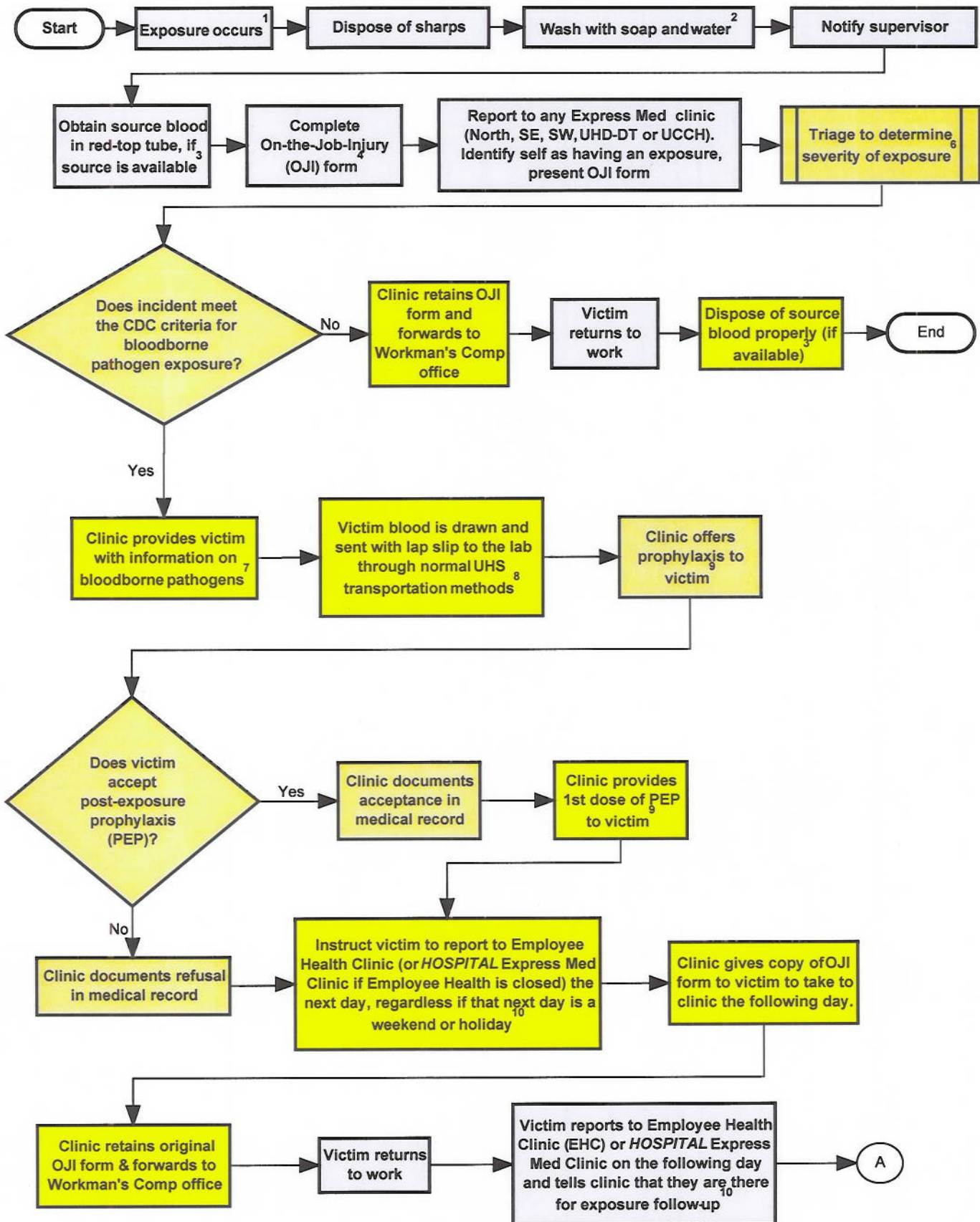
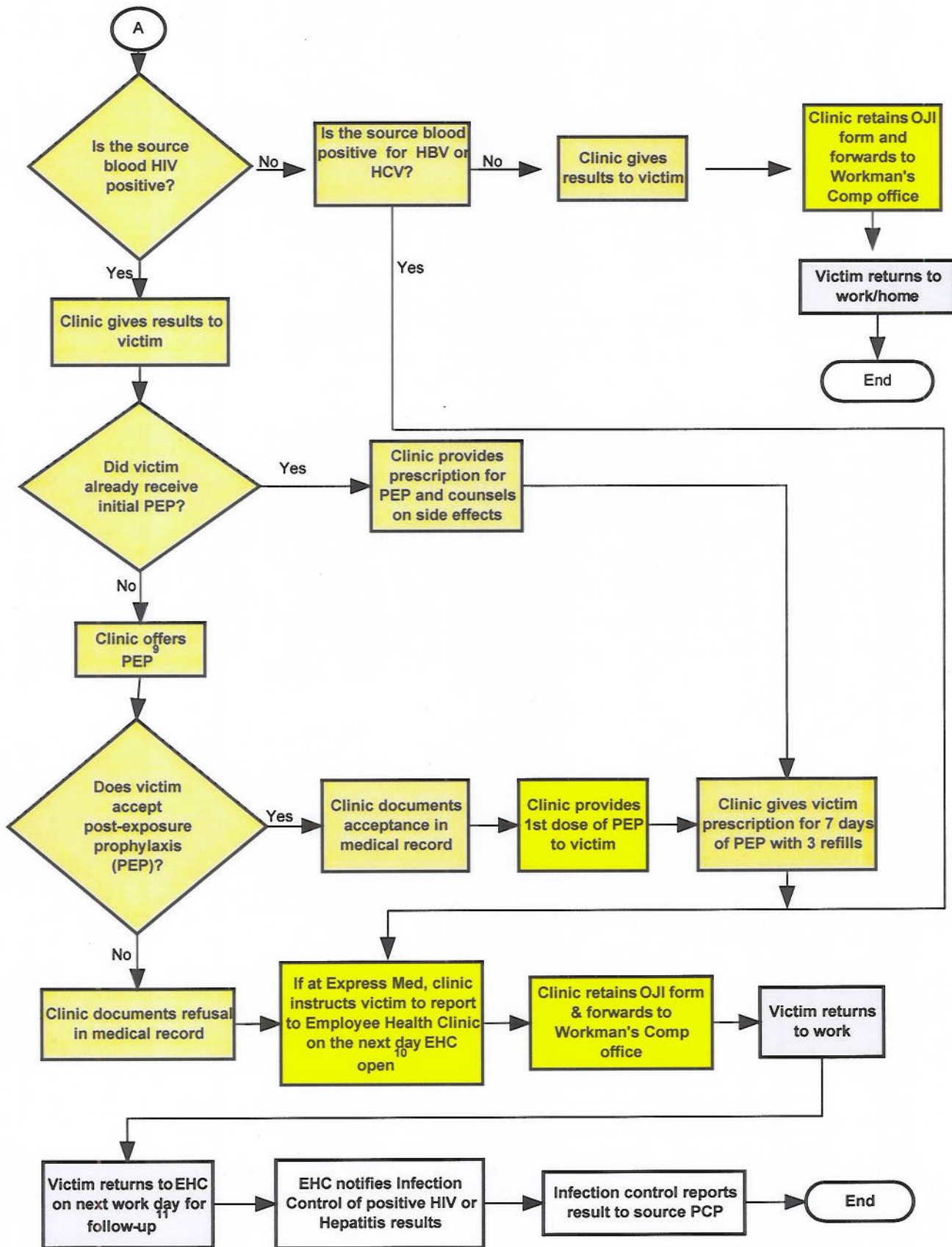


