

Prescribing nPEP

(non-occupational HIV post-exposure prophylaxis)

Key concepts for providers:



- 1. Early initiation of nPEP is essential!** Evaluate persons rapidly for nPEP when care is sought **≤72 hours after a potential exposure - the first dose needs to be given ASAP**



- 2. Do an HIV test before initiating nPEP** (if rapid testing is not possible, send blood to lab and initiate nPEP immediately – follow-up with results and patient asap – stopping nPEP only if test result is confirmed positive)



- 3. All persons offered nPEP should be prescribed a 28-day course** of a 3-drug antiretroviral regimen, and given the first dose **ON SITE ASAP** after the exposure

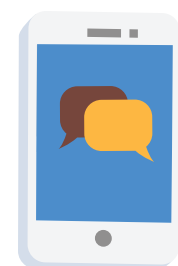
- 4. Adherence** to recommended dosing for 28 days without interruption **is essential**



- 5. Emphasize that severe adverse effects from nPEP are rare**, but review possible side effects and reinforce the limitedness of such effects



- 6. Follow-up is important** for additional counseling and monitoring



For clinician-to-clinician assistance with nPEP-related questions contact:

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

