



**City of Winchester
Fire & Rescue Department
STANDARD OPERATING PROCEDURE**



Section:	Infectious Disease Control	SOP:	4.10
Subject:	Post Exposure Management and Records Guidelines	Executed:	June 5, 2015
		Revised:	
Approved:			
 Allen W. Baldwin, Fire Chief			

PURPOSE: The purpose of this SOP is to set guidelines for Management to follow post an infectious disease exposure.

POST EXPOSURE REFERRAL

GENERAL GUIDELINES

The City of Winchester will have the Designated Officer advise the exposed employee as to whether a medical facility will need to handle an employee exposure injury and treatment.

The Designated Officer will initiate the referral for post exposure management following a question and counseling session.

The employee, if deemed necessary, will be offered Hepatitis B (HBV), Human IMMUNODEFICIENCY virus (HIV), Hepatitis C and VDRL testing. If the employee consents to baseline blood testing, but does not wish to have the testing done at that time for HIV, then the hospital will preserve the blood for at least 90 days. If within 90 days following the incident, the employee elects to have the testing performed then it will be done as soon as possible.

Exposures which require medical treatment will be offered treatment that is in accordance with the published protocols set forth by the CC. Protocols for HBV, HCV, HIV, Syphilis, and Tuberculosis are to be available.

ALL exposed employees will receive counseling; this will be conducted by a health care professional who has been trained in pre and posttest counseling.

DR PASTORS RESPONSIBILITIES

Doctor Pastor will be furnished with a listing of the exposed employee's job duties as they relate to the exposure incident. This provider will make the final exposure determination.

Documentation of the route of exposure and the circumstances of the exposure will be furnished by the Designated Officer to assist with this determination, if the designated officer disagrees with this, public health officer will be contacted. If the employee insists on treatment when a non-exposure has been ruled the care provider will contact the Designated Officer.

Doctor Pastor will furnish a written opinion letter regarding the exposure within 15 days of the incident as set forth in the regulation to the employee, and will generate a letter to the Designated Officer to verify compliance.

The hospital will carry out exposure notification/management within 48 hours as outlined in the Ryan White Law (Public Law 101-381).

RECEIVING HOSPITALS RESPONSIBILITIES

The receiving hospital is responsible for source patient testing. Rapid HIV testing and rapid HCV testing is to be performed on the source patient. This is done to comply with the 2005 CDC Guidelines and to expedite testing on behalf of the exposed employee. Source patient test results will be called to the Designated Officer.

If the Hospital is conducting employee follow up on of hours, the emergency physician will call the Clinicians hotline for any cases involving HIV post exposure follow up.

CITY OF WINCHESTER'S RESPONSIBILITIES

The appropriate Agency in the city will furnish any and all relevant medical information to the office of the designated medical care provider.

If the exposure was a needle stick injury or an exposure to TB resulting in a positive skin test, the Designated Officer will complete an OSHA 300-report form and the Sharps injury log. The OSHA 300 form will contain records of contaminated injuries that require "more than" first aid. All other contaminated sharps injuries will be recorded on the sharps injury log with no employee identification.

The Designated Officer WILL receive a summary of the written opinion within 15 days' time frame set forth in the regulation. A written opinion will be forwarded directly to the employee by the physician – Doctor Pastor

The Designated Officer will document that the employee has been informed of the evaluation results. This should be in accordance with the 48 hour time frame set forth in the Ryan White Law.

All records will be maintained for duration of the employees department plus an additional 30 years as set forth in the OSHA regulation.

Employees who have post exposure medical evaluation and follow up conducted by a physician other than the designated physician, the exam report will be reviewed by Doctor Pastor. The costs associated with the physician are the employee's responsibility

POST EXPOSURE MANAGEMENT

In accordance with OSHA 1910.1030 and the Ryan White Law, employee will be instructed to contact the Designated Officer, if they feel that they have been involved in a possible exposure situation. Exposure reporting will be done with regard to blood borne and airborne transmissible diseases.

The designated officer will conduct the initial investigation of the incident and contact the appropriate hospital personnel.

Should exposure management/treatment be deemed indicated, the employee will be advised by the designated officer where to seek additional medical treatment and what treatment it should entail.

Post exposure evaluation and medical treatment will be made at no cost to the member. It will be set up at a reasonable time at the departments designated location – Doctor Antonio Pastor located at 21475 Ridge Top Circle in Sterling, Virginia. This has been presented to the employee in their training sessions.

Treatment will be conducted by or under the direct supervision of a licensed physician or other health care professional who is familiar with the OSHA standard, the Centers for Disease Control and Prevention medical follow up guidelines and the criteria for pre and post exposure counseling.

All treatment for exposure management will follow the published recommendations set forth by the US Public Health department – the CDC and or the Advisory Committee on Immunization Practices

The established program for medical evaluation and follow up will be conducted by an accredited laboratory tests will be conducted at Doctor Pastors office. Medical records of exposure medical management will be confidential.

**MEDICAL RECORDS OF EXPOSURE MEDICAL MANAGEMENT WILL BE
CONFIDENTIAL.**

CONFIDENTIAL ELEMENTS WILL INCLUDE THE FOLLOWING:

- Documentation of the route of exposure and the circumstances under which the exposure occurred
- Virginia has an exception for source patient consent in the event of a blood borne exposure
- Results of the testing of the source patients' blood test shall be made available to the exposed employee. The exposed employee should hold this information to be confidential.
- Hospitals must release source patients test results. This is not a HIPPA violation