Workplace Health and Safety

Health Protection Team
Edmonton Zone
Reporting Exposures to
Blood & Body Fluids

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Definition: Blood/Body Fluid Exposure Incident

When an individual comes into contact with blood or potentially infectious blood or body fluid:

- From equipment contaminated with blood or bodily fluid
  - needles, sharp instruments
- From splash of contaminated fluid on mucous membrane
- From contaminated fluid contact with non intact skin

**Blood or body fluid on intact skin is not considered to be an exposure.**
What is “Blood /Body Fluid”?  

- An exposure has occurred when the individual has been in contact with **blood** or:

<table>
<thead>
<tr>
<th>Pleural fluid</th>
<th>Synovial fluid</th>
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<tbody>
<tr>
<td>Pericardial fluid</td>
<td>Peritoneal fluid</td>
</tr>
<tr>
<td>Cerebrospinal fluid</td>
<td>Amniotic fluid</td>
</tr>
</tbody>
</table>

The fluids **do not** have to have blood in them to be considered infectious
What is “Blood /Body Fluid”?

Tears, feces, sputum, vomitus, nasal secretions, sweat and urine are NOT considered potentially infectious for bloodborne disease unless contaminated with visible blood.

Saliva:
- **if** contaminated with blood, exposure is considered for Hepatitis C (HCV), Hepatitis B (HBV), & Human Immunodeficiency virus (HIV).
- **if not** contaminated with blood, exposure is considered for HBV only.
Factors: the Risk of Exposure

Details of the injury that may be associated with a higher risk of disease transmission include:

- the depth of the percutaneous injury
  (i.e. arterial/venous injection poses greater risk than a subcutaneous)

- the type of device
  (i.e. a hollow or large bore device, a device with visible blood on it; a device used for vascular access)

- source patient with a high viral load or in the terminal phase of illness

FYI: An IV that is or has been connected to a patient is considered contaminated. While there may not be visible blood, cells may be refluxing up the tubing. Consider this to be an exposure.
Work Practices that Increase the Risk of Exposure

- Recapping needles
- Failing to dispose of used needles/sharps properly in a biohazard container.
- Not wearing appropriate PPE when providing care that may expose the employee to blood/bodily fluid
  - eye protection, gloves, gown, mask (surgical or N95)

In uncertain situations, the default should be to assume that an exposure has occurred.
What Should I Do If I Have A BBFE?

• Seek First Aid or Medical Attention if necessary
• Report the exposure to your manager/immediate supervisor
• Call the Staff Incident/Injury Reporting Line
CALL 1-888-482-8550 to report a BBFE

- The call center agent will ask questions about the source
- The Risk Assessment of the Source/incident needs to be completed:
  - the Risk Assessment of the Incident will determine if the injured employee would be advised to report to Emergency
  - Source Risk Assessment form (SRA) is available on InSite
- Unit Manager/Designate will obtain consent from source
- Unit Manager /Designate will complete source requisition & arrange to collect source blood STAT
- Rapid HIV testing for the source is available at UAH, RAH & SCH
  - please complete & obtain results - proceed to Emergency if Positive for HIV.
- The WHS – Edmonton Zone OHN will follow up with the employee on the next business day
Why “Source” Blood?

- The patient (source) blood is tested for:
  - Hepatitis B virus (HBV) → 30% rate of transmission
  - Hepatitis C virus (HCV) → 3% rate of transmission
  - Human Immunodeficiency virus (HIV) → 0.3% rate of transmission

- Source blood results assists in determining treatment & appropriate follow up for the employee

- Source results are **not** given to the employee due to privacy and health information act
  - employee will be informed whether or not follow up is required
What is “Follow up”?

- All BBFE injured employees are contacted by WHS post exposure
- WHS will confirm Hepatitis B immunity status
- Dependent upon ‘source’ blood results, WHS will inform employee regarding the recommended follow up
- WHS will provide the requisitions for the follow-up
Forms on InSite
http://inSite.alBERTAhealthservices.ca/7310.asp

• Our Teams
• Workplace Health and Safety
• Resource Index (A-Z)
• Blood Bodily Fluid Exposure (BBFE)
• Edmonton Zone
  • BBFE Source Baseline testing Requisition & Instructions
  • BBFE Risk Assessment Form
  • Rapid HIV Antibody Test Request
### WHS process & Source requisition

**BBFE Source Baseline Testing Requisition and Instructions**

1. **Injured Employee** - seeks first aid for injury
2. **Injured Employee** - call the Staff Incident/Injury Reporting Line - 1-888-482-8330
   - You will be given a case # by the Staff Incident/Injury Reporting Line. Write the case # down as it will be needed for follow up on this incident.
   - Report incident to Unit Manager or Designate (Charge RN/Staff RN) and acquire a BBFE Package – BBFE Source Baseline Testing Requisition and Instructions. BBFE Source Risk Assessment Form, and Rapid HIV Antibody Test Request which is available at [UBAHRH/SCAH](http://uploads.albertahealthservices.ca/180075.doc)
   - Notify your direct supervisor/manager that a BBFE incident has occurred. Your direct supervisor/manager is to complete a WHS Incident Investigation Report ([http://uploads.albertahealthservices.ca/180075.doc](http://uploads.albertahealthservices.ca/180075.doc)).

