

## TRAINING UPDATE

**Lab Location:**

**Department:**

FWMC, SGMC, WOMC

Core and Field Ops

**Date Distributed:**

**Due Date:**

3/1/22

3/25/2022

### DESCRIPTION OF PROCEDURE REVISION

**Name of procedure:**

**Blood and Body Fluid Exposure Orders (AHC.L977 v3)**

**Description of change(s):**

The SOP was updated to include FWMC.

Important points to remember are highlighted in yellow on the attached SOP:

1. Never register an exposure order on a patient or employee medical record number.
2. See Section 5 for instructions on how to create a Medical Record number
3. See Section 5 for who to call with results.

**This revised SOP will be implemented on February 25, 2021**

**Document your compliance with this training update by taking the quiz in the MTS system.**

Non-Technical SOP

<b>Title</b>	<b>Blood and Body Fluid Exposure Orders</b>	
<b>Prepared by</b>	Stephanie Codina	Date: 9.22.2017
<b>Owner</b>	Robert SanLuis, Stephanie Codina	Date: 9.22.2017

<b>Laboratory Approval</b>		
<b>Print Name and Title</b>	<b>Signature</b>	<b>Date</b>
<i>Refer to the electronic signature page for approval and approval dates.</i>		
Local Issue Date:		Local Effective Date:

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**1. PURPOSE**

This procedure defines the process for ordering testing following an exposure to blood or body fluids.

**2. SCOPE**

This procedure applies to any Adventist employee, contractor, or patient who has been involved in a blood or body fluid exposure.

**3. RESPONSIBILITY**

All staff members must understand and adhere to this procedure when placing orders following a blood or body fluid exposure.

**4. DEFINITIONS**

N/A

**5. PROCEDURE**

Step	Action
1	Per Adventist Policy, all exposures will be reported. A. During business hours, report exposures to the occupational health department. B. After business hours, report exposures to the charge nurse on the unit where the exposure occurred or to nursing administration. If the exposed person needs medical care, exposures may be reported to the ED.
2	The laboratory may be called to collect blood from the exposed or source person. Blood draws should occur within 1 hour of notification.
3	Consent must be obtained from the patient prior to calling the lab to draw specimens. Consent is the responsibility of the charge nurse. Lab staff should not collect or store the consent form.

**Initial Testing Orders**

Step	Action																				
1	Access Sunquest GUI and select option, "Order Entry."																				
2	Click the "New Patient" button in the lower, right-hand corner of the screen. <b>Never enter exposure orders on a patient or employee medical record number.</b>																				
3	At the "Patient ID" prompt, type one of the following based on location. Then, click the "Create" button. Document the medical record number that is created in the top, right-hand corner of the request form. <table border="1" data-bbox="444 1251 1416 1671"> <thead> <tr> <th>Location for Occ Health BBFE</th> <th>Type this code at the prompt</th> </tr> </thead> <tbody> <tr> <td>SGMC, GEC, WOMC, FWMC</td> <td>EXP-</td> </tr> <tr> <td>Rehabilitation Rockville</td> <td>SARHM-</td> </tr> <tr> <td>Rehabilitation Takoma Park</td> <td>WARHM-</td> </tr> <tr> <td>Behavioral Health, Rockville</td> <td>SABH-</td> </tr> <tr> <td>Behavioral Health, Takoma Park</td> <td>WABH-</td> </tr> <tr> <td>Adventist Home Health, Rockville</td> <td>SADVHH-</td> </tr> <tr> <td>Adventist Home Health, Takoma Park</td> <td>WADVHH-</td> </tr> <tr> <td>Adventist Home Assistant, Rockville</td> <td>SADVHA-</td> </tr> <tr> <td>Adventist Home Assistant, Takoma Park</td> <td>WADVHA-</td> </tr> </tbody> </table>	Location for Occ Health BBFE	Type this code at the prompt	SGMC, GEC, WOMC, FWMC	EXP-	Rehabilitation Rockville	SARHM-	Rehabilitation Takoma Park	WARHM-	Behavioral Health, Rockville	SABH-	Behavioral Health, Takoma Park	WABH-	Adventist Home Health, Rockville	SADVHH-	Adventist Home Health, Takoma Park	WADVHH-	Adventist Home Assistant, Rockville	SADVHA-	Adventist Home Assistant, Takoma Park	WADVHA-
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4	At the patient name prompt, A. For the <i>patient or source</i> of exposure, type the full name of the patient obtained from the hospital label (last name, first name). B. For the <i>employee or person exposed</i> , enter the alias as defined below. <b>Do not enter the employee name.</b> 1. First initial of the first name 2. First initial of the last name																				

