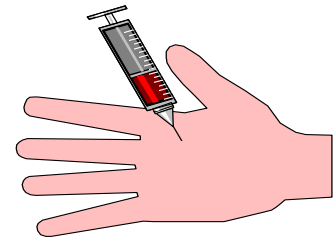


BIOHAZARD & NEEDLESTICK INJURY - STAFF

Working in a health service environment can put you at risk of exposure to blood and body fluids containing viruses. Prevention of injury to yourself and others is the best protection. To become infected, blood-borne viruses (BBV) must enter your body through a cut or puncture to the skin, splash to the eye or through contact with oral mucosa.



Prevention:

- Ensure that you are fully vaccinated against diphtheria and tetanus, Hepatitis B, and Hepatitis A
- Wear protective clothing ie masks, gowns, eyewear, gloves before performing procedures
- Never recap needles
- Dispose of sharps at point of use
- Do not over fill laundry / rubbish bags
- Use the correct disposal method for waste

First Aid:

- If skin is penetrated encourage bleeding and wash the area well with soap and water.
- If the eyes are contaminated rinse gently but thoroughly with water or normal saline whilst the eyes are open.
- If blood gets in the mouth, spit it out then rinse the mouth with water several times.

Reporting a Biohazard / Needlestick Injury:

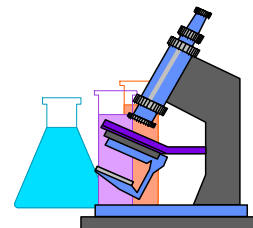
If you incur a biohazard injury then please report to the District Medical Officer On-Call.

Report the incident directly to your supervisor and complete an [Incident Report Form](#). Forward the completed incident report to the General Manager Remote Health – CA / TE.

Blood Tests:

Serology is requested for the following:

- Hepatitis B Sag, Sab
- Hepatitis C ab
- HIV
- Syphilis
- HTLV-1 (may be required)



Staff may choose to have blood taken & held until patient's blood results are confirmed.

Baseline Tests:

Initial tests are baseline tests. These indicate your status before the incident occurred. The results of these tests may show disease previously acquired.

Confidentiality:

Maintaining confidentiality is paramount.

Positive HIV results will be phoned directly to the senior physician.

Window Period:

Developed by: Professional Practice Group	Page 1	Reviewed: April 2009
Release Date: June 2008		Next Review: April 2012

If you have been exposed to a BBV following a biohazard incident it may take up to 3 months before antibodies are detected in your blood (this is known as the window period). During the window period you may be infectious and must take care not to infect anyone. You can do this by:

- Ensuring a level of safe work practice.
- Practising safe sex with your partner.
- Avoiding blood and body fluid donations.
- Avoiding pregnancy.

Testing the Source Person (Index Case):

If possible blood *should* be obtained from the source person *for the same tests*. The person must give *informed consent* to the tests and arrangements *need to be* made for them to receive their results.

Prophylaxis:

Hepatitis B immunoglobulin may be required if not previously vaccinated for hepatitis B or Hepatitis B vaccinations are not up to date,

The use of antiviral drugs in high-risk situations may significantly reduce the chance of acquiring HIV -this must be commenced as soon as possible. HIV prophylaxis is initiated in consultation with the medical physician.

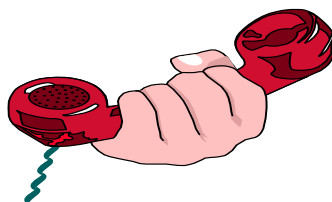
Follow up tests:

After 3 months you will need to arrange for follow up tests to determine your post window period status.

Make sure that you have information on:

- Blood tests and results
- Follow-up
- Safe work & sex practices
- The window period

**A biohazard injury can be a stressful incident.
If you would like to talk it over or obtain further information phone**



Centre for Disease Control in your Region.