**BCCDC Non-certified Practice Decision Support Tool**

**Registered Nurse assessment and management of HIV Pre Exposure Prophylaxis (PrEP)**

**HIV PRE EXPOSURE PROPHYLAXIS (PrEP)**

**BACKGROUND**

This decision support tool (DST) is an evidence-based document that can be used to guide the assessment and management of clients eligible for, or currently taking, HIV Pre Exposure Prophylaxis (PrEP). This DST guides practice in conjunction with clinical judgement, current available evidence, and consultation with a health care team as required. Nurses support individual autonomy and decision-making in a person-centred approach.

Further resources to support clinicians and clients in the enrollment and management of PrEP including client and clinician educational resources and medication access processes can be found on the [SmartSex Resource](http://www.smartsexresource.com) website.

**BCCNP RN SCOPE OF PRACTICE**

Registered nurses (RN) act within autonomous scope of practice when providing initial assessment for PrEP and on-going management of clients taking PrEP. Registered nurses cannot autonomously prescribe PrEP; the prescribing and medical management of PrEP is completed by a Nurse Practitioner (NP) or physician (MD). A client specific order may be required for certain laboratory investigations outside an RN’s scope of practice. (e.g. eGFR, creatinine, CBC). Organizational processes must be in place to direct test results to the appropriate health care provider for follow up.

**SEXUAL HEALTH HISTORY AND PREP ELIGIBILITY**

Completing a sexual health history and assessment, including the collection of specimens for sexually transmitted infection (STI) testing, is within the scope of practice for all RNs who possess the competencies (knowledge, skills attitude and judgements) to do so. While the [BCCNP STI Assessment DST](http://www.smartsexresource.com) is intended for use by nurses with STI Certified Practice, it may also serve as a useful guide for other RNs to frame a comprehensive sexual health history.

For men who have sex with men (MSM), complete a HIV Incidence Risk Index (HIRI) Score (Appendix A).
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HIV PrEP

Assessment of social and environmental factors (including housing, food security, safety, mental health and substance use) is recommended; disparities in these may impact access to care and/or likelihood of infection acquisition and/or adherence.

Referral for PrEP initiation and/or further assessment is recommended with any the following sexual health history findings:

1) For cis- and transgender Men who have Sex with Men (MSM) and Transgender Women (TGW):
   - with a calculated HIV Incidence Risk Index for men who have sex with men (HIRI-MSM) score $\geq 10$. A HIRI score can be completed based on previous, current or potential future sexual and drug use practices.
   - reporting condomless anal sex and having any of the following:
     - Infectious syphilis or rectal bacterial STI, particularly if diagnosed in the preceding 12 months
     - Use of non-occupational post-exposure prophylaxis (nPEP) on more than one occasion
     - Ongoing sexual relationship with an HIV-positive partner who is not receiving stable antiretroviral therapy (ART) and/or does not have an HIV viral load $<200$ copies/ml

2) For Persons who Inject Drugs (PWID), reporting sharing of injection equipment and:
   - having an HIV-positive injecting partner who is not receiving stable ART and/or does not have an HIV viral load $<200$ copies/ml

3) For all other persons who do not fit into the above criteria who report condomless vaginal or anal sex and an:
   - Ongoing sexual relationship with an HIV-positive partner who is not receiving stable ART and/or does not have an HIV viral load $<200$ copies/ml
4) Other populations clinically assessed to be at high risk for HIV infection including: unprotected vaginal/anal sex with partners from MSM/PWID population of unknown HIV status, transgender men, gender diverse individuals, people engaging in sex work.

5) Client self-referral: clients who self-refer for PrEP may be an indication of undisclosed risk and merits further assessment.

**BASELINE – SCREENING TESTS**

Table 1 outlines the required and recommended baseline screening tests for PrEP initiation and enrollment.