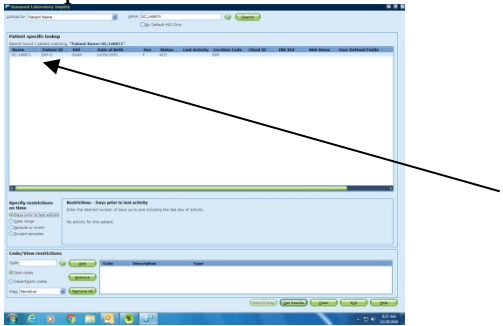
Step	Action
	3. Comma 4. Employee ID number For example, for employee Jane Doe with an employee ID of 12345, the name would be JD,12345.
5	At the “date of birth” prompt, type the patient or employee’s actual date of birth. Then, press the “tab” key.
6	At the “sex” prompt, enter the patient or employee’s gender (M for male or F for female). Then, press the “tab” key.
7	Press the “tab” key until the “Save” button appears in the lower, right-hand corner of the screen. Click the “Save” button.
8	At the collect time prompt, type “N” for now.
9	At the “Order Code” prompt, enter the tests requested on the requisition, then click the “Save” button. Generally, the following tests will be ordered: <ul style="list-style-type: none"> <li>A. Patient or Source               <ul style="list-style-type: none"> <li>a. HIVRS2 = Rapid HIV 1/2 Antibody Test</li> <li>b. XHBSAN = Hepatitis B surface antigen</li> <li>c. XHCRQT = Hepatitis C antibody with reflex to RIBA</li> </ul> </li> <li>B. Employee or Person Exposed               <ul style="list-style-type: none"> <li>a. XHIV12 = HIV 1/2 Serology Progressive</li> <li>b. XHBPV = Hepatitis B Titer</li> <li>c. XHCRQT = Hepatitis C Ab with reflex to RIBA</li> </ul> </li> <li>C. Employee or Person Exposed if Prophylaxis is Indicated               <ul style="list-style-type: none"> <li>a. BMP = Basic Metabolic Panel</li> <li>b. LIVP = Hepatic Function Tests</li> <li>c. CBC = Complete Blood Count</li> <li>d. HCG = Pregnancy Test</li> </ul> </li> </ul>
10	Labels will print for the requested tests. <ul style="list-style-type: none"> <li>A. Laboratory staff will verify if specimens are available for the patient/source. Previously collected specimens may be used for testing if they meet specimen requirements. Under routine circumstances, testing will require lavender and red top tubes that are less than 5 days old.</li> <li>B. Laboratory staff will collect specimens when asked.               <ul style="list-style-type: none"> <li>a. Laboratory staff members will collect specimens within one hour of notification at SGMC, WOMC, Rehabilitation Hospital, and Behavioral Health.</li> <li>b. Employees (not patients) from outside of the hospital (Rehabilitation and Behavioral Health) must present to the laboratory for testing.</li> <li>c. If the source patient is a newborn, exposure labs will be collected from the baby’s mother when possible.</li> </ul> </li> </ul>

Step	Action
	C. Collection and testing should take place as soon as possible. If prophylaxis is indicated, it must be started within 2 hours of exposure.
11	HIV consents should be directed to Occupational Health. They are not maintained or stored in the laboratory.

### Results

Step	Action
1	<p>Lab tests collected during an exposure do not display in Cerner and must be called as soon as possible after testing. Prophylaxis must be started within 2 hours of exposure.</p> <p>A. During normal business hours, results are called to the Occupational Health office.</p> <p>B. After hours, results are called to the nursing administrator.</p> <p>C. Results are NEVER given to the person who was exposed regardless of position or employment status.</p>

### Subsequent Orders

Step	Action
1	<p>There may be times when Occupational Health refers an employee back to the laboratory for subsequent testing. For return visits, use the same medical record number generated during initial testing.</p> <p>A. Access Sunquest function “Laboratory Inquiry.”</p> <p>B. At the “Lookup by” prompt, select “Patient Name” from the dropdown menu.</p> <p>C. At the “Value” prompt, type the employee alias as defined in step 4 above.</p> <p>D. Click the “Search” button.</p> <p>E. Obtain the medical record number that corresponds to the occupational health encounter.</p> 
2	Place orders per routine procedure.

## 6. RELATED DOCUMENTS

Form: Post Exposure to Blood and/or Body Fluids

**7. REFERENCES**  
None

**8. REVISION HISTORY**

<b>Version</b>	<b>Date</b>	<b>Reason for Revision</b>	<b>Revised By</b>	<b>Approved By</b>
		Supersedes SGAH.CS949.0		
0	1/28/20	Header & section 5: changed WAH to WOMC Section 5: updated to specify call results to nursing admin after hours (to align with hospital policy)	L Barrett	R SanLuis
1	10/16/20	Section 5: Updated rehabilitation and behavioral health hospital names; added statement that blood will be collected from mom when the source patient is a newborn.	S Codina	NCacciabeve
2	2/15/22	Section 5: Added FWMC to Testing Orders	RSANLUIS	NCacciabeve
2	2/15/22	Header: Changed site to All Laboratories Footer: Changed prefix to AHC	D Collier	NCacciabeve

**9. ADDENDA AND APPENDICES**  
None