**NEEDLE STICK PROTOCOLS**

**Boston Children’s Hospital**Human Blood or Body Fluid Exposure

\*\*EXPOSURE TO HUMAN BLOOD OR BODY FLUIDS REQUIRES IMMEDIATE ASSESSMENT - page 7845 (STIK) IMMEDIATELY if you think you have been exposed\*\* By page operator: Internal: 0

External: 617-355-6363

Ask the operator to page 7845 (STIK)

BCH Occupational Health: 857-218-3046

**Boston VA HealthCare System**

Needle sticks injuries or other blood borne pathogen exposures are considered to be medical emergencies. Employees sustaining such injuries or exposures are to report to Occupational Health (or the Emergency Department/Urgent Care Clinic after hours) within 1 hour of the incident. Occupational Health phone: 857-203-6127

Once there, an injury report gets written. The primary team is responsible for ordering the blood on the patient. The resident should have follow-up with their home institution occupational health.

**South Shore Hospital**

Should an exposure incident occur, contact Employee Health Services @ Fogg Rd. 781-624-8212

An immediately available confidential medical evaluation and follow-up will be conducted by Employee Health Services during the day shift, or by the Emergency Department during off-shift hours. Following the initial first aid (clean the wound, flush eyes or other mucous membrane, etc.), the following activities will be performed:

\*Document the routes of exposure and how the exposure occurred.   
\*Identify and document the source individual, if possible.   
\*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 and provider.

\*If the source individual is already known to be HIV, HCV and/or HBV positive, new testing may not need to be performed.   
\*Assure that the exposed employee is provided with the source individual's test results and remind the employee to maintain patient confidentiality.   
\*After obtaining consent, the exposed employee's blood is collected as soon as feasible after the exposure incident to establish a baseline, and tested for HIV, HCV, and HBV serologic status. Blood will be tested periodically as clinically indicated.   
\*If the employee does not give consent for HIV serologic testing during collection of blood for baseline testing, baseline blood may be preserved for future consideration for testing.   
\*Offer post-exposure prophylaxis as clinically indicated.

**BWFaulkner Hospital**

**Blood or Bodily Fluid Post Exposure Guidelines**

1. During business hours, employees with a blood or body fluid exposure will report to Occupational Health for evaluation.

2. Evenings, nights and weekends, employees with a blood or body fluid exposure will report to the Emergency Department for evaluation.

a. Nursing supervisor should be notified for any on-duty employee being evaluated in ED

3. Non-employees with a blood or body fluid exposure will be evaluated for exposure in the Emergency Department, regardless of time of day.

**Evaluation of exposure patient**

1. Evaluation of past medical history including HIV, HBV, and HCV status, hepatitis B vaccination status, tetanus status, drug allergies and pregnancy status if applicable.

2. Evaluation of nature of exposure (puncture wound, laceration, needle type, etc.)

3. Documentation of exposure no longer needs to be performed on paper. Please use EPIC smartphrase “.BWFEDPOSTEXPOSURE” in your note for documentation.

**Evaluation of source patient**

1. If source is a known patient, consider obtaining infectious disease testing on source patient with their consent.

a. EPIC order is “Exposure source”. Ensure order time is current and STAT

b. “Exposure source” contains testing for HIV Ab, HCV Ab, and HBV Ab and antigen - no charge for testing

c. Source patient must sign HIV consent form to release results to exposure patient. This is found in the Post-exposure folders in ED.

**Exposure management**

1. Infectious disease can be contacted to help determine need for post exposure prophylaxis

2. National PEP Hotline (888) 448-4911 can also be contacted to help determine need for PEP.

**Hepatitis B**

1. Administer Hepatitis B immunoglobulin and vaccinations if indicated.

**Tetanus**

1. Administer Tdap Booster if indicated.

**HIV - If patient will be starting anti-retroviral PEP:**

Employees

1. Order CBC, CMP, and “Exposure employee” blood panel in EPIC. Ensure order time is current and STAT

2. “Exposure employee” contains testing for HIV Ab, HCV Ab, and HBV Ab - no charge for testing

3. Evaluate pregnancy status if indicated

4. Provide appropriate initial 4-day supply of anti-retrovirals

a. HIV PEP Kit Basic - Dolutegravir 50mg daily and Truvada 200/300 daily

b. HIV PEP Kit Pregnant – Kaletra 400/100 BID and Combivir 150/300 BID

c. HIV PEP Kit Renal (GFR<60) – Raltegravir 400mg BID and Combivir 150/300 BID

5. Do not provide prescription for further anti-retrovirals beyond initial 4-day supply

6. Consider prescribing anti-emetics

7. Provide patient with Bloodborne Pathogen Educational Packet which is available in Post-exposure folders in ED.

8. Patient will need to follow up with **Occupational Health** on next business day, where they will receive follow up on their blood tests, prescription for remaining supply of anti-retrovirals and further counseling.

**If patient will not be starting anti-retroviral PEP**

1. Bloodwork does not need to be ordered for purposes of PEP

2. Employees need to follow up in Occupational Health where any necessary blood testing can be obtained. Follow up should be arranged as above

3. Non-employees can follow up with Infectious Disease at the discretion of the treating clinician, and can be arranged as above.