

EMERGENCY DEPARTMENT BLOOD OR BODY FLUID EXPOSURE CHECKLIST

NOTE: Individuals with exposures to the following do not require any testing or post-exposure prophylaxis: feces, nasal secretions, saliva, sputum, sweat, tears, urine, and vomitus unless visibly contaminated with blood. If the exposed is a hospital employee, ask him/her to follow-up in Employee Health within 72 hours.

Blood or Body Fluid (BBF) Exposure Evaluation

Review the appropriate guidelines for indications, management & treatment on the Lifespan intranet (under MEDICAL tab in the "GUIDELINES" section, "Blood/Body Fluid Exposure" :

- For Healthcare Workers (only) → CDC Healthcare Worker HIV PEP Guidelines (2013) and Hepatitis Guidelines (2001)
- For everyone else/non-occupational exposure → CDC (2016) HIV PEP guidelines
- Adult Sexual Assault → CDC STD guidelines for STDs and sexual assault
- Pediatric Sexual Assault → CDC STD guidelines for STDs and sexual assault

Testing

- Obtain HIV ED Exposure Ab/Ag Combo test for SOURCE of exposure (when possible and indicated)
- Obtain acute hepatitis panel for SOURCE of exposure and hepatitis B surface antibody (when possible and indicated)
- Obtain HIV ED Exposure Ab/Ag Combo test and acute hepatitis panel for EXPOSED and hepatitis B surface antibody
- Obtain pregnancy test for EXPOSED females of child bearing age
- If HIV PEP is prescribed, obtain CBC, chemistry profile, and liver enzymes

Treatment

- Administer HBV Vaccine (if indicated) (Order HBIG in exceptional circumstances, see guidelines)
- Order HIV PEP and administer the first dose in the Emergency Department (if indicated)
 - Refer to HIV PEP treatment decision algorithm
 - When HIV PEP is indicated, administer first dose (HIV PEP requires follow-up visit, within 72 hours): Raltegravir 400 mg PO twice daily + Truvada 1 tablet PO once daily (Tenofovir 300mg + Emtricitabine 200mg)
 - Provide HIV PEP starter packs for a 3-day or 6-day supply of treatment
- Consider emergency contraception and STD prophylaxis for a sexual exposure
- Update tetanus vaccination as needed for puncture wounds

Follow-up

- Review and provide follow-up visit referral instructions. All patients should be referred for follow-up.
- All Lifespan affiliated employees, students, and security guards should contact Employee and Occupational Health (EOHS) on the next business day for guidance on follow-up. RIH: 444-4038 · TMH: 793-3126

Special Conditions (Additional Follow-up)

If patient starts HIV PEP:

- Review and provide patient instructions for patients receiving HIV PEP
- Review and provide follow-up visit referral instructions for blood/body fluid exposure, refer patient as indicated

If patient is an adult sexual assault survivor:

- Patient should be seen by Day One – the Sexual Assault and Trauma Resource Center – in the ED
Refer patient to Day One for follow-up.....1-800-494-8100
- Refer adult females for follow-up at:
 - Women's Primary Care Center at W&IH (will be seen regardless of insurance).....453-7950
 - OB-Gyn Associates (private insurance, Medicare, Medicaid).....331-6980
- Refer adult males for follow-up at Miriam Hospital Immunology Clinic793-2928

If the patient is a pediatric sexual assault survivor:

- Patient should be referred for follow up at the Child Safe Clinic444-3996

If uninsured (all patients may follow up at TMH Immunology Clinic):

- Refer patient to the Miriam Hospital Immunology Clinic and call directly:
 - Clinic 793-2928 OR Backline 793-7299 (do not give to patients)
 - If making off hours referral, page and notify the ID fellow on-call444-4000