**Table 1. Baseline Screening Tests**

<table>
<thead>
<tr>
<th></th>
<th>Assay type</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Required Testing</strong></td>
<td></td>
</tr>
<tr>
<td>HIV Serology</td>
<td>4th Generation Ab/Ag Assay*</td>
</tr>
<tr>
<td>Hepatitis B Screen</td>
<td>hepatitis B surface antigen†</td>
</tr>
<tr>
<td>Renal function</td>
<td>creatinine, eGFR‡</td>
</tr>
<tr>
<td><strong>Recommended Testing</strong></td>
<td></td>
</tr>
<tr>
<td>Gonorrhea Screen</td>
<td>urine NAAT test; throat, rectal and/or vaginal swabs dependant on type of sexual exposures reported</td>
</tr>
<tr>
<td>Chlamydia Screen</td>
<td>urine NAAT test; throat, rectal and/or vaginal swabs dependant on type of sexual exposures reported</td>
</tr>
<tr>
<td>Syphilis Screen</td>
<td>T. pallidum EIA</td>
</tr>
<tr>
<td>Hepatitis B Screen</td>
<td>hepatitis B core antibody, surface antibody</td>
</tr>
<tr>
<td>Hepatitis C Screen</td>
<td>hepatitis C antibody if not known to be hepatitis C positive; hepatitis RNA if previously hepatitis C positive</td>
</tr>
<tr>
<td>Renal function</td>
<td>urinalysis or urine albumin to creatinine ratio (ACR)‡</td>
</tr>
<tr>
<td><strong>Additional Testing</strong></td>
<td></td>
</tr>
<tr>
<td>Pregnancy Test</td>
<td>urine§</td>
</tr>
<tr>
<td>Complete Blood Count</td>
<td>cbc serology‡</td>
</tr>
</tbody>
</table>

*If symptoms suggestive of acute HIV infection (recent contact risk coupled with the emergence of typical symptoms) within the previous 6 weeks are present, and/or history of high risk condomless sex in the previous month, a pooled nucleic acid amplification test (NAAT) for HIV RNA may be recommended. Contact the BC Centre for Disease Control medical microbiologist on call at 604-661-7033 to order this test.

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1 National data on HIV incidence among people engaging in sex work is scarce; as such, this eligibility criteria should be applied to these individuals based on the presence of other risk factors. Tan et al. Canadian guideline on HIV pre-exposure prophylaxis and nonoccupational postexposure prophylaxis. 2017.
Documentation of a recent negative 4th generation HIV Ag/AB test (within the previous 15 days) MUST be provided on the enrollment form.

†Provide hepatitis B surface antigen (HBsAg) status. If client is HBsAg positive, additional monitoring or consultation with a specialist is advised.

To assess for immunization status and eligibility, hepatitis B core and surface antibody screening is recommended.

‡Please note that for RN(C), a client specific order is required for these tests.

?Offer if indicated

**PREP INITIATION**

Refer to a nurse practitioner/physician for initiation of PrEP (e.g. completion of PrEP enrolment and prescription request) and/or further assessment if required.

Perform medication reconciliation (list of all client medications and supplements) to inform potential interactions or contraindications with PrEP medication.

**FOLLOW UP – TESTING AND MONITORING**

While a client remains on PrEP, follow-up is required at 1 month following initiation, and every three months thereafter.

Table 2 outlines the testing and monitoring recommendations for follow up PrEP appointments.

**Table 2. Ongoing Testing and Monitoring**

<table>
<thead>
<tr>
<th>Recommended Testing</th>
<th>Assay Type</th>
<th>Every 3 months</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>HIV Serology</td>
<td>4th Generation Ab/Ag Assay</td>
<td>X</td>
<td>Documentation to BCCfE is not required for ongoing PrEP enrollment. Clinicians are responsible for monitoring the HIV status of their client.</td>
</tr>
<tr>
<td>Hepatitis C Screen</td>
<td>hepatitis C antibody if not known to be hepatitis C positive; hepatitis RNA if previously hepatitis C positive</td>
<td></td>
<td>Every 6 months based on risk (e.g. PWID, MSM)</td>
</tr>
<tr>
<td>Gonorrhea Screen</td>
<td>urine NAAT test; throat, rectal and/or vaginal NAAT swabs dependant on type of sexual exposures reported</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>
### Chlamydia Screen
- urine NAAT test; throat, rectal and/or vaginal NAAT swabs dependant on type of sexual exposures reported

