



NOTICE OF ADOPTION OF REGULATIONS

Revisions to Chapter 511-5-4 “Serologic Tests for Pregnant Women”

The Department of Public Health hereby adopts a new title, noted above, and amendments to Rule 511-5-4, previously titled “Serologic Test for Syphilis for Pregnant Women,” as provided in the Notice of Proposed Rulemaking issued on June 15, 2022. This action is taken pursuant to the Department’s authority under Georgia Code Sections 31-2A-6, 31-12-3 and 31-17-4.

In accordance with Georgia Code Section 31-5-1, the above-listed title change and amendments will take effect on August 31, 2022.

This 1st day of August, 2022.

Kathleen E. Toomey, M.D., M.P.H.
Commissioner
Georgia Department of Public Health



RESPONSE TO PUBLIC COMMENTS

Revisions to Chapter 511-5-4

“Serologic Tests for Pregnant Women”

The Georgia Department of Public Health (“Department” or “DPH”) received a public comment in response to the invitation for public comment found in the Notice of Proposed Rulemaking issued on June 15, 2022. The comment received was reviewed and considered by Department staff and the Commissioner of Public Health.

The Commissioner elected to adopt the rules as proposed on June 15, 2022, and the new rules will become effective on August 31, 2022.

The information below is provided as a response to the public comment.

Comment Received:

The commenter expressed concern that the proposed revisions to Chapter 511-5-4-.03 allow pregnant women to decline testing for syphilis, HIV, hepatitis B and/or hepatitis C without requiring that information on pregnant women who decline screening be shared with the Department. The commenter further noted that the Department needs this type of information in order to effectively track data associated with increases in congenital syphilis and perinatal HIV.

DPH Response:

The Department agrees that data on pregnant women who decline screening could be helpful for purposes of tracking. Currently there is no mechanism in Georgia law for reporting of this type of information. The Department appreciates the comment and will consider this suggestion moving forward as a potential opportunity for future improvements in the program.

**RULES OF THE
DEPARTMENT OF PUBLIC HEALTH**

**CHAPTER 511-5
HEALTH PROMOTION**

**511-5-4
SEROLOGIC TESTS FOR PREGNANT WOMEN**

TABLE OF CONTENTS

511-5-4-.01	Purpose
511-5-4-.02	Definitions
511-5-4-.03	Provisions

Rule 511-5-4-.01 Purpose

The purpose of this Rule is to detect the presence of certain infectious diseases in a pregnant or postpartum woman and provide appropriate treatment for the woman and baby.

Authority: O.C.G.A. §§ 31-2A-6, 31-12-3 and 31-17-4.

Rule 511-5-4-.02 Definitions

Unless a different meaning is required by the context, the following terms as used in these Rules shall have the meaning hereinafter respectively ascribed to same:

- (a) "Standard serologic test for syphilis" means a test designed to detect evidence of syphilis.
- (b) "Standard serologic test for hepatitis B" means a test designed to detect evidence of hepatitis B surface antigen (HBsAg).
- (c) "Standard serologic test for hepatitis C" means a test designed to detect evidence of hepatitis C. This definition includes an HCV-antibody test with reflect HCV RNA polymerase chain reaction (PCR) test.
- (d) "Standard serologic test for HIV" means a test designed to detect evidence of HIV.
- (e) "Department" means the Georgia Department of Public Health.

Authority: O.C.G.A. §§ 31-2A-6, 31-12-3 and 31-17-4.

Rule 511-5-4-.03 Provisions

(1) Unless the patient declines screening, every pregnant woman shall have a blood specimen taken as prescribed herein for a standard serologic test for syphilis, a standard serologic test for HIV, a standard serologic test for hepatitis B and a standard serologic test for hepatitis C.

(2) Every health care provider in this state providing prenatal care to a pregnant woman, or delivering or attending a woman just delivered, shall take or cause to be taken a venous blood specimen for submission to a clinical laboratory for a standard serologic test for syphilis, a standard serologic test for HIV, a standard serologic test for hepatitis B and a standard serologic test for hepatitis C, as follows:

- (a) At the initial visit to the health care provider for prenatal care, a standard serologic test for:
 - 1. Syphilis;
 - 2. HIV;
 - 3. Hepatitis B; and

4. Hepatitis C.

(b) In the third trimester in the following circumstances:

1. A standard serologic test for syphilis, as required in O.C.G.A. Section 31-17-4.2. The specimen shall be taken early during the third trimester, ideally at 28-32 weeks of gestation;
2. A standard serologic test for HIV, as required in O.C.G.A. Section 31-17-4.2; and
3. A standard serologic test for hepatitis C if the woman has known or potential exposures to hepatitis C.

(c) As soon as possible upon admission to the hospital or birth facility for delivery:

1. A standard serologic test for syphilis, for women not tested prenatally, who deliver a stillborn infant, are at high risk for syphilis, or as long as Georgia is classified by the Centers for Disease Control and Prevention as a state with high syphilis morbidity. In accordance with O.C.G.A. Section 31-17-4.2, if a syphilis test was conducted in the third trimester, and the woman does not disclose activities posing a risk for syphilis infection more recently, this test is not required;
2. A standard serologic test for HIV, for women not tested prenatally and for women at increased risk for HIV infection who were not tested in the third trimester. In accordance with O.C.G.A. Section 31-17-4.2, if an HIV test was conducted in the third trimester, and the woman does not disclose activities posing a risk for HIV infection more recently, this test is not required;
3. A standard serologic test for Hepatitis B, for women not tested prenatally, with signs or symptoms of hepatitis, or at high risk for hepatitis B; and
4. A standard serologic test for Hepatitis C, for women not tested prenatally.

(3) Patients shall be notified of all tests to be conducted and shall have the opportunity to refuse the test.

Authority: O.C.G.A. §§ 31-2A-6, 31-12-3 and 31-17-4.