

# Blood & Body Fluid Post Exposure Process

(Emory Clinic & Emory Satellite Facilities)

## Healthcare worker responsibilities

**1)** Immediately clean the wound with soap & water. Flush exposed oral/nasal mucosa with water for 15 minutes. Use eyewash station to irrigate eyes for 15 minutes.

**2)** Notify supervisor of exposure & report source patient information: **first/last names, DOB and MRN.**

**3)** Emory employees complete incident report in **HOME**. Non-Emory employees are to contact OIM during business hours at **404-686-8587, option 4.**

## During OIM business hours (Mon.-Fri., 7:30 a.m. – 4 p.m.)

**Page OIM Advanced Practice Provider (APP): 404-686-550, ID# 50464**

### OIM APP or Clinic Supervisor as directed:

- Obtain source patient consent.
  - Obtain source patient blood (1 gold/1 red speckled tube).
  - Coordinate ordering BBP exposure labs & faxing Post Exposure Screen Request to lab customer service.
  - Deliver labeled source patient specimens to EUH lab or ensure courier pick up.
  - Fax Consent, Post Exposure Screen Form & BBP Exposure Form to BBP coordinator.
- Employee evaluation/lab work will be done in the OIM office.*

## Important Contacts

**OIM on-call APP:** 404-686-5500, ID# 50464

**OIM:** 404-686-8587, option 4

**EUH Administrative Nursing Supervisor:** 404-686-5500, ID# 13084

**Lab Customer Service:** 404-712-5748; fax 404-712-5567; fax 404-712-0828

**BBP Coordinator:** 404-686-9237; fax 404-686-7095

## Questions?

Page on-call OIM Advance Practice Provider (APP): 404-686-5500, ID# 50464

## After OIM business hours (Mon.-Fri. 4 p.m. – 7:30 a.m., weekends & holidays)

**Notify Administrative Supervisor: 404-686-5500, ID# 13084**

- **Administrative Nursing Supervisor:** Coordinate obtaining source patient consent, source patient blood (1 gold/1 red speckle tube) & ordering of BBP exposure labs.
- **TEC (A, B, or C):** Deliver labeled source patient specimens to EUH lab.
- **Satellite Clinics:** Coordinate courier to deliver labeled specimen to EUH lab inc. Post Exposure Screen Request if faxed.
- Fax Consent, Post Exposure Screen Request & BBP Exposure Information Form to BBP coordinator.

*Employee evaluation/lab work will be done in the OIM office.*