**Policy Number:** 128a  
**Policy Name:** Procedure: Bloodborne Pathogen Post-Exposure Protocol  
**Reviewed by:** Nursing Faculty  
**Last Review Date:** 1/17/18  

**Procedure: BLOODBORNE PATHOGEN POST-EXPOSURE PROTOCOL**

In the event that you are exposed to bloodborne pathogens **IMMEDIATE ACTION IS REQUIRED.** Exposure incidents include:
- Percutaneous injury: needlestick, cut, or laceration
- Mucous membrane: blood or body fluid splash
- Nonintact skin: dermatitis, hangnail, abrasion, chafing, etc.
- Parenteral: includes human bite that breaks skin

Intact skin: when the duration of the contact is prolonged (several minutes or more) or involves an extensive area

You must follow the steps below:

1. Clean the site where exposure occurred. Wash needlesticks and cuts for 10 minutes with soap and water or a known disinfectant against HIV. For splashes to the nose, mouth, or intact skin, flush the area for 10-15 minutes with tap water, sterile water, or sterile saline. Irrigate eyes with tap water, saline, or sterile irrigants for 10 minutes.

2. After cleaning, notify your clinical instructor or preceptor. Do not waste excessive time attempting to contact one of these people. Notify a staff person if unable to locate your clinical instructor or preceptor. Also notify the unit supervisor and the agency infection control or occupational health nurse.

3. Assure the source patient’s name and medical record number is recorded.

4. Report to the nearest health care facility immediately for medical evaluation and post exposure management. You will be evaluated for exposure to bloodborne pathogens. Post-exposure prophylaxis may be recommended. **Time is of the essence.** You have a window of time to begin this medication. This time factor is why it is urgent that you report for care promptly after an exposure.

5. The source patient may need to be tested for HIV, Hepatitis B, and Hepatitis C. Post-exposure prophylaxis can be taken for the time period it takes to determine the source person’s HIV status. Permission must be obtained.

6. If you have not yet notified your clinical instructor, continue to attempt to do that or notify an administrator in the College (Department Chair, Vice Dean, or Dean). You will need to complete any agency, CNPD, and UND documentation.

7. The cost of your care will be borne by you or your insurance.

Students are to read this protocol and sign annually stating they have read and understand the protocol. Documentation is sent to the CNPD Risk Management Officer.

Approved by Executive Council 8/25/06; 9/07/09  
Nursing Graduate Council 12/07/12  
"Reviewed by Policy Committee/Presented at Nursing Faculty: 01/17/18"