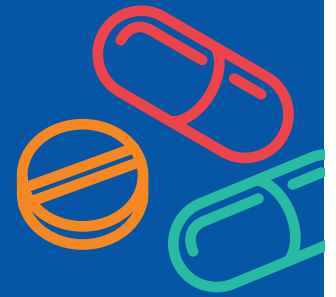


# Rapid ART

Starting antiretroviral therapy (ART) immediately after HIV diagnosis is recommended by U.S. federal guidelines. Rapid ART (aka immediate ART) can result in earlier HIV viral suppression, improved retention in care, and reduced HIV transmission.



## INDICATIONS

### Rapid ART is appropriate for:

- Individuals with a confirmed HIV diagnosis (i.e., HIV Ag, Ab, and/or HIV RNA viral load)
- Persons with suspected acute HIV infection, with or without confirmed HIV diagnosis (HIV Ag or Ab test results may be negative or indeterminate at the time of evaluation)

### Rapid ART is not appropriate for:

- Persons with certain untreated opportunistic infections (OIs)—e.g., the CNS infections cryptococcal or TB meningitis; begin OI treatment before starting ART (consult with experts)

## COMPRESSED HIV INTAKE

- Review of HIV test results
- Targeted health history
- HIV risk behaviors
- Date of last negative HIV test
- Use of PrEP or PEP
- Psychoemotional counseling, support
- HIV education (including ART benefits, possible adverse effects, adherence, preventing transmission)
- Targeted physical exam
- Benefits counseling, insurance enrollment or optimization

### Baseline Labs

- Repeat HIV testing (if indicated)
- HIV RNA (quantitative viral load)
- CD4 cell count
- HIV genotype, including integrase
- HLA-B\*5701
- CBC/differential
- Complete metabolic panel (kidney & liver tests, glucose)
- STI testing: syphilis test (RPR, VDRL, or treponemal), chlamydia and gonorrhea NAAT tests (urine, pharynx, rectum as indicated by sites of exposure)
- TB screening test (e.g., Quantiferon)
- Hepatitis serologies (HAV IgG, HBsAb, HBsAg, HBcAb, HCV IgG)
- Pregnancy test (if appropriate)

### Offer ART

- If patient agrees and there are no contraindications, prescribe 30-day supply, give starter pack if available
- If patient declines immediate ART, follow up within 1-2 weeks, re-offer ART, continue HIV education

## RECOMMENDED REGIMENS

These can be modified based on results of baseline labs.

- Dolutegravir (Tivicay), 50 mg once daily + [TAF/FTC (Descovy), TDF/FTC (Truvada), or TDF/3TC] 1 once daily
- Bictegravir/TAF/FTC (Biktarvy) 1 once daily
- Darunavir/cobicistat/TAF/FTC (Symtuza) 1 once daily

If **taking PrEP or PEP** at or since the time of HIV infection:

- Consider an enhanced regimen: boosted PI + integrase inhibitor + TAF/FTC (Descovy), TDF/FTC (Truvada), or TDF/3TC; seek consultation
- If on injectable cabotegravir PrEP, consider boosted PI + TAF/FTC (Descovy), TDF/FTC (Truvada), or TDF/3TC

If **pregnant** or trying to conceive (some antiretrovirals are not recommended during pregnancy):

- Dolutegravir (Tivicay), 50 mg once daily + [TAF/FTC (Descovy), TDF/FTC (Truvada), or TDF/3TC] 1 once daily
- Other options may be appropriate; consult with expert

**Abbreviations:** 3TC: lamivudine; FTC: emtricitabine; PI: protease inhibitor; TAF: tenofovir alafenamide; TDF: tenofovir disoproxil fumarate; BID: twice daily

## FOLLOW UP

Schedule a follow-up visit for 1-2 weeks, then at least monthly until well established in care

## RESOURCES / REFERENCES

- **AETC National Clinician Consultation Center**  
Monday–Friday 9 AM to 8 PM ET / 800-933-3413
- See **full Rapid ART guide** at <https://aidsetc.org/rapid-art>
- Based on: Getting to Zero San Francisco. **Rapid ART: Immediate ART initiation at HIV diagnosis and re-engagement in care at:** [www.gettingtozerosf.org](http://www.gettingtozerosf.org)