3. **Unit Manager/Designate** - obtain consent from Source (patient), and arrange to have blood collected STAT for the following tests: HIV, HBsAg, and Rapid HIV Antibody Test Request which is available at [UBAHRH/SCAH](http://uploads.albertahealthservices.ca/180075.doc).

4. **Employee/Unit Manager/Designate** completes Record Case # on all forms.
   - **BBFE Source Baseline Testing Requisitions** - draw 1 Gold Top tube and send to Lab STAT
   - **BBFE Source Risk Assessment form** - use this form to help you assess the risk of the Source (patient). If this source is:
     - **High Risk**, unknown or if you are unable to obtain source (patient) blood – Proceed to ER with the completed Source Risk Assessment Form (Ensure source (patient) blood is requested before proceeding to ER).
     - When you arrive in ER - advise the Trauma Nurse that a high risk workplace BBFE has occurred and provide the completed Source Risk Assessment form to the Trauma Nurse.
     - If the source (patient) is not high risk – Do not proceed to ER. WHS will contact employee the next business day for follow up. (Ensure that source (patient) blood is requested)
   - **Rapid HIV Antibody Test Request** - For [UBAHRH/SCAH](http://uploads.albertahealthservices.ca/180075.doc) only - complete the Rapid HIV Antibody Test request and draw an additional 1 Gold Top tube and send to the lab STAT – Note: Indicate on the Source Risk Assessment form that Rapid HIV Antibody Test has been requested.

WHS will follow up with all employees the next business day.
Source Risk Assessment (SRA)
Rapid HIV requisition and Instruction

WHS Instruction Sheet
Rapid HIV Antibody Test Request

1. Patient Information section – complete with Source Information

2. Physician Information* – complete with attending physician information. If no attending physician, complete with the following information:
   - Ordering Physician/Practitioner: Dr. Nader Abbasi
   - Physician Code: F7977
   - Phone/Pager Number: N/A (not applicable)
   - Report Location Code: ABQCH

*Physician Information must be completed or there may be delays in receiving results from the lab

3. Collection Information – Complete all sections for collection information

4. Reason for Testing – Check the following boxes
   - HIV and
   - Source patient of blood or body fluid exposure

5. SOURCE lab results in the case of Occupational Exposures are to be phoned to the charge nurse where the source patient is located:
   - Provide Charge Nurse Name and Charge Nurse Phone Number

*The contact person should ideally be a charge nurse where the source patient is located and whenever possible this should not be the employee who incurred the injury (recipient).
**All rapid HIV results can be accessed on Netcare

This area must be completed or there may be delays in receiving results from the lab

6. Rapid HIV Antibody Test Request – requires a separate gold top tube to be drawn and sent to the lab STAT.
   *Note: For University of Alberta Hospital only, the rapid HIV antibody test request and specimen must be taken to the UHCC Biochemistry Core Lab and not the Provincial Laboratory.

NOTE: All Rapid HIV results will be available on Netcare

www.albertahealthservices.ca
WHS Services Available

• Drop In Immunization clinics
  – for the vaccine preventable diseases that occur in the workplace
• Injury/Incident Reporting: 1-888-482-8550
• Communicable Disease reporting
  – If staff have been exposed to possible communicable disease, the exposure should be reported immediately to the manager/supervisor to contact AHS Staff Incident/Injury Reporting line at 1-888-482-8550 to report the incident or injury.
• BBFE Follow-up
WHS - How to Contact

ALL WHS Contact Information is on Insite

http://insite.albertahealthservices.ca/7310.asp

→ Our Teams
→ Workplace Health and Safety
→ Contact Us
→ Edmonton Zone
WHS Edmonton
Clinic Schedule on InSite

http://insite.albertahealthservices.ca/7310.asp

→ Our Teams
→ Workplace Health and Safety
→ Employee Immunizations
→ Zone Employee Immunization Assessment
→ Click on return the form

→ Choose - Edmonton Zone - Assessment: Visit a Drop-In Health Protection Clinic
Questions ?