Appendix 3
 Non-Hospital Campus: Employee, Faculty, Housestaff, Volunteers, Students





Appendix 3

Non-Hospital Campus: Employee, Faculty, House Staff, Students, Volunteers

Legend for Algorithm

1. Exposure: A specific eye, mouth, other mucous membrane, non-intact skin or parenteral contact with blood or other potentially infectious materials that results from the performance of an employee's duties.
2. Soap and water must be used in this instance; hand sanitizer is not adequate. When an eye or mucous membrane is exposed, pre-prepared eye wash, a liter of normal saline, or a liter of sterile water should be used to cleanse the eye/mucous membrane. Contact lenses should not be removed prior to rinsing the eye.
3.
 - a. Special consent is NOT required to draw blood for or to perform testing on source or victim blood if testing is done in accordance with this policy. A physician order is not required however the source's physician should be notified that the blood is being drawn and the reason.
 - b. If the exposure occurs at a non-hospital campus AND not at a facility at which an Express Med clinic is located (that is, other than North, SE, SW, UHC-DT or UCCH), the source blood should be forwarded to the hospital laboratory with a **BCHD #908 NS Rev. 8/08**. *Source blood must be forwarded to the hospital laboratory through normal transportation methods; victims will not transport blood themselves.*
 - c. Source blood should NOT be submitted via electronic means due to billing considerations. The form must be completed in its entirety to ensure timely follow up of results.
 - d. If the decision is made that the incident does NOT meet the CDC criteria for bloodborne pathogen exposure, the Express Med will notify the laboratory not to process the source blood.
4. Employee Accident/Injury/Exposure Form, BHCD#502 NS Rev. 7/01. This form must be completed in its entirety. If the supervisor is not available to sign, the employee should PRINT the full name of the supervisor in the appropriate block and must ensure that the supervisor receives a copy of the form. Obtaining a signature on the form should not delay treatment for the victim. The form must be carried by the employee to the appropriate treatment area (Employee Health, Express Med or Emergency Center).
5. The victim should identify himself/herself as having a sharps injury to ensure immediate care. Each ambulatory area should designate the location to which employees at that facility should report.
6. See appendices 7 and 8.
7. The Department of Health and Human Services (Centers for Disease Control and

Prevention) “Exposure to Blood: What Healthcare Personnel Need to Know” is the recommended source for information on bloodborne pathogen exposures. This pamphlet is available through University Health System publications.

8. *Blood may ONLY be transported to and from University Health System sites via approved, courier services.* Victims may not transport either the source or their own blood specimens between campuses.
9. Consent is NOT required for administration of post-exposure prophylaxis (PEP). If the employee refuses PEP, appropriate documentation should be made in the medical record.
10.
 - a. Blood that has been properly transported to University Health System pathology with the appropriate BHCD #908, will be processed with the same immediacy as blood drawn on the main hospital campus.
 - b. It is imperative that victims report to Employee Health Clinic (Express Med clinic when the EHC is closed) at the University Health System *hospital campus* on the next day to obtain the results of victim and source blood. This must be done regardless if the next day is a holiday or a weekend in order to continue PEP if required.
 - c. When the victim reports to the EHC (or Express Med), they must identify themselves as having had a bloodborne pathogen exposure and present the OJI from the previous day. If there are any issues, the house supervisor should be contacted.
11. Employee Health Clinic is responsible for follow up testing, etc. of victims whose source blood is positive for any bloodborne pathogen. See Appendix 10, Management of Occupational Blood Exposures.