

JUVENILE MATTERS
NOTICE TO AND INFORMATION
FOR VICTIM RE: COURT ORDERED
HIV/AIDS TEST OF CHILD

JD-JM-186 New 10-10
C.G.S. §§ 54-102a, 54-102b, 54-102c
P.A. 10-43 §41-42

STATE OF CONNECTICUT
SUPERIOR COURT
www.jud.ct.gov



Instructions To Clerk

1. Whenever the Court orders a test of the child pursuant to C.G.S. § 54-102a or 54-102b, provide the victim with this form and the informational packet provided by the Department of Public Health.
2. If the Court orders disclosure of the test results to the victim, also provide the victim with form JD-JM-187, Victim's Designation of Receiver For child's HIV/AIDS Test Results.
3. Keep a copy of this form in the court file.

Name of child	Date of court order	Docket number
---------------	---------------------	---------------

Name and address of victim

□ □ □ □

Notice To and Information for Victim About Court Ordered HIV/AIDS Test Of Child

Connecticut law allows the Court to order the child in a sexual assault case to be tested for venereal diseases (*also known as "sexually transmitted diseases" or "STD's"*) and HIV/AIDS. Although you, as the victim, may ask the Court to order the child tested for HIV/AIDS, the Court may order the child tested for HIV/AIDS **without** a request from you. When the court orders an HIV/AIDS test of the child, without a request from the victim, the court may or may not order that results of the child's HIV/AIDS test be disclosed to the victim.

Connecticut General Statutes sections 54-102a and 54-102b as amended by P.A. 10-43 when a court orders that the child in a sexual assault case be tested for HIV/AIDS, the law (*Connecticut General Statutes section 54-102c*) requires the Court to give the victim the following information:

1. Educational materials about HIV/AIDS (human immunodeficiency virus and acquired immune deficiency syndrome) developed by the Department of Health.
2. Information about and referral to HIV counseling and testing for sexual assault victims provided through sites funded by the Department of Public Health; and
3. Referrals and information about rape crisis centers.

On the date of court order shown above, the Court ordered the child named above to be tested for HIV/AIDS. The Court further ordered that the results of the test:

Not be disclosed to you
 Be disclosed to you upon conviction as delinquent *
 Be disclosed to you as soon as possible *

* *If the court ordered the child's HIV/AIDS test results be disclosed to you (either immediately or upon conviction), the law allows you to choose a health care provider or an HIV counseling and testing site, funded by the Department of Public Health, to receive the child's HIV/AIDS test results and provide the information to you. This option allows you the opportunity to receive the child's HIV/AIDS test results from a trained professional in a supportive environment where you can discuss the information. Form JD-JM-187, Victim's Designation of Receiver For Child's HIV/AIDS Test Results is enclosed for this purpose. If you want the court to send the child's test results to a health care provider or an HIV counseling and testing site, fill out the form, return the original and a copy to the clerk of the Court, and keep a copy for your records.*

Enclosed are: a brochure about HIV/STD's and sexual assault, a list of HIV counseling and testing sites funded by the Department of Public Health, and information about sexual assault crisis services that includes a list of rape crisis centers throughout the state.

You may want to discuss the enclosed information and your concerns about HIV/AIDS with a sexual assault counselor, an HIV counselor, your health care provider, or a court-based OVS Victim Services Advocate. Help is available. You do not have to go through this alone. The services that are provided by community-based sexual assault crisis services are free and confidential. The services provided by the Department of Public Health funded HIV counseling and testing sites are free of charge. Counseling and discussing the child's test results and your own testing options are confidential. If you choose to be tested yourself, discuss with an HIV counselor your options for anonymous or confidential testing.

Signed (Authorized Court Personnel)	Print name of Clerk	Date
-------------------------------------	---------------------	------