

Appendix C – New York State Department of Health AIDS Institute (NYSDOH AI), PEP to Prevent HIV Infection

In June 2020 (updated 2022), the New York State Department of Health AIDS Institute published its recommendations on HIV post-exposure prophylaxis following an occupational exposure.

NEW IN THE 2020 EDITION OF THIS GUIDELINE

- **Reorganization of the previous 4 (four) guidelines into 1 (one) document:**
 - This PEP guideline addresses management of 4 (four) types of exposure to HIV: occupational, non-occupational (consensual sexual exposure, exposure through needle-sharing), sexual assault, and exposures in children. Icons throughout signal content specific to one exposure type. This edition reflects a unified approach to the recommendations for all exposure types, with differences between exposure scenarios highlighted throughout.
- **With updated recommendations for:**
 - Initiation of post-exposure prophylaxis when an exposure is reported *within 72 hours*.
 - Provision of the *full course of PEP medications whenever possible*.
 - If the full course of PEP medications cannot be provided, then *at least a 7-day starter pack should be provided* to patients with occupational or non-occupational exposures and to sexual assault patients who are ≥ 18 years old.
 - Sexual assault patients who are < 18 years old now (*by law*) must be *provided with the full course of PEP medications*.
 - HIV testing of a *source who is taking pre-exposure prophylaxis (PrEP)*.
 - PEP in an exposed individual who is *taking PrEP*.
 - Transitioning an exposed individual from *PEP to PrEP* when indicated.
 - *Linking an exposed individual to care with an experienced HIV care provider* when there is evidence of or concern for HIV infection.
 - *Alternative PEP regimens*, including a single-tablet regimen.
- **Additional highlights:**
 - Recommendations that reflect the evidence regarding the negligible risk of HIV acquisition through sexual exposure when the source has an undetectable viral load, as defined by the *U=U statement* endorsed by the New York State Department of Health (NYSDOH) AIDS Institute (AI).
 - Considerations regarding the use of *dolutegravir in PEP regimens* given the small risk of teratogenicity in the first trimester of pregnancy.
 - Changes in the requirements for *laboratory monitoring* for renal and liver function. Updated sections on the management of concomitant exposure to hepatitis B virus (HBV) and hepatitis C virus (HCV).

KEY POINTS

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- **EXPOSURE TO HIV IS A MEDICAL EMERGENCY:** PEP should be initiated immediately—ideally within 2 hours of an exposure but no later than 72 hours after an exposure—because the effectiveness of PEP decreases over time after 2 hours.
- Assessment of exposure, HIV and other baseline testing, and other related activities can proceed after the first dose of PEP is administered.

Source: NYSDOH AI, *PEP to Prevent HIV Infection*. Updates to this Guideline. August 2022.

This guideline was developed by the New York State Department of Health AIDS Institute (NYSDOH AI) for healthcare practitioners in any medical setting (e.g., emergency department, sexual health clinic, urgent care clinic, inpatient unit primary care practice) who manage the care of individuals who request post-exposure prophylaxis (PEP) after a possible exposure to HIV.

HIV transmission can be prevented through use of barrier protection during sex (e.g., latex condoms), safer drug injection techniques, and adherence to universal precautions in the healthcare setting. HIV infection can also be prevented with use of antiretroviral (ARV) medications taken as pre-exposure prophylaxis (PrEP). After an exposure has occurred, HIV infection can be prevented with rapid administration of ARV medications as PEP. The first dose of PEP should be administered within 2 hours of an exposure (ideal) and no later than 72 hours after an exposure.

The NYS Department of Health AIDS Institute (2020; updated 2022) clinical guidelines for HIV post-exposure prophylaxis for healthcare workers can be found at: https://www.hivguidelines.org/pep-for-hiv-prevention/pep/risk/#tab_0. The full report may be found at: [Updated: Substance Use Screening, Risk Assessment, and Use Disorder Diagnosis \(5/31/24\) - Clinical Guidelines Program \(hivguidelines.org\)](#)