Title/Description: Monitoring UK HealthCare Employee Exposure to Transmissible Agents

Purpose: To establish guidelines for screening and monitoring UK HealthCare employees who are exposed to transmissible agents.

Policy

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Occupational Exposure

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Persons and Sites Affected

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Effective Date

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Policy

Employees shall receive prompt and effective treatment for occupational exposure to potentially infectious materials. UK HealthCare has established a screening and monitoring program and post-exposure protocols that are consistent with OSHA standards. UK HealthCare employees who are exposed to a transmissible agent shall complete an Incident Report as soon as possible.¹

Procedure

Occupational Exposure

An occupational exposure is defined as an exposure that takes place during the performance of job duties that may place a worker at risk. The exposure may take the form of a percutaneous (puncture through the skin), cutaneous (non-intact skin), or mucous membrane (eye, nose, mouth) contact with blood, tissues, or other potentially infectious body fluids, such as:

1. Semen, vaginal secretions, saliva, or other body fluids;
2. Cerebrospinal, synovial, pleural, peritoneal, pericardial, and amniotic fluids; or
3. Laboratory specimens

Reporting an Exposure

If an employee is exposed to blood or other potentially infectious material (OPIM) by percutaneous or cutaneous exposure to the skin or mucous membranes, the employee shall notify his or her supervisor immediately.

¹ Employees who work off campus shall contact University Health Service at 859 323-5823 for guidance.
The employee shall obtain an Occupational Exposure (Blood/Body Fluid Spray, Splash, or Sharps Puncture) packet from the nearest nursing unit or from his or her supervisor and follow the instructions in the packet.

The employee’s supervisor, or the employee if the supervisor is unavailable, shall report to UK Worker’s Care by calling 1-800-440-6285.

An appointment shall be made for the employee by Worker’s Care. If the employee has an injury that requires acute medical attention at a time that UK HealthCare Employee Health is not open, UK Worker’s Care shall provide instructions for care.

**UK HealthCare Employee Health Evaluation**

UK HealthCare Employee Health staff shall obtain a history from the employee to determine the need for further evaluation. The history shall be documented in the employee's confidential employee medical record and shall include:

1. Date and time of exposure;
2. Job duty being performed at time of exposure;
3. Details of exposure;
4. Immediate treatment used;
5. Description of source of exposure; and
6. Immunization and prior exposure history.

If the history reveals that an occupational exposure has occurred, UK HealthCare Employee Health staff shall evaluate the employee and administer appropriate testing and/or prophylaxis. All test results shall be provided in writing to the employee. For employees at the main UK campus or within 50 miles of the main UK campus, the baseline laboratory test will be completed at the University Health Service, and the prescribing pharmacy shall be either the Chandler Hospital or Kentucky Clinic Pharmacy. For employees in the Commonwealth of Kentucky more than 50 miles from the main UK campus, alternate laboratory testing sites and pharmacy sites shall be identified.

The patient whose blood, tissue, or fluids lead to an occupational exposure (source patient) shall be tested in the same manner as the employee, whenever possible. Consent for this testing is obtained as a part of the general consent to treatment. The University Health Service Blood Borne Pathogen Nurse Coordinator shall coordinate obtaining blood samples and reports from source patients at Chandler Hospital, UK HealthCare Good Samaritan Hospital, and in the Lexington-Fayette County area. In other locations, the University Health Service and the Department Administrator shall work together to identify community resources to complete the necessary blood work on the source patient.

If the employee has sustained an occupational exposure, the following shall be performed:

1. The source patient shall be tested for human immunodeficiency virus (HIV), hepatitis B virus (HBV), and hepatitis C virus (HCV), if indicated.
2. UK HealthCare Employee Health shall evaluate the wound or splash site and provide appropriate treatment and documentation.
3. Based on employee history and test results, UK HealthCare Employee Health shall administer appropriate post exposure protocol and prophylaxis.

**Bloodborne Pathogen Post-Exposure Protocol**

1. **Hepatitis B Exposure**

Hepatitis B is a viral hepatitis with an insidious onset. It has an incubation period of 45-160 days and is commonly referred to as "serum hepatitis." It can progress to a chronic phase and is potentially fatal.

(a) **Screening**

(i) Employees shall not be screened for hepatitis B in the absence of an at-risk exposure.

(ii) If an employee sustains an occupational exposure, University Health Service shall test the employee for HBsAb.

