			<p>% partners tested, among HIV- or unknown: 61.8% % partners tested positive: 22.2% NNTInew: 27.5 NNTIany: 6.5</p> <p>Female: Partner index ratio: 1.2 % partners notified: 45.1% % partners tested, all notified: 37.0% % partners tested, among HIV- or unknown: 53.8% % partners tested positive: 9.4% NNTInew: 76.9 NNTIany: 7.7</p>
<p>Author, Year: Bocour et al., 2013</p> <p>Study Design: Cross-sectional</p> <p>Suitability of Design: Least</p> <p>Quality of Execution: Fair</p>	<p>Location: New York City, New York, US</p> <p>Urbanicity: urban</p> <p>Setting: NYC Department of Health and Mental Hygiene</p> <p>Type of Referral: Provider referral through FSU and DIS</p> <p>Notification Delivery Methods: NR</p> <p>Additional Services Offered: Staff assessed patients' understanding of the follow-up care plan made by providers and attempted to address any potential barriers to adherence to the plan, including facilitating appointment scheduling and providing transportation to appointments</p> <p>Comparison: FSU vs. non-FSU (provider vs. third-party referral)</p>	<p>Eligibility Criteria: Index patients: two mutually exclusive analytic populations were drawn from the population of all persons living in NYC, at least 13 years old, newly diagnosed with HIV infection between 2007 and 2011, reported to NYC Health Department by 03/31/2013: Intervention: newly diagnosed persons interviewed for PS by FSU staff, and Comparison: newly HIV-diagnosed persons at non-FSU-participating NYC facilities that offered ongoing HIV medical care Partners: sexual and needle sharing partners</p> <p>Sample Size: Index patients: 10095 Index patients interviewed: NR Identified partners: NR</p> <p>Demographics: Index patients: <i>Age, mean:</i> 38 <i>Sex:</i> 73% male; 27% female <i>Race/Ethnicity:</i> 16% white; 48% Black/African American; 33% Hispanic/Latino; 3% unknown/other</p>	<p>How Ascertained: Data from NYC HIV surveillance registry (HSR) and the FSU database</p> <p>Intervention Duration: 60 months</p> <p>Results: Linkage to care within 91 days of diagnosis: linkage to care was evaluated using CD4 and viral load reports to HSR as a proxy for an HIV-related medical care visit</p> <p>FSU patients (79%) were more likely than non-FSU patients (66%) to initiate care within 3 months of diagnosis (P<0.0001).</p> <p>In the multivariable model, FSU patients were slightly more likely to initiate care within 3 months of diagnosis, adjusted prevalence ratio of 1.10, 95% CI 1.08–1.12</p> <p>Established care: HIV care was considered 'established' if at least two viral load or CD4 tests, including the linkage to care laboratory, separated by at least 91 days, were received for those</p>

Study	Intervention Characteristics	Population Characteristics	Results
		<p><i>Transmission category:</i> 28% heterosexual contact; 7% IDU history; 43% MSM; 22% unknown <i>SES:</i> NR <i>Education:</i> NR <i>Insurance:</i> NR</p>	<p>who had ever initiated care during the 12-month period after initial diagnosis</p> <p>Among those who ever initiated care, FSU patients (87%) were more likely than non-FSU patients (84%) to have established themselves in (P=0.0001).</p> <p>In the multivariable model, FSU patients were slightly more likely to have established care, adjusted prevalence ratio of 1.04, 95% CI 1.02–1.06</p>
<p>Author, Year: Chiou et al., 2015</p> <p>Study Design: Individual RCT</p> <p>Suitability of Design: Greatest</p> <p>Quality of Execution: Fair</p>	<p>Location: Taipei City, Taiwan</p> <p>Urbanicity: urban</p> <p>Setting: infectious disease outpatient department in one of the Taipei City hospitals</p> <p>Type of Referral: Mix of provider, self, and third-party referral</p> <p>Notification Delivery Methods: NR</p> <p>Additional Services Offered: Partners were scheduled to undergo HIV testing and rapid testing</p> <p>Partners tested negative at the first screening were tested for HIV again after a period of 3 months. If result was still negative, follow-up was ceased</p> <p>Comparison: Multi-session counseling vs. one session counseling at initial interview of the index patient</p>	<p>Eligibility Criteria: Index patients: recruited from infectious disease outpatient department in one of the Taipei City hospitals, men who have sex with men, infected through unsafe sex, literate and able to communicate Partners: sexual partners</p> <p>Sample Size: Index patients: 84 Index patients interviewed: 84 Identified partners: 467</p> <p>Demographics: Index patients: <i>Age group:</i> 4% less than 20; 63% aged 21-30; 30% aged 31-40; 4% aged 41-50 <i>Sex:</i> 100% male <i>Race/Ethnicity:</i> NR <i>Transmission category:</i> 100% MSM <i>SES, monthly income, USD:</i> 6% with no monthly income; 24% with less than 667; 56% with 667-1332; 6% 1333-1666; 8.3% greater than 1666 <i>SES, employment:</i> 80% employed; 20% not employed <i>Education:</i> 26% senior of high school; 61% college and university; 13% graduate school <i>Insurance:</i> NR</p>	<p>How Ascertained: NR</p> <p>Intervention Duration: 12 months</p> <p>Results: Partner index ratio: Multiple sessions: 7.2 One session: 3.9</p> <p>% partners notified: Multiple sessions: 74.8% One session: 71.5% Difference: 3.3 percentage points</p> <p>% partners tested, all notified: Multiple sessions: 34.5% One session: 28.0% Difference: 6.5 percentage points</p> <p>% partners tested positive: Multiple sessions: 39.7% One session: 27.3% Difference: 12.5 percentage points</p> <p>NNTInew: Multiple sessions: 1.4 One session: 4.7</p> <p>NNTIany: Multiple sessions: 0.5 One session: 0.9</p>

