Blood-borne Pathogens: Post-exposure Procedure

Department: Chemical and General Safety
Program: Blood-borne Pathogens
Owner: Program Manager, Tom Rizzi
Authority: ES&H Manual, Chapter 46, Blood-borne Pathogens

Immediate Steps

Should an exposure incident occur

1. Contact the on-site physician in the Medical Department. An immediately available confidential medical evaluation and follow-up will be conducted by the physician or his or her designee.

2. Administer initial first aid. Employees must wash hands and any other skin with soap and water, or flush mucous membranes with water immediately or as soon as feasible following contact of such body areas with blood or other potentially infectious materials.

After first aid has been conducted, the following activities will be performed the employee’s designated medical provider:

1. Document the routes of exposure and how the exposure occurred.

2. Identify and document the source individual (unless the employer can establish that identification is infeasible or prohibited by state or local law).

3. Obtain consent and make arrangements to have the source individual tested as soon as possible to determine human immunodeficiency (HIV), hepatitis B (HBV), and hepatitis C (HCV) virus infectivity; document that the source individual’s test results were conveyed to the employee’s health care provider.

4. If the source individual is already known to be HIV, HCV, and/or HBV positive, new testing need not be performed.

5. Ensure that the exposed employee is provided with the source individual’s test results and with information about applicable disclosure laws and regulations concerning the identity and infectious status of the source individual (for example, laws protecting confidentiality).

6. After obtaining consent, collect exposed employee’s blood as soon as feasible after exposure incident, and test blood for HBV and HIV serological status.

7. If the exposed employee does not give consent for HIV serological testing during collection of blood for baseline testing, preserve the baseline blood sample for at least 90 days; if the exposed employee elects to have the baseline sample tested during this waiting period, perform testing as soon as feasible.
**Administration of Post-exposure Evaluation and Follow-up**

Health care worker(s) responsible for employee’s HBV vaccination and post-exposure evaluation and follow-up will be given a copy of the OSHA blood-borne pathogens standard.

The treating physician evaluating an employee after an exposure incident will receive the following:

- A description of the employee’s job duties relevant to the exposure incident
- Route(s) of exposure
- Circumstances of exposure if possible, results of the source individual’s blood test relevant employee medical records, including vaccination status

The employee will be provided with a copy of the provider’s written opinion within 15 days after completion of the evaluation.

**Procedures for Evaluating the Circumstances Surrounding an Exposure Incident**

The blood-borne pathogen program manager, in cooperation with the Medical Department, will review the circumstances of all exposure incidents to determine

- Engineering controls in use at the time
- Work practices followed
- A description of the device being used (including type and brand)
- Protective equipment or clothing that was used at the time of the exposure incident (gloves, eye shields)
- Location of the incident
- Procedure being performed when the incident occurred
- Employee’s training