

What should I do if I am exposed to blood or body fluid of a patient?

1. Immediately following an exposure:
 - a. Wash cuts, puncture wounds or skin abrasions with soap and water;
 - b. Flush splashes to the nose, mouth, or skin with water;
 - c. Irrigate eyes with clean water, saline, or sterile irrigates.
2. Staff/affiliate advises area leadership/After Hours Coordinator immediately and completes a **Workplace/Injury/Illness/Hazard** report in [AEMS](#). For affiliates who do not have access to AEMS, event should be entered by an LHSC staff member.
3. All exposures must be followed up in a timely manner in order to assess and reduce your risk of becoming infected with a blood borne pathogen. If the patient source is known or suspected to be HIV, Hepatitis B and/or Hepatitis C positive, report immediately to Occupational Health and Safety Services (OHSS), or Emergency Services if OHSS is closed.
4. The treating provider/designate must obtain [informed consent](#) from the patient (source), or their [Substitute Decision Maker \(SDM\)](#), in order to test for a blood borne pathogen (e.g. Hepatitis B virus, Human Immune Immunodeficiency Virus (HIV), Hepatitis C virus).
5. Have blood drawn promptly on a patient (source) by order HEPNES STAT in Powerchart. Send light green top vacutainer with the appropriate label to Core Lab for testing. DO NOT USE Ministry of Health HIV testing kits.
6. OHSS will contact affected persons if further follow-up is required.