PrEP Screening Checklist

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| **Screening for Substantial Risk for HIV infection** |
|  **Clients are at increased risk for HIV if they meet any one (1) of the three criteria below:**  |
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| **1) Client is sexually active and reports ANY one of these activities in the last six months:** |
| * Reports vaginal or anal intercourse without condoms
* Has a sex partner with one or more of the following HIV risk(s):
	+ Is living with HIV?
	+ Unknown HIV status?
	+ Injects drugs?
	+ Has sex with men?
	+ Is a transgender person?
	+ Is a sex worker?
	+ Has sex with multiple partners without condoms?
* History of a sexually transmitted infection (STI) (based on self-report, lab test, syndromic STI treatment)
* History of use of post-exposure prophylaxis (PEP)
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| **2) Client reports history of sharing injection material/equipment in the last six months** |
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| **3) Client reports having a sexual partner in the last six months who is HIV positive AND who has not** |
| **been on effective\* HIV treatment***\*If partner has been on ART for less than six months, or has inconsistent or unknown adherence* |
| **PrEP Eligibility** |
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| **Eligibility Criterial (must meet all three below)** |
| 1) **Confirmed HIV-negative** |
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| 2) **At substantial risk for HIV**  - At least one of the 3 boxes/risks in section C above is checked |
| 3) **Has no signs/symptoms of acute HIV infection**No flu-like symptoms (e.g. fever, chills, rash, night-sweats, muscle aches, sore throat, fatigue, swollen lymph glands) |
| If all three criteria are met, provide information and refer for PrEP |
| **PrEP Screening Outcomes** |
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| 1) **Provided PrEP educational materials**  |  |
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| 2) **Referred for PrEP services - gave name and contact information for PrEP provider** |
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| 3) **Navigation/linkage to PrEP services (i.e. assisted client with appointment and/or followed-up with provider)** |
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| 4) **Client declined (i.e. was eligible but declined PrEP all related services)** |