



Post-Exposure Prophylaxis (PEP) to Prevent HIV Infection

April 2023

Table 6: Recommended Monitoring After PEP Initiation		
Monitoring Test or Activity	Frequency	Notes
Clinic visit	<ul style="list-style-type: none"> Baseline 48 hours Week 2 Week 4 Week 12 	Follow-ups at 48 hours and 2 weeks may be conducted by telephone call.
HIV-1/2 antigen/antibody combination immunoassay (recommended even if the exposed individual declines PEP)	<ul style="list-style-type: none"> Baseline Week 4 Week 12 	HIV specialist consultation: Immediate consultation with a clinician experienced in managing antiretroviral therapy is advised to determine optimal treatment options if the exposed individual's sequential test confirms HIV infection.
Serum liver enzymes, blood urea nitrogen, creatinine, CBC	<ul style="list-style-type: none"> Baseline Weeks 12 and 24 in patients ≥12 years old 	<ul style="list-style-type: none"> Obtain CBC in children 2 to 12 years old if PEP regimen contains zidovudine. Use a serum liver enzyme panel provided by laboratory. Repeat laboratory testing after week 2 of PEP medications in the case of abnormal renal or liver function [Mikati, et al. 2019]. Repeat laboratory testing if the patient experiences signs or symptoms of drug-induced kidney or liver injury while taking PEP medications.
Pregnancy test	<ul style="list-style-type: none"> Baseline Week 4 	Only if exposed individual is of childbearing capacity.
HBsAg, anti-HBs	<ul style="list-style-type: none"> Baseline: All patients Week 12: If patient is ≥12 years old 	Patients with a reactive anti-HBs test result need not repeat an HBsAg test.
HCV antibody	<ul style="list-style-type: none"> Baseline Week 24 	If source patient has known HCV viremia or unknown status, HCV antibody testing should be performed at baseline as well as 24 weeks after an initial nonreactive test result.
HCV RNA	<ul style="list-style-type: none"> Week 4 Week 12 	If source patient has known HCV viremia or unknown status, HCV RNA should be performed during HIV testing at weeks 4 and 12.
RPR, 3-site screening for gonorrhea and chlamydia	<ul style="list-style-type: none"> Baseline 	<ul style="list-style-type: none"> Repeat screening at week 4 for sexual exposures. Repeat RPR at week 12 if the exposed individual is <12 years old.
Abbreviations: anti-HBs, hepatitis B surface antibody; CBC, complete blood count; HBsAg, hepatitis B surface antigen; HCV, hepatitis C virus; PEP, post-exposure prophylaxis; RPR, rapid plasma reagin.		

Reference

Mikati T, Crawley A, Daskalakis DC. Are routine renal and liver labs testing among PEP patients on TDF/FTC/DTV necessary? Abstract 983. CROI; 2019 Mar 4-7; Seattle, WA. <https://www.croiconference.org/sessions/are-routine-renal-and-liver-labs-testing-among-pep-patients-tdftcdtv-necessary>