Accidental needle stick or blood splash to mucus membrane procedure

1. Immediately provide first aid

- after sharps injuries
- o allow the wound to bleed freely for a brief time
- o gently wash with soap and water
- o bandage as required

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- after exposure to eye, nose, or mouth
- o flush area with generous amounts of water for at least 10 minutes

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- after exposure to broken skin
- o wash with soap and water

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2. Assess patient's status and seek patient consent for testing

- practitioner should assess the risk by examining patient's medical history and questioning the patient
- patient cooperation should be sought to clarify status
- if HBV, HCV, or HIV status is unknown or uncertain, advise patient to consent to testing of blood-borne pathogens by qualified medical professionals
 - 3. Staff member should be referred to an infectious disease specialist or hospital emergency department for further advice and if necessary, post-exposure prophylaxis
- have processes and information readily available so that the staff member can have prophylaxis treatment administered as quickly as possible

4. Document the incident

- workplace safety requirements must be adhered to
- record the staff member's name, and status of their immunizations
- date and time of the incident
- what the staff member was doing
- detail the extent of the exposure, the protective measures that were in place, and the actions that were taken immediately afterward
- the name of the source and the known status of the blood-borne pathogen
- identify follow-up procedures and post-exposure counselling and management