Study	Intervention Characteristics	Population Characteristics	Results
<p>Author, Year: De Olalla et al., 2015</p> <p>Study Design: Pre-post only</p> <p>Suitability of Design: Least</p> <p>Quality of Execution: Fair</p>	<p>Location: Barcelona, Spain</p> <p>Urbanicity: urban</p> <p>Setting: a hospital HIV unit and STI Primary Care Center</p> <p>Type of Referral: Provider and self-referral</p> <p>Notification Delivery Methods: telephone</p> <p>Additional Services Offered: Partners offered free HIV rapid testing</p> <p>Comparison: Partner services vs. no service</p>	<p>Eligibility Criteria: Index patients: persons diagnosed between January 2012 and June 2013, managed for the first time in one of two participating healthcare centers were invited to participate as index case Partners: sexual and needle sharing partners</p> <p>Sample Size: Index patients: 131 Index patients interviewed: 125 Identified partners: 2050</p> <p>Demographics: Index patients: <i>Age, median:</i> 34 <i>Sex:</i> 96% male; 4% female <i>Race/Ethnicity:</i> NR <i>Transmission category:</i> 83% MSM; 13% heterosexual contact; 2% MSM and IDU; 2% heterosexual contact and IDU <i>SES:</i> NR <i>Education:</i> 5% no formal education; 16% primary; 44% secondary; 34% university; 1% missing <i>Insurance:</i> 100%</p>	<p>How Ascertained: Outcomes of HIV testing for partners informed by self-referral were obtained from their index cases and not confirmed by medical records Outcomes of HIV testing for partners who were informed by provider referral were verified by medical records</p> <p>Intervention Duration: 10 months</p> <p>Results: Partner index ratio: 16.4 % partners notified: 9.7% % partners tested, all notified: 70.9% % partners tested, among HIV- or unknown: 100% % partners tested positive: 18.4% NNTInew: 4.8 NNTIany: 1.5</p>
<p>Author, Year: Golden et al., 2009</p> <p>Study Design: Cross-sectional</p> <p>Suitability of Design: Least</p> <p>Quality of Execution: Fair</p>	<p>Location: Seattle, Washington, US</p> <p>Urbanicity: urban</p> <p>Setting: the largest HIV clinic in Washington state</p> <p>Type of Referral: Provider and self-referral</p> <p>Notification Delivery Methods: NR</p> <p>Additional Services Offered: NR</p> <p>Comparison:</p>	<p>Eligibility Criteria: Index patients: from the largest HIV clinic in the Washington state, diagnosed with HIV infection, visiting the clinic in 2006 and 2007, English-speaking Partners: sexual partners</p> <p>Sample Size: Index patients: 370 Index patients interviewed: NR Identified partners: NR</p> <p>Demographics: Index patients:</p>	<p>How Ascertained: Data taken from public health department databases</p> <p>Intervention Duration: 12 months</p> <p>Results: Index patients who received partner services were significantly more likely to report notifying at least one sex partner than index patients who did not receive partner services</p> <p>More index patients who received partner services (13%) reported their</p>

Study	Intervention Characteristics	Population Characteristics	Results
	<p>Partner services vs. no service People who received partner services vs. people who did not receive partner services</p>	<p><i>Age, median:</i> 45 <i>Sex:</i> 82% male; 16% female; 2% transgender persons; 0.3% unknown <i>Race/Ethnicity:</i> 66% white; 17% Black/African American; 14% multiple races; 9% Hispanic/Latino; 3% NR <i>Transmission category:</i> NR <i>SES:</i> income in last year, 64% less than \$15K; 20% \$15K to \$30K; 14% more than \$30K <i>Education:</i> 45% high school or less; 52% some college or more <i>Insurance:</i> NR</p>	<p>partners diagnosed with HIV compared with index patients who did not receive partner services (8%) (P=0.23)</p>
<p>Author, Year: Green et al., 2017</p> <p>Study Design: Pre-post only</p> <p>Suitability of Design: Least</p> <p>Quality of Execution: Fair</p>	<p>Location: San Diego, California, US</p> <p>Urbanicity: urban</p> <p>Setting: community-based HIV testing sites of the San Diego Primary Infection Resource Consortium (SD PIRC)</p> <p>Type of Referral: Mix of provider, self, and third-party referral</p> <p>Notification Delivery Methods: NR</p> <p>Additional Services Offered: Partners successfully contacted were offered free of charge HIV testing and counseling through SD PIRC or a testing facility of their choice and linkage to prevention and treatment services</p> <p>Comparison: Partner services vs. no service</p>	<p>Eligibility Criteria: Index patients: all people with acute and early HIV infection Partners: sexual or needle sharing partners</p> <p>Sample Size: Index patients: 574 Index patients provided sufficient information for partners to be located: 107 Identified partners: 119</p> <p>Demographics: Index patients: <i>Age, median:</i> 30 <i>Sex:</i> 95% male; 5% female <i>Race/Ethnicity:</i> 60% white; 5% Black/African American; 29% Hispanic/Latino; 6% other <i>Transmission category:</i> 96% MSM; 4% IDU <i>SES:</i> NR <i>Education:</i> NR <i>Insurance:</i> NR</p>	<p>How Ascertained: Data taken from study database</p> <p>Intervention Duration: 228 months</p> <p>Results: % partners tested positive: 32.8% NNTInew: 14.7 NNTIany: 1.6</p>
<p>Author, Year: Heumann et al., 2017</p> <p>Study Design: Cross-sectional</p>	<p>Location: King County, Washington, US</p> <p>Urbanicity: urban</p>	<p>Eligibility Criteria: Index patients: all King County WA residents reported to Public Health Seattle and King County (PHSKC) with newly diagnosed HIV infection who were interviewed by DIS for PS</p>	<p>How Ascertained: Data extracted and de-identified from partner services records completed by staff at PHSKC</p> <p>Intervention Duration: 60 months</p>

