

Strategies for Providing nPEP to Survivors of Sexual Assault: Sparrow Hospital

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Providing nPEP: Assess Level of Risk

- **Patient presents to Sparrow Hospital ER with the complaint of sexual assault.**
- **To minimize trauma, a Forensic Nurse Examiner (FNE) meets promptly with the patient to determine level of risk and offer treatment and follow-up options.**

Risk Assessment Guide

Risk Category	Clinical/Historical Findings	Recommendation for Non-Occupational Post Exposure Prophylaxis (nPEP)	Medication Recommendation
<p>___ High</p>	<ul style="list-style-type: none"> Penetration assault by one or more assailants known to be HIV positive or at high risk of HIV infection. <p>Example: Injection drug users or men who have sex with men. HIV prevalence among convicted sex offenders may be twice the general male population which emphasizes the higher risk of HIV exposure following sexual assault.</p> <p>AND/OR</p> <ul style="list-style-type: none"> Anal penetration with or without injuries. <p>Injuries include trauma/tearing of mucosal tissue and bleeding or presence of blood.</p>	<p>STRONGLY RECOMMENDED</p>	<p>Truvada & Isentress</p>
<p>___ Moderate</p>	<ul style="list-style-type: none"> Penetration assault by one or more assailants of unknown HIV status with vaginal injuries and known or unsure ejaculation and no or uncertain condom use. Penetration assault in the presence of an STI, genital lesion, IUD or menstruation. Penetration assault by one or more uncircumcised assailants of unknown HIV status. 	<p>RECOMMENDED</p>	<p>As per High Risk</p>
<p>___ Lower</p>	<ul style="list-style-type: none"> Penetration assault by one or more assailants of unknown HIV status with no vaginal injuries with ejaculation or vaginal injuries without ejaculation. 	<p>RECOMMENDED</p>	<p>As per High Risk</p>
<p>___ Very Low</p>	<ul style="list-style-type: none"> No anal or vaginal penetration No ejaculation from the assailant Oral penetration only Condom use Assailant known to be HIV negative Bite injury, unless the biter's mouth was bloody and the exposed patient's skin is visibly broken. 	<p>NOT RECOMMENDED</p>	<p>None</p>

Providing nPEP: Counsel Patient

- **FNE discusses MDHHS recommendations for nPEP, risks of infection, and pros/cons of taking medication with the patient:**
 - **The FNE communicates clearly and simply to the patient the importance of nPEP, while considering their emotional state and ability to comprehend the nature of antiretroviral treatment.**
 - **Clinicians recommend HIV nPEP to victims when significant exposure may have occurred, as defined by direct contact of the vagina, penis, anus, or mouth with the semen, vaginal fluids, or blood of the alleged assailant, with or without physical injury, tissue damage, or presence of blood at the site of the assault.**
 - **nPEP is also offered in cases when broken skin or mucus membranes of the victim have been in contact with blood, semen, or vaginal fluids from the alleged assailant.**
 - **nPEP is offered in cases of bites that result in visible blood.**

Providing nPEP: Counsel Patient

- **FNE also talks with the patient about the:**
 - **Importance of adherence to the treatment regimen to prevent PEP failure or the development of drug resistance should infection occur**
 - **Need to reduce risk and prevent STI, including HIV, exposure to others**
 - **Signs and symptoms of acute HIV infection**

Providing nPEP: Ensure Medication

- **The FNE provides the patient with a 4 day starter pack.**
 - Truvada (Tenofovir 300mg PO qd + Emtricitabine 200mg PO qd) (4tabs)
 - Isentress (Raltegravir) 400mg PO bid. (8tabs)
 - Zofran 4mg PO every 6hrs - prn nausea (16tabs)
- **If a patient presents on a weekend or holiday, the FNE will assure they have enough medication in the starter pack (an additional 4 days of medication) until their initial follow up appointment with the Ingham County Health Department (ICHHD), their preferred local health department or clinic, or their primary care physician.**
- **The remainder of the 28-day medication regimen is prescribed for the patient by a provider at the health department or their PCP.**

Providing nPEP: Pregnancy

- **FNE initiates a full discussion of the benefits and risks of HIV prophylaxis for both maternal and fetal health, following prompt consultation with an HIV expert.**
- **Pregnant assault survivors are referred to an OB provider for post-assault follow-up care.**

Providing nPEP: Follow-Up

- **A follow up visit with the ICHD, their PCP, or their preferred local health department or clinic, is scheduled to review their decision, evaluate initial drug tolerability, reinforce the need for adherence of the regimen, and arrange for follow up care including HIV testing.**
 - **If the patient prefers to be seen at ICHD, the FNE:**
 - **Fills out the referral form for the ICHD.**
 - **Faxes the form to the ICHD STI clinic.**
 - **Calls the ICHD STI clinic to inform them of the referral.**
 - **If the patient wishes to follow up with their PCP or other health department or clinic, the FNE gives the patient contact phone numbers their preferred provider can call with any questions regarding the nPEP process.**
 - **Sparrow SANE Program**
 - **ICHD**

Providing nPEP: Uninsured, Co-Pays

- **The FNE helps uninsured patients or those needing co-pay assistance access Gilead and Merck patient compassionate use programs:**
 - **Gilead Sciences, Truvada**
 - Call 1-800-226-2056
 - **Merck, Raltegravir (Isentress)**
 - Fill out the voucher
 - Give co-pay voucher

Providing nPEP: Minimizing Trauma

- **If an assault patient is unsure and/or too upset to make a decision at that time whether or not to participate in the nPEP regimen, the FNE:**
 - **Provides the patient with prescriptions for the medications.**
 - **Arranges for the patient to follow up with the ICHD within 24 hours.**

Providing nPEP: Pharmacy

- **Sexual assault patients are encouraged to fill their prescriptions at the Sparrow Hospital Outpatient Pharmacy as outlining pharmacies do not tend to carry these medications regularly.**
- **Patients are given a fact sheet about nPEP, and instructions about follow-up care options. (Please see handout)**

Thank you

Contact Information

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