

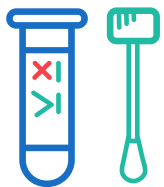
# Prescribing nPEP: Key Concepts

(non-occupational HIV post-exposure prophylaxis or nPEP)



## Early initiation of nPEP is essential!

Evaluate persons rapidly for nPEP when care is sought  $\leq 72$  hours after a potential exposure—the first dose needs to be given ASAP.



## Test for HIV before starting nPEP.

- Rapid 4<sup>th</sup> generation HIV test is preferred: if the result is negative, start nPEP immediately.
- If a laboratory-based test is sent, start nPEP immediately, stop treatment if result is positive.
- For all persons with HIV-positive test results: refer for immediate ART initiation and linkage to HIV care.



**Start treatment immediately.** Prescribe a 28-day course of a 3-drug antiretroviral regimen and give the first dose on site ASAP after the exposure (see the nPEP Prescriber's Quick Guide at <https://aidsetc.org/npep>).



**Adherence** to daily nPEP medications for 28 days is essential.



**Severe adverse effects from nPEP are rare** but review possible side effects and ask the patient to call if they experience any of them.



**Follow-up is important** for additional counseling and monitoring. Schedule appointments at the first visit.

**For free clinician-to-clinician assistance with nPEP-related questions:**

AETC National Clinician Consultation Center  
Post-Exposure Prophylaxis Hotline (PEPline)  
888-HIV-4911 (888-448-4911)  
9:00 AM - 9:00 PM ET, 7 days/week