(iii) The source patient shall be screened at the time of exposure for HBsAg. Consent for such testing is obtained as a part of the general consent to treatment.

(iv) If the source patient refuses screening, the refusal shall be noted in the source patient’s medical record. With regard to the employee’s evaluation and treatment, the source patient shall be handled as an unknown.

(v) University Health Service shall receive daily reports from the laboratory. Test results shall be recorded in the confidential employee medical record.

(vi) University Health Service is responsible for implementing appropriate follow-up.

(b) **Exposure Protocol:** UK HealthCare Employee Health shall manage employees exposed to hepatitis B according to current recommendations from the [Centers for Disease Control and Prevention’s guidelines and recommendations for hepatitis B](https://www.cdc.gov/hepatitis/). 

2. **Hepatitis C Exposure**

Hepatitis C is the form of viral hepatitis most frequently associated with blood transfusions. Specific incubation period for this virus is unknown but is probably 3 to 12 months.

(a) **Screening:** Routine hepatitis C screening is not recommended.

(b) **Exposure Protocol:** UK HealthCare Employee Health will manage employees exposed to hepatitis C according to current recommendations from the [Centers for Disease Control and Prevention’s guidelines and recommendations for hepatitis C](https://www.cdc.gov/hepatitis/). 

3. **HIV-Positive Exposure**

Human immunodeficiency virus (HIV) is the virus that causes AIDS. This virus is passed from one person to another through blood-to-blood and sexual contact exposures. Body fluids that have been proven to spread HIV are blood, semen, vaginal fluid, breast milk, and other body fluids containing blood. Additional body fluids that may transmit the virus that health care workers may come into contact with are cerebrospinal fluid surrounding the brain and the spinal cord, synovial fluid surrounding bone joints, and amniotic fluid surrounding a fetus.
(a) Screening: If the history reveals that an occupational exposure has occurred, UK HealthCare Employee Health staff shall evaluate the employee and administer appropriate testing and/or prophylaxis. All test results shall be provided in writing to the employee.

(b) Exposure Protocol: UK HealthCare Employee Health will manage employees exposed to HIV according to current recommendations from the Centers for Disease Control and Prevention’s HIV/AIDS Guidelines and Recommendations.

(i) Employees who do not wish HIV testing shall be required sign a Refusal of Treatment form.

(ii) The patient whose blood, tissue, or fluids lead to an occupational exposure (source patient) shall be tested in the same manner as the employee, whenever possible. Consent for such testing is obtained as part of the general consent to treatment.

4. Other Potential Employee Exposures (Including Meningococcal Meningitis)

(a) Any employee who suspects that he or she has been exposed to a communicable disease shall contact Infection Prevention and Control and/or UK HealthCare Employee Health.

(b) If it is known or suspected that an employee has been exposed to other communicable diseases, such as TB, varicella, or pertussis, the employee shall be notified by Infection Prevention and Control.

(c) *Neisseria meningitidis*

(i) All microbiology technologists shall be offered the meningococcal vaccine.

(ii) The Clinical Laboratory shall notify Infection Prevention and Control of any positive cultures for Neisseria meningitidis.

(iii) Infection Prevention and Control shall notify the nursing manager of the unit of the index case, as well as departments identified from chart review whose personnel have had significant contact with the index case.

(iv) Infection Prevention and Control shall also notify UK HealthCare Employee Health and UK Workers’ Care. Supervisors are responsible for contacting Infection Prevention and Control, UK HealthCare Employee Health, and UK Workers’ Care with the names of all exposed personnel.

(d) Hepatitis A Exposure

(i) Hepatitis A is an acute onset viral hepatitis with an incubation period of 14-50 days. It is commonly referred to as "infectious hepatitis." Routine screening of patients and/or staff for anti-HAV (antibody to hepatitis A virus) is not recommended.

(ii) Exposure Protocol: UK HealthCare Employee Health shall manage employees exposed to hepatitis A according to current Centers for Disease Control and Prevention’s guidelines and recommendations for hepatitis A.
**Persons and Sites Affected**

| ☑ Enterprise | ☐ Chandler | ☐ Good Samaritan | ☐ Kentucky Children’s | ☐ Ambulatory | ☐ Department |

**Policies Replaced**

| ☑ Chandler HP03-17 | ☐ Good Samaritan | ☐ Kentucky Children’s CH | ☐ Ambulatory KC | ☐ Other |

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