**Policy**

A Post-Exposure Evaluation and follow-up will be provided to all Ohio Living employees who have had an occupational exposure incident to bloodborne pathogens or other potentially infectious materials.

**Procedure**

1. Any employee having possible exposure to bloodborne or other potentially infectious agents while working must:
	1. Wash the area with soap and water, or flush mucous membranes with water immediately or as soon as feasible following contact.
	2. Report this exposure to their supervisor immediately (within 12 hours, preferably sooner), and
	3. Complete the exposure incident report: **Exposure to Bloodborne Disease Incident Report**
		1. Employees must report any of the following:
			1. Needlestick injury
			2. Cuts with sharp objects contaminated with blood or body fluids
			3. Mucous membrane exposure to blood or body fluids (splash to eye or mouth)
			4. Blood or body fluid contact with open area of skin
	4. *Note: Exposure to saliva without visible blood, tears, sweat, or non-bloody urine or feces does not require post-exposure follow-up.*
	5. Body fluids include
		1. semen, vaginal secretions, or other body fluids contaminated with visible blood
		2. cerebrospinal, synovial, pleural, peritoneal, pericardial, and amniotic fluids
2. An immediately available confidential medical evaluation and follow-up will be conducted by the employee's personal physician, or the Medical Director, at no expense to the employee. All policies regarding Post-Exposure to Bloodborne Pathogens will be shared and reviewed with the preferred physician to ensure appropriate follow up.
3. The incident shall be reviewed by the physician to determine the likelihood of exposure to Hepatitis B, Hepatitis C, HIV, or other bloodborne pathogens.
4. The following information will be provided to the health care professional responsible for evaluating the employee after an exposure incident:
5. A description of the exposed employee’s duties as they relate to the exposure incident;
6. Documentation of the route(s) of exposure and circumstances under which exposure occurred.
7. Results of the source individual’s blood testing, if available;
8. All medical records relevant to the appropriate treatment of the employee including vaccination status
9. Ohio Living’s policy and procedure regarding post exposure to bloodborne pathogens or other potentially infectious materials.
10. Identify and document the source individual, unless the employer can establish that identification is infeasible. If the source cannot be identified, then the employee will follow the steps outlined below.
11. The source individual will be evaluated clinically to determine the likelihood of HIV and Hepatitis infections. The source individual’s physician may be consulted to obtain this information.
12. Obtain consent and make arrangements to have the source individual tested as soon as possible to determine HIV, HCV, and HBV infectivity; document that the source individual's test results were conveyed to the employee's health care provider. If the source individual is already known to be HIV, HCV and/or HBV positive, new testing need not be performed.
13. Use forms:
14. **Consent for Hepatitis B or C Blood Tests**, and/or
15. **Ohio Department of Health Informed Consent to HIV Antibody Test**.
16. If consent cannot be obtained the facility must so state on the consent form and maintain this documentation with the **Exposure to Bloodborne Disease Incident Report form**.
17. If consent for testing of the source individual’s blood cannot be obtained and medical need is apparent, the Quality Assurance and Performance Improvement Committee will determine if exception to informed consent is permitted (per O.R.C. 3701.24). This would be acted upon through legal counsel.
18. Ohio Living will pay the cost of testing and the results will not be placed in the patient’s medical record.
19. Assure that the exposed employee is provided with the source individual's test results and with information about applicable disclosure laws and regulations concerning the identity and infectious status of the source individual (e.g., laws protecting confidentiality). After obtaining consent, collect exposed employee's blood as soon as feasible after exposure incident, and test blood for HCV, HBV and HIV serological status.
20. The employee may elect to have a blood specimen drawn and preserved for 90 days during which time they may decide to have the sample tested. Use form **Consent for Blood Specimen Collection**. If the employee chooses to have the sample tested, complete the appropriate consent forms for the specified test(s).
21. In the event that the employee refuses follow up evaluation and/or testing or treatment, a release form will be signed by the employee and filed in the employee medical file. Form used: **Release Upon Refusal of Treatment for Blood/Body Fluid Exposure**.
22. The health care professional will complete the Ohio Living form **Medical Evaluation Report – Post-Exposure to Bloodborne Pathogens** and return the completed form to Human Resources.
23. File the report in the employee’s confidential medical file, separate from the personnel file.
24. Human Resources will provide a copy of the report to the employee within 15 days of completion of the evaluation.