



**HIV - Infant of Mother with HIV Infection Not Ruled Out**

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DATE \_\_\_\_/\_\_\_\_/\_\_\_\_ TIME \_\_\_\_\_  
 DD MM YYYY

WEIGHT: \_\_\_\_\_ KG      GESTATIONAL AGE (GA) \_\_\_\_\_

ALLERGY CAUTION sheet reviewed

**Reminders**

- ▶ If HIV infection has not been ruled out: **AVOID** infant feeding of breast milk until **MATERNAL HIV negative status is confirmed and ongoing risk factors are ruled out**
- ▶ Universal precautions for blood and body fluid: wash injection site prior to IM injection or blood sampling

**Medications**

- ▶ Initiate TRIPLE antiretroviral prophylaxis with zidovudine, nevirapine, and lamivudine **WITHIN 90 MINUTES** of birth

**Zidovudine**

**35 weeks and greater**

- zidovudine \_\_\_\_\_ mg (4 mg/kg/dose) PO Q12H for 6 weeks
- \*OR\*
- zidovudine \_\_\_\_\_ mg (3 mg/kg/dose) IV Q12H for 6 weeks

**30 to 34 weeks**

- zidovudine \_\_\_\_\_ mg (2 mg/kg/dose) PO Q12H for 2 weeks (for first 2 weeks)
- zidovudine \_\_\_\_\_ mg (3 mg/kg/dose) PO Q12H for 4 weeks (to start after initial 2 week therapy compl
- \*OR\*
- zidovudine \_\_\_\_\_ mg (1.5 mg/kg/dose) IV Q12H for 2 weeks (for first 2 weeks)
- zidovudine \_\_\_\_\_ mg (2.3 mg/kg/dose) IV Q12H for 4 weeks (to start after initial 2 week therapy compl

**29 weeks and less**

- zidovudine \_\_\_\_\_ mg (2 mg/kg/dose) PO Q12H for 4 weeks (for first 4 weeks)
- zidovudine \_\_\_\_\_ mg (3 mg/kg/dose) PO Q12H for 2 weeks (to start after initial 4 week therapy comple
- \*OR\*
- zidovudine \_\_\_\_\_ mg (1.5 mg/kg/dose) IV Q12H for 4 weeks (for first 4 weeks)
- zidovudine \_\_\_\_\_ mg (2.3 mg/kg/dose) IV Q12H for 2 weeks (to start after initial 4 week therapy compl

**Nevirapine**

**Greater than 2 kg body weight:**

- nevirapine 12 mg PO once at birth, once at 2 days of age, and once at 6 days of age (total 3 doses)

**Less than or equal to 2 kg body weight:**

- nevirapine 8 mg PO once at birth, once at 2 days of age, and once at 6 days of age (total 3 doses)

**LamiVUDine**

**Greater than 2 kg body weight:**

- lamiVUDine 6 mg PO Q12H for 2 weeks

**Less than or equal to 2 kg body weight:**

- lamiVUDine 4 mg PO Q12H for 2 weeks

Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

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**Laboratory**

▶ **To be done within 90 MINUTES of birth**

- Complete blood count (CBC) with differential
- Aspartate aminotransferase (AST)
- Alanine aminotransferase (ALT)
- Bilirubin, total unconjugated and conjugated
- Urea
- Creatinine (Cr), serum
- Saliva Swab CMV
- Infant Diagnostic HIV PCR: Send 2 mL in one EDTA tube (lavender top) (PHSA Lab Serology Screening Requisition #00073506 Request Infant Diagnostic HIV PCR under Other Tests)

**Consults**

- Pediatrician on-call
- Oak Tree Clinic 604-875-2250 (leave message if after hours)

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