Study	Intervention Characteristics	Population Characteristics	Results
<p>Suitability of Design: Least</p> <p>Quality of Execution: Good</p>	<p>Setting: King County public health department</p> <p>Type of Referral: Provider referral</p> <p>Notification Delivery Methods: NR</p> <p>Additional Services Offered: NR</p> <p>Comparison: Index patients received initial interview in-person vs. index patients received initial interview over the phone</p>	<p>between 2010 to 2014, and with completed interview records Partners: NR</p> <p>Sample Size: Index patients: 1167 Index patients interviewed with completed interview records: 847 Identified partners: 1298</p> <p>Demographics: Index patients: <i>Age, median:</i> 34 <i>Sex:</i> 90% male; 10% female <i>Race/Ethnicity:</i> 59% white; 16% Black/African American; 6% Asian/Pacific Islander; 15% Hispanic/Latino; 5% other <i>Transmission category:</i> NR <i>SES:</i> NR <i>Education:</i> NR <i>Insurance:</i> NR</p>	<p>Results: Initial interview in-person: Partner index ratio: 1.9 % partners notified: 73.9% % partners tested, all notified: 44.2% % partners tested positive: 16.4% NNTInew: 9.9 Days between diagnosis and interview of index cases, median: 10</p> <p>Initial interview over telephone: Partner index ratio: 1.3 % partners notified: 71.3% % partners tested, all notified: 52.5% % partners tested positive: 10.2% NNTInew: 20.4 Days between diagnosis and interview of index cases, median: 42</p>
<p>Author, Year: Hightow-Weidman et al., 2014</p> <p>Study Design: Cross-sectional</p> <p>Suitability of Design: Least</p> <p>Quality of Execution: Fair</p>	<p>Location: North Carolina, statewide, US</p> <p>Urbanicity: mix of urban and rural</p> <p>Setting: NC Division of Public Health (NC DPH), North Carolina Internet Partner Notification (IPN) services, University of North Carolina at Chapel Hill collaborated with the North Carolina Division of Public Health</p> <p>Type of Referral: Provider referral</p> <p>Notification Delivery Methods: IPN: email Text partner notification (TxPN): text message</p> <p>Additional Services Offered:</p>	<p>Eligibility Criteria: Index patients: all clients diagnosed with HIV reported to NC DPH from 2010 to 2012, assigned to staff to initiate partner services IPN index cases: persons with web-based information elicited, such as screen or profile name and website and or email TxtPN index cases: persons who did not initially respond to traditional partner notification or IPN Partners: sexual partners</p> <p>Sample Size: Index patients: NR Index patients interviewed: NR Identified partners: NR</p> <p>Demographics: Index patients:</p>	<p>How Ascertained: Records from NC DPH</p> <p>Intervention Duration: IPN: 12 months TxPN: 8 months</p> <p>Results: IPN: # partners tested positive per month: 0.6</p> <p>TxPN: # partners tested positive per month: 0.13</p> <p>IPN vs. TxPN: # partners tested positive per month: 366.7%</p>

Study	Intervention Characteristics	Population Characteristics	Results
	<p>HIV testing of partners</p> <p>Comparison: IPN vs. no IPN TxPN vs. no TxPN IPN vs. TxPN</p>	<p><i>Age:</i> NR <i>Sex:</i> NR <i>Race/Ethnicity:</i> NR <i>Transmission category:</i> NR <i>SES:</i> NR <i>Education:</i> NR <i>Insurance:</i> NR</p>	
<p>Author, Year: Hood et al., 2017</p> <p>Study Design: Cross-sectional</p> <p>Suitability of Design: Least</p> <p>Quality of Execution: Fair</p>	<p>Location: King County, Washington, US</p> <p>Urbanicity: urban</p> <p>Setting: Public Health-Seattle & King County (PHSKC), HIV/STD Program</p> <p>Type of Referral: Provider referral</p> <p>Notification Delivery Methods: NR</p> <p>Additional Services Offered: Field services team ensured linkage to care for all unsuppressed individuals with newly reported HIV infections; care linkage needed to be confirmed or until the staff determined that additional efforts to promote linkage would be futile</p> <p>Newly diagnosed individuals (without evidence of an existing HIV care provider) were invited to participate in the PHSKC One-on-One program, allowing individuals to be seen by a public health medical provider for a clinical assessment, initial laboratory evaluation, and counseling, usually within several days of diagnosis</p> <p>Comparison: Index patients received partner services vs. those who did not</p>	<p>Eligibility Criteria: Index patients: all persons newly diagnosed with HIV infection and records entered into the King County HIV Surveillance System Partners: sexual or needle sharing partners</p> <p>Sample Size: Index patients: 1474 Index patients interviewed: NR Identified partners: NR</p> <p>Demographics: Index patients: <i>Age:</i> NR <i>Sex:</i> 89% male; 11% female <i>Race/Ethnicity:</i> 58% white; 16% Black/African American; 6% Asian; 1% Pacific Islander; 1% American Indian/Alaska Native; 15% Hispanic/Latino; 1% multiracial <i>Transmission category:</i> 70% MSM; 4% IDU; 8% MSM/IDU; 6% heterosexual contact; 13% unknown <i>SES:</i> NR <i>Education:</i> NR <i>Insurance:</i> NR</p>	<p>How Ascertained: All data matched against the Enhanced HIV/AIDS Reporting System, also from reported laboratory records, STD Clinic records, electronic medical records, and partner services databases</p> <p>Intervention Duration: 72 months</p> <p>Results: After controlling for demographic characteristics and other factors, linkage to care within 30 and 90 days of diagnosis was significantly greater among individuals receiving versus not receiving partner services</p> <p>30 days: Adjusted relative risk (RR)= 1.10 95% CI: 1.03 to 1.18 P = .004</p> <p>90 days: Adjusted RR= 1.07 95% CI, 1.01 to 1.14 P = .014</p>

