# PrEP FOLLOW UP AND MONITORING

Once PrEP is initiated, patients should return for follow-up approximately every 3 months

## OPTIONAL
## 1st MONTH

- Evaluate and support adherence
- Assess risky behaviors and provide risk-reduction counseling and condoms
- Evaluate for side effects
  - Common side effects include: Nausea, flatulence, rash, or headache
    - Discuss OTC medications as needed for symptoms

## AT LEAST EVERY
## 3 MONTHS

- Assess side effects, adherence, and HIV acquisition risk behaviors
- Repeat HIV testing and assess for signs and symptoms
- Conduct STI testing
  - Sexually active persons with signs or symptoms of infection
  - Asymptomatic MSM at high risk for recurrent bacterial STIs

## AT LEAST EVERY
## 6 MONTHS

- Check serum creatinine
  - A rise in serum creatinine is not a reason to withhold treatment if eCrCl remains ≥60 ml/min
- Conduct STI screening for sexually active adolescents and adults EVEN IF asymptomatic
  - Syphilis and gonorrhea for both men and women
  - Include chlamydia for MSM

## AT LEAST EVERY
## 12 MONTHS

- Evaluate the need to continue PrEP as a component of HIV prevention

## MEDICATION ADHERENCE

- **Establish trust and bidirectional communication**
- **Provide simple explanation and education**
  - Medication dosage and schedule
  - Management of common side effects
  - Relationship of adherence to the efficacy of PrEP
  - Signs and symptoms of acute HIV infections and recommended actions
- **Support adherence**
  - Tailor dose to patient's daily routine
  - Identify reminders to minimize forgetting doses
  - Identify and address barriers to adherence
- **Monitor medication adherence in a non-judgmental way**

## RISK REDUCTION

- **Establish trust and bidirectional communication**
- **Provide feedback on HIV risk factors**
  - Elicit barriers to consistent condom use
  - Elicit barriers to reducing substance abuse
- **Support risk-reducing efforts**
  - Assist patients to identify 1 or 2 feasible steps toward risk reduction
  - Identify and address anticipated barriers to accomplishing planned actions to reduce risk
- **Monitor behavioral adherence in a non-judgmental way**