

Step-by-Step Instructions for Using the HIV Antiretroviral Medication Coding Charts

- From the patient's chart or medication list from the pharmacy, identify his/her HIV medications.
 - Be careful not to include prophylaxis (e.g. Septra, Dapsone, Atovaquone, Pentamidine nebulizer, etc.) or medications for the treatment of opportunistic infections (e.g. azithromycin). These drugs are reported in the "other" medications. You will know they are not HIV antiretrovirals because they are also not found on the HIV Antiretroviral Coding Chart.
- Using Chart A, complete the following:
 - Assign a color to each generic/brand name drug based on its drug class. For example:
 - = "nukes"
 - = "non-nukes"
 - = protease inhibitors
 - = entry/fusion inhibitors
 - = integrase inhibitors
 - Note: ritonavir (Norvir) is not an HIV medication so do not assign it a color.**
 - Note any combination medications (**Atripla, Complera, Combivir, Epzicom, Truvada, or Trizivir**) – those that contain at least two drugs. They will be considered on a case by case basis.
- Using Chart B and the guidelines below, determine if the patient is on mono-, dual or triple therapy and record in ARIES.

Monotherapy

- If you have identified **only one color (i.e. one drug)**, then the patient is receiving monotherapy.
 - Please note: if a patient is receiving only Kaletra (**lopinavir**/ritonavir), he/she is on monotherapy because ritonavir is only used as a booster.
 - If a patient is on any combination drug, then he/she is NOT on monotherapy.

Dual Therapy

- If you have identified **only two but different colors (i.e. two different drugs)**, then the patient is receiving dual therapy.
 - Example: Retrovir (**zidovudine**) + Viramune (**nevirapine**)
- If a patient is **only** on a **combination drug (specifically Combivir, Epzicom, Truvada or Trizivir*)**, then the patient is also receiving dual therapy.
 - *Please note: if a patient is receiving only **Trizivir**, the patient is receiving dual therapy. Although Trizivir contains 3 medications (abacavir/lamivudine/zidovudine), they all belong to the same class ("nukes"). Trizivir needs to be combined with a medication from another class in order to qualify as triple therapy.

Triple Therapy (Highly Active Antiretroviral Therapy or HAART)

Patients on triple therapy are typically on 3 different drugs – two of which can be in the same class. Common combinations for HIV medication regimens include:

- Two "nukes" + "non-nuke"
- Two "nukes" + protease in inhibitor

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7. If you have identified any of the following from the list below, then the patient is considered to be on triple therapy (HAART therapy).
- a. If the patient is on **Atripla** (efavirenz/emtricitabine/tenofovir) or **Complera** (rilpivirine/emtricitabine/tenofovir) – this makes sense because they contain two “nukes” (**emtricitabine** and **tenofovir**) plus a “non-nuke” (**efavirenz** or **rilpivirine**).
 - b. If the patient is on a **combination drug** (specifically Combivir, Epzicom, Truvada, or Trizivir) **and** a medication from a **different class**.
 - i. For example: **Truvada** (**emtricitabine** + **tenofovir**) + Prezista (**darunavir**) + Norvir (ritonavir)
 - c. If you have identified **at least two of the same colors and a different color**:
 - i. For example: Epivir (**lamivudine**) + Videx (**didanosine**) + Sustiva (**efavirenz**)
 - d. If you have identified **three different colors**:
 - i. For example: Prezista (**darunavir**) + Norvir (ritonavir) + Intelence (**etravirine**) + Isentress (**raltegravir**)
8. Please consult the patient’s primary care physician if you suspect that the patient is on salvage therapy.