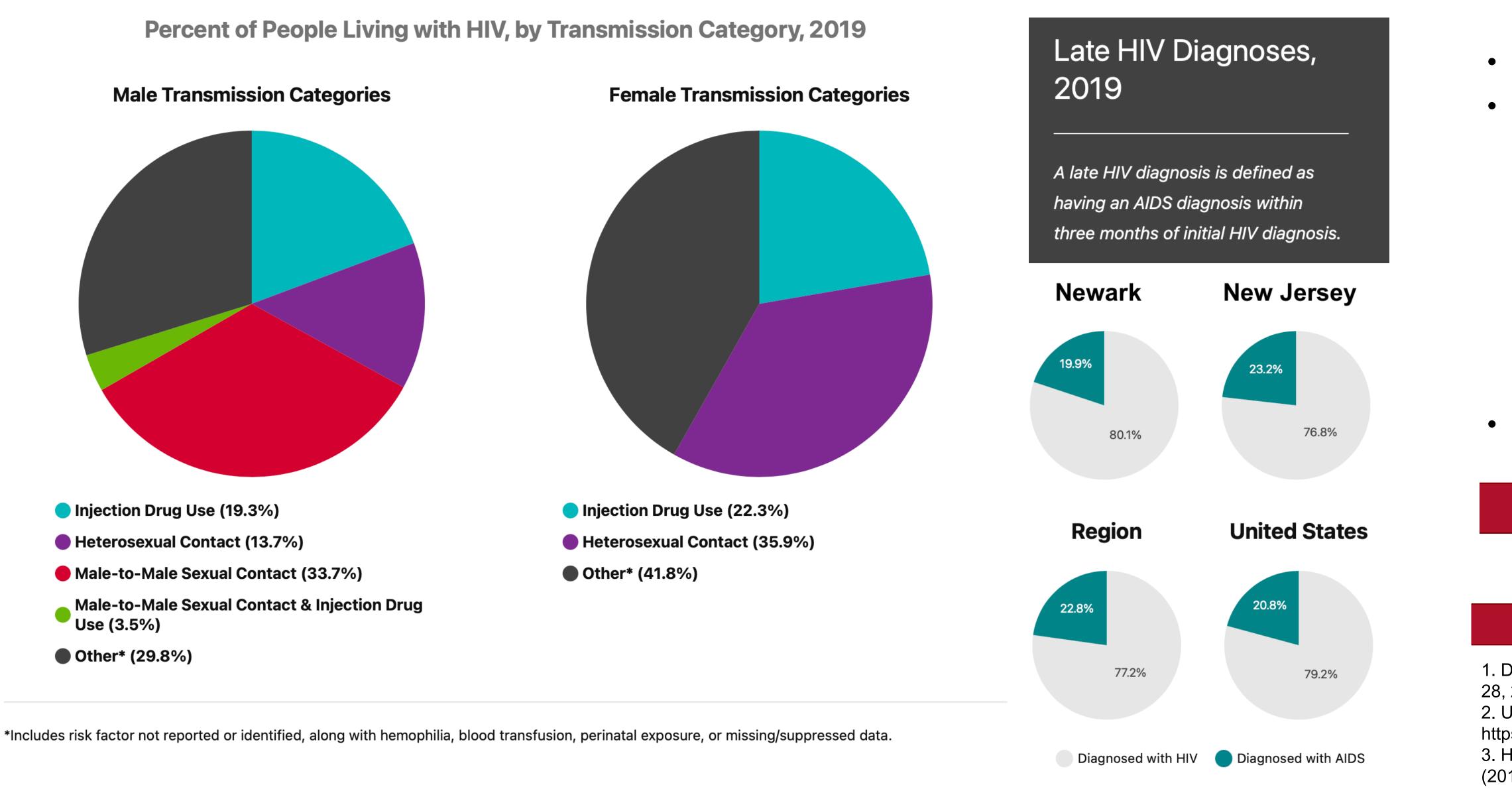
Quality improvement of outpatient initiation of HIV pre-exposure prophylaxis

- 151 people in Newark, NJ were newly diagnosed with HIV in 2019, or 67/100,000 compared to 14/100,000 across the state. HIV led to 98 deaths in Newark in 2019.¹
- Pre-exposure prophylaxis (PrEP) with oral emtricitibine/tenofovir disoproxil fumarate reduces the risk of HIV infection by >90%.²
- It was approved by the FDA in 2012, but less than 20% of men who have sex with men are estimated to have taken PrEP in 2016.²
- In 2021, the US Department of Health and Human Services determined that most commercial insurers and some Medicaid programs are required to provide oral PrEP medication, necessary laboratory tests, and clinic visits with no out-of-pocket cost to patients.²
- Since FDA approval, rates of PrEP use have risen 25-fold in 6 years. However African Americans, Hispanics, women, and residents of southern states have disproportionately low numbers of PrEP users.³
- This study aims to maximize the rate that patients at high risk of acquiring HIV infection are appropriately started on PrEP at the University Hospital Ambulatory Internal Medicine Clinic (AIMC).

