

INFORMATION GUIDE

Laboratory Monitoring for Persons Prescribed HIV PrEP

David H. Spach, MD¹ / Brian R. Wood, MD¹ / Raphael J. Landovitz, MD²

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Abbreviations

TDF-FTC = Tenofovir DF-emtricitabine

TAF-FTC = Tenofovir alafenamideemtricitabine

CAB-LA = Long-acting injectable cabotegravir

LEN-SQ = Subcutaneous lenacapavir

ABOUT THIS INFORMATION GUIDE

This information guide is intended for health care professionals involved in care of persons interested in or receiving HIV preexposure prophylaxis (PrEP). This guide was created and produced by the University of Washington Infectious Diseases Education & Assessment Program (IDEA) as part of the federally-funded *National HIV PrEP Curriculum* project.

SOURCES FOR LABORATORY MONITORING GUIDE

The laboratory monitoring tables are based on the 2021 Centers for Disease Control and Prevention (CDC) HIV PrEP Clinical Practice Guideline and the Clinical Recommendation for the Use of Injectable Lenacapavir as HIV Preexposure Prophylaxis — United States, 2025; some information in these tables have been slightly modified from the original CDC recommendations based on updated information and new CDC viral hepatitis screening recommendations.

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LAST UPDATED

This educational guide was last updated November 3, 2025.

AUTHOR AFFILIATIONS

- ¹ Division of Allergy and Infectious Diseases / University of Washington
- ² Division of Infectious Diseases / University of California, Los Angeles

Table based on 2021 CDC Clinical Practice Guidelines for HIV PrEP

Laboratory Evaluation in Persons Taking Tenofovir DF-Emtricitabine (TDF-FTC) HIV PrEP

Test	Initial visit	Q 3 months	Q 6 months	Q 12 months	When stopping
HIV Antigen/ Antibody*	ALL [†]	ALL			ALL
HIV-1 RNA	If indicated [‡]	ALL			ALL
Renal Function (eCrCl)	ALL		Age ≥50 years OR baseline eCrCl <90 mL/min [§]	Age <50 years <i>AND</i> baseline eCrCl ≥90 mL/min [§]	ALL
Syphilis Serology	ALL	MSM	MSW WSM		MSM
Gonorrhea	ALL	MSM	MSW WSM		MSM
Chlamydia	ALL	MSM	MSW WSM		MSM
Hepatitis B Serology	ALL [¶]				
Hepatitis C Serology	ALL			MSM and/or PWID	
Pregnancy Test	ALL [#]	ALL [#]			

ABBREVIATIONS:

MSM = men who have sex with men; MSW = men who have sex with women; WSM = women who have sex with men; PWID = persons who inject drugs

LEGEND:

- *The HIV antigen-antibody test must be a blood-based assay; oral fluid HIV testing is not recommended.
- † Perform within 7 days of starting HIV PrEP
- ‡ Not routinely recommended, but order if any of the following apply: (1) received oral HIV PrEP or HIV PEP medications in past 3 months; (2) received cabotegravir injection in the past 12 months; (3) had high-risk exposure to HIV in prior 4 weeks; (4) has symptoms that suggest acute HIV.
- §TDF-FTC is not recommended if the estimated creatinine clearance is less than 60 mL/min.
- \P One-time screening recommended for all adults in the United States. Give hepatitis B immunization if nonimmune.
- #For women with childbearing potential; advised for counseling purposes

EDITOR'S NOTES

- 1. Inability to order HIV-1 RNA testing should not preclude the use of TDF-FTC for HIV PrEP.
- 2. These recommendations pertain to persons taking daily oral TDF-FTC or on-demand (2-1-1) TDF-FTC.

