

Standard Operating Procedure

Procedure Title:	Needle Stick Exposure Procedure
Date:	1/13/23
Version:	1.0
Department:	Clinical
Approved By:	Brooke Gregory

Purpose: The purpose of this SOP is to outline the immediate action to take following a needle stick exposure.

Procedure: When a team member experiences a needle stick exposure the following steps are to be taken:

1. Immediately wash the affected area with soap and warm running water.
2. Notify supervisor immediately.
3. Discuss needle stick exposure with patient and ask to complete labs prior to leaving clinic.
 - a. Order the following labs and send to Asante STAT:
 - i. HIV Testing
 - ii. Hep B antigen
 - iii. Hep C antibody
 - iv. AST/ALT
4. Complete 802 and Employee Incident Report forms as soon as possible following the exposure (located in binder at each location and on each floor).
 - a. Once completed, turn in to supervisor to review then they will submit to HR.
5. Employee who suffered the needle stick exposure to complete labs STAT.
 - a. Order the following labs under DX: W46.1XXA, and send to Asante STAT:
 - i. Hep B Surface Antibody
 - ii. HIV Testing NOW, and again at 6 weeks, 3 months, and 6 months
 - iii. Hep C Antibody NOW, and again at 2 weeks, 4 weeks, and 8 weeks
6. Pending lab results, if the need for medication is assessed employee is to:
 - a. proceed to Asante ER for treatment OR
 - b. call the Clinicians' Post Exposure Prophylaxis (PEP) Line at 1-888-448-4911
7. If the employee does not proceed to ER for treatment and medication is warranted, the prescriptions can be sent to Asante Retail Pharmacy, 541-789-5850. The pharmacy will then need to order the medication from Asante hospital which will arrive next day.
 - a. Give post-exposure prophylaxis (PEP) for exposures posing risk of infection transmission:
 - i. HBV

1. Give PEP as soon as possible, preferably within 24 hours,
 2. PEP can be given to pregnant women
- ii. HCV
1. PEP not recommended
- iii. HIV
1. Initiate PEP as soon as possible, within hours of exposure
 2. Offer pregnancy testing to all women of childbearing age even if they are not known to be pregnant
 3. Seek expert consultation if viral resistance is suspected
 4. Administer PEP for 4 weeks if tolerated

Most health care workers with occupational exposure to body fluids do not develop disease. For those who do, prognosis is the same as other routes of transmission.