

**Management of Non-VA Employee Healthcare Trainees (Students, Residents, Fellows)**  
**Who While Providing Care to Veterans at GLA VA**  
**Had Blood-borne Pathogen (BBP) Exposure**

**Responsibilities**

1. Trainee:

- a. Immediate Procedure (if indicated):
  - Clean wound with soap and water.
  - Flush mucous membranes with water/saline.
  - Other wound care as dictated by injury or accident.
  - Serious injuries (e.g. lacerations) should be evaluated immediately in an Emergency Room.
- b. Collect patient information
- c. Notify Supervisor (Attending/Chief Resident) of injury immediately

2. Supervisor:

- Competent source patients:
    - Outpatient: consent patient for HIV and HCV testing.
      - HIV: in WLA Outpatient Clinic Orders select Infectious Disease menu. Select **HIV Needlestick Source** – this is a rapid HIV test. Send patient to Lab to have blood drawn.
    - Inpatient: same order process as Outpatient, request expedited bedside blood draw.
  - Incompetent source patients: If a patient is not able to consent due to mental or medical reasons, the patient's next of kin can provide consent. **If there is no next of kin or conservator, the HIV test cannot be done.** According to Public Law 100-132, HIV testing requires the informed consent of patients. Furthermore, per VA legal counsel, **HIV testing is not an emergency even in the event that a healthcare worker suffers a needlestick injury;** two doctors cannot sign the HIV consent form for the patient.
- a. Details regarding Infectious Disease/Rapid HIV testing, ID team contact information, and prophylaxis/management recommendations are available on the Intranet under ***Patient Care->Infectious Disease->Needle stick injury.***
  - b. Based upon trainee preference, refer trainee for immediate medical care:
    - i. Duty Hours: VA Employee Health (Building 256) or Parent Institution Employee Health
    - ii. Off-tour hours or holidays: Refer to VA Emergency Department (ED) or Parent Institution
  - c. Complete two required reports on-line (within 2 working days):
    - i. Hyperlinks are found via **VA Intranet -> Employees** (top of page)-> ***Needlestick and Sharps Injuries*** (icon at top of page) -> **Step 3** has two ***hyper-links*** for the required reports below:

1. [Sharp Object Injury Report](#) (requires information on the device involved in the injury)
  2. **Incident Report** via ECOMP – GLA Intranet Home Page Quicklinks
3. Incident Report (OSHA Form 301) via ECOMP. Process initiated by injured trainee and complete by supervisor.
- 1) <https://ECOMP.dol.gov>
    - ECOMP shortcut is available via “VA Bookmarks” from Google Chrome / Microsoft Edge / Internet Explore.
    - Searching for the word “ECOMP” on any browser for the web address.
  - 2) Reporting based on the existing agreement between GLA and the affiliated school on where the BBP exposure should be recorded (OSHA 300 log). The incident should only be recorded in one location, not on both agencies. If GLA is recording the incident in OSHA 300 log, report BBP incident in ECOMP OSHA Form 301, otherwise report to the affiliated school for recording.
  - 3) ECOMP has only has 2 options for “Employment Status” - “Federal Employee” and “Contractor”. **Select “Federal Employee”** to start the process.
  - 4) “Job Title” – select closest job title. Department of Labor job title does not have students, residents, fellows for selection.
  - 5) Register for an ECOMP account.
    - Do not enter Home Phone number, instead enter cell phone number. (User must be able to receive CODE for confirmation of Identify Verification.)
    - Verify email address. Do not include email domain (@va.gov) in address field. Select email domain “@va.gov” on the field to the right.
  - 6) For “Department” / “Agency Group”/ “Agency”, select in following order:
    - “DEPARTMENT OF VETERANS AFFAIRS”
    - “VHA-VISN22 DESERT PACIFIC HCN”
    - “GREATER LOS ANGELES HCS-GLA VAMC-691” for WLA campus and all GLA campuses except Sepulveda VAMC and Downtown Los Angeles (LA OPC).
  - 7) **OSHA Form 301 – Item 17: Required full detail information on the device involved in the injury.**
  - 8) OSHA Form 301 once filed by injurer,
    - Notification emails of pending supervisor review will be delivered to supervisor and OSHA Record Keeper (ORK).
    - Notification email of pending final review by OSHA Record Keeper (ORK) will be delivered to ORK.
  - 9) GLA ORK is Jeffrey Tang, Occupational Safety & Health Specialist. Contact for assistance at 310-478-3711 Extension 44511. Email: Jeffrey.Tang@va.gov

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4. Employee Health:

- a. Provision of first-aid for injury
- b. Completion of Hazardous Body Fluid Exposure Report form for trainee – per Infection Control
- c. May assist in completing HIV testing of source patient – contact attending or record or PCP.
- d. Review of source patient information if available and discussion of risk-level of exposure.
  - i. Risk 3-4/1000 percutaneous with HIV+ and needle stick
  - ii. Risk <4/10,000 percutaneous with unknown HIV status
  - iii. Risk <<3/1000 for mucocutaneous exposure
  - iv. Risk is reduced @90% by PEP administered <24 hours
- e. Order baseline labs/serologies on trainee
- f. If source patient cannot be completed before the close of business or if the source refuses testing or is unknown, a 7-day supply of Post-Exposure Prophylaxis (PEP) is offered to the trainee with follow-up referral to Infectious Disease Clinic if the source is HIV positive or unknown:
  - i. Trainees are referred to their parent institution Employee Health department for filing of a work injury claim and subsequent follow-up care (e.g. future labs at 3, 6, and 12 months, longer term supply of medications)
  - ii. No trainee is refused PEP if he/she requests it, however only a limited supply (7 days maximum) will be dispensed by Employee Health or Emergency Department by GLA policy.
- g. If trainee declines PEP, they will complete a PEP consent/declination form

### **Treatment**

Recommendations are per GLA Infectious Disease, January 2020. Treatment ideally initiated within 2 hours and absolutely within 24 hours post-exposure. Guidelines available on **GLA Intranet: Patient care->Infectious Disease->Needlestick injury.**

### **Follow-up**

1. Employee Health department at Parent Institution (e.g. UCLA, USC, Cedars-Sinai)

### **Billing:**

1. Tests or medications ordered by VA Employee Health should not be billed to the trainee. If billing does occur, trainees should follow-up at the Business Office to address.

### **Information below is from the VA Intranet:**

*Patient care->Infectious Disease->Needlestick injury*

## **NEEDLESTICK INJURY**

- Complete information regarding management of needlestick injuries can be found [here](#).

- Urgent clinical questions should be directed to the Infectious Diseases Fellow on-call (VA pager 5848 or ext.40270).
- Rapid HIV testing is available for source patients involved in needlestick injuries (order HIV Needlestick Source). The order is located in the Infectious Disease order menu and requires that the patient be sent to the outpatient lab or blood be drawn on the inpatient service.

### **Step 1: Immediate Procedures**

- Clean wound with soap and water
- Flush mucous membranes with water/saline
- Other wound care as dictated by injury or accident
- Serious injuries (e.g., lacerations) should be evaluated immediately in the Emergency Room

### **Step 2: Are you in need of treatment?**

- During regular work hours, employees should report to Employee Health in Building 304
- After hours, employees should be evaluated in the Emergency Room