



# INVITE-Home Needlestick Protocol

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1. **DON'T panic! Needlesticks rarely occur and can be managed safely and appropriately.**
2. **NEVER perform an injection except under either in-person or Zoom supervision of your study clinician/nurse.**
3. **The needles provided for Cabenuva injection come with safety mechanisms to reduce the risk of accidental needlestick. Your study clinician will guide you through the injection process and provide in-person tips and coaching for reducing the risk of an accidental needlestick.**
4. **ALWAYS put on gloves prior to giving an injection. Your study clinician will provide you with gloves.**
5. **After giving an injection, ALWAYS and IMMEDIATELY engage the safety lock of the needle on a hard surface and immediately dispose of the needle safely in the sharps container that you were provided. NEVER attempt to recap a needle with your hands.**
6. **If you have a potential exposure to HIV, starting post-exposure prophylaxis (PEP) as soon as possible (latest by 72 hours) can prevent HIV infection. Your study clinician and team can help you assess your risk and will help you connect to PEP resources if necessary.**
7. **Lightly wash the affected area (of needlestick, nick or cut) under running water with soap; do not scrub or suck or squeeze the wound.**
8. **Allow the wound to bleed to help flush out potential contaminants, holding it under running water can help. You can apply pressure above the wound to squeeze more blood out.**
9. **Allow the wound to wash under running water for 15 minutes.**
10. **Apply an antiseptic solution, if available, and bandage.**
11. **Call Jonathan Van Nuys, NP study clinician at 415-294-0609 who can help assess the need for PEP and advise further medical follow-up.**
12. **You will be provided with a list of places where you can access PEP if you have insurance or not. Your study clinician and team will assist you in choosing a place where you can get needed care.**
13. **If PEP is recommended, time is of the essence, and the recommendation is to seek immediate or as soon as possible medical care and assessment. This can be done through your primary care provider, if you have one, or at one of the community sites listed, or at an urgent care or emergency room. You have up to 72 hours to start PEP after a needlestick exposure, but the sooner the better. Please contact your study clinician or team for assistance.**
14. **Note the approximate time of the needlestick, whether you noticed blood on the needle before sticking yourself, and whether the needlestick was deep or superficial. Your study clinician/nurse can record this for you**



## What to Expect at Your PEP Visit

1. **Samples of your blood will be drawn for baseline testing for HIV, hepatitis B, and hepatitis C, as appropriate.**
2. **Baseline liver and kidney function tests will be drawn if you and your clinician decide that PEP is recommended for you.**
3. **Vaccines may be recommended for you, depending upon your hepatitis B immunization history and status.**
4. **Please bring a list of any medications, supplements, and vaccine history (especially hepatitis B vaccine history) with you to your needlestick assessment visit to discuss with the provider.**
5. **PEP medication needs to be taken every day for 28 days and is highly effective in preventing HIV if taken within 72 hours and as directed.**
6. **If the clinician you see needs expert assistance or advice on prescribing PEP, assessing risk, and appropriate testing, please bring this number to the clinic to give to them for assistance: National Clinicians Consultation Center, PEP line—888-448-4911. If after hours, you may provide them with the study clinician number for expert consultation (Jonathan Van Nuys, NP study clinician at 415-294-0609).**
7. **PEP medication is overall, very well tolerated, but side effects may include stomach upset, diarrhea, gas, bloating, nausea, and headache. Side effects are generally mild and will often decrease and often disappear after your body gets used to the medication. Strategies that can be used to minimize side effects, if they occur, are taking the medication with bland food or changing the timing of the medication. Some people find that taking the medication at night may be preferable for sleeping through the side effects. Over-the-counter pain relief medications or stomach upset relief medication may be used if needed. If nausea is an issue, talk to your prescribing provider, they may prescribe anti-nausea medication in case it is needed.**
8. **It is important to take your PEP every day for the full 28 days. If you miss a dose, take it as soon as you remember it, don't double a dose to make up for it.**
9. **Follow-up testing may be recommended for HIV at 6 weeks and 4 months. Follow-up testing for hepatitis B may be recommended depending on your immune status. Hepatitis C testing follow-up may be recommended at 6 weeks and 4 months if the person you were injecting either has active hepatitis C or is hepatitis C status unknown.**
10. **The risk for HIV transmission from a needlestick from a source person with HIV and a detectable viral load is low (about 0.23% per needlestick). This risk is lower when the source person has an undetectable viral load or when the needlestick is superficial and not used to draw blood. Also, wearing gloves decreases the risk. Hepatitis C transmission from a needlestick with a source person with active hepatitis C is low (about 0.2% per needlestick). There is no PEP medication for hepatitis C exposure, but it is highly curable with 8-12 weeks of well-tolerated oral hepatitis C medications.**
11. **Your study team is here to help you and guide you in the unlikely event of an accidental needlestick. Please call Jonathan Van Nuys, NP, study clinician at 415-294-0609 or Parya Saberi, PharmD at 415-502-1000 ext. 17171 at any time for any guidance, support, and/or reassurance.**



## Places to Access PEP

**\* Your study nurse will help guide you to the best place for you to get care, given your individual circumstances.**

PEP Access Location	Address	Phone	Hours	Insurance Needed
AHF	518a Castro Street SF, CA 94114	415-552-2814	Wed and Fri only, 8:30am-5:30pm	No
Magnet at Strut	470 Castro Street SF, CA, 94114	415-487-3000	Tue-Sat, 10:00am-7:00pm	No
SF City Clinic	356 7 <sup>th</sup> Street SF, CA, 94103	628-217-6600	Mon 8am-4pm, Tue 1pm-6pm, Wed 8am-4pm, Thu 8-11am, 1-4pm, Fri 8am-4pm	No
SF General Hospital	995 Portrero Avenue SF, CA, 94110	415-206-2453	Mon-Fri, 10am-5pm Emergency Department is 24 hours	Yes—Medi-Cal, Medicare, SF Health Plan, Healthy SF, Healthy Workers, emergency Medi-Cal if needed.
Planned Parenthood	1522 Bush Street SF, CA, 94109	415-821-1282	Mon, Tue, Thur-8:30am-8pm Wed and Fri—8:30am-5pm Sat 8:30am – 4:30pm	No; accepts insured and uninsured at sliding scale, may be free.
Kaiser SF	2238 Geary Boulevard SF, CA, 95404	415-833-2200	Mo-Fr 8am-5pm or urgent care after hours. If unable to reach PCP, may try PEP program coordinator: Dong Phong “Phooey” Nguyen, PharmD, 415-833-0162 Mon-Fri 7:30am-3:00pm	Yes, Kaiser only. Kaiser members can access PEP at any Kaiser urgent care as well, the best way to access is by contacting your PCP. You can also call through the PEP program coordinators.
Kaiser SF Mission Bay	1600 Owens Street Mission Bay Facility SF, CA, 94158	415-833-2200	Mo-Friday 8-5 or urgent care after hours If unable to reach PCP may try PEP program coordinator: Tony To Phengrasamy, PharmD 628-242-6533 Mon-Thu -8:30am -5pm	Yes, Kaiser only. Kaiser members can access PEP at any Kaiser urgent care as well, the best way to access is by contacting your PCP. You can also call through the PEP program coordinators.