Allergies

NKA  Allergies confirmed within Meditech

New Allergies to be added in Meditech:

Lab Investigations

To order in Meditech select ED PEP (ED Post-Exposure Prophylaxis) order set

CBC  ALT  Electrolytes  Creatinine

Beta-HCG

HIV Serology

Hepatitis Testing (Hepatitis B Surface Antibody and Hepatitis C Serology)

OR

If unvaccinated or vaccine status unknown:

Hepatitis Testing (Hepatitis B Surface Antibody, Hepatitis B Core Antibody, Hepatitis B Surface Antigen and Hepatitis C Serology)

STI Screening (if sexual exposure):

Syphilis screen serology

Chlamydia and gonorrhea PCR (choose site(s) depending on patient exposure history)

Cervix  Urethra  Urine

Treatment

If high risk sexual exposure:

Ceftriaxone 250 mg IM x 1 dose

AND

Azithromycin 1 g PO x 1 dose

**OR** if history of anaphylactic reaction to beta-lactams:

Gentamicin 240 mg IM x 1 dose (give as 2 separate injections)

AND

Azithromycin 2 g PO x 1 dose

**OR** if contraindication or history of anaphylactic reaction to macrolides:

Ceftriaxone 250 mg IM x 1 dose

AND

Doxycycline 100 mg PO bid x 7 days

Treatment (con’t)

If initiating PEP:

PEP kit (4-day supply, first dose to be taken in the Emergency Department. PEP kit located in ED Orange Zone ADU)

Tenofovir Disoproxil Fumerate 300 mg/Emtricitabine 200 mg (Truvada®) + Dolutegravir 50 mg (Tivicay®)

Prescriptions provided (Medications must be prescribed together)

Tenofovir Disoproxil Fumerate 300 mg/Emtricitabine 200 mg (Truvada®) 1 tablet PO once daily x 24 days

Dolutegravir (Tivicay®) 50 mg PO once daily x 24 days

Hepatitis B:

Vaccinated with known Anti-HBs greater than or equal to 10 milliunits/mL: No further action necessary

Never vaccinated, incomplete vaccine series, known vaccine non-responder, antibody level unknown:

Source patient HBsAg negative

Initiate vaccine series:  Recombivax HB 10 mcg IM x 1 dose OR Engerix B 20 mcg IM x 1 dose\*

Source patient HBsAg positive or unknown

Initiate vaccine series:  Recombivax HB 10 mcg IM x 1 dose OR Engerix B 20 mcg IM x 1 dose\*

Hepatitis B Immune Globulin (HBIG) (0.06 mL/kg)­­­ \_\_\_\_\_\_\_\_\_\_\_\_ mL IM x 1 dose (obtain from blood bank). Give at separate site from hepatitis vaccine.

\*Both products are interchangeable, provided by Public Health

Consults

Page Infectious Diseases on call if any of the following criteria are met

Source is known or suspected to harbour drug resistant HIV

Exposed person is known or suspected to be pregnant; or is breastfeeding

Exposed person has renal or liver disease which may require antiretroviral dosing adjustment

Exposed person is on multiple medications that may increase risk of drug interactions

Exposure was more than 72 hours ago

Urgent referral to Infectious Diseases Clinic (See standard Emergency Department Referral Form)

Additional Orders

DO NOT USE: <, >, SC, SQ, U, IU, zero after decimal (write 1 mg)     ALWAYS USE zero before decimal (0.5 mg)