

UnityPoint Health – Marshalltown
TEAM MEMBER, MEDICAL STAFF or VOLUNTEER

Management of Occupational Blood Exposures
Quick Reference for the Care Providers

KEY ELEMENTS:

1. Do Not register the SOURCE of the exposure in EPIC.
2. The Lab will put them in SunQuest.
3. Don't test the person exposed, until the SOURCE's test results are known.
4. The person exposed must complete both pages of the PAPER employee injury form.

Step 1:

- 1) Register the Team Member/Medical Staff/Volunteer as a patient
 - a) Guarantor: UnityPoint Health – Marshalltown
 - b) Primary Insurance Plan: Work Comp
 - c) Subscriber: UPH – Marshalltown
- 2) Provide immediate care to the exposure site:
 - a) Wash wounds and skin with soap and water.
 - b) Flush mucous membranes with water.
- 3) Make sure BOTH PAGES of the Employee First Report of Injury Form is completed and faxed to Human Resources. This form is in the Kit.
 - a) An RL injury report is not required.
 - b) Make sure the Team Member reports the incident to their Department Manager/Nursing Supervisor.
- 4) Determine risk associated with exposure by:
 - Type of fluid (e.g., blood, visibly bloody fluid, other potentially infectious fluid or tissue, and concentrated virus)
 - AND
 - Type of exposure (i.e., percutaneous injury, mucous membrane or non-intact skin exposure and bites resulting in blood exposure).

Step 2: Evaluate the SOURCE of the exposure.

- 5) Do Not register the SOURCE of the exposure in EPIC.
- 6) Do Not use the original account for the SOURCE's blood work. This is so the patient will not be charged for the lab work.
- 7) The Lab will put them in SunQuest and take it from there.
- 8) If the Source is Known: Test them for HIV, HBsAg and HCV.
 - i) Call the Lab to see if they have blood available on the patient. If not, they will need to draw them.
 - ii) Consent is not required.
- b) For unknown sources, assess risk of exposure to HBV, HCV or HIV infection.
 - i) Do not test discarded needles or syringes for virus contamination.

- c) NOTE: If the source of an exposure is an infant less than 6 months old, determine the risk status of the mother. If blood testing is indicated, use mother's blood. Infants of this age may not have developed their own antibodies yet, therefore testing the mother is a more reliable source.

Step 3:

- 9) Evaluate the exposed person:
- a) Check tetanus status. Provide Tdap if applicable.
 - b) If the Source's Rapid HIV test comes back POSITIVE:
 - i) Assess the Exposed Person for HIV, HBsAb and HCV.
 - (1) DO NOT enter these tests into EPIC.
 - (a) The Lab will do that.
 - (b) Lab slip is in the Kit.
 - (2) Provide HIV information to the co-worker. Handout in the Kit.
 - (3) Have them sign the HIV consent.

Step 4:

- 10) Offer Post Exposure Prophylaxis (PEP) for exposures posing risk of infection transmission:
- a) Hepatitis B: See Table in the Policy in the Kit.
 - b) Hepatitis C: PEP not recommended.
 - c) HIV: See the Policy in the Kit.
 - i) Initiate PEP as soon as possible, preferably within hours of exposure.
 - ii) If the exposure meets the criteria, have the Team Member sign the consent or refusal for post exposure prophylaxis. The Form is in the Kit.
 - iii) If the Team Member agrees to take the medication:
 - (1) Seek expert consultation if viral resistance is suspected.
 - (2) Offer pregnancy testing to all whom of childbearing age not known to be pregnant.
 - (3) Have the appropriate lab work drawn. Order form in the Kit.
 - (4) Order the prescriptions for the Team Member, using the HyVee Grocery store in Marshalltown.
 - (5) Complete the myMatrixx form and give it to the Team Member to take to HyVee Grocery store in Marshalltown.
 - (6) The medication is to be taken for 30 days.

Step 5:

- 11) Process the chart as you normally would EXCEPT send the completed forms from this BBP exposure packet to Employee Health.