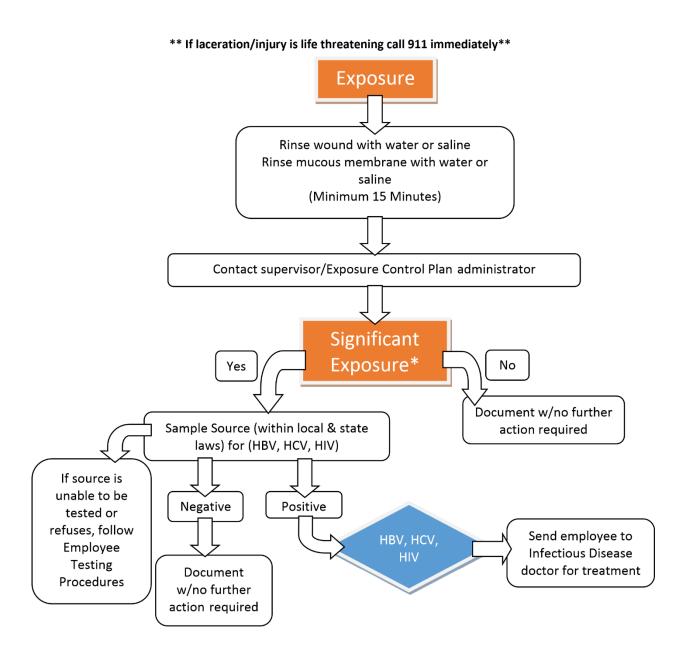


## Bloodborne Pathogen Flowchart





## **Likely Treatment**

HBV Exposure: If not verified immune, then HBIG within 48 hours and start series

HCV Exposure: Infectious disease control MD will determine

HIV: Infectious disease control MD will review labs to determine best post-exposure prophylaxis

protocol.

## **Employee Testing Procedures**

If source is unable to be tested

- 1. Employee baseline is completed.
- 2. Infectious disease control MD is consulted to determine all factors involved in the exposure.
- 3. Depending on factors HIV PEP may be considered.
- 4. Depending on factors and employee's Hep B status HBIG an Hep B Series may be considered.
- 5. Depending on factors Hep C treatment or monitoring for conversion followed by treatment may be considered.

## \*Significant Exposure

Significant exposure of an employee in the occupational setting is defined as the employee having sustained a contact, which carries a potential for a transmission of HIV, HBV, HCV, and other bloodborne pathogens by one or more of the following means:

- 1. Transmission of blood, semen, or other body fluid into a body orifice.
- 2. Exchange of blood during the accidental or intentional infliction of a penetrating wound, including a needle puncture.
- 3. Entry of blood or other body fluid into an eye an open wound, an oozing lesion, or where a significant breakdown in the skin has occurred.

\*CDC 2015