### Syphilis Screen
- T. pallidum EIA

### Renal Function
- creatinine, eGFR

### Pregnancy Test
- Urine

**On-going Management**

The following are components of ongoing management of PrEP clients:

- Assess for signs and symptoms of acute HIV infection. Contact the BCCDC medical microbiologist on call at 604-661-7033 to order testing if suspected acute HIV.
- Assess for PEP if recent high risk exposure and more than 3 doses have been missed in the period of a week.
- Review screening and diagnostic tests
  - Ensure all recommended tests based on client’s exposure risk have been completed
  - Tests necessitating a client specific order require sign off by a NP/MD. Please refer to your agency policy.
  - Verify results are within normal range; results falling outside of normal range (e.g. renal function) require consultation with NP/MD.
- Ensure treatment is completed for all positive STIs.
- Review medication history/changes to medication
- Assess medication adherence
- Assess medication side effects
- Assess on-going exposures and need for continued use of PrEP
- Additional assessment as appropriate (eg. risk reduction counselling, food security, housing, etc.)
- Ensure client has lab requisition for testing due at follow up appointment.
CONSULTATION AND/OR REFERRAL

- HIV positive result or suspected acute HIV infection
- Hepatitis B infection - individuals with chronic HBV infection require a referral to a physician with HBV treatment experience
- Abnormal renal function results (unless reviewed by NP/MD and PrEP continuation approved)
- Known osteoporosis or osteopenia
- Severe or unexpected side effects
- Expected side effects (e.g. nausea, diarrhea) persisting longer than 1 month
- Client request for intermittent or on-demand use of PrEP
- Medication/supplement additions or changes that may interact with or have overlapping toxicities with PrEP use (e.g. NSAIDS) or may falsely elevate serum creatinine and lower eGFR (e.g. creatinine supplements)

CLIENT EDUCATION

Refer to the BCCDC PrEP Clinician and Client Resources on Smart Sex Resource for detailed information on PrEP effectiveness, safety, starting, taking and stopping PrEP.

Remind and support client in completing follow-up testing as per agency or clinic recommendations, prior to any subsequent appointment.
### Appendix A: HIRI-MSM Risk Calculator

**HIRI-MSM Risk Index Calculator**

(Score ≥ 10 suggests HIV Incidence of 2% in Vancouver)

<table>
<thead>
<tr>
<th>Question</th>
<th>Score</th>
</tr>
</thead>
</table>
| 1  How old are you today?                                                 | If <18 years, score 0  
If 18-28 years, score 8  
If 29-40 years, score 5  
If 41-48 years, score 2  
If 49 years or more, score 0                                           |
| 2  In the last 6 months, how many men have you had sex with?             | If >10 male partners, score 7  
If 6-10 male partners, score 4  
If 0-5 male partners, score 0                                           |
| 3  In the last 6 months, how many times did you have receptive anal sex (you were the bottom) with a man without a condom? | If 1 or more times, score 10  
If 0 times, score 0                                                        |
| 4  In the last 6 months, how many of your male sex partners were HIV-positive? | If >1 positive partners, score 8  
If 1 positive partner, score 4  
If 0 positive partner, score 0                                           |
| 5  In the last 6 months, how many times did you have insertive anal sex (you were the top) without a condom with a man who was HIV-positive? | If 5 or more times, score 6  
If 0 times, score 0                                                        |
| 6  In the last 6 months, have you used methamphetamines such as crystal or speed? | If yes, score 6  
If no, score 0                                                            |

Add down entries in right to calculate total score:
REFERENCES


