

March 4, 2009

ATTN: Medical Health Officers and Branch Offices

Public Health Nursing Administrators and Assistant Administrators

Holders of Communicable Disease Control Manuals

Re: **Blood and Body Fluid Exposure Management Guidelines**

Please note the following revisions to the above guidelines:

Page 3, Section 4.0 "DEFINITIONS:"

- Definition of skin exposure is now more explicit (i.e., three or more drops of blood or infectious body fluid in contact with skin for 3 or more minutes).
- Added definitions of susceptibility for HIV, HBV, and HCV

Page 3, Subsection 5.1 "Cleanse:"

Revised wording for increased clarity. The recommendations have not changed.

Page 4, Subsection 5.2 "Triage:"

- Revised outer time limits for the administration of HBIg post-exposure:
 - percutaneous exposure no later than 7days after the exposure
 - permucosal and sexual exposures no later than 14 days after the last
- More detailed recommendations regarding which type of bites warrant consideration for antiretroviral therapy

Administrative Circular # 2009:07





Page 5, Section 5.3 "Blood and Body Fluid Exposure Management Algorithm:"

 This new algorithm outlines the steps to be taken in the management of a blood and body fluid exposure.

Page 7, Table 1: "Fluids and tissues capable of transmitting bloodborne pathogens:"

"Inflammatory exudates" added to the list of fluids

Page 8, Subsection 5.4.2 "Assess the risk of transmission from the source:"

- New recommendation that if the source person discloses they are HIV positive, contact the BC Centre for Excellence in HIV/AIDS to obtain advice regarding appropriate anti-retroviral therapy for the exposed person.
- Included new recommendations from the British Columbia Centre for Excellence in HIV/AIDS (revised October 2007): "If the attending physician of the source person is known, that physician may, without breaching confidentiality, provide some insight into whether or not the exposure should be regarded as higher risk."

Page 11, Table 2: "Indicators for increased risk of transmission from the source to the exposed person:"

• Under the HIV column, added "Emigration from a country where HIV is endemic."

Page 15, Table 3: "Testing of the exposed person:"

- Revised recommendations:
 - o Test at 3 versus 2 weeks for anti-HIV; if source is HCV+ or in a high **risk group** test exposed person for HCV infection by RT-PCR.
 - o Final testing now recommended at 9 versus 12 months. There is evidence that a negative test at 9 months is sufficient to rule out infection as a result of the exposure.
- Added explanatory footnotes





Page 19, Subsection 9.1.2 "Post-exposure HIV testing:"

- Timeline for testing of the exposed person has been revised to 3 and 6 weeks and 6 and 12 months.
- Added information about point-of-care (POC) testing (i.e., rapid HIV test).

Page 21, Table 5: Hepatitis B Post-Exposure Prophylaxis:

- Revised outer time limits for the administration of HBIq post-exposure:
 - percutaneous exposure no later than 7days later
 - permucosal and sexual exposures no later than 14 days after the last exposure

Page 22, 9.2 HBV Exposure

Revised post-exposure testing schedule: 6 and 9 months.

Page 22, 9.4 HCV Exposure

 Revised post-exposure testing schedule: if the source is HCV+ or in a high risk group, test HCV RT-PCR at 3 weeks; if source is not in one of these groups and the exposed person's initial anti-HCV test is negative, next test at 9 months.

Page 27, Subsection 10.5.1 "Considerations pertaining to breast feeding:"

 More detailed recommendations and considerations pertaining to the risks of transmission of HIV, HCV, and HBV through breast milk

Appendices A, B, and C – Fact Sheets for Health Care and Emergency Service Providers for HIV, HBV, and HCV Exposures:

New resources





The HLTH 2339 "Management of Percutaneous or Permucosal Exposure to Blood and Body Fluid/Laboratory Requisition:"

- In the section "Exposure Information," added sexual and skin exposure
- In the section "Source Person:"
 - now use the term "Infectious Status of the Source"
 - deleted "unknown" category for responses regarding "Known Member of a Higher Risk Group"
- In the section "Laboratory Use Only," the order of "Exposed Person's Name" and the "Source Person Lab ID Only" has been reversed for consistency with the ordering of the data collection in the above sections.

The HLTH 2340 "Management of Percutaneous or Permucosal Exposure to Blood and Body Fluid Letter for Follow-up Physician:"

Added the website for access to the Blood and Body Fluid Exposure Management Guidelines for assistance with patient counseling

Note: stock of the HLTH 2339 and HLTH 2340 can be ordered no cost from Distribution Services in Victoria by fax: (250) 952-4559 or phone (250) 952-4008.

The HLTH 2339 is not available electronically, as it is a four page NCR form and the last two pages block out identifying information for the source person.

Please delete and destroy the following pages from the Communicable Disease Control Manual – Chapter I Management of Specific Diseases:

Table of Contents Pages 1 – 26

Dated May 2005

Insert the following replacement pages:

Blood and Body Fluid Exposure Management: Table of Contents Pages 1 – 42

Dated March 2009





You may also wish to insert:

HLTH 2339 "Management of Percutaneous or Permucosal Exposure to Blood and Body Fluid/Laboratory Requisition" Dated January 2008

HLTH 2340 "Management of Percutaneous or Permucosal Exposure to Blood and Body Fluid Letter for Follow-up Physician" Dated January 2008

If you have any questions or concerns, please contact Karen Pielak, Nurse Epidemiologist, at telephone (604) 660-6061, fax (604) 660-0197 or by e-mail to karen.pielak@bccdc.ca

Sincerely,

Dr. Jane Buxton

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