

Marking Sheet: Post-exposure prophylaxis

Examiner Candidate			
0= Not attempted, 1=partially completed, 2=fully	com	nplet	ed
	0	1	2
Introduces self to patient			
Obtains history			
Establishes exact time of incident (20 minutes ago)			
Establishes that injury was percutaneous			
Checks wound is OK			
Asks whether first aid has been given / was the wound encouraged to bleed?			
Offers analgesia			
Confirms that the source has established HIV infection			
Asks patient about PMHx / DHx / Allergies			
Asks patient about sexual history			
Establishes that female patient is not pregnant			
Establishes that patient is immunised for Hepatitis B & blood tests have			
shown adequate response			
Explanation that risk of transmission is 3 per 1000 or 1 in 300			
Advises patient that PEP is best given within 1 hour of exposure			
Seeks patient's own views on having PEP			
Doctor's knowledge of the drugs to be prescribed (name and dose)			
Explanation that PEP will continue for 4 weeks			
Explanation of side effects of drugs e.g. nausea / vomiting / diarhoea			
Encourage patient to have baseline blood sample for storage & future analysis			
Obtains consent to perform the blood test			
Advice about prescription of anti-emetics and anti-diarrhoeals			
Advice about seeking medical help if there is persistent vomiting			
Advice about barrier contraception			
Mentions follow up blood test at 12 and 24 weeks			
Legal aspects of the injury – has it been reported to police's Occupational Health service? Has it been entered in injury book? Has the burglar been arrested?			
Feasibility of taking blood sample from burglar			
Arranges follow up – GP / Occ Health / Sexual Health clinic			
Advice to avoid donating blood			
Refers to local protocol for dispensing PEP / contact on call PEP specialist			
Allows patient to asks questions			
Addresses patient's concerns			

Examiner's global score (1-5) Actor's global score (1-5)

Examiner's Impression: Pass Borderline Clear Fail

Comments