Study	Intervention Characteristics	Population Characteristics	Results
<p>Author, Year: Landis et al., 1992</p> <p>Study Design: Individual RCT</p> <p>Suitability of Design: Greatest</p> <p>Quality of Execution: Fair</p>	<p>Location: Durham, Mecklenburg & Wake County Health Departments, North Carolina, US</p> <p>Urbanicity: mix of urban and rural</p> <p>Setting: 3 large county health departments in NC, Durham, Mecklenburg, and Wake County</p> <p>Type of Referral: Provider referral</p> <p>Notification Delivery Methods: in-person notification if possible</p> <p>Additional Services Offered: HIV testing and counseling offered to partners</p> <p>Comparison: Provider vs. provider and self-referral vs. self-referral</p>	<p>Eligibility Criteria: Index patients: persons tested HIV positive and returned for their results were assigned to public health counselors participating in the study in the 3 counties Partners: sexual or needle sharing partners</p> <p>Sample Size: Index patients: 162 Index patients interviewed: 74 Identified partners: 310</p> <p>Demographics: Index patients: <i>Age, mean:</i> 30 <i>Sex:</i> 69% male; 31% female <i>Race/Ethnicity:</i> 87% Black/African American <i>Transmission category:</i> NR <i>SES:</i> NR <i>Education:</i> NR <i>Insurance:</i> NR</p>	<p>How Ascertained: Notification and HIV testing outcomes from clinic records and health department record</p> <p>Intervention Duration: 20 months</p> <p>Results: Provider referral Partner index ratio: 4.0 % partners notified: 49.7% % partners tested, all notified: 46.2% % partners tested positive: 25.0% NNTInew: 4.3</p> <p>Provider and self-referral Partner index ratio: 4.4 % partners notified: 32.7% % partners tested, all notified: 50.0% % partners tested positive: 20.0% NNTInew: 7.0</p> <p>Self-referral Partner index ratio: 4.4 % partners notified: 6.5% % partners tested, all notified: 50.0% % partners tested positive: 20.0% NNTInew: 35.0</p>
<p>Author, Year: Lee et al., 1990</p> <p>Study Design: Pre-post only</p> <p>Suitability of Design: Least</p> <p>Quality of Execution: Fair</p>	<p>Location: Kansas City, Missouri, US</p> <p>Urbanicity: urban</p> <p>Setting: Kansas City Health Department</p> <p>Type of Referral: Provider and self-referral</p> <p>Notification Delivery Methods: NR</p> <p>Additional Services Offered: Partners tested negative were sent letters at 3 months intervals and offered additional testing</p>	<p>Eligibility Criteria: Index patients: all people tested positive at Kansas City Health Department HIV counseling and testing clinics during study period Partners: sexual or needle sharing partners</p> <p>Sample Size: Index patients: 160 Index patients interviewed: 106 Identified partners: 219</p> <p>Demographics: Index patients: <i>Age:</i> NR</p>	<p>How Ascertained: Databases of Kansas City Health Department</p> <p>Intervention Duration: 12 months</p> <p>Results: Overall: Partner index ratio: 2.1 % partners notified: 78.5% % partners tested, all notified: 68% % partners tested, among HIV- or unknown: 90.0% % partners tested positive: 20.5% NNTInew: 4.4 NNTIany: 1.6</p>

Study	Intervention Characteristics	Population Characteristics	Results
	<p>Persons tested positive had their medical records monitored to see if they returned to clinic for any reason; these individuals received additional counseling stressing methods of minimizing the risk of transmission of HIV</p> <p>Clients who were HIV seropositive or who needed to return to the clinic because of another disease received person-to-person post-test counseling by public health advisors</p> <p>Comparison: Partner services vs. no service</p>	<p><i>Sex:</i> 92% male; 8% female <i>Race/Ethnicity:</i> 38% white; 59% Black/African American; 3% Hispanic/Latino <i>Transmission category:</i> 69% MSM; 8% IDU; 3% others; 7% no risk identified <i>SES:</i> NR <i>Education:</i> NR <i>Insurance:</i> NR</p>	<p>Repeated testing: # partners tested negative: 93 # partners tested negative and offered testing: 69 # partners accepted testing: 30 # partners tested positive: 2 % partners retested positive: 6.7%</p>
<p>Author, Year: Malave et al., 2008</p> <p>Study Design: Cross-sectional</p> <p>Suitability of Design: Least</p> <p>Quality of Execution: Fair</p>	<p>Location: New York City, New York, US</p> <p>Urbanicity: urban</p> <p>Setting: New York City Department of Hygiene and Mental Health-run (DOHMH) STD clinics</p> <p>Type of Referral: Provider referral</p> <p>Notification Delivery Methods: NR</p> <p>Additional Services Offered: HIV testing for partners</p> <p>Comparison: Provider referral (NYC DOHMH-run STD clinic) vs. self and third-party referral (non-STD clinic)</p>	<p>Eligibility Criteria: Index patients: patients newly diagnosed with HIV in one of the 10 NYC DOHMH-run STD clinics Partners: sexual or needle sharing partners</p> <p>Sample Size: Index patients: 3666 Index patients interviewed: 719 Identified partners: 925</p> <p>Demographics: Index patients: <i>Age group:</i> 24% aged 13-29; 32% aged 30-39; 29% aged 40-49; 15% aged 50 or more <i>Sex:</i> 69% male; 31% female <i>Race/Ethnicity:</i> 15% white; 53% Black/African American; 29% Hispanic/Latino; 3% other or unknown <i>Transmission category:</i> 37% MSM; 10% IDU; 21% heterosexual contact; 33% other or unknown <i>SES, neighborhood income:</i> 60% with income at least 20% below poverty line</p>	<p>How Ascertained: NYC HIV/AIDS surveillance registry; NYC DOHMH</p> <p>Intervention Duration: 12 months</p> <p>Results: STD clinic: % partners notified: 70.9% % partners tested: 69.2% % partners tested positive: 27.0%</p> <p>Non-STD clinic: % partners notified: 28.3% % partners tested: 47.4% % partners tested positive: 22.2%</p>

