



POST EXPOSURE PROTOCOL – FOR FACULTY & STAFF
Revised October 2013

PURPOSE

To assure timely and appropriate access to medical treatment and follow-up care after exposure to blood and bodily fluids.

PROCEDURE

1. Exposed person should clean wound and skin sites with soap and water immediately. Exposed mucous membranes should be flushed with water.
2. Exposed person must notify faculty member of the class in which incident occurred.
3. Notify Public Safety Department (718-260-5550/5555).
 - a. Faculty member of class in which incident occurred must call Public Safety to inform the department of the incident and leave the exposed person's name, location and extension of classroom.
 - b. Exposed person should complete Public Safety Incident Report. Fully describe how the injury occurred and the device involved. Incident report should include the exposed person's name, location and source person's name.
4. Public Safety ensures that the exposed person immediately reports to the appropriate treatment location with completed incident form (preferably within one hour of the occurrence*). All exposed persons **MUST BE EVALUATED**.

***NOTE: Post Exposure Prophylaxis (PEP) for HIV should be initiated promptly within the first few hours and no later than 36 hours after exposure.**

POLICY

1. A student/exposed person who sustain a blood or body fluid exposure will be evaluated based on current Center for Disease Control and New York State Department of Health recommendations.

2. A student must report a blood or body fluid exposure to his/her respective faculty/staff. Thereafter, faculty/staff must report the exposure to their respective supervisor.
3. Affected student must report occurrence to the Public Safety Department (718-260-5550/5555) as soon as possible and complete an Incident Report.
4. Public Safety Department must direct student to treatment location.

DEFINITIONS

Post Exposure Prophylaxis (PEP): A combination of antiretroviral agents used to prevent HIV infection, given to individuals with high risk exposure to an HIV positive or potentially infected source person.

Percutaneous or non-intact skin exposure: The introduction of blood or other body fluids including semen, vaginal secretions, cerebrospinal and amniotic fluid directly through the skin (puncture or cut).

Mucosal exposure: The introduction of blood and body fluids as defined above onto mucous membranes (splash to eye or mouth). Any exposure to feces, nasal secretions, tears, urine, vomitus or saliva, which is not visibly contaminated with blood, does not constitute a risk of transmission for HIV, HBV, or HCV. Saliva transmitted through human bite may pose a risk if the skin is broken and visible blood is present.

Exposed person: The student, faculty or staff member exposed to blood or body fluids.
Source person: The individual whose blood and body fluid was involved in the exposure.

BLOOD AND BODY FLUID EXPOSURE CHECKLIST

EXPOSED PERSON'S NAME: _____

DATE OF EXPOSURE: _____

- Evaluated injury and provided basic wound care
- Completed Incident Report
- Person transported to healthcare facility

Name of Facility: _____

Date: _____

Time: _____

Name: _____

Public Safety Officer

Signature: _____

Public Safety Officer

Treatment Location

Hours & Days of Operation

NYCCT Wellness Center
Pearl 104

Monday – Thursday 9:00AM – 5:00PM
Wednesday 9:00AM – 6:00PM
Friday Closed

Downtown Integrated Medical Services Inc.
81 Willoughby Street
Brooklyn, NY 11201
718-522-3399

Monday – Thursday 9:00AM – 7:00PM
Friday 9:00AM – 6:00PM
Saturday 9:00AM – 5:00PM
Sunday Closed