

Provider PrEP documentation template

Assessment comments:

Z72.5 High-risk sexual behavior

Z20.82 Contact with and (suspected) exposure to other viral communicable disease

Plan comments:

____ Completed high risk evaluation of uninfected individual

____ Reviewed negative HIV-1 test immediately prior to initiating Truvada for a PrEP indication

____ Reviewed HBV, HBC screening results

____ Confirmed estimated creatinine clearance >60mL/min prior to initiation and periodically during treatment

____ Confirmed that the uninfected individual at high risk is not taking other HIV-1 medications or HBV medications

____ Evaluated risk/benefit for women who may be pregnant or may want to become pregnant

____ Rx for Truvada #30

Counseling:

____ Discussed known safety risks with use of Truvada for a PrEP indication.

____ Counseled on the importance of scheduled follow-up every 2 to no less than 3 months, including regular HIV-1 screening tests and STD screening tests while taking Truvada for a PrEP indication to reconfirm HIV-1- negative status.

____ Instructed client to contact provider if they experience any of the following symptoms: fever, rash, joint pain, oral ulcers, fatigue, night sweats, sore throat, malaise, pain in muscles, loss of appetite.

____ Discussed the importance of discontinuing Truvada for a PrEP indication and urgent need to start combination antiretroviral therapy if seroconversion has occurred, to reduce the development of resistant HIV-1 variants.

____ Counseled that Truvada for PrEP takes 7 days of daily dosing for receptive anal sex and 20 days of daily dosing for other activities, including insertive anal sex, vaginal sex and injection drug use to reach efficacy for males and females.

____ Counseled on the importance of adherence to daily dosing schedule for efficacy of prevention.

____ Counseled that Truvada for a PrEP indication should be used only as part of a comprehensive prevention strategy.

____ Counseled on importance of not abruptly stopping Truvada if hepatitis B infected, due to potential flares of HBV that may potentially be fatal.

____ Educated on practicing safer sex consistently and using condoms correctly.

____ Discussed the importance of the individual knowing their HIV-1 status and, if possible, that of their partner(s).

____ Discussed the importance of and performed screening for sexually transmitted infections (STIs), such as syphilis and gonorrhea, which can facilitate HIV-1 transmission.

____ Offered HBV vaccination as appropriate.

____ Provided education on where information about Truvada for a PrEP indication can be accessed.

____ Discussed potential adverse reactions.

____ Reviewed the Truvada Medication Guide with the uninfected individual at high risk, copy given to client.

____ Return to clinic in 3 months for follow-up.