APPLICATION FOR SUBSIDY BY SPECIAL AUTHORITY

APPLICANT (stamp or sticker acceptable)	PATIENT NHI:	REFERRER Reg No:
Reg No:	First Names:	First Names:
Name:	Surname:	Surname:
Address:	DOB:	Address:
	Address:	
Fax Number:		Fax Number:

Antiretrovirals

Initial application — Confirmed HIV					
Applications only from a named specialist. Approvals valid without further renewal unless notified.					
Prerequisites(tick box where appropriate) The patient has confirmed HIV infection Note: Tenofovir disoproxil prescribed under endorsement for HIV is included in the count of up to 4 subsidised antiretrovirals. Subsidies apply for a combination of up to four antiretroviral medications. The combination of a protease inhibitor and low-dose ritonavir given as a booster (either as part of a combination product or separately) will be counted as one protease inhibitor for the purpose of accessing funding to antiretrovirals.					
Renewal — Confirmed HIV					
Current approval Number (if known):					
Applications only from a named specialist. Approvals valid without further renewal unless notified.					
Prerequisites(tick box where appropriate)					
The treatment remains appropriate and the patient is benefiting from treatment					
Initial application — Prevention of maternal transmission Applications only from a named specialist. Approvals valid for 1 year. Prerequisites(tick boxes where appropriate)					
or Prevention of maternal foetal transmission					
Treatment of the newborn for up to eight weeks					
Note: Tenofovir disoproxil prescribed under endorsement for HIV is included in the count of up to 4 subsidised antiretrovirals. Subsidies apply for a combination of up to four antiretroviral medications. The combination of a protease inhibitor and low-dose ritonavir given as a booster (either as part of a combination product or separately) will be counted as one protease inhibitor for the purpose of accessing funding to antiretrovirals. Some antiretrovirals are unapproved or contraindicated for this indication. Practitioners prescribing these medications should exercise their own skill.					

judgement, expertise and discretion, and make their own prescribing decisions with respect to the use of a Pharmaceutical for an indication for which it is not approved or contraindicated.

I confirm the above details are correct and that in signing this form I understand I may be audited.

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Antiretrovirals - continued

Initial application — post-exposure prophylaxis following exposure to HIV Applications from any relevant practitioner. Approvals valid for 4 weeks. Prerequisites(tick boxes where appropriate)							
	and		Treat	ment course to be initiated within 72 hours post exposure			
		or		Patient has had condomless anal intercourse or receptive vaginal intercourse with a known HIV positive person with an unknown or detectable viral load greater than 200 copies per ml			
		or		Patient has shared intravenous injecting equipment with a known HIV positive person			
		or		Patient has had non-consensual intercourse and the clinician considers that the risk assessment indicates prophylaxis is required			
				Patient has had condomless anal intercourse with a person from a high HIV prevalence country or risk group whose HIV status is unknown			
Subs	Note: Tenofovir disoproxil prescribed under endorsement for HIV is included in the count of up to 4 subsidised antiretrovirals. Subsidies apply for a combination of up to four antiretroviral medications. The combination of a protease inhibitor and low-dose ritonavir given as a booster (either as part of a combination product or separately) will be counted as one protease inhibitor for the purpose of accessing funding to						
			ealth	pathways or the Australasian Society for HIV, Viral Hepatitis and Sexual Health Medicine clinical guidelines for PEP (https://www.ashm.org			
Renewal — second or subsequent post-exposure prophylaxis Current approval Number (if known): Applications from any relevant practitioner. Approvals valid for 4 weeks. Prerequisites(tick boxes where appropriate)							
	and		Treat	ment course to be initiated within 72 hours post exposure			
				Patient has had condomless anal intercourse or receptive vaginal intercourse with a known HIV positive person with an unknown or detectable viral load greater than 200 copies per ml			
		or		Patient has shared intravenous injecting equipment with a known HIV positive person			
		or		Patient has had non-consensual intercourse and the clinician considers that the risk assessment indicates prophylaxis is required			
				Patient has had condomless anal intercourse with a person from a high HIV prevalence country or risk group whose HIV status is unknown			
Initial application — Percutaneous exposure							
Applications only from a named specialist. Approvals valid for 6 weeks. Prerequisites (tick box where appropriate)							
Subs a bo	: Teno sidies	ofovi appl (eithe	r diso _l y for a	has percutaneous exposure to blood known to be HIV positive proxil prescribed under endorsement for HIV is included in the count of up to 4 subsidised antiretrovirals. combination of up to four antiretroviral medications. The combination of a protease inhibitor and low-dose ritonavir given as part of a combination product or separately) will be counted as one protease inhibitor for the purpose of accessing funding to			

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Address:	DOB:	Address:
	Address:	
Fax Number:		Fax Number:
Antiretrovirals - continued		

 $\label{eq:Renewal} \textbf{Renewal} - \textbf{Second or subsequent percutaneous exposure}$

Current approval Number (if known):.....

Applications only from a named specialist. Approvals valid for 6 weeks. **Prerequisites**(tick box where appropriate)

The patient has percutaneous exposure to blood known to be HIV positive

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