

## Appendix A: HCW Blood-Borne Pathogens Exposure Algorithm

\*\* Note: Policy and Appendices located on SAH Intranet: Knowledge / Policies & Procedures / Human Resources Policies / Occupational Health / Post Exposure to Blood Borne Pathogens

### First Aid:

- Allow the wound to bleed freely
- Cleanse wound thoroughly with soap and water
- If contact with mucous membranes – flush well with water
- Remove any clothing contaminated with blood or body fluid

Report the incident immediately to your Manager / Supervisor / Delegate  
**AND call Occupational Health x4317**

**Complete an Employee Incident Report**

### Source Patient:

- If known, manager/supervisor/delegate/nurse (not the injured worker) will ask if source patient will consent to testing for HIV, Hepatitis B (HBV) and Hepatitis C (HCV). \*\*NOTE: If you (employee) are not willing to be tested as well, then source patient will not be tested\*\*
- Complete **Source Patient Release of Information Consent and Risk Assessment** (Appendix B) and send signed copy to Occupational Health Services (email to [healthnurse@sah.on.ca](mailto:healthnurse@sah.on.ca) or fax 705-759-3826).
- If source patient consents to testing, patient's nurse can use **GEN 11 Medical Directive** for testing for HIV, HBV and HCV (see below for order entry) under the MRP. Occupational Health cannot order testing for patients.
- **MEDITECH Order Entry for Source Patient Testing:**
  - Search for the **Source Pt – SAH HCW Exposure** order set
  - Orders for **Hepatitis B Virus, Hepatitis C Virus, Hepatitis C RNA, & HIV(1&2) Rapid Antibody Occ** should be automatically selected in this order set.
  - Ensure you scroll down to the Reflexed Orders and select **HIV 1/2 Diagnostic Serology**.
- **Public Health Ontario Laboratory Requisitions** \*Must complete all 3 requisitions\*
  - **HIV Serology/HIV PCR Test Requisition**
    - In Section 6, select **HIV1/HIV2** unless patient is infant <18 months of age
    - In Section 7, select **Post-exposure prophylaxis**
  - **General Test Requisition** (use for HBV and HCV)
    - In Testing Indication(s)/Criteria section, specify **Post-exposure testing in other**
    - In Relevant Exposure(s) section, select **Source**
    - In Test(s) Requested section, select the following:
      - For Hepatitis B – **Acute Infection**
      - For Hepatitis C – **Current/Past Infection**
  - **HCV/HBV Viral Load, Genotyping, and Drug Resistance Testing Requisition** (use for HCV RNA)
    - In Tests Requested section, select **HCV RNA Viral Load**
    - In Testing Indication(s) / Criteria section, for HCV RNA, select **Diagnostic** and specify **Source patient for occupational exposure** in **Other**

### Baseline Testing and Risk Assessment for HCW:

- During Occupational Health Services hours of operation, contact x4317 for assessment and to arrange baseline testing for HIV, HBV, and HCV. Note that baseline testing will not show if you were exposed during this incident. It only provides a baseline. Further testing will be arranged, if indicated, (i.e. high risk or unknown source patient) at 6 weeks, 3 months, and 6 months post-exposure.
- Occupational Health Services routine hours of operation are Monday-Friday 0700-1500. Hours are subject to change without notice and will be reflected in the voicemail message.
- Outside of office hours, you can choose to wait until the next day if patient is low risk and you have obtained first aid. Otherwise, you can go to the Emergency Department for assessment. If you choose to go to the ED for assessment, please leave a voicemail for Occupational Health Services at x4317 so they can follow up with you upon their return.