Study	Intervention Characteristics	Population Characteristics	Results
<p>Author, Year: Marcus et al., 2009</p> <p>Study Design: Pre-post only</p> <p>Suitability of Design: Least</p> <p>Quality of Execution: Fair</p>	<p>Location: San Francisco, California, US</p> <p>Urbanicity: urban</p> <p>Setting: San Francisco Department of Public Health (SFDPH)</p> <p>Type of Referral: Provider referral</p> <p>Notification Delivery Methods: NR</p> <p>Additional Services Offered: HIV testing of partners</p> <p>Comparison: Partner services vs. no service Time between diagnosis and interview within 2 weeks vs. more than 2 weeks</p>	<p><i>Education:</i> NR <i>Insurance:</i> NR</p> <p>Eligibility Criteria: Index patients: county residents with newly diagnosed HIV infection within study period Partners: recent sexual partners</p> <p>Sample Size: Index patients: 615 Index patients interviewed: 481 Identified partners: 419</p> <p>Demographics: Index patients: <i>Age group:</i> 35% aged less than 30; 37% aged 30-39; 22% aged 40-49; 6% aged 50 or more <i>Sex:</i> 95% male; 4% female; 1% transgender <i>Race/Ethnicity:</i> NR <i>Transmission category:</i> NR <i>SES:</i> NR <i>Education:</i> NR <i>Insurance:</i> NR</p>	<p>How Ascertained: Data from SFDPH</p> <p>Intervention Duration: 54 months</p> <p>Results: Overall: Partner index ratio: 0.9 % partners notified: 74.7% % partners tested, all notified: 63.9% % partners tested, among HIV- or unknown: 91.7% % partners tested positive: 22.0% NNTInew: 10.9 NNTIany: 3.5</p> <p>Interviews conducted within 2 weeks of diagnosis yielded more new positive cases (NNTInew=8) than those conducted more than 2 weeks after diagnosis (NNTInew=21)</p>
<p>Author, Year: Pattman et al., 1993</p> <p>Study Design: Pre-post only</p> <p>Suitability of Design: Least</p> <p>Quality of Execution: Fair</p>	<p>Location: New Castle, UK</p> <p>Urbanicity: urban</p> <p>Setting: Genitourinary medicine department in Newcastle upon Tyne, covering residents of Newcastle, Northumberland, and Gateshead</p> <p>Type of Referral: Provider and self-referral</p> <p>Notification Delivery Methods: health advisers approached the partner by telephone, letter or personal visit</p> <p>Additional Services Offered: NR</p> <p>Comparison:</p>	<p>Eligibility Criteria: Index patients: all persons tested positive within the catchment area during study period Partners: sexual or needle sharing partners</p> <p>Sample Size: Index patients: 114 Index patients interviewed: 114 Identified partners: NR</p> <p>Demographics: Index patients: <i>Age:</i> NR <i>Sex:</i> 94% male; 6% female <i>Race/Ethnicity:</i> NR <i>Transmission category:</i> NR <i>SES:</i> NR</p>	<p>How Ascertained: Records from Genitourinary medicine department in Newcastle upon Tyne</p> <p>Intervention Duration: 90 months</p> <p>Results: Overall: % partners tested positive: 31.6% NNTInew: 4.6</p>

Study	Intervention Characteristics	Population Characteristics	Results
<p>Author, Year: Pavia et al., 1993</p> <p>Study Design: Pre-post only</p> <p>Suitability of Design: Least</p> <p>Quality of Execution: Fair</p>	<p>Partner services vs. no service</p> <p>Location: Salt Lake City, Utah, US</p> <p>Urbanicity: mix of urban and rural</p> <p>Setting: Utah Department of Health</p> <p>Type of Referral: Provider and self-referral</p> <p>Notification Delivery Methods: partners were notified in a face-to-face interview and counseled for 30 to 90 minutes</p> <p>Additional Services Offered: For index patients, additional posttest counseling and referral for medical follow-up and community-based services; partners were referred to a counseling and testing site and received additional pre- and posttest counseling</p> <p>Comparison: Partner services vs. no service</p>	<p><i>Education:</i> NR <i>Insurance:</i> NR</p> <p>Eligibility Criteria: Index patients: all persons in Utah who were reported with HIV infection or AIDS during study period Partners: sexual or needle sharing partners</p> <p>Sample Size: Index patients: NR Index patients interviewed: 308 Identified partners: 807</p> <p>Demographics: Index patients: <i>Age, median:</i> 32 <i>Sex:</i> 89% male; 11% female <i>Race/Ethnicity:</i> 84% white; 8% Black/African American; 7% Hispanic/Latino <i>Transmission category:</i> 62% MSM; 18% IDU; 6% MSM/IDU 9% heterosexual contact; 4% other <i>SES:</i> NR <i>Education:</i> NR <i>Insurance:</i> NR</p>	<p>How Ascertained: Public records from public health and prison systems</p> <p>Intervention Duration: 24 months</p> <p>Results: Overall: Partner index ratio: 2.6 % partners notified: 73.6% % partners tested, all notified: 47.0% % partners tested, among HIV- or unknown: 63.4% % partners tested positive: 14.0% NNTInew: 7.9 NNTIany: 1.6</p>
<p>Author, Year: Ramstedt et al., 1990</p> <p>Study Design: Pre-post only</p> <p>Suitability of Design: Least</p> <p>Quality of Execution: Fair</p>	<p>Location: Gothenburg, Sweden</p> <p>Urbanicity: urban</p> <p>Setting: infectious disease department and county health system</p> <p>Type of Referral: Provider and self-referral</p> <p>Notification Delivery Methods: partners received letters asking them to call or write to arrange a face-to-face meeting to deliver the notification</p> <p>Additional Services Offered:</p>	<p>Eligibility Criteria: Index patients: all persons tested positive for HIV in Gothenburg, Sweden, during study period Partners: sexual or needle sharing partners</p> <p>Sample Size: Index patients: 91 Index patients interviewed: 91 Identified partners: 188</p> <p>Demographics: Index patients: <i>Age:</i> NR <i>Sex:</i> 91% male; 9% female</p>	<p>How Ascertained: NR</p> <p>Intervention Duration: 48 months</p> <p>Results: Overall: Partner index ratio: 2.1 % partners tested positive: 11.2% NNTInew: 4.3</p>