Table based on 2021 CDC Clinical Practice Guidelines for HIV PrEP

Laboratory Evaluation in Persons Taking Tenofovir Alafenamide-Emtricitabine (TAF-FTC) HIV PrEP

Test	Initial visit	Q 3 months	Q 6 months	Q 12 months	When stopping
HIV Antigen/ Antibody*	ALL [†]	ALL			ALL
HIV-1 RNA	If indicated ‡	ALL			ALL
Renal Function (eCrCl)	ALL		Age ≥50 years OR baseline eCrCl <90 mL/min [§]	Age <50 years AND baseline eCrCl ≥90 mL/min [§]	ALL
Syphilis Serology	ALL	MSM	MSW WSM		MSM
Gonorrhea	ALL	MSM	MSW WSM		MSM
Chlamydia	ALL	MSM	MSW WSM		MSM
Hepatitis B Serology	ALL				
Hepatitis C Serology	ALL			MSM and/or PWID	
Lipid Panel	ALL			ALL	
Pregnancy Test	ALL [#]	ALL [#]			

ABBREVIATIONS:

MSM = men who have sex with men; MSW = men who have sex with women; WSM = women who have sex with men; PWID = persons who inject drugs

*The HIV antigen-antibody test must be a blood-based assay; oral fluid HIV testing is not recommended.

EDITOR'S NOTES

1. Inability to order HIV-1 RNA testing should not preclude the use of TAF-FTC for HIV PrEP.

[†] Perform within 7 days of starting HIV PrEP

[‡]Not routinely recommended, but order if any of the following apply: (1) received oral HIV PrEP or HIV PEP medications in past 3 months; (2) received cabotegravir injection in the past 12 months; (3) had high-risk exposure to HIV in prior 4 weeks; (4) has symptoms that suggest acute HIV.

[§] TAF-FTC is not recommended if the estimated creatinine clearance is less than 30 mL/min.

 $[\]P$ One-time screening recommended for all adults in the United States. Give hepatitis B immunization if nonimmune.

[#]For women with childbearing potential; advised for counseling purposes

Table based on 2021 CDC Clinical Practice Guidelines for HIV PrEP

Laboratory Evaluation in Persons Receiving Injectable Cabotegravir (CAB-LA) for HIV PrEP

TEST	Initial visit	1 month	Q2 months	Q4 months	Q6 months	Q12 months	When stopping
HIV Antigen/ Antibody*	ALL [†]	ALL [†]	ALL [‡]				ALL
HIV-1 RNA	ALL [§]	ALL [§]	ALL [§]				ALL
Syphilis	ALL			MSM	MSW WSM		MSM
Gonorrhea	ALL			MSM	MSW WSM		MSM
Chlamydia	ALL			MSM	MSW WSM		MSM
Hepatitis B Serology	ALL [¶]						
Hepatitis C Serology	ALL					MSM and/or PWID	
Pregnancy Test	ALL [#]			ALL			

ABBREVIATIONS:

MSM = men who have sex with men; MSW = men who have sex with women; WSM = women who have sex with men; PWID = persons who inject drugs

LEGEND:

 st The HIV antigen-antibody test must be a blood-based test approved or cleared by the FDA for the diagnosis of acute or primary HIV-1 infection. Two testing options are acceptable: (1) a laboratory blood-based HIV-antigen antibody test, or (2) a rapid, point-of-care blood HIV antigen-antibody test. Oral fluid HIV testing should not be used.

† Perform within 7 days of starting HIV PrEP. Confirm negative HIV status prior to giving the first dose of cabotegravir. If an oral cabotegravir lead-in is used, the initial HIV testing should be done within 7 days of starting the oral lead-in, repeated within 7 days of the first cabotegravir initiation injection dose, and repeated again prior to the second initiation injection dose given 1 month later. If a rapid blood-based HIV antigen-antibody test is used to document the negative HIV test, a supplemental laboratory blood-based HIV antigen-antibody test should also be obtained; the cabotegravir can be started if the laboratory blood-based HIV antigen-antibody test result is pending.

‡ Confirm negative HIV status prior to giving cabotegravir continuation doses. If a rapid blood-based HIV antigen-antibody test is used to document the negative HIV test, a supplemental laboratory blood-based HIV antigen-antibody test should also be obtained; the cabotegravir dose can be given if the laboratory blood-based HIV antigen-antibody test result is pending.

