EXPOSURE INCIDENT PROTOCOL

An exposure incident occurs when there is exposure to a patient’s blood and/or saliva:
- Through a needle stick or other sharp perforating the skin
- Contamination through an open cut or skin laceration
- Splash or spatter to eyes, nose, mouth or other mucous membrane

1. Immediate Care:
   o Thoroughly wash the exposure site
   o Thoroughly flush eyes or other mucous membrane with water. The Eye Wash Station is located in Sterilization.

2. If the patient source of the exposure is known, ask the patient to remain present until the need for testing has been determined.

3. Notify the Department Lead who will contact the Co-Chair.

4. The Co-Chair will explain the indicated treatment choices to the exposed volunteer, begin the Exposure Incident Report and coordinate any needed care or testing.

5. The exposed volunteer will be given the choice to be tested. The volunteer has the right to refuse testing. If refused, the volunteer will sign the Exposure Incident Report in the section indicating refusal for testing / follow-up care.

6. All testing of the exposed volunteer is at their own expense as specified in the volunteer waiver form that was signed during registration.

7. If the source patient is known and present and the exposed person chooses to be tested:
   o Co-Chair will speak to the source patient and ask them to agree to be transported to the hospital for testing. Explain all expenses will be covered by the MOM project.
   o The exposed volunteer will be transported to the hospital for post-exposure testing. The expenses will be covered by the volunteer
   o A copy of the patient’s record and a copy of the Exposure Incident Report will accompany the exposed volunteer to the hospital

8. If the source patient is unknown or not present:
   o If desired, the exposed volunteer will be transported to the hospital for post-exposure testing.
   o A copy of the Exposure Incident Report will accompany the exposed volunteer to the hospital

9. Any follow-up testing or treatment is the responsibility of the exposed volunteer

10. The original Exposure Incident Report will remain with the MDA