Study	Intervention Characteristics	Population Characteristics	Results
	HIV testing of partners Comparison: Partner services vs. no service	<i>Race/Ethnicity:</i> NR <i>Transmission category:</i> 70% MSM; 6% IDU; 7% heterosexual contact; 1% unknown <i>SES:</i> NR <i>Education:</i> NR <i>Insurance:</i> NR	
Author, Year: Renaud 2011 Study Design: Pre-post only Suitability of Design: Least Quality of Execution: Fair	Location: New York City, New York, US Urbanicity: urban Setting: New York City Department of Health and Mental Hygiene (DOHMH), FSU Type of Referral: Provider referral Notification Delivery Methods: partners notified in person Additional Services Offered: HIV testing offered to all partners in the field; linkage to medical care for partners who tested positive Comparison: Partner services vs. no service Field testing for partners vs. clinic-based testing for partners	Eligibility Criteria: Index patients: persons recently diagnosed with HIV infection Partners: sexual or needle sharing partners Sample Size: Index patients: NR Index patients interviewed: NR Identified partners: NR Demographics: Index patients: <i>Age:</i> NR <i>Sex:</i> NR <i>Race/Ethnicity:</i> NR <i>Transmission category:</i> NR <i>SES:</i> NR <i>Education:</i> NR <i>Insurance:</i> NR	How Ascertained: FSU and DOHMH records Intervention Duration: 12 months Results: Overall: % partners tested, all notified: 52.5% % partners tested positive: 11.6% Field testing of HIV (point-of-care testing): % partners tested, all notified: 76.4% % partners tested positive: 9.3% Clinic-based testing of HIV (referred testing): % partners tested, all notified: 52.5% % partners tested positive: 11.6%
Author, Year: Rutherford 1991 Study Design: Pre-post only Suitability of Design: Least Quality of Execution: Fair	Location: San Francisco, California, US Urbanicity: urban Setting: San Francisco Department of Public Health (SFDPH) Type of Referral: Provider referral Notification Delivery Methods: NR Additional Services Offered:	Eligibility Criteria: Index patients: persons diagnosed with HIV or AIDS and reported to SFDPH, living within San Francisco Partners: sexual partners Sample Size: Index patients: 59 Index patients interviewed: 51 Identified partners: 79 Demographics: Index patients:	How Ascertained: Public health department records Intervention Duration: 24 months Results: Overall: Partner index ratio: 2.6 % partners notified: 43.7% % partners tested, all notified: 57.6% % partners tested positive: 20.6% NNTInew: 7.3

Study	Intervention Characteristics	Population Characteristics	Results
	<p>HIV testing of partners and contacted again 2 weeks later for results reporting</p> <p>Comparison: Partner services vs. no service</p>	<p><i>Age, mean:</i> 38 for males; 42 for females <i>Sex:</i> 88% male; 12% female <i>Race/Ethnicity:</i> 61% white <i>Transmission category:</i> 63% MSM; 18% IDU; 12% heterosexual contact; 6% unknown <i>SES:</i> NR <i>Education:</i> NR <i>Insurance:</i> NR</p>	
<p>Author, Year: Spencer 1993</p> <p>Study Design: Cross-sectional</p> <p>Suitability of Design: Least</p> <p>Quality of Execution: Good</p>	<p>Location: Colorado, statewide, US</p> <p>Urbanicity: mix of urban and rural</p> <p>Setting: Colorado Department of Public Health</p> <p>Type of Referral: Provider referral</p> <p>Notification Delivery Methods: NR</p> <p>Additional Services Offered: Partner eligible for new or repeat counselling and or testing if the person had not previously been counselled or tested or if the exposure to the index case indicated unsafe behavior had persisted despite prior counselling and or testing</p> <p>Comparison: Partner services vs. no service Provider referral vs. self-referral</p>	<p>Eligibility Criteria: Index patients: individuals tested positive for HIV in Colorado during study period, prioritized individuals who were unlikely to have recognized their risk of infection, those with high transmission potential due to their continued practice of unsafe behaviors Partners: sexual or needle sharing partners</p> <p>Sample Size: Index patients: 231 Index patients interviewed: 226 Identified partners: 239</p> <p>Demographics: Index patients: <i>Age:</i> NR <i>Sex:</i> 85% male; 15% female <i>Race/Ethnicity:</i> 70% white; 14% Black/African American; 15% Hispanic/Latino; 1% other <i>Transmission category:</i> NR <i>SES:</i> NR <i>Education:</i> NR <i>Insurance:</i> NR</p>	<p>How Ascertained: Data from clinic and health department records</p> <p>Intervention Duration: 12 months</p> <p>Results: Overall: Partner index ratio: 1.0 % partners notified: 78.7% % partners tested, all notified: 42.6% % partners tested positive: 21.3% NNTInew: 13.6</p> <p>Provider referral: % partners notified: 39.4%</p> <p>Self-referral: % partners notified: 28.8%</p>
<p>Author, Year: Torrone 2010</p> <p>Study Design: Cross-sectional</p>	<p>Location: North Carolina, statewide, US</p> <p>Urbanicity: mix of urban and rural</p> <p>Setting: North Carolina Partner Counseling and Referral Services</p>	<p>Eligibility Criteria: Index patients: women aged 18-30 years who were newly diagnosed with HIV in North Carolina during study period Partners: sexual or needle sharing partners</p>	<p>How Ascertained: Data abstracted from partner counseling and referral services records</p> <p>Intervention Duration: 48 months</p> <p>Results:</p>