§ An HIV-1 RNA should be obtained prior to the first dose of cabotegravir (oral lead-in and/or first injection) and repeated prior to every cabotegravir injection. Oral cabotegravir lead-in and cabotegravir injections can be given if the HIV-1 RNA result is pending and the blood-based HIV antigen-antibody test result is negative.

 \P One-time screening recommended for all adults in the United States. Give hepatitis B immunization if nonimmune.

#For women with childbearing potential; advised for counseling purposes

Table based on 2021 CDC Clinical Practice Guidelines for HIV PrEP and Clinical Recommendation for the Use of Injectable Lenacapavir as HIV Preexposure Prophylaxis — United States, 2025

Laboratory Evaluation in Persons Starting or Receiving Lenacapavir for HIV PrEP

Test	Initial visit	Q 6 months	Q 12 months	When stopping
HIV-1 Antigen/ Antibody*	ALL [†]	ALL [‡]	ALL [‡]	ALL
HIV-1 RNA	ALL [§]			
Syphilis Serology	ALL	MSM [¶]	ALL	ALL
Gonorrhea	ALL	MSM [¶]	ALL	ALL
Chlamydia	ALL	MSM [¶]	ALL	ALL
Hepatitis B Serology	ALL [#]			
Hepatitis C Serology**	ALĽ ^{††}		MSM and/or PWID	
Pregnancy Test	ALL ^{‡‡}	ALL ^{‡‡}	ALL ^{‡‡}	

ABBREVIATIONS: MSM = Men who have sex with men; PWID = Persons who Inject Drugs

LEGEND:

- *The HIV antigen-antibody test must be a blood-based test approved or cleared by the FDA for the diagnosis of acute or primary HIV-1 infection. Two testing options are acceptable: (1) a laboratory blood-based HIV-antigen antibody test, or (2) a rapid, point-of-care blood HIV antigen-antibody test. Oral fluid HIV testing should not be used.
- † Perform within 7 days prior to starting HIV PrEP. Confirm negative HIV status prior to giving the lenacapavir initiation dose. If a rapid blood-based HIV antigen-antibody test is used to document the negative HIV test, a supplemental laboratory blood-based HIV antigen-antibody test should also be obtained; lenacapavir can be started if the laboratory blood-based HIV antigen-antibody test result is pending.
- ‡ Confirm negative HIV status prior to giving the lenacapavir continuation dose. If a rapid blood-based antigen-antibody test is used to document the negative HIV test, a supplemental laboratory blood-based HIV antigen-antibody test should also be obtained; the lenacapvir continuation dose can be given if the laboratory blood-based HIV antigen antibody test result is pending.
- §A blood sample for an HIV-1 RNA test should be drawn within 7 days prior to the initiation dose; the lenacapavir initiation phase dosing can be given if the HIV-1 RNA test result is pending and the blood-based HIV antigen-antibody test is negative. If starting lenacapavir after a switch from another HIV PrEP regimen without any interruption, only a laboratory-based HIV antigen-antibody test is needed before the injection.
- Testing for MSM is usually done every 3-6 months.
- $^{\#}$ One-time screening for hepatitis B virus (HBV) recommended for all adults in the United States. Screen with hepatitis B surface antigen (HBsAg), hepatitis B surface antibody (HBsAb), and hepatitis B core antibody (HBcAb).
- **One-time screening for HCV recommended for all adults in the United States.
- \dagger Screen with hepatitis C antibody test and, if reactive, reflex to hepatitis C virus (HCV) RNA test.
- ^{‡‡}For women with childbearing potential; advised for counseling purposes.

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DISCLOSURES

Dr. Spach, Dr. Wood, and Dr. Landovitz have no disclosures.

APPRECIATION

The authors would like to thank Peter Harrison, MPH and Carol Kono-Noble for their design and production work.

ACKNOWLEDGEMENT

The Health Resources and Services Administration (HRSA), Department of Health and Human Services (HHS) and Centers for Disease Control and Prevention (CDC) provided financial support for the National HIV PrEP Curriculum. The award provided 100% of total costs and totaled \$299,994 from HRSA and \$603,203 from CDC. The contents are those of the author. They may not reflect the policies of HRSA, HHS, CDC, or the U.S. Government.







