

# Post Exposure to Blood and/or Body Fluids Algorithm

## EXPOSED

1. **PROVIDE FIRST AID for yourself**
  - Thoroughly rinse with soap and water the percutaneous injury site and/or intact skin
  - Flush eyes, nose, mouth with running water
  - **Exception:** for sexual assaults, all prophylactic action occurs in the Emergency Department (ED)
2. **PROCEED FOR RISK ASSESSMENT**

Community Exposure involving either Non-occupational or Occupational  
**EXPOSED - Proceed to the nearest Emergency Department (ED)**

Occupational Exposure involving Southern Health-Santé Sud (SH-SS) and Partner Organizations  
 Employee, Physician, Student, Volunteer  
**EXPOSED - CONTACT Manager/Supervisor/Delegate**

**EXPOSED to the ED:**  
 Register and triage as per *Triage and Waiting Room Monitoring* (CLI.5110.PL.005) policy  
 ➤ Assign CTAS Level 2

Determine **RISK** to Exposed based on **BODY FLUIDS** and **TYPE of EXPOSURE**  
 Use *Post Exposure to Blood and Body Fluids Risk Assessment and Management* (CLI.4110.PL.017.FORM.01) form; complete sections A, B, and C

**Does the TYPE of EXPOSURE place the EXPOSED at RISK?**

YES

NO

Reassure the **exposed** that the body fluid involved and/or the type of exposure experienced are not ones associated with transmission of either HIV, HBV, or HCV

- Occupational Exposures within Our Programs
- ✓ Identify Source - complete section D of Risk Assessment
  - ✓ **Exposed to closest ED ASAP**

Assess RISK from KNOWN Source

### ALL EXPOSED in ED:

- Continue completing all sections of *Post Exposure to Blood and Body Fluids Risk Assessment and Management*
- Complete *Post Exposure to Blood and Body Fluids Instructions Record – Exposed* (CLI.4110.PL.017.FORM.04)  
 Provide either *Manitoba Health: What you should know?* (CLI.4110.PL.017.SD.02) or *Manitoba Health: Ce Que Vous Devez Savoir?* (CLI.4110.PL.017.SD.03)

- **DO NOT** delay providing HIV – PEP by waiting for laboratory testing of exposed, or source risk assessment/laboratory testing (**PROVIDE** first dose preferably within **2 to 4** hours post exposure)

- **Order laboratory tests as per standard orders**
- Post Exposure Prophylaxis (PEP) to Blood and Body Fluids Standard Orders - Adult* (CLI.4110.PL.017.FORM.05) or
- Post Exposure Prophylaxis (PEP) to Blood and Body Fluids Standard Orders - Pediatric* (CLI.4110.PL.017.FORM.06)

### PROVIDE DISEASE SPECIFIC TREATMENT

**Prescriber** - use *Post Exposure to Blood and Body Fluids Risk Assessment and Management* section G & H to assess PEP initiation for HIV and HBV

**To Prescribe PEP, follow:**

- Post Exposure Prophylaxis (PEP) to Blood and Body Fluids Standard Orders - Adult* or
- Post Exposure Prophylaxis (PEP) to Blood and Body Fluids Standard Orders - Pediatric*

**For HIV, provide if indicated:**

- HIV – PEP kit(s)
- Information about HIV – PEP medication
- Outpatient Prescription for Human Immunodeficiency Virus (HIV) Post Exposure Prophylaxis (PEP) - Adult (CLI.4110.PL.017.FORM.07) or
- Outpatient Prescription for Human Immunodeficiency Virus (HIV) Post Exposure Prophylaxis (PEP) - Pediatric (CLI.4110.PL.017.FORM.08).

**For HBV – laboratory results needed prior to PEP start**  
**For HCV, there is no PEP**

### Source Assessment to be completed:

1. For Occupational Exposure of SH-SS or Partner Organizations:
  - By Manager/Supervisor/Delegate
  - By ED staff if source is a client in community
2. Community Exposure (both occupational and non-occupational):
  - By ED Staff

Complete:

- *Post Exposure to Blood and Body Fluids Source Consent* (CLI.4110.PL.017.FORM.02)
- *Post Exposure to Blood and Body Fluids Testing of Source* (CLI.4110.PL.017.FORM.03)

**For Occupational exposures:**  
**The exposed does NOT counsel their own source nor becomes involved in obtaining consent from the source**

Complete and fax *Post Exposure to Blood and Body Fluids Referral* (CLI.4110.PL.017.FORM.09)