Study	Intervention Characteristics	Population Characteristics	Results
<p>Suitability of Design: Least</p> <p>Quality of Execution: Fair</p>	<p>Type of Referral: Provider referral</p> <p>Notification Delivery Methods: NR</p> <p>Additional Services Offered: HIV testing, either in clinic or in field</p> <p>Comparison: Pregnant vs. non-pregnant women</p>	<p>Sample Size: Index patients: NR Index patients interviewed: 551 Identified partners: 1940</p> <p>Demographics: Index patients: <i>Age group:</i> 45% aged 26-30; 55% aged 18-25 <i>Sex:</i> 100% female <i>Race/Ethnicity:</i> 23% white; 74% Black/African American; 11% Hispanic/Latino; 89% non-Hispanic/Latino; 4% other <i>Transmission category:</i> 9% exchanged sex for drugs or money; 35% used recreational drugs; 3% IDU; 3% had sex with partners with IDU; 6% had sex with partners with HIV infection <i>SES:</i> NR <i>Education:</i> NR <i>Insurance:</i> NR</p>	<p>Pregnant women: Partner index ratio: 1.8 % partners notified: 71.8% % partners tested, all notified: 58.4% % partners tested, among HIV- or unknown: 65.8% % partners tested positive: 24.0% NNTInew: 5.5 NNTIany: 3.1 Days between diagnosis and partners tested positive, mean: 63</p> <p>Non-pregnant women: Partner index ratio: 1.7 % partners notified: 70.4% % partners tested, all notified: 45.8% % partners tested, among HIV- or unknown: 59.3% % partners tested positive: 18.4% NNTInew: 10.1 NNTIany: 2.7 Days between diagnosis and partners tested positive, mean: 122</p>
<p>Author, Year: Tsega 2012</p> <p>Study Design: Cross-sectional</p> <p>Suitability of Design: Least</p> <p>Quality of Execution: Fair</p>	<p>Location: New York City, New York, US</p> <p>Urbanicity: urban</p> <p>Setting: NYC Department of Health and Mental Hygiene (DOHMH)</p> <p>Type of Referral: Provider referral</p> <p>Notification Delivery Methods: NR</p> <p>Additional Services Offered: HIV testing of partners</p> <p>Comparison: Index patients were categorized into 3 mutually exclusive groups based on birthplace: US and its territories</p>	<p>Eligibility Criteria: Index patients: people newly diagnosed with HIV infection who were interviewed for partner services from July 2006 to December 2008 whose self-reported race or ethnicity is non-Hispanic Black Partners: sexual or needle sharing partners</p> <p>Sample Size: Index patients: NR Index patients interviewed: 1560 Identified partners: 1521</p> <p>Demographics: Index patients: <i>Age, mean:</i> 39 <i>Sex:</i> 55% male; 45% female; 0.9% transgender</p>	<p>How Ascertained: Data collected by the DOHMH HIV FSU was used for this analysis NYC HIV/AIDS Reporting System (HARS), a population-based registry of all persons diagnosed with AIDS in NYC since 1981 and HIV since 2000</p> <p>Intervention Duration: 29 months</p> <p>Results: Birthplace in US and its territories: Partner index ratio: 1.0 % partners knowing their HIV+ status: 20.4% % partners notified: 33.1% % partners tested, among HIV- or unknown: 70.7% % partners tested positive: 7.9% NNTInew: 66</p>

Study	Intervention Characteristics	Population Characteristics	Results
	<p>Sub-Saharan Africa The Caribbean</p>	<p><i>Race/Ethnicity:</i> 100% Black/African American <i>Transmission category:</i> 22% heterosexual contact; 6% IDU; 5% MSM; 1% MSM/IDU; 1% perinatal infection; 49% no identified risk <i>SES:</i> NR <i>Education:</i> NR <i>Insurance:</i> NR</p>	<p>NNTIany: 4.4</p> <p>Birthplace in Sub-Saharan Africa: Partner index ratio: 0.7 % partners knowing their HIV+ status: 11.7% % partners notified: 43.9% % partners tested, among HIV- or unknown: 79.1% % partners tested positive: 8.8% NNTInew: 56 NNTIany: 11</p> <p>Birthplace in US and its territories: Partner index ratio: 1.1 % partners knowing their HIV+ status: 12.2% % partners notified: 38.6% % partners tested, among HIV- or unknown: 58.3% % partners tested positive: 7.9% NNTInew: 57 NNTIany: 6</p>
<p>Author, Year: Udeagu 2012</p> <p>Study Design: Pre-post only</p> <p>Suitability of Design: Least</p> <p>Quality of Execution: Fair</p>	<p>Location: New York City, New York, US</p> <p>Urbanicity: urban</p> <p>Setting: Department of Health and Mental Hygiene (DOHMH) partnered with 8 hospitals serving neighborhoods with high rates of late HIV diagnosis, high HIV prevalence, and mortality</p> <p>Type of Referral: Provider referral (DIS-assisted)</p> <p>Notification Delivery Methods: DIS notified partners in-person</p> <p>Additional Services Offered: DOHMH offered field-testing using an oral test following partner notification to remove barriers to testing and negative test documentation</p>	<p>Eligibility Criteria: Index patients: persons diagnosed with HIV infection during the study period at the participating hospitals Partners: sexual or needle sharing partners</p> <p>Sample Size: Index patients: NR Index patients interviewed: 1280 Identified partners: 736</p> <p>Demographics: Index patients: <i>Age group:</i> 1% aged 0-12; 4% aged 13-19; 22% aged 20-29; 24% aged 30-39; 28% aged 40-49; 15% aged 50-59; 7% aged 60 or more <i>Sex:</i> 60% male; 40% female <i>Race/Ethnicity:</i> 2% white; 66% Black/African American; 1%</p>	<p>How Ascertained: Data abstracted from Provider Report Form and FSU database</p> <p>Intervention Duration: 30 months</p> <p>Results: Provider referral: Partner index ratio: 0.9 % partners notified: 40.9% % partners tested, all notified: 61.3% % partners tested positive: 12.8%</p> <p>Self and third-party referral: Partner index ratio: 0.3 % partners notified: 27.6% % partners tested, all notified: 57.1% % partners tested positive: 0%</p>

