

OCCUPATIONAL EXPOSURE TO HIV

Emergency Responder

Updated January 2024

Occupational exposures require urgent medical evaluation. The first dose of post exposure prophylaxis (PEP) should be given ASAP, even while evaluation is still under way.

First Aid	<ul style="list-style-type: none">• Needle stick or cut: wash with soap and water—don't squeeze injury• Mucus membrane: rinse with water until splashed fluid is no longer visible
Next Steps	<ul style="list-style-type: none">• Notify supervisor or EMS designated officer• Proceed to ED for evaluation and treatment• Complete incident report—but do not delay ED visit
At Hospital	<ul style="list-style-type: none">• 1st dose of PEP offered before other testing—Ideally taken within 2 hours of exposure• Source patient's HIV, HCV, HBV status will be requested from patient's medical provider• Responder's HIV, HCV, HBV status is confirmed• ED provider determines need for continued PEP
Follow Up	<ul style="list-style-type: none">• Re-evaluation by medical provider within 72 hours of beginning PEP

New York State Clinical Guidelines for Post-Exposure Prophylaxis* provide treatment and testing recommendations and incorporate New York State regulations regarding testing of source patient and access to HIV-related information after occupational exposures:
https://www.hivguidelines.org/guideline/hiv-peg/?mycollection=peg-prep*

ED providers: Do not delay initial dose of PEP while determining HIV status of source patient or responder.

- Start HIV prophylaxis ASAP—ideally within 2 hours and no later than 72 hours post-exposure
- Evaluate source patient (if known)—✓HIV, HCV, and HBV status through voluntary testing or patient's medical provider
- Obtain baseline HIV, HCV, and HBV tests—if responder's status unknown
- Encourage follow-up confidential testing—at 1 and 3 months post exposure even if PEP is declined
- Review symptoms suggestive of acute HIV and the need to immediately notify a medical provider if symptoms occur
- Counsel about the need for risk-reduction measures until testing rules out HIV infection
- Ensure follow-up with provider experienced with PEP to:
 - Re-evaluate responder within 72 hours after exposure
 - Monitor weekly while on PEP
- If the patient is given a starter PEP packet and not a full 28 day supply, it should be determined if the ARV's are available at the pharmacy where the Rx is sent to determine medical follow up is made

CEI's PEP Line: 1-866-637-2342

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Providing answers for clinicians 24 hours/day

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