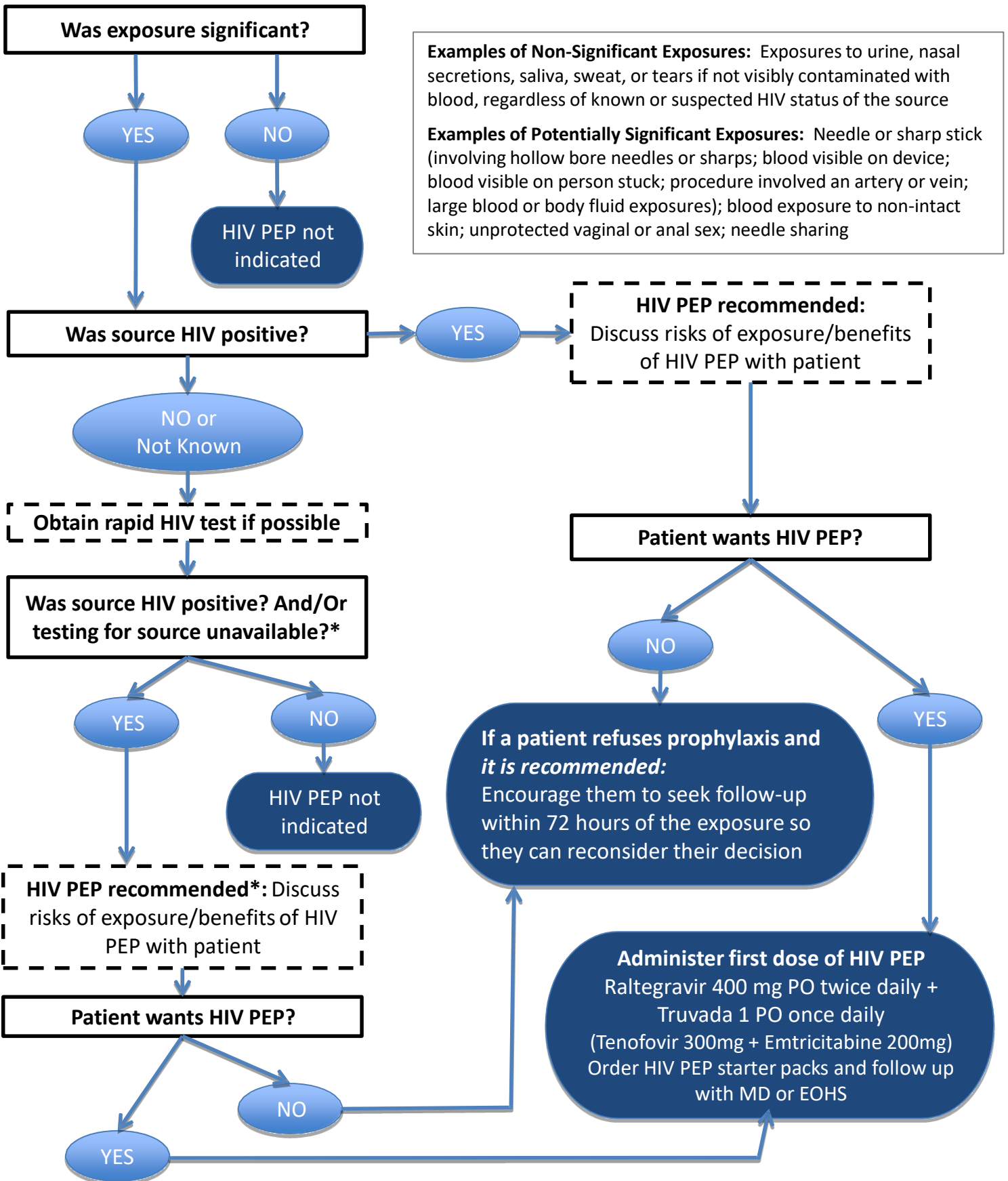


EMERGENCY DEPARTMENT BLOOD OR BODY FLUID EXPOSURE PROTOCOL

IS HIV PEP INDICATED?



Examples of Non-Significant Exposures: Exposures to urine, nasal secretions, saliva, sweat, or tears if not visibly contaminated with blood, regardless of known or suspected HIV status of the source

Examples of Potentially Significant Exposures: Needle or sharp stick (involving hollow bore needles or sharps; blood visible on device; blood visible on person stuck; procedure involved an artery or vein; large blood or body fluid exposures); blood exposure to non-intact skin; unprotected vaginal or anal sex; needle sharing

HIV PEP recommended:
Discuss risks of exposure/benefits of HIV PEP with patient

Patient wants HIV PEP?

If a patient refuses prophylaxis and it is recommended:
Encourage them to seek follow-up within 72 hours of the exposure so they can reconsider their decision

Administer first dose of HIV PEP
Raltegravir 400 mg PO twice daily +
Truvada 1 PO once daily
(Tenofovir 300mg + Emtricitabine 200mg)
Order HIV PEP starter packs and follow up
with MD or EOHS

*If HIV status of SOURCE is unknown and test results are not yet available, consider initiating PEP while awaiting results