**ATTACHMENT F – Steps for incident follow-up**

These steps are to be followed by the licensed health-care practitioner following an exposure incident.

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| \* | Document the routes of exposure and how the exposure occurred. |
|  | Identify and document the source individual (unless the employer can establish that identification is infeasible or prohibited by state or local law). |
| \* | Obtain consent and plan to have the source individual tested as soon as possible to determine HIV, HCV, and HBV infectivity; document that the source individual's test results were conveyed to the employee's health-care provider. |
| \* | If the source individual is already known to be HIV, HCV and/or HBV positive, new testing need not be performed. |
| \* | Assure the exposed employee is provided with the source individual's test results and with information about applicable disclosure laws and regulations concerning the identity and infectious status of the source individual (e.g., laws protecting confidentiality). |
| \* | After obtaining consent, collect exposed employee's blood as soon as feasible after exposure incident, and test blood for HBV and HIV serological status. |
| \* | If the employee does not give consent for HIV serological testing during collection of blood for baseline testing, preserve the baseline blood sample for at least 90 days; if the exposed employee elects to have the baseline sample tested during this waiting period, perform testing as soon as feasible. |
|  | Provide post-exposure prophylaxis as medically indicated and recommended by the U.S. Public Health Service. |
|  | Provide medical counseling. |
|  | Evaluate reported illnesses. |