

UNCMC HIV Post-Exposure Prophylaxis (PEP): Pediatric Guideline

Please contact Dr. Thomas Belhorn (pager 216-9049) for all pediatric HIV PEP patients.

This step is vital to ensure appropriate regimen selection and follow-up scheduled.

Age ≥ 13 years:

Tenofovir DF 300mg / Emtricitabine 200mg [Truvada®] one tablet daily **PLUS**
Raltegravir [Isentress®] 400mg one tablet twice daily (same as adult)

Age 2-12 years:

Children ≥ 6 years old **AND** ≥ 35kg: Tenofovir DF 300mg / Emtricitabine 200mg [Truvada®] one tablet daily **PLUS** Raltegravir [Isentress®] 400mg one tablet twice daily (same as adult)

Children < 6 years old **OR** < 35 kg: for the three-day supply, use the **liquid** formulation of Zidovudine, Lamivudine, and Lopinavir/Ritonavir. For the outpatient regimen, use of the liquid or tablet formulations is appropriate.

Age < 2 years:

Contact Dr. Thomas Belhorn (pager 216-9049) for further assistance

After confirming need for HIV PEP, three orders must be placed:

- 1) Inpatient medication first-doses to be given in the ED (Epic order)
- 2) Outpatient 3-day supply (prescription printed from Epic, tubed to Pediatric Satellite Pharmacy who will return completed products)
- 3) Outpatient 28-day supply (prescription printed from Epic, handed to patient/family to fill at COP or pharmacy of their choosing)

When discharging patients, please send prescriptions to UNC Central Outpatient Pharmacy (COP) during regular business hours. For patients discharged outside of COP business hours, prescribers may direct patients to contact COP immediately when they open **OR** the prescriber may send the prescriptions to an available pharmacy. The prescriber **must** ensure the pharmacy has medications in stock prior to sending the prescriptions. Prescriptions should be written for a **28-day supply**. If the patient qualifies for the Pharmacy Assistance Program (PAP), please direct them to the appropriate application form ([ENGLISH](#) or [SPANISH](#)). Patients may also contact a PAP counselor by calling (919) 966-7690 for further assistance.

UNC COP Hours: M-F 0700-2000; Sa-Su 0830-1600 (discharges only on weekends)

PAP Counselor Services: M-F 0800-1630; Sa-Su CLOSED

Please refer to **Tables 1-3** on the next page regarding dosing recommendations for patients 2-12 years of age.

Table 1: Weight-based Zidovudine (Retrovir®) Dosing

Weight	Dose (capsule/tablet) ¹	Dose (syrup)
< 9 kg		12 mg/kg/dose BID
9 - < 17 kg	100 mg BID	100 mg (10 mL) BID
17 - < 22 kg	100 mg qAM + 200 mg qPM	150 mg (15 mL) BID
22 - < 27 kg	200 mg BID	200 mg (20 mL) BID
27 - < 30 kg	200 mg qAM + 300 mg qPM	250 mg (25 mL) BID
≥ 30 kg	300 mg BID	300 mg (30 mL) BID

Available products at UNCCMC: zidovudine 100 mg capsules; 300 mg tablets; 10 mg/mL syrup

¹Tablets may not be crushed or split; capsules may not be opened.

Table 2: Weight-based Lamivudine (Epivir®) Dosing

Weight	Dose (tablet) ¹	Dose (solution)
< 14 kg		5 mg/kg/dose BID
14 - < 20 kg	75 mg BID	75 mg (7.5 mL) BID
20 - < 25 kg	75 mg qAM + 150 mg qPM	110 mg (11 mL) BID
≥ 25 kg	150 mg BID	150 mg (15 mL) BID

Available products at UNCCMC: lamivudine 150 mg tablets¹; 10 mg/mL solution

¹Tablets may be split in half.

Table 3: Weight-based Lopinavir/Ritonavir (Kaletra®) Dosing

Weight	Dose (tablet) ¹	Dose (solution)
< 15 kg		12 mg/kg/dose ² BID
15 - < 25 kg	200 mg / 50 mg BID	200 mg / 50 mg (2.5 mL) BID
25 - < 35 kg ³	200 mg / 50 mg qAM 400 mg / 100 mg qPM	300 mg / 75 mg (3.75 mL) BID
≥ 35 kg ³	400 mg / 100 mg BID	400 mg / 100 mg (5 mL) BID

¹Tablets may not be crushed or split.

²Dosing based off of lopinavir component.

³Consider using raltegravir 400 mg tabs in children ≥ 6 years old and > 25 kg who are able to swallow whole tablets.

Available products at UNCCMC: lopinavir 200 mg / ritonavir 50 mg tablets;

80 mg lopinavir / 20 mg ritonavir per mL solution