

PrEP Prescribing Guidelines			
	Men Who Have Sex With Men	Heterosexual Women and Men	Persons Who Inject Drugs
Detecting substantial risk of acquiring HIV infection	<ul style="list-style-type: none"> • HIV+ sexual partner • Recent bacterial STI • High number of sex partners • History of inconsistent or no condom use • Commercial sex work 	<ul style="list-style-type: none"> • HIV+ sexual partner • Recent bacterial STI • High number of sex partners • History of inconsistent or no condom use • Commercial sex work • In area/network with high HIV prevalence 	<ul style="list-style-type: none"> • HIV+ injecting partner • Sharing injection equipment
Clinically eligible	<ul style="list-style-type: none"> • Documented negative HIV test result before prescribing PrEP • No signs/symptoms of acute HIV infection • Normal renal function; no contraindicated medications • Documented hepatitis B virus infection and vaccination status 		
Prescription	<ul style="list-style-type: none"> • Daily, continuing, oral doses of Truvada, ≤ 90-day supply 		
Other services	<ul style="list-style-type: none"> • Follow-up visits at least every 3 months to provide the following: HIV test, medication adherence counseling, behavioral risk reduction support, side effect assessment, STI symptom assessment • Assessment of renal function at 3 months and every 6 months thereafter • Test for bacterial STIs every 3–6 months 		
	<ul style="list-style-type: none"> • Oral/rectal STI testing 	<ul style="list-style-type: none"> • For women, assessment of pregnancy intent • Pregnancy test every 3 months 	<ul style="list-style-type: none"> • Access to clean needles/syringes and drug treatment services

Source: www.cdc.gov/hiv/pdf/risk/prep/cdc-hiv-prep-guidelines-2017.pdf