

What do I do if I have a blood or body fluid exposure?

EMPLOYEES

If you received an abrasion or punctured your skin with a used needle or instrument, or have come into contact with blood and/or body fluids on a cut or mucous membrane, immediately:

- 1. Wash the area thoroughly with soap and water.
- 2. Allow wound to bleed freely. DO NOT force the bleeding.
- 3. If you received a splash to eyes or mucous membranes, thoroughly flush with water or normal saline for at least 10 minutes. Use an eyewash station/bottle if available.
- 4. Let your Supervisor/Manager/Clinical Coordinator/Person in Charge know.
- 5. Complete the <u>HLTH 2339 form</u> along with the person in charge.
- 6. Go the nearest Emergency Department as soon as possible (within 2 hours).
- 7. Call the Workplace Health Call Centre at 1-866-922-9464 to speak to an Occupational Health Nurse.

MANAGER, SUPERVISOR, PERSON IN CHARGE

If your employee has reported an exposure to blood or body fluid through a sharps injury or a splash to mucous membranes, immediately:

- 1. Instruct the employee to cleanse the area if they have not already done so.
- 2. Along with employee complete the provincial HLTH 2339 form, "Management of Percutaneous or Permucosal Exposure to Blood and Body Fluid/ Laboratory Requisition" (ePRO Item Number: 00073119).
 - a. Complete top 3 sections: Exposed Person Information, Exposure Information and Source Person Information. Make a copy to allow for follow up with source.
 - b. Ensure source patient has provided consent for blood work. If not obtain consent following guidelines on reverse of HLTH 2339 form.
 - c. Notify Most Responsible Physician, to obtain order for collection of source patient blood work.
 - d. If the source person is not on site, the manager may need to contact the Source Person's physician to ask for BBFE blood work to be done.
- Direct employee along with the original of the HLTH 2339 form to the nearest Emergency, UBCH Urgent Care Centre or Whistler or Pemberton Health Centre (within 2 hours of the incident) for assessment.

If you are a VCH employee at a non VCH site, ask that the HLTH 2339 be faxed to the WHCC at 604-953-5138.

a. Employees are encouraged to attend an Emergency Department with a



- colleague, who will be able to assist with navigating through the Emergency Department triage so that exposure assessments are completed in the critical 2 hour window following an exposure event.
- b. For safety purposes, it is highly recommended that employees working in buildings without an Emergency Department either have a colleague drive them to an Emergency Department or take a taxi, whose expense will be covered by the employee's Manager.
- 4. Direct the employee to call the <u>Workplace Health Call Centre</u> at **1-866-922-9464** following their visit to the Emergency Department to report the incident and to speak with an Occupational Health Nurse.

WORKPLACE HEALTH CALL CENTRE (WHCC)

When you call the Workplace Health Call Centre (WHCC) at 1-866-922-9464:

- You can speak with an Occupational Health Nurse (OHN) directly when you call. He/she will ask you to describe the incident, provide support & ask you to go to an Emergency Department for treatment if you have not already done so.
 If you get a voicemail message, leave a message with your name, ID number, your work site, your phone number and the best time to reach you with a call back. If a message is left after hours, you will get a call back the next business day.
- 2. Please inform the OHN if you have received medications/immunizations in the Emergency Department.
- 3. When the source is high risk or unknown you will be sent laboratory requisitions for follow-up blood work for the next 9 months.
- 4. The OHN will inform you of any precautions you might need to take until you are informed that all test results are negative.
- After your exposure, you and the source person, if known, will be tested for Hepatitis B, Hepatitis C and HIV antibodies. The OHN will phone you with advice on any follow-up based on the source results.

SOURCE PERSON INFORMATION

High risk criteria includes:

- High risk sexual behaviour (multiple sex partners, anal sex)
- History of injection drug use
- Past/present diagnosis HIV, Hepatitis B or C
- Emigration from HIV, Hepatitis B or C endemic country
- Diagnosis of sexually transmitted infection(s)
- Multiple blood transfusions/products prior to 1992(HCV), 1985(HIV), 1972(HBV)
- History of dialysis
- Tattoos, body piercing, electrolysis
- High risk sexual partner