POST EXPOSURE FOLLOW UP TO BLOOD/BODY FLUIDS, SHARPS INJURIES, NEEDLE STICKS, HUMAN BITES THAT PUNCTURE THE SKIN

All Exposures

<u>Employee</u> notifies Supervisor/Manager or delegate and reports to Emergency – completes an online electronic incident report – phone calls are encouraged when reporting regardless of the hour – leave a voice message @ ext. 1996 or 4055

SOURCE PATIENT FOLLOW UP

Source patient known

Yes - Staff on unit obtain MD order for lab work on source patient - Stat HIV HBsAg Hep C. Indicate "send copy to Occupational Health"

Ensure consent is signed by source patient

Source patient unknown

No? - If unable to test source patient, employee will still have the baseline blood work done immediately post-exposure, @ 6 weeks, 3 months, and 6 months.

IMMEDIATE POST-EXPOSURE CARE FOR EMPLOYEES

Is this a puncture wound OR a bite that breaks skin?

No → Skin is intact, then no action → wash area gently with soap and water

Is this a puncture wound OR a bite that breaks skin?

Yes — Rinse site of contact under running water (with a strong stream) x 2 minute

For an eye splash - irrigate eye with water or saline x 10 minutes

The Emergency Department physician will assess the staff member, order the post exposure module in the Electronic Health Record as applicable for lab testing, as well as counsel the employee on post exposure prophylaxis and order accordingly. Once the lab results are back, the Emergency Department physician reviews the results and follows up accordingly.

Occupational Health, Safety and Wellness practitioners will follow up with the employee to ensure all follow-up has been arranged. As required, the Staff Safety Specialist will complete the required process with WSIB.

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Reference: CCH Policy No. HR 20-065 - Occupational Exposure to a Bloodborne Pathogen (Appendix)