PrEP Home Checklist v1.0

Every Visit
- Screening for signs/symptoms of acute HIV and other STIs
- Risk Reduction Counseling
- Appropriate referrals and follow-ups (SW, Pharmacy, et al.)
- For those on PrEP:
  - Assessment of PrEP adherence, side effects, ongoing indication for continued use
  - Appropriate labs for visit depending on risk factors and/or acute STI symptoms
  - Patients on PrEP require visits at least every 3 months
  - DO NOT write PrEP Rx for more than 90 days at a time

Baseline Visit
- Social Work Visit
- Pharmacy Visit
- Prescriber Visit
  - Focused risk assessment
  - Screening for signs/symptoms of acute HIV and other STIs
  - Full history and physical
- Introduction to PrEP: Indications, Data
- Targeted Risk Reduction Counseling
- Labs:
  - HIV Ag/Ab
  - RPR
  - Urine Gc/Chl NAAT
  - Hep A IgG
  - Hep BsAg, HepBsAb, HepBcAb
  - Hep C Ab
  - Urinalysis
  - BMP
  - All females of reproductive potential: urine pregnancy test
  - MSM: oropharyngeal AND rectal Gc/Chl NAAT
  - Concern for acute HIV or HCV: HIV or HCV viral load testing
- Discharge with follow-up to be scheduled within one week after lab collection
- PrEP informational handout(s) to be provided to patient
- Referral to appropriate medical care i.e. PCP, ob/gyn, et al.
**First Follow-Up Visit**

- Social Work F/U
- Pharmacy F/U
- Prescriber Appointment
  - Screening for signs/symptoms of acute HIV and other STIs
  - Review of baseline labs
  - Reassessment of PrEP readiness and eligibility
- For those who are “PrEP”ared:
  - Review of PrEP usage, side effects, monitoring
  - Patient-Provider Contract review and signing
  - Rx: Truvada; one tablet daily; #30; 0 refills
- Targeted Risk Reduction Counseling
- Appropriate treatment for diagnosed STIs
- Immunize appropriately if Hep A or Hep B non-immune
- Labs: None required
- Discharge with follow-up to be scheduled in 30 days
- Provide copy of patient-provider contract to patient
- Referral to appropriate medical care

**30 Day Follow-Up:**

- Social Work F/U
- Pharmacy F/U
- Prescriber Appointment
  - Screening for signs/symptoms of acute HIV and other STIs
  - Interval targeted social history
  - Review of PrEP indication, usage, side effects
- For those who remain “PrEP”ared:
  - Rx: Truvada; one tablet daily; #60; 0 refills
  - Continue monthly refills for those at risk for non-adherence or who require closer monitoring
- Targeted Risk Reduction Counseling
- Immunize appropriately if Hep A or Hep B non-immune
- Labs: None required
  - Consider BMP in those with known renal disease OR at risk for development of renal disease
- Discharge with follow-up to be scheduled in 60 days
- Referral to appropriate medical care
3 Month Follow-Up:

- Social Work F/U
- Pharmacy F/U
- Prescriber Appointment
  - Screening for signs/symptoms of acute HIV and other STIs
  - Interval targeted social history
  - Review of PrEP indication, usage, side effects
- For those who remain “PrEP”ared:
  - Rx: Truvada; one tablet daily; #90; 0 refills
  - Continue monthly refills for those at risk for non-adherence or who require closer monitoring
- Targeted Risk Reduction Counseling
- Immunize appropriately if Hep A or Hep B non-immune
- Labs:
  - HIV Ag/Ab
  - RPR
  - Urine Gc/Chl NAAT
  - BMP
  - All females of reproductive potential: urine pregnancy test
  - MSM: oropharyngeal AND rectal Gc/Chl NAAT
- Discharge with follow-up to be scheduled in 3 months
  - May schedule shorter follow-up in those who require closer monitoring
- Referral to appropriate medical care

6 Month Follow-Up:

- Social Work F/U
- Pharmacy F/U
- Prescriber Appointment
  - Screening for signs/symptoms of acute HIV and other STIs
  - Interval targeted social history
  - Review of PrEP indication, usage, side effects
- For those who remain “PrEP”ared:
  - Rx: Truvada; one tablet daily; #90; 0 refills
  - Continue monthly refills for those at risk for non-adherence or who require closer monitoring
- Targeted Risk Reduction Counseling
- Immunize appropriately if Hep A or Hep B non-immune
6 Month Follow-Up Ctd.

- Labs:
  - HIV Ag/Ab
  - RPR
  - Urine Gc/Chl NAAT
  - BMP
  - Patients with pre-existing renal disease or at risk for development of renal disease: Urinalysis
  - All females of reproductive potential: urine pregnancy test
  - MSM:
    - oropharyngeal AND rectal Gc/Chl NAAT
    - HCV Ab
- Discharge with follow-up to be scheduled in 3 months
  - May schedule shorter follow-up in those who require closer monitoring
  - Referral to appropriate medical care

9 Month Follow-Up

- Social Work F/U
- Pharmacy F/U
- Prescriber Appointment
  - Screening for signs/symptoms of acute HIV and other STIs
  - Interval targeted social history
  - Review of PrEP indication, usage, side effects
- For those who remain “PrEP”ared:
  - Rx: Truvada; one tablet daily; #90; 0 refills
  - Continue monthly refills for those at risk for non-adherence or who require closer monitoring
- Targeted Risk Reduction Counseling
- Immunize appropriately if Hep A or Hep B non-immune
- Labs:
  - HIV Ag/Ab
  - RPR
  - Urine Gc/Chl NAAT
  - BMP
  - All females of reproductive potential: urine pregnancy test
  - MSM: oropharyngeal AND rectal Gc/Chl NAAT
- Discharge with follow-up to be scheduled in 3 months and referrals as needed
12 Month Follow-Up:

