Putting It All Together



n managing an occupational bloodborne pathogens exposure, the injured worker, the employer or designated infection control coordinator, and the evaluating healthcare professional all have important roles to play. Being prepared for accidental injuries and properly managing them is the best way to limit the risk of disease transmission. Adapted by OSAP from information jointly prepared by the Occupational Safety and Health Administration (OSHA) and the American Dental Association, this flowchart walks dental healthcare personnel through federal OSHA postexposure requirements.

Before an Exposure Occurs...

Dental Worker

Receive training on:

- risks of occupational exposures,
- prevention strategies and techniques.
- ☐ immediate reporting of injuries/ exposures, and
- □ reporting procedures within the practice setting.

Employer / Infection Control Coordinator

Establish referral arrangements and protocol for workers to follow if exposures to blood or saliva

for workers to follow if exposures to blood or saliva occur via puncture injury, mucous membrane, or non-intact skin.

Train occupationally exposed employees in postexposure protocols.

Make available and pay for hepatitis B vaccine for employees at occupational risk.

Qualified Healthcare Provider

Contract with dentist-employer to provide medical evaluation, counseling, and follow-up care to dental office employees exposed to blood or other potentially infectious materials.

Keep current on public health guidelines for managing occupational exposure incidents and be aware of an evaluating healthcare provider's responsibilities ethically and by law.

When an Exposure Incident Occurs...

Dental Worker

Perform first aid:

- Clean wounds and exposed skin sites with soap and water. In the case of a mucous membrane exposure, flush the affected area with cool water.
- Avoid using caustic agents such as bleach or disinfectants on wounds. An antiseptic may be used, although there is no evidence to suggest that using it or squeezing the wound to express fluid reduces risk of disease transmission.

Report the injury to the employer or designated infection control coordinator.

Report to the healthcare professional designated by the employer/infection control coordinator for medical evaluation and follow-up.

Employer / Infection Control Coordinator

Document events of the exposure as they occurred in the practice setting.

Immediately direct the employee to the evaluating healthcare professional.

With the employee, send to the evaluating healthcare professional:

- $\ \square$ a copy of the worker's standard job description,
- a copy of the exposure incident report,
- the source patient's identity and bloodborne infection status (if known and consent is obtained),
- □ the employee's HBV status and other relevant medical information (if known and consent is obtained), and
- □ a copy of the Occupational Safety and Health Administration (OSHA) Bloodborne Pathogens Standard.

Arrange for source patient testing, if the source patient is known and has consented.

Pay for postexposure evaluation, and, if indicated, prophylaxis

Receive copy of Written Opinion.

Receive Written Opinion from evaluating health-care professional:

- ☐ File copy of Written Opinion in employee's confidential medical record (if maintained by the dentist employer).
- ☐ Provide copy of Written Opinion to exposed employee.

Qualified Healthcare Provider

Evaluate exposure incident, worker, and source patient (with consent) for HBV, HCV, and HIV, maintaining confidentiality:

- ☐ Arrange for collection and testing (with consent) of exposed worker and source patient as soon as feasible (if serostatus is not already known).
- ☐ In the event that consent is not obtained for HIV testing, arrange for blood sample to be preserved for up to 90 days (to allow time for the exposed worker to consent to HIV testing).
- ☐ Arrange for additional collection and testing as recommended by the U.S. Public Health Service/CDC.
- □ Notify worker of results of all testing and of the need for strict confidentiality with regard to source patient results.
- Provide counselina.
- ☐ Provide postexposure prophylaxis, if medically indicated.

Assess any illnesses/side effects reported by the worker.

Send employer a Written Opinion within 15

days. The Written Opinion contains (only):*

- documentation that the employee was informed of evaluation results and the need for any further follow-up, and
- whether HBV vaccine was indicated and if it was received.
- * All other findings or diagnoses remain confidential and are not included in the written report.