

The Office of Management and Budget (OMB) Peer Review Plan for the 2025 US Public Health Service Guidelines for the Management of Occupational Exposures to Human Immunodeficiency Virus and Recommendations for Postexposure Prophylaxis in Healthcare Settings

Title: 2025 US Public Health Service Guidelines for the Management of Occupational Exposures to Human Immunodeficiency Virus and Recommendations for Postexposure Prophylaxis in Healthcare Settings

Abstract:

The recommendations in this guideline update the 2013 “Updated US Public Health Service (PHS) Guidelines for the Management of Occupational Exposures to Human Immunodeficiency Virus and Recommendations for Postexposure Prophylaxis,” hereafter referred to as the 2013 PHS guidelines.¹

The Centers for Disease Control and Prevention assembled a working group of representatives from federal agencies in the U.S. Department of Health and Human Services (HHS) who identified the priority topics for update and conducted systematic literature reviews to formulate recommendations. All recommendations were reviewed by a non-consensus forming panel of external experts, and at a public meeting of the Healthcare Infection Control Practices Advisory Committee (HICPAC). New evidence-based recommendations are developed using the Grading of Recommendations Assessment, Development and Evaluation (GRADE) framework and classified according to the HICPAC recommendation scheme when evidence supported recommendation development.^{3,4} Other recommendations in this document are classified as good practice statements according to the criteria set forth by GRADE.⁵ The working group solicited additional feedback on recommendations from relevant agencies, subject-matter experts, stakeholders and the public.

This update provides new recommendations on considerations for HCP on post-exposure prophylaxis. Recommendations that have changed since the 2013 PHS guidelines include:

- new antiretroviral drug regimens for post-exposure prophylaxis (PEP);
- a shortened duration of post-exposure follow-up HIV testing;
- elimination of routine laboratory tests for antiretroviral drug toxicity; and
- considerations for PEP for HCP with exposures to source patients with undetectable viral loads.

The principles of exposure management remain unchanged in the 2025 recommendations, and this guideline continues to emphasize primary prevention strategies; the prompt reporting and management of occupational exposures; adherence to recommended HIV PEP regimens when indicated; the role of expert consultation in management of exposures; and follow-up of exposed HCP.

Purpose: The availability of new medication options, new information on the window of detection for different HIV tests, and the risk of transmission from people with undetectable viral loads prompted this update. The primary intended audience for these recommendations remains occupational health services staff providing occupational infection prevention and control services to healthcare personnel (HCP).

Public Health Impact: Implementation of the guidelines may optimize PEP adherence and treatment experience among HCP following occupational exposures to HIV infection during routine care delivery.

Type of Dissemination: Influential Scientific Information (ISI)

Timing of Review (including deferrals): September – October, 2024

Type of Review (panel, individual or alternative procedure): Individual

Opportunities for the Public to Comment (how and when):

- *Healthcare Infection Control Practices Advisory Committee (HICPAC) Meeting:*
 - August 22, 2023: Dr. Aaron Kofman (DHQP, CDC) presented an informational update on the draft 2025 US Public Health Service Guideline for the Management of Occupational Exposures to Human Immunodeficiency Virus and Recommendations for Postexposure Prophylaxis in Healthcare Settings. Rationale for the update, timeline, and proposed draft key recommendations were shared. Updated drug recommendations for postexposure prophylaxis regimens were included. No comments were submitted during the public comment period.

Peer Reviewers Provided with Public Comments before the Review: No public comments had been submitted at the time of the review.

Anticipated Number of Reviewers: 3

Primary Disciplines or Expertise: HIV prevention strategies and research, infectious disease, infection prevention and control

Reviewers Selected by (agency or designated outside organization): Centers for Disease Control and Prevention (CDC)

Public Nominations Requested for Reviewers: No

Charge to Peer Reviewers: The document that you will review is a draft of the guidelines document that will be posted on the CDC Website entitled “2025 US Public Health Service Guidelines for the Management of Occupational Exposures to Human Immunodeficiency Virus and Recommendations for Postexposure Prophylaxis in Healthcare Settings”.

We request your expert opinion on several issues, in particular whether:

- The methods for developing the recommendations are appropriate.
- The rationale for not grading the quality of evidence and strength of recommendations is clear and appropriate.
- The evidence that supports new recommendations is complete, clear and appropriately collected and synthesized. (e.g., findings of any key studies are not missing, misinterpreted or inappropriately cited).
- The description of evidence supporting new recommendations notes relevant limitations of the evidence.
- Recommendations are relevant and complete – and their benefits and limitations are clearly noted and appropriate.
- The audience is clear and appropriate.

At a later time, CDC will publicly post any comments you make (without attribution) in response to your comments on this page ([CDC/ATSDR Peer Review Agenda](#) | [Science Quality](#) | [CDC](#)).

Peer reviewers:

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Additional elements to be added to the public posting as they become available:

- Peer Reviewers' Comments
- CDC/ATSDR's Response to Reviewers' Comments
- Final guidance document (an Influential Scientific Assessment)

References:

1. Kuhar DT, Henderson DK, Struble KA, et al. Updated US Public Health Service guidelines for the management of occupational exposures to human immunodeficiency virus and recommendations for postexposure prophylaxis. *Infect Control Hosp Epidemiol.* 2013;34(9):875-92. <http://doi.org/10.1086/672271>
3. The Healthcare Infection Control Practices Advisory Committee. Update to the Centers for Disease Control and Prevention and the Healthcare Infection Control Practices Advisory Committee Recommendation Categorization Scheme for Infection Control and Prevention Guideline Recommendations. 2019 [cited 2025 March 20]; Available from: <https://www.cdc.gov/hicpac/media/pdfs/recommendation-scheme-update-508.pdf>
4. Guyatt GH, Oxman AD, Vist GE, et al. GRADE: an emerging consensus on rating quality of evidence and strength of recommendations. *BMJ* 2008;336(7650):924-6.
5. Dewidar O, Lotfi T, Langendam MW, et al. Good or best practice statements: proposal for the operationalisation and implementation of GRADE guidance. *BMJ Evid Based Med* 2023;28(3):189-196.