



Clinical Staff Executive Committee

MEDICAL CENTER POLICY NO. 0134

A. SUBJECT: Transmissible Bloodborne Pathogens

B. EFFECTIVE DATE: July 1, 2013 (R)

C. POLICY:

Diseases caused by bloodborne pathogens such as the human immunodeficiency viruses (HIV), hepatitis C (HCV) and hepatitis B (HBV) pose special concerns for all persons providing patient care or other services within the Medical Center. As required by federal regulations, Standard Precautions related to the treatment and care of patients shall be followed at all times.

http://www.cdc.gov/ncidod/dhqp/gl_isolation_ptII.html

Healthcare practitioners who perform exposure-prone invasive procedures shall be encouraged to seek appropriate testing for viruses or other diseases that may be transmitted to patients and to disclose the results of such testing to the Director of Employee Health or WorkMed.

D. PROCEDURES:

1. Training in Standard Precautions

All healthcare practitioners, Medical Center employees, and all students who work within the Medical Center shall be instructed in Standard Precaution requirements and techniques. For healthcare practitioners and Medical Center employees, such instructions shall be provided as part of their initial orientation following hiring; and for all students who work within the Medical Center, it shall be provided before the initial potential exposure to blood or body fluids. Annual retraining will be provided as required by accreditation or regulatory standards. Healthcare practitioners, Medical Center employees and students who fail unjustifiably to follow precautions shall be subject to appropriate discipline by their supervisors.

2. Required Work Assignments

Healthcare shall be provided to patients even if such care poses the risk of exposure to bloodborne pathogens. A healthcare practitioner or Medical Center employee shall not refuse to treat a patient because the patient is infected with a bloodborne pathogen such as HIV, HCV or HBV.

- a. If a healthcare practitioner or Medical Center employee refuses to treat a patient infected with a bloodborne pathogen, appropriate steps to educate and counsel the healthcare practitioner or employee shall be made with the assistance of Hospital Epidemiology and/or Employee Health.

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- b. Refusal to work that persists beyond the period of counseling shall be addressed in accordance with Medical Center Human Resources policies.

3. Management of Healthcare Worker Exposures

If a healthcare practitioner, Medical Center employee, or student has bloodborne pathogen exposure, the individual shall immediately report the exposure by paging PIC#1523 for initial exposure evaluation. The individual will be instructed to go to Employee Health or the Emergency Department, as appropriate for initial exposure work-up, counseling and/or treatment. The procedure outlined in [Medical Center Policy No. 0117 "Testing for HIV and Hepatitis Viruses Following Certain Exposures to Blood or Body Fluids"](#) shall be followed.

4. Management of Patient Exposures

If a patient has a parenteral or mucous/membrane exposure to the blood or other body fluid of a healthcare practitioner, Medical Center employee or student, or a cutaneous exposure involving large amounts of blood or prolonged contact with blood, then the patient shall be immediately informed of the incident. The procedure outlined in [Medical Center Policy No. 0117 "Testing for HIV and Hepatitis Viruses Following Certain Exposures to Blood or Body Fluids"](#) shall be followed.

5. Management of Infected Healthcare Practitioner, Employee or Student

Healthcare practitioners, Medical Center employees, and students who are found to be infected with certain bloodborne pathogens, specifically including HIV and Hepatitis B and C, shall be permitted to perform duties of patient care and treatment only after a case-specific review and assessment of risk to patients and others. During this review, effort will be made to maintain confidentiality of the involved practitioner, employee or student.

- a. Employee Health, Work Med or Student Health will notify the Director of Hospital Epidemiology or designee within 24 hours of being made aware of an employee, a practitioner or student's infected status. It is the responsibility of the Director of Hospital Epidemiology to determine if the individual will be removed from performing patient care duties or allowed limited duties.
- b. The Director of Hospital Epidemiology or designee will notify the appropriate person and/or office of any duty restrictions within 24 hours of being notified of the individual's infected status.
 - The Associate Dean for Students in the School of Medicine will be notified for any medical student;
 - The Dean's Office in the School of Nursing will be notified for any nursing student;
 - Employee Health/Human Resources will be notified for any Medical Center employee;
 - The Credentials Committee will be notified for any attending physician, nurse practitioner or physician assistant;

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- The Designated Institutional Officer (DIO) and Associate Dean for Graduate; Medical Education will be notified for any Graduate Medical Trainee;
 - The Department Chair, and as appropriate, Division Chief, will be notified for any attending physician, nurse practitioner, or physician assistant.
- c. Within two weeks of initial notification of an individual's infected status, the Director of Hospital Epidemiology or designee shall convene an Expert Review Panel consisting of the Director of Hospital Epidemiology or designee, the Medical Directors of Employee Health and Work Med and experts in the management of blood borne pathogens.

The review and assessment shall consider the following:

- An individualized evaluation of the person's duties;
- The existence and extent of disabilities that impair or prevent the performance of duties;
- The extent to which, through accommodation, the person can continue working in a useful capacity;
- The risks posed to the individual and to others;
- The risk of transmission of any other simultaneously carried infectious agent;
- Whether prospective patients shall be notified of the infected practitioner's status; and
- Whether prospective patients' informed consent for treatment by the infected practitioner shall be required.

The panel may request additional updated laboratory testing as needed to complete their work exposure related assessment and may request ongoing communication from the individual's personal physician regarding the individual's current clinical status.

- d. Based on a thorough review of the above considerations, the panel will submit, in writing, their recommendations to the appropriate individual/offices listed above in 5b.
6. Reasonable Accommodation

The Medical Center shall provide reasonable accommodation to any healthcare practitioner, Medical Center employee, or student infected with a bloodborne pathogen in a manner consistent with accommodation provided for others with disabling medical problems.

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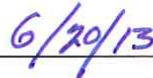
SIGNATURE:



Robert S. Gibson, M.D., President, Clinical Staff



R. Edward Howell, CEO, UVA Medical Center



DATE:

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Approved March 3, 1992

Reviewed March 1996

Revised November 1992, June 1993, February 2000, July 2004, December 2007, June 2010, June 2013

Approved by Quality Committee

Approved by the Clinical Staff Executive Committee