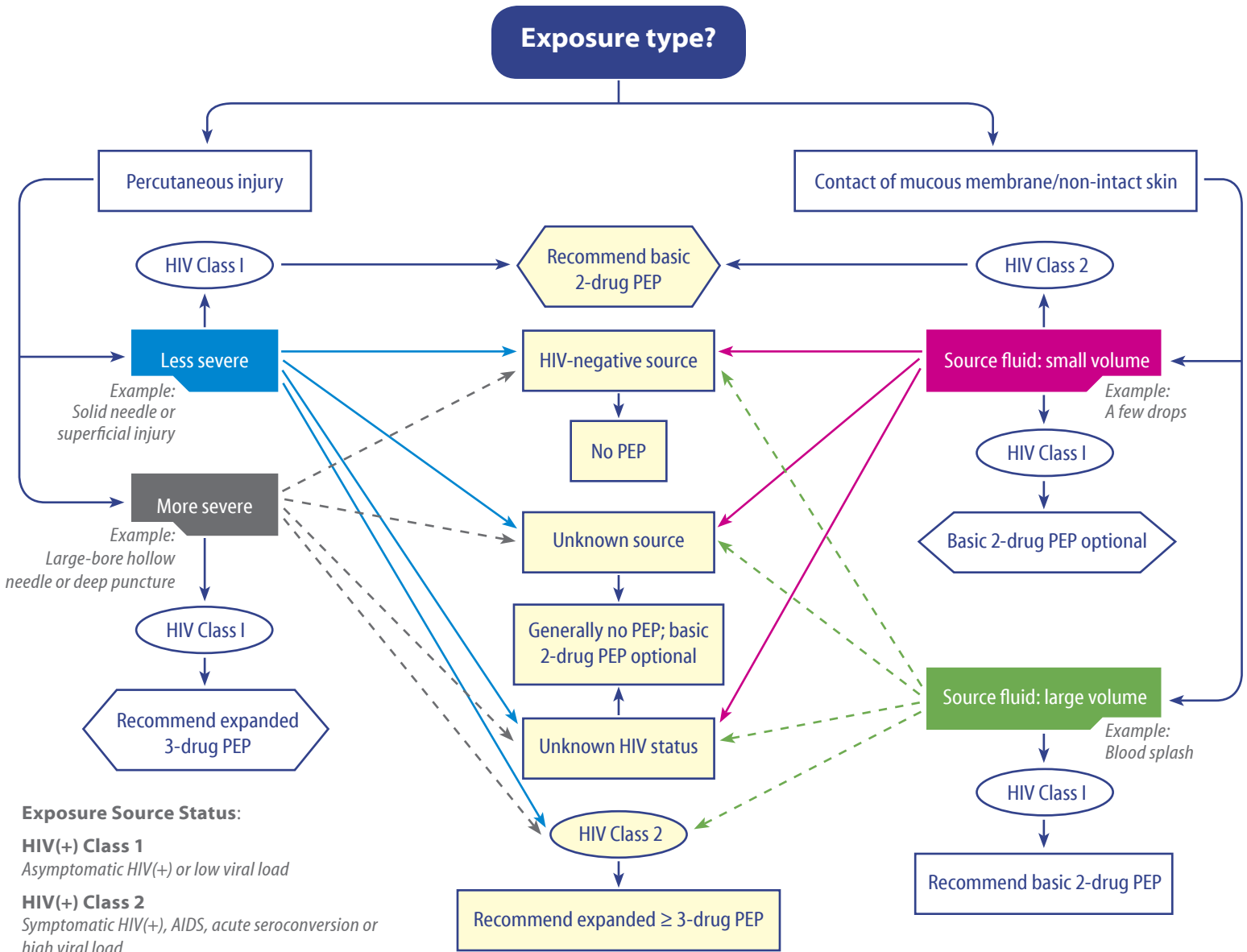


Determining Health Care Workers' Need for Post-Exposure Prophylaxis (PEP) for HIV



Exposure Source Status:

HIV(+) Class 1

Asymptomatic HIV(+) or low viral load

HIV(+) Class 2

Symptomatic HIV(+), AIDS, acute seroconversion or high viral load

Unknown source

Examples: exposure from sharps container or splash from inappropriately disposed blood

Unknown HIV status

Example: deceased person—no HIV test

Sources:

CDC. Updated U.S. Public Health Service Guidelines for the Management of Occupational Exposures to HIV and Recommendations for Postexposure Prophylaxis. *MMWR*, September, 2005, Vol.54, No.RR-9. Available at http://www.ucsf.edu/hivcntr/Clinical_Resources/Guidelines/PDFs/rr5409.pdf.

CDC. Updated U.S. Public Health Service Guidelines for the Management of Occupational Exposures to HBV, HCV, and HIV and Recommendations for Postexposure Prophylaxis. *MMWR*, June 29, 2001, Vol.50, No.RR-11. Available at <http://www.cdc.gov/mmwr/PDF/rr/rr5011.pdf>.

General PEP Guidelines:

- Start PEP as soon as possible, ideally within hours of exposure; re-evaluate after 72 hours.
- Waiting for rapid HIV test results should not delay PEP for more than 2 hours.
- PEP should be administered for 4 weeks; discontinue only if source is later determined to be HIV(-).
- Monitor for drug toxicity: baseline and 2 weeks after start of PEP.

Updated:

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