- Social Work F/U
- Pharmacy F/U
- Prescriber Appointment
  - Screening for signs/symptoms of acute HIV and other STIs
  - Interval targeted social history
  - Review of PrEP indication, usage, side effects
- For those who remain “PrEP”ared:
  - Rx: Truvada; one tablet daily; #90; 0 refills
  - Continue monthly refills for those at risk for non-adherence or who require closer monitoring
- Targeted Risk Reduction Counseling
- Immunize appropriately if Hep A or Hep B non-immune
- Labs:
  - HIV Ag/Ab
  - RPR
  - Urine Gc/Chl NAAT
  - HCV Ab
  - BMP
  - Urinalysis
  - All females of reproductive potential: urine pregnancy test
  - MSM:
    - oropharyngeal AND rectal Gc/Chl NAAT
- Discharge with follow-up to be scheduled in 3 months and referrals as needed

Discontinuation of PrEP:

- Clear documentation of:
  - 1. Reason(s) for PrEP discontinuation
  - 2. Medication adherence prior to discontinuation
  - 3. Risk behaviors
- Labs:
  - HIV Ag/Ab
  - Any other lab work due that would otherwise be due at the visit
- Targeted Risk Reduction Counseling
- Immunize appropriately if Hep A or Hep B non-immune
- Discharge with appropriate referrals placed
Potential Candidates for PrEP (Adapted from NY State Guidelines)

- MSM who engage in unprotected anal intercourse
- Individuals who are in a serodiscordant sexual relationship with a known HIV-infected partner
- Male-to-female and female-to-male transgender individuals engaging in high-risk sexual behaviors
- Individuals engaging in transactional sex, such as sex for money, drugs, or housing
- IDU who report any of the following behaviors: sharing injection equipment (including to inject hormones among transgender individuals), injecting one or more times per day, injecting cocaine or methamphetamine, engaging in high-risk sexual behaviors
- Individuals who use stimulant drugs associated with high-risk behaviors, such as methamphetamine
- Individuals diagnosed with at least one anogenital sexually transmitted infection in the last year
- Individuals who have been prescribed non-occupational post-exposure prophylaxis (nPEP) who demonstrate continued high-risk behavior or have used multiple courses of nPEP

HIV Risk Assessment Tools

<table>
<thead>
<tr>
<th>HIRI-MSM Risk Index*</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 How old are you today (yrs)?</td>
<td>0-8</td>
</tr>
<tr>
<td>18-28 years</td>
<td>8</td>
</tr>
<tr>
<td>29-40 years</td>
<td>5</td>
</tr>
<tr>
<td>41-48 years</td>
<td>2</td>
</tr>
<tr>
<td>≥49 years</td>
<td>0</td>
</tr>
<tr>
<td>2 How many men have you had sex with in the last 6 months?</td>
<td>0-10</td>
</tr>
<tr>
<td>&gt;10 male partners</td>
<td>7</td>
</tr>
<tr>
<td>6-10 male partners</td>
<td>4</td>
</tr>
<tr>
<td>0-5 male partners</td>
<td>1-3</td>
</tr>
<tr>
<td>0 times</td>
<td>0</td>
</tr>
<tr>
<td>3 In the last 6 months, how many times did you have receptive anal sex (you were the bottom) with a man?</td>
<td>0-10</td>
</tr>
<tr>
<td>1 or more times</td>
<td>10</td>
</tr>
<tr>
<td>0 times</td>
<td>0</td>
</tr>
<tr>
<td>4 How many of your male sex partners were HIV positive?</td>
<td>0-8</td>
</tr>
<tr>
<td>&gt;1 positive partner</td>
<td>8</td>
</tr>
<tr>
<td>1 positive partner</td>
<td>4</td>
</tr>
<tr>
<td>&lt;1 positive partner</td>
<td>0</td>
</tr>
<tr>
<td>5 In the last 6 months, how many times did you have insertive anal sex (you were the top) with a man who was HIV positive?</td>
<td>0-6</td>
</tr>
<tr>
<td>5 or more times</td>
<td>6</td>
</tr>
<tr>
<td>0 times</td>
<td>0</td>
</tr>
<tr>
<td>6 In the last 6 months, have you used methamphetamines such as crystal or speed?</td>
<td>0-5</td>
</tr>
<tr>
<td>Yes</td>
<td>5</td>
</tr>
<tr>
<td>No</td>
<td>0</td>
</tr>
<tr>
<td>7 In the last 6 months, have you used poppers (amyl nitrate)?</td>
<td>0-3</td>
</tr>
<tr>
<td>Yes</td>
<td>3</td>
</tr>
<tr>
<td>No</td>
<td>0</td>
</tr>
<tr>
<td>Add down entries in right column to calculate total score</td>
<td>Total score</td>
</tr>
</tbody>
</table>

*To identify sexually active MSM in their practice, we recommend clinicians ask all their male patients a routine question: “In the past (time) have you had sex? (if yes), with men, women, or both?”

†If score is 10 or greater, evaluate for PrEP or other intensive HIV prevention services; if score is 9 or less, provide indicated standard HIV prevention services.
**Risk Assessment Tool for Heterosexual Men and Women**
In the past 6 months:

- How many men/women have you had sex with?
- How many times did you have vaginal or anal sex when neither you nor your partner wore a condom?
- How many of your sex partners were HIV-positive?
- *(if any positive)* With these HIV-positive partners, how many times did you have vaginal or anal sex without a condom?

**Risk Assessment Tool for IDU**

- When did you last inject unprescribed drugs?
- In the past 6 months, have you injected by using needles, syringes, or other drug preparation equipment that had already been used by another person?
- In the past 6 months, have you been in a methadone or other medication-based drug treatment program?