PrEP PRE-PRESCRIPTION PATIENT EVALUATION CHECKLIST

From the NYSDOH AIDS Institute guideline, PrEP to Prevent HIV Acquisition, available at www.hivguidelines.org

1. SYMPTOMS OF ACUTE HIV INFECTION
   ❍ Has the patient experienced a febrile, “flu”-, “mono”-like illness in the previous 6 weeks?
   ❍ Has the patient had a rash in the previous 6 weeks?

2. READINESS AND WILLINGNESS TO ADHERE TO PrEP
   ❍ Identify potential barriers to daily adherence.
   ❍ Screen for health literacy.

3. HIV STATUS OF PATIENT’S SEX PARTNER(S)
   ❍ Does the patient have sex partners who are known to be HIV-infected?
     If yes, ask about each partner:
     ❍ Is the partner taking antiretroviral therapy (ART)?
     ❍ Is the partner’s HIV viral load suppressed? If no, is a resistance profile available?

4. UNDERSTANDING OF PrEP
   ❍ Ask “Why do you want PrEP?”
   ❍ Ask “What is your understanding of what PrEP will do for you?”

5. POTENTIAL DRUG-DRUG INTERACTIONS
   ❍ Ask the patient to list all drugs he or she is taking, including prescription drugs, OTC drugs, and non-prescription therapies.
   ❍ Identify nephrotoxic medications.

6. SUBSTANCE USE AND MENTAL HEALTH STATUS*
   ❍ Refer to the Mental Health Screening quick reference guide
   ❍ Refer to the Substance Use Screening quick reference guide

7. PSYCHOSOCIAL STATUS*
   ❍ Screen for intimate partner violence; see NYS Office for the Prevention of Domestic Violence.
   ❍ Assess relationships and social support status.
   ❍ Assess housing status/instability.

8. REPRODUCTIVE PLANS
   ❍ Is the patient trying to conceive?
   ❍ Is the patient currently using contraception? If not, is the patient interested in using hormonal contraception or other effective method of contraception in addition to condoms?
   ❍ Is the patient or the patient’s partner currently pregnant?
   ❍ Is the patient currently breastfeeding?

   ❍ Connect the individual to resources for assistance with payment, such as the NYSDOH PrEP Assistance Program.
   ❍ Other resources can be found through NYSDOH Payment Options for Pre-Exposure Prophylaxis (PrEP).

* Substance use, mental health disorders, and psychosocial challenges are not exclusionary criteria. Assessment allows the clinician to provide appropriate referrals and offer a tailored prevention plan. Substance use and mental health disorders may be barriers to adherence and cofactors for increased risk for HIV acquisition.