

**Management of Occupational Exposures to
BloodBorne Pathogens – Hepatitis B & C, HIV****Policy #7020****Policy**

To ensure that prompt evaluation, treatment, counseling and follow-up are initiated in a timely manner, all employees and other healthcare personnel are required to immediately report any occurrences of occupational exposure to blood, body fluid, and/or Other Potentially Infectious Materials (OPIM). Inova has developed an Exposure Control Plan (ECP) for Bloodborne Pathogens, Policy #7008, that outlines measures that have been implemented to minimize and prevent, when possible, exposure to bloodborn pathogens (BBP). Employees shall be provided information regarding the risks for and prevention of bloodborne infections, including the need to be vaccinated against hepatitis B. Personnel knowledgeable in exposure management shall be available for consultation at all hours of the day. Persons responsible for providing post-exposure management shall be familiar with evaluation and treatment protocols and the facility's plans for accessing hepatitis B immune globulin (HBIG), hepatitis B vaccine and antiretroviral drugs for HIV post exposure prophylaxis (PEP).

During routine Employee Health & Services (EH&S) office hours, employees should report directly to the EH&S office for prompt evaluation and treatment. During non-office hours and/or when EH&S is not available, other resources have been established for each operating unit to ensure appropriate evaluation and follow-up. Employees can also call Inova's Exposure Information Line at (703) 664-7500 for general guidelines on what to do in the event of an exposure event.

Because occupational exposures to BBP are considered urgent medical concerns, upon report of an exposure, prompt documentation and investigation of the circumstances of the exposure event and source shall be initiated to determine appropriate evaluation, treatment, and follow-up for the exposed individual.

In accordance with Centers for Disease Control and Prevention (CDC) guidelines (MMWR-June 29, 2011/Vol. 50/No. RR-1), Inova has established this policy and the following guidelines for the management of occupational exposures that could place an individual at risk for acquiring a BBP infection.

Purpose

Occupational exposures to BBP should be considered urgent medical concerns to ensure timely exposure management and administration of preventative therapies and medications such as HBIG, hepatitis B vaccine, and/or PEP, as deemed indicated. Exposure prevention remains the primary way to prevent transmission of hepatitis B virus (HBV), hepatitis C virus (HCV), and human HIV in healthcare settings. However, hepatitis B immunization and post exposure management are integral parts of a complete program to prevent infection following bloodborne pathogen exposure and are important elements of workplace safety.

Definitions

Healthcare personnel (HCP): Persons (e.g. employees, students, contractors, attending clinicians, public safety workers, or volunteers) whose activities involve contact with patients or with blood or other body fluids from patients in a healthcare setting.

Exposure: A percutaneous injury (e.g. needle-stick or cut with a sharp object) or contact of mucous membrane or non-intact skin (e.g. exposed skin that is chapped, abraded, or afflicted with dermatitis) with blood, tissue, or other body fluids that are potentially infectious.

Blood and Other Potentially Infectious Materials (OPIM): Blood and OPIM containing visible blood, semen and vaginal secretions are considered potentially infectious. Although semen and vaginal secretions have been implicated in the sexual transmission of HBV, HCV, and HIV, they have not been implicated in occupational transmission from patients to HCP. The following fluids are also considered potentially infectious: cerebrospinal fluid, synovial fluid, pleural fluid, peritoneal fluid, pericardial fluid, and amniotic fluid. Feces, nasal secretions, saliva, sputum, sweat, tears, urine and vomitus are not considered potentially infectious unless they contain blood. Any direct contact (i.e. contact without barrier protection) to a concentrated virus in a research laboratory or production facility is considered an exposure that requires clinical evaluation.

Post exposure prophylaxis (PEP): Treatment, medication, and follow-up laboratory testing will be defined under post exposure management for the specific exposure (i.e. HBV, HCV, or HIV).

General Guidelines

In the event of an occupational exposure, employees shall notify their immediate supervisor and must complete a *Safety Always* report and report to EH&S.

Any person determined to be at risk for infection with HBV, HCV, or HIV should be referred to a medical provider for appropriate counseling and treatment. Confidentiality of the source person evaluation should be maintained at all times.

Counseling

Infection following an occupational exposure occurs infrequently; however, individuals who become infected or who are otherwise chronically infected with HBV, HCV, or HIV should follow all recommended treatments of the treating healthcare provider. In addition they should follow all recommended infection control practices including standard precautions and appropriate use of protective barriers, and care in the use and disposal of needles and other sharp instruments. Work activities and/or restrictions shall be determined in consultation with Infection Control on a case-by-case basis.

Responsibilities

Preventing and controlling occupational exposure is a shared responsibility of all Inova operating units and employees. All employees who are at risk for exposure to BBP as part of their job duties are included in Inova's Exposure Control Plan. Because of the severe nature of occupational exposures and the potential serious sequelae to employees, strict adherence to safety practices and prompt reporting of any exposure event is an expectation of all employees and other HCP. Individuals reporting exposure incidents shall be provided with resources for appropriate evaluation, treatment, and follow-up.

Healthcare Personnel (HCP)

- HCP are responsible for following standard precautions and all other exposure safety measure. See Exposure Control Plan for Bloodborne Pathogens, Policy #7008.
- HCP are required to report all blood and/or body fluids exposures as soon as they occur, so that management of the exposure is not delayed.
- HCP need to make an educated decision concerning the need for hepatitis B vaccination.
- HCP need to participate in ongoing educational programs concerning occupational exposures to bloodborne pathogens.

Employee Health & Safety

- EH&S shall educate and promote hepatitis B vaccination in accordance with United States Public Health Service (USPHS) guidelines.
- EH&S shall establish and maintain an exposure reporting process.
- EH&S shall evaluate exposure reports for prompt processing of the exposed individual, to include appropriate counseling, consent for treatment, and follow-up.
- EH&S shall maintain a Sharps Injury Log.
- EH&S shall review this policy as needed but no less than on an annual basis.

Healthcare Facility (HCF)

- Inova shall establish and maintain a written policy for management of exposures in accordance with the USPHS guidelines.
- Inova shall provide appropriate training to employees on the prevention of and response to occupational exposures.
- Inova shall provide and educate personnel concerning elimination or substitution of sharps, engineering controls, administrative and work practice controls, and personal protective equipment.

Appendix:

Addendum – Post Exposure Management for Non-Inova Employee Workers