

1. **Purpose**

To provide a process for caring for patients and/or staff following needlestick injury or blood/body fluid exposure.

To prevent the transmission of Hepatitis B, Hepatitis C and HIV.

To provide a responsible program for the management of exposures

2. **Scope**

Applies to all programs and services at all sites of Brock University. The employees identified as most likely to be exposed are Custodial Services, Student Health Services, Athletics, Researchers working with Human Bodily Fluids

3. **Definitions**

4. **Procedure**

When an individual is exposed to blood/body fluids from a known and untested source or an unknown source, the individual shall immediately:

- 1) Allow the wound to bleed freely and then cleanse it with soap and water. Exposed mucous membranes should be flushed with water.
- 2) The individual must inform/report the incident to their immediate supervisor or security (x3200),
- 3) Seek treatment at the Student Health Clinic (Monday-Friday 8-30 am – 4:00 pm), or at the nearest emergency room. Treatment should be obtained as soon after the incident as possible,
- 4) Complete an Incident Report as soon after treatment is obtained as possible, this is submitted to the WSIB by EHS. Keep EHS (John Roberts) informed of any changes in medical status throughout treatment..

5. At the Clinic (Brock will consult with Student Health Services and Emergency)

- 1) The employee should be asked about previous immunization against Hepatitis B and about their tetanus immunization status.
- 2) If not immunized against Hepatitis B or last tetanus shot more than 10 years ago, individual should receive appropriate prophylaxis (or sent to a clinic where prophylaxis can be obtained)
- 3) Receive information about the vaccinations recommended and urgent antibody screening for HBV, HCV and HIV.
- 4) Point of care HIV testing should be done. Serologic testing for HBV, HCV and HIV should be done for all exposure to untested blood. If the source is known then they also should be encouraged to go for testing.
- 5) If the exposed employee refuses to allow the testing of his/her blood, the exposed employee must document their understanding that a claim will not be validated nor will they be allowed to enroll in the Federal Surveillance Program.

## **Treatment Recommendations**

- a. Immunized and with documented protective anti-HBs
  - no action required

- b. No documented anti-HBs

Recommend Twinrix (covered by Brock Insurance coverages). In the event that the individual is not a member of the Brock Community and was at Brock for legitimate purposes, Brock will cover medical costs.

- c. If the exposed person has been exposed to blood reasonably suspected to be contaminated or coming from a person who is HIV positive, the following advice should be given:
  - Prophylaxis this must be activated within hours of exposure, preferably no longer than 4 hours. This must be done via the Emergency Department of an Acute Care Hospital (not Prompt Care). The PEP will be determined by a physician. The exposed individual will be provided information on the 3 drugs currently prescribed (available from Brock Security and the Health Clinic) and should read it prior to seeing the physician. This will help in informed decision making and speed the evaluation process. PEP treatment is for 28 days. The hospital gives a 3 day supply, following which the individual must get a prescription from an MD for continuation.

If sero-conversion occurs during the follow up period to the injury the WSIB (EHS) and the Niagara Region Medical Officer of Health (attending physician) will be notified .

## HEPATITIS C

There is no prophylactic treatment currently available for a person exposed to the blood of people infected with Hepatitis C.

Counsel the exposed employee about the risk of becoming infected. (Risk is poorly quantified but appears lower than for HBV by 3-10%, but higher than HIV.). Recommend that they collect baseline sera, re-test at a reasonable time interval (how long does hep C take to develop):

Counsel the employee to see their physician if they have any signs of hepatitis like illness – fatigue, yellow skin or eyes, decreased appetite, right sided abdominal pain or nausea.

