Post-Exposure Requirements

WAC 296-823-160

Summary

YOUR RESPONSIBILITY:

To make sure employees who have been exposed to blood or other potentially infectious materials (OPIM) have appropriate post-exposure evaluation and follow-up available

You must

Make a confidential medical evaluation and follow-up available to employees who experience an exposure incident
WAC 296-823-16005 160-2

Test the blood of the source person
WAC 296-823-16010 160-4

Provide the results of the source person's blood test to the exposed employee
WAC 296-823-16015 160-5

Collect and test the blood of the exposed employee
WAC 296-823-16020 160-6

Provide information to the health care professional evaluating the employee
WAC 296-823-16025 160-6

Obtain a copy of the health care professional's written opinion on post-exposure evaluation and provide it to the employee
WAC 296-823-16030. 160-7

Post-Exposure Requirements

WAC 296-823-160

Rule

WAC 296-823-16005

Make a confidential medical evaluation and follow-up available to employees who experience an exposure incident

You must

- Make immediately available a confidential post-exposure evaluation and follow-up to all employees with occupational exposure to blood or OPIM who report an exposure incident.

Note:

The employer or a third-party health care provider identified by the employer may do the evaluation.

Definition:

Exposure incident: A specific eye, mouth, other mucous membrane, nonintact skin or parenteral contact with blood or other potentially infectious materials (OPIM) that results from the performance of an employee's duties. Examples of nonintact skin include skin with dermatitis, hangnails, cuts, abrasions, chafing, or acne.

You must

- Make sure that the post-exposure medical evaluation and follow-up are all of the following:
  - Immediately available following an exposure incident
  - Confidential
  - At no cost to the employee
  - At a reasonable time and place
  - Administered by or under the supervision of a licensed physician or by another licensed health care professional
  - Provided according to recommendations of the United States Public Health Service current at the time these evaluations and procedures take place.

-Continued-

WAC 296-823-16005 (Continued)

You must

- Make sure that the evaluation and follow-up includes **at least** these elements:
  - Documentation of the routes of exposure, and the circumstances under which the exposure incident happened
  - Identification and documentation of the source individual, unless you can establish that identification is infeasible or prohibited by state or local law
  - Collection and testing of blood to detect the presence of HBV and HIV
  - Post-exposure preventive treatment, when medically indicated, as recommended by the United States Public Health Service
  - Counseling
  - Evaluation of reported illnesses.
- Make sure that all laboratory tests are conducted by a laboratory licensed by the state or Clinical Laboratory Improvement Amendments (Act) (CLIA).

Post-Exposure Requirements

WAC 296-823-160

Rule

WAC 296-823-16010

Test the blood of the source person

Exemption:

When the source individual is already known to be infected with HBV or HIV, you don't need to test their status.

You must

- Arrange to test the source individual's blood for HBV and HIV as soon as feasible after getting their consent.
  - If you don't get consent, you must establish that legally required consent can't be obtained.
  - When the law doesn't require the source individual's consent, their blood, if available, must be tested and the results documented.

Note:

- Your local health authority enforces rules regarding HIV testing and consent which are found in WAC 246-100-206, Special Diseases-Sexually Transmitted Diseases, and WAC 246-100-207, Human Immunodeficiency Virus (HIV) Testing.
  Go to http://www.leg.wa.gov/wac and click on Title 246, to find these rules.
- Source testing: According to the Centers for Disease Control and Prevention (CDC) Standards, hepatitis C virus (HCV) infection is the most common chronic bloodborne infection in the United States. The CDC recommends testing of the source person for the presence of anti-HCV antibody. (Updated *U.S. Public Health Service Guidelines for the Management of Occupational Exposures to HBV, HCV, and HIV and Recommendations for Post-exposure Prophylaxis,* MMWR, June 29, 2000/50(RR11); 1-42.)

WAC 296-823-16015

Provide the results of the source person's blood test to the exposed employee

You must

- Make sure the results of the source person's blood test are provided to the exposed employee, if possible
- Make sure the exposed employee is informed of applicable laws and regulations regarding disclosure of the identity and infection status of the source person.

Note:

➢ Laws and regulations that currently apply are:
  - Chapter 70.02 RCW, Medical Records--Health care Information Access and Disclosure.
  - Chapter 70.24 RCW, Control and Treatment of Sexually Transmitted Diseases.

➢ Go to http://www.leg.wa.gov/rcw/ and click on Title 70 to find these rules.

Post-Exposure Requirements

WAC 296-823-160

Rule

WAC 296-823-16020

Collect and test the blood of the exposed employee

You must

- Arrange to have the exposed employee's blood collected and tested as soon as feasible after consent is obtained.
  - If the employee consents to baseline blood collection, but doesn't give consent at that time for HIV serologic testing, the sample must be preserved for at least 90 days. If, within 90 days of the exposure incident, the employee chooses to have the baseline sample tested, it must be done as soon as possible.

WAC 296-823-16025

Provide information to the health care professional evaluating the employee

You must

- Provide **all** of the following information to the health care professional evaluating an employee after an exposure incident:
  - A copy of WAC 296-823-160
  - A description of the job duties the exposed employee was performing when exposed
  - Documentation of the routes of exposure and circumstances under which exposure occurred
  - Results of the source person's blood testing, if available
  - All medical records that you are responsible to maintain, including vaccination status, relevant to the appropriate treatment of the employee.

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WAC 296-823-16025 (Continued)

Reference:

Requirements for the health care professional's written opinion for hepatitis B vaccinations can be found in WAC 296-823-13010.

Note:

You may meet the requirement to provide a copy of WAC 296-823-160 to the health care professional by giving them http://www.lni.wa.gov/rules/, as long as their office has a computer and access to the Labor and Industries' website.

WAC 296-823-16030

Provide a copy of the health care professional's written opinion to the employee

You must

- Obtain and provide to the employee a copy of the evaluating health care professional's written opinion within 15 days of the completion of their evaluation.

Note:

- ➢ If the health care professional provides the written opinion directly to the employee, you don't need to do so.
- ➢ If the employee's personal health care professional completes the evaluation, you aren't required to obtain the health care professional's written opinion.

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Post-Exposure Requirements

WAC 296-823-160

Rule

WAC 296-823-16030 (Continued)

You must

- Make sure the health care professional's written opinion is limited to the following information:
  - That the employee has been informed of the results of the evaluation
  - That the employee has been told about any medical conditions resulting from exposure to blood or other potentially infectious materials (OPIM) which need further evaluation or treatment.
- Make sure that all other findings or diagnoses remain confidential and are not included in the written report.

Helpful tools:

Health Care Professional's Written Opinion for Post-exposure Evaluation and Health Care Provider's Written Opinion for Hepatitis B Vaccination

These forms are available for your use in the resource section of this chapter.