Study	Intervention Characteristics	Population Characteristics	Results
	<p>DIS assisted with appointment scheduling, providing transportation to appointments when needed</p> <p>Exposed partners tested HIV positive following notification and testing were linked to medical care</p> <p>Comparison: Provider vs. self and third-party referral</p>	<p>Asian/Pacific Islander; 0.2% American Indian/Alaska Native; 31% Hispanic/Latino; 0.2% other <i>Transmission category:</i> 21% MSM; 7% IDU; 33% heterosexual contact; 1% perinatal; 31% unknown <i>SES:</i> NR <i>Education:</i> NR <i>Insurance:</i> NR</p>	
<p>Author, Year: Udeagu 2014a</p> <p>Study Design: Cross-sectional</p> <p>Suitability of Design: Least</p> <p>Quality of Execution: Fair</p>	<p>Location: New York City, New York, US</p> <p>Urbanicity: urban</p> <p>Setting: Department of Health and Mental Hygiene (DOHMH) FSU</p> <p>Type of Referral: Provider referral (DIS-assisted)</p> <p>Notification Delivery Methods: contact with partners through mail, telephone calls, field visits, email, or text message to mobile numbers; notification was delivered in-person whenever possible, or through email and text message if meeting in-person was not possible</p> <p>Additional Services Offered: HIV testing in the field or referred to STD clinic or HIV testing-site</p> <p>Comparison: Traditional partner services (contact by mail, telephone, field visits) vs. internet partner services (contact by email) vs. text message partner services (contact by text messages)</p>	<p>Eligibility Criteria: Index patients: persons newly diagnosed with HIV infection Partners: sex, needle-sharing, or social network partners of index patients</p> <p>Sample Size: Index patients: NR Index patients interviewed: 1845 Identified partners: 3247</p> <p>Demographics: Index patients: <i>Age group:</i> 7% aged 13-19; 34% aged 20-29; 26% aged 30-39; 20% aged 40-49; 13% aged 50 or more <i>Sex:</i> 67% male; 33% female <i>Race/Ethnicity:</i> 10% white; 48% Black/African American; 39% Hispanic/Latino; 3% other or unknown <i>Transmission category:</i> NR <i>SES:</i> NR <i>Education:</i> NR <i>Insurance:</i> NR</p>	<p>How Ascertained: Data abstracted from FSU database</p> <p>Intervention Duration: 12 months</p> <p>Results: Internet partner service: Partner index ratio: 3.8 % partners notified: 40.7% % partners tested, all notified: 27.7% % partners tested, among HIV- or unknown: 33.7% % partners tested positive: 9.7% NNTInew: 24.3 NNTIany: 3.2 Days between initial contact attempt to closing investigation, mean: 13</p> <p>Text message partner service: Partner index ratio: 2.1 % partners notified: 77.4% % partners tested, all notified: 36.8% % partners tested, among HIV- or unknown: 45.1% % partners tested positive: 4.8% NNTInew: 35.2 NNTIany: 3.1 Days between initial contact attempt to closing investigation, mean: 16</p> <p>Traditional partner service: Partner index ratio: 1.6 % partners notified: 69.2%</p>

Study	Intervention Characteristics	Population Characteristics	Results
			% partners tested, all notified: 44.6% % partners tested, among HIV- or unknown: 68.5% % partners tested positive: 13.2% NNTInew: 15.1 NNTIany: 2.2 Days between initial contact attempt to closing investigation, mean: 23
<p>Author, Year: Udeagu 2014b</p> <p>Study Design: Cross-sectional</p> <p>Suitability of Design: Least</p> <p>Quality of Execution: Fair</p>	<p>Location: New York City, New York, US</p> <p>Urbanicity: urban</p> <p>Setting: Department of Health and Mental Hygiene (DOHMH) FSU</p> <p>Type of Referral: Provider referral</p> <p>Notification Delivery Methods: notification to partner delivered either in person or over the phone</p> <p>Additional Services Offered: Point-of-care HIV testing or referral to STD clinic or HIV testing-site</p> <p>Comparison: Notification delivered in-person vs. by telephone</p>	<p>Eligibility Criteria: Index patients: persons newly diagnosed with HIV infection Partners: sex, needle-sharing, or social network partners of index patients, notified during evaluation period</p> <p>Sample Size: Index patients: NR Index patients interviewed: NR Identified partners: 8224</p> <p>Demographics: Index patients: <i>Age:</i> NR <i>Sex:</i> NR <i>Race/Ethnicity:</i> NR <i>Transmission category:</i> NR <i>SES:</i> NR <i>Education:</i> NR <i>Insurance:</i> NR</p>	<p>How Ascertained: Data abstracted from FSU database</p> <p>Intervention Duration: 48 months</p> <p>Results: Partner notification in person: % partners tested, among HIV- or unknown: 81.0% % partners tested positive: 10.0%</p> <p>Partner notification by phone: % partners tested, among HIV- or unknown: 40.0% % partners tested positive: 11.0%</p>
<p>Author, Year: Wykoff 1991</p> <p>Study Design: Pre-post only</p> <p>Suitability of Design: Least</p> <p>Quality of Execution: Fair</p>	<p>Location: South Carolina, US</p> <p>Urbanicity: rural</p> <p>Setting: six-county health district with a population of 180,000 in a rural area</p> <p>Type of Referral: Provider referral Self-referral available if index patients chose the option</p> <p>Notification Delivery Methods: NR</p>	<p>Eligibility Criteria: Index patients: persons diagnosed with HIV infection residing within the six-county area Partners: sexual or needle sharing partners</p> <p>Sample Size: Index patients: 119 Index patients interviewed: 91 Identified partners: 485</p> <p>Demographics:</p>	<p>How Ascertained: NR</p> <p>Intervention Duration: 30 months</p> <p>Results: Overall: Partner index ratio: 5.3 % partners notified: 59.8% % partners tested, all notified: 96.6% % partners tested positive: 14.6% NNTInew: 2.2</p> <p>Repeated testing:</p>

Study	Intervention Characteristics	Population Characteristics	Results
	<p>Additional Services Offered: Post-test counseling sessions to review test results and reinforce educational message</p> <p>Partners tested positive were seen by clinic social worker, scheduled for additional follow-up education and support sessions</p> <p>Partners tested negative for HIV were encouraged to return at 6m intervals for educational reinforcement and follow-up testing</p> <p>Comparison: Partner services vs. no service</p>	<p>Index patients: <i>Age:</i> NR <i>Sex:</i> NR <i>Race/Ethnicity:</i> NR <i>Transmission category:</i> NR <i>SES:</i> NR <i>Education:</i> NR <i>Insurance:</i> NR</p>	<p># partners tested negative: 239 # partners retested at 6 months: 72 # partners tested positive at 6 months: 5 % tested positive at 6 months: 6.9% # partners retested at 12 months: 79 # partners tested positive at 6 months: 3 % tested positive at 6 months: 3.8%</p>