

# ECASD Bloodborne Pathogen Exposure Control Plan

## **Bloodborne Pathogens Frequently Asked Questions \***

1. What are the first steps that should be taken when an employee has possible exposure to another person's blood or body fluids?

*Exposed person - The first priority is to provide first aid; then contact an Occupational Medicine department (or other licensed healthcare professional of the exposed person's choosing) to schedule an appointment. Wounds on skin should be immediately washed with soap and water; mucous membranes (eyes, nose, mouth) should be flushed with large amounts of water (10-15 minute flush).*

*Source Person - The source person (the individual whose blood or body fluid resulted in the exposure) should be identified immediately, if possible. A supervisor should discuss with this individual (or applicable parent/guardian) the importance of contacting an Occupational Medicine department (or other licensed healthcare professional of the source person's choosing) for an assessment and baseline lab testing. This testing is done to reassure the exposed person and to assist the clinic in identifying what type of follow-up care is appropriate. In some cases, the source person is injured and requires medical care.*

*Employer - Reassure everyone that this is a confidential process and that the testing results are not released to the employer. The needed information is only shared between the exposed individual, the source individual, and the health care provider. Both individuals should be encouraged to establish prompt appointments in an Occupational Medicine department (or other licensed healthcare professional of their choosing) to begin testing and evaluation. Ideally, they should be seen within hours of the exposure.*

2. What is the difference between a significant exposure and a non-significant exposure?

*There are criteria for evaluation of an exposure to blood or body fluids developed by the Centers for Disease Control (CDC) that health care providers utilize. Some of the conditions that are considered are: 1) the condition of the person's skin, 2) the depth of puncture, and 3) other factors that affect the degree of risk. If the exposure is considered non-significant, no further follow-up is required. If the exposure is deemed significant, the established guidelines will be followed and communicated to the exposed person. Follow-up to a significant exposure can continue up to 12 months. Referral to specialists may be done, if indicated.*

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### 3. What is Post-exposure Prophylaxis (PEP)?

*PEP is an attempt to prevent the transmission of a disease after an exposure has occurred. Receiving treatment following certain exposures to either human immunodeficiency virus (HIV) or hepatitis B virus (HBV) may prevent subsequent infection. At present, there are no published recommendations for Federal Drug Administration (FDA) approved PEP for hepatitis C virus (HCV). The key to successful PEP is prompt reporting and evaluation of the source person and exposed person.*

### 4. What bloodborne diseases are monitored in an exposure situation?

- 1. Hepatitis B Virus = HBV – If an individual is exposed to HBV and receives post-exposure treatment (immune globulin or hepatitis vaccine), it is unlikely that they will become infected or pass the infection on to others. No precautions are recommended.*
- 2. Hepatitis C Virus = HCV – The risk of becoming infected and passing the infection on to others after an exposure to HCV is low. No precautions are recommended.*
- 3. Human Immunodeficiency Virus = HIV – During the follow-up period, especially the first 6 months when most infected persons are expected to show signs of infection, the individual should follow recommendations for preventing transmission of HIV.*

### 5. How can I contract HBV, HCV, or HIV?

*Casual contact with a person who has HBV, HCV, or HIV will not harm you. These viruses are NOT transmitted through sneezing or coughing, shaking hands or hugging, sitting next to someone, giving blood, eating or drinking, sharing water fountains, rest rooms, or work equipment. The most common ways these viruses are transmitted are through sexual contact, sharing IV drug needles, direct contact between broken skin and infected body fluids, and being stuck by an infected needle. If the source of the exposure is positive for any of these diseases, or if the source person is unknown, precautions need to be taken during the follow-up period.*

### 6. What information is provided to the exposed person, source person, and employer?

*Exposed person - 1) Information on exposures and identifies precautions that need to be taken during the follow-up period. 2) Healthcare Professional's written opinion: Medical Follow-up form and the next appointment date if indicated. 3) Counseling and review of lab results in a confidential manner.*

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Source person - Counseling and review of lab results in a confidential manner.

Employer - Medical Evaluations are confidential. The employer does not have a right or access to the medical information. The employer will receive the "Healthcare Professional's written opinion": Medical Follow-up form.

7. What are the benefits of prompt reporting and medical evaluation for exposures to blood or body fluids?

*Increases the chance of identifying the source person and arranging testing!! If the source individual is negative for HIV, HBV, and HCV—NO further follow-up is needed. The prompt testing of a source individual can prevent:*

- 1) Months of worry and precautions for the exposed individual,*
- 2) The need for hundreds to thousands of dollars of lab testing and treatment, and*
- 3) Several appointments to the clinic that results in loss of work hours and productivity.*

8. What if the source person is not identifiable?

*The health care provider will review the details of the incident with the exposed individual and determine the degree of risk. Follow-up will be established based on that assessment.*

9. What information do I need for OSHA?

*Following an exposure incident, employers are required to document, at a minimum, the "route(s) of exposure, and the circumstances under which the exposure incident occurred" as per standard 29 CFR 1910.1030 (f)(3)(i).*

Healthcare Professional's Written Opinion – Paragraph (f)(5):

*The employer is required to obtain a written opinion and provide it to the employee within 15 working days of completion of the original evaluation. The standard specifies the information which is to be included in the written opinion:*

- 1) For hepatitis B vaccination: whether hepatitis B vaccinations is indicated for the employee, and if the employee received the vaccination;*
- 2) For post-exposure evaluation and follow-up: that the employee has been informed of the results of the evaluation and told about any medical conditions resulting from exposure to blood or Other Potentially Infectious Material requiring further evaluation or treatment.*

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*3) All other finding or diagnoses shall remain confidential and shall not be included in the written report. The employer is afforded access to the limited information stated above. Any information regarding the results of the employee's evaluation or medical conditions must be conveyed by the health care professional to the employee alone and not as part of the written opinion that goes to the employer.*

\* This FAQ was compiled with information assistance from Marshfield Clinic – Occupational Health.

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### Other Resources

Center for Disease Control (CDC)	<a href="http://www.cdc.gov">www.cdc.gov</a>
National Institute for Occupational Safety & Health (NIOSH)	<a href="http://www.cdc.gov/niosh/homepage.html">www.cdc.gov/niosh/homepage.html</a>
Occupational Safety and Health Administration (OSHA)	<a href="http://www.osha.gov">www.osha.gov</a>