



Oregon

Theodore R. Kulongoski, Governor

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DATE: May 18, 2010
TO: Site Managers
FROM: Deanna Bathke, Director
SUBJECT: Hep B - Post Exposure Guidelines (i.e. human bites, scratches)

I would like to ensure all SOCP employees understand the SOCP Post Exposure Guidelines for Hepatitis B and Other Potentially Infectious Materials (i.e. human bites, scratches).

Laminated guidelines have been placed in the Central Office group home mailboxes for pick up. The laminated guidelines **must** be posted in an area viewable by all staff. *(A sample electronic version is attached.)*

The employee will:

- Immediately report the incident to their supervisor
- Fill out the "801" Employee Incident/Accident Report and give to supervisor.
- Give the Physical Assessment form(s) to Health Care professional and return to their supervisor.
- If necessary, fill out "Statement of Consent"

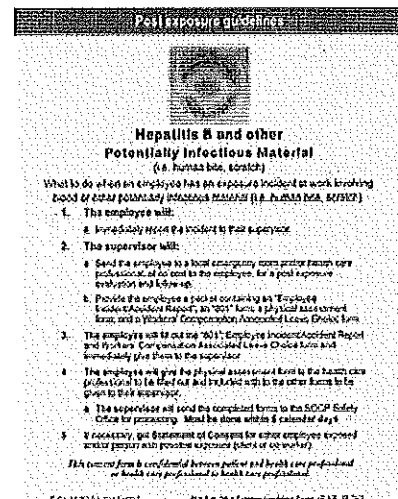
The supervisor will:

Send the employee to a local emergency room and/or health care professional.

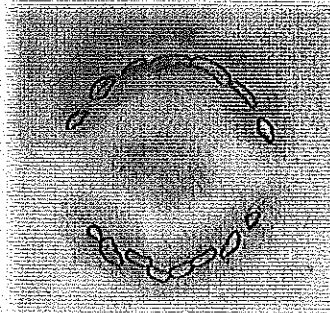
Provide the employee a packet containing an "Employee Incident/Accident Report"; an "801" form; a physical assessment form; and a Workers' Compensation Associated Leave Choice form.

The supervisor will send the completed forms to the SOCP Safety Office for processing, **within 5 calendar days.**

cc: Brad Heath, Clinical Services Manager
Laura Traeger, Program Administrator
Pat Kettleon, QA Manager
Terri