

Oakland County Medical Control Authority
System Protocols
BLOODBORNE PATHOGEN EXPOSURE POLICY

June, 2018

Section 8.5

Bloodborne Pathogen Exposure Policy

Police, Fire or EMS personnel who, in the performance of their duty, sustain a needle stick, mucous membrane or open wound exposure to blood or other potentially infectious material (OPIM) may request, under Public Act 368 and 419, that the patient be tested for HIV/Hepatitis B and C surface antigen. The exposed individual shall make the request on a Michigan Department of Health and Human Services Form. The exposed healthcare provider must go to the same hospital as the source patient.

The health facility that receives an exposure request from Police, Fire or EMS personnel shall accept as fact the description of their exposure to the patient's blood or OPIM. The health care facility shall make the determination as to whether or not an exposure was a needle stick, mucous membrane or open wound pursuant to the Michigan Administrative Codes. Determination may occur in person, by phone or by appropriate personnel according to MIOSHA standards.

Exposure Testing:

1. If an exposure occurs, it must be documented on the PCR, and verbal notification given to the physician caring for the source patient (if known).
2. A Physician determines if an exposure has occurred.
3. The exposed healthcare provider must complete the standard State Form and give to the hospital attending emergency physician.
4. The hospital will test the patient for HIV/ Hepatitis B and C surface antigen with the most expedient method utilized. The test results will be disseminated to Police, Fire or EMS personnel as soon as test results are available. Notification will be released on positive or negative results to the individual specified on the standard State Form. The form, after completed by the hospital, will be returned to the agency.
5. The exposed individual will be referred to their respective department and MIOSHA Exposure Control Plan for follow-up, testing, logistics and counseling.

Exposures Where There is No patient (unknown Source Patient, Patient left hospital prior to testing)

1. If an exposure occurs, it must be documented on the PCR, and verbal notification given to the physician caring for the source patient (if known).
2. A health care professional determines whether an exposure has occurred. A health care professional is defined in above section.
3. State Form is completed and given to the source patient's emergency department (if known).
4. If the patient left prior to testing, the receiving hospital will attempt to contact the patient to initiate testing for HIV/ Hepatitis B and C surface antigen. If the patient agrees to be tested, refer to this policy, section "Exposure Testing".

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5. If the patient is unavailable for testing, the exposed individual may undergo testing outlined in their department's MIOSHA Exposure Control Plan. The exposed individual's department and designated testing facility shall be responsible for testing, logistic and counseling of their employee.

Exposure Where the Patient is Declared Dead on The Scene.

1. The EMS or Police agency on scene will notify the Oakland County Medical Examiner's office that there is a first responder who has a suspected body fluid exposure from a patient who has been declared dead on scene. The Oakland Medical Examiner is requiring that this case be ordered into the office.
2. An exposure sticker will be placed on the patient's EMS Medical report form and the EMS report will be forward to the Medical Examiner's office.
3. A Physician determines if an exposure has occurred.
4. State Form is completed and forward to Medical Examiner's office.
5. The Medical Examiner's office will initiate testing for HIV/ Hepatitis B and C surface antigen, in accordance with the Exposure Testing section of this policy.
6. If for some reason the patient's blood was not drawn by the Medical Examiner's Office for testing, the exposed individual may undergo testing outlined in their department's MIOSHA Exposure Control Plan. The exposed Individual's department and designated testing facility shall be responsible for, logistics and counseling of their employees.

In all cases, follow-up testing, logistics and counseling will be at the expense discretion of the exposed individual's life support agency and respective exposure control plans.

Treatment

All treatment will be provided to exposed individuals according to the current Center for Disease Control (CDC) recommendations.