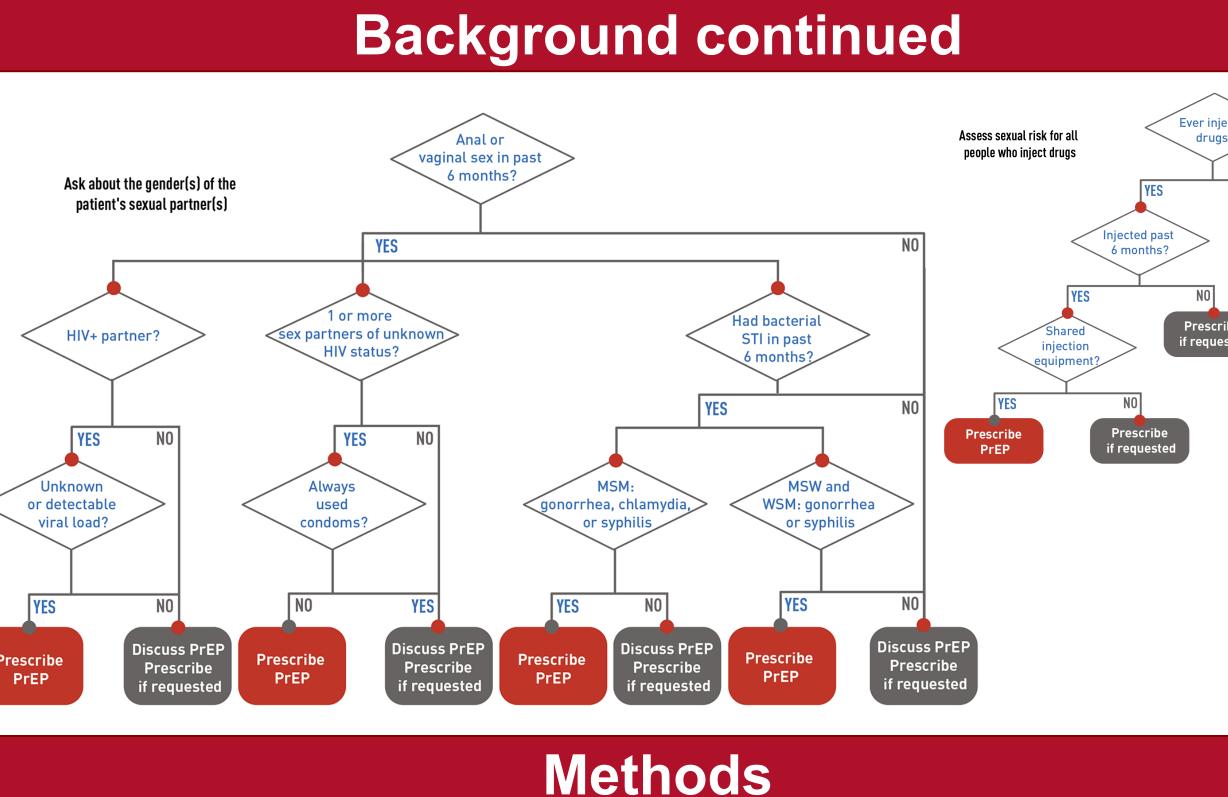


RUTGERS



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Background



Study population:

• New patients in the AIMC

Study period: TBD

Data collection: Chart review

- Medical, sexual, recreational substance use history
- Whether PrEP was offered
- Whether PrEP was initiated by the patient

Exclusion criteria: None

Interventions:

- Resident education prior to ambulatory blocks
- Adding to the new patient note template in the electronic health record (EHR)
- Iterative reassessment and readjustment
- Statistical Analysis: To be determined

Results, Conclusion

To be determined; IRB pending departmental review

References

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3. Harris, N. S., Johnson, A. S., Huang, Y.-L. A., Kern, D., Fulton, P., Smith, D. K., Valleroy, L. A., & Hall, H. I. (2019). Vital signs: Status of human immunodeficiency virus testing, viral suppression, and HIV preexposure prophylaxis — United States, 2013–2018. MMWR. Morbidity and Mortality Weekly Report, 68(48), 1117–1123. https://doi.org/10.15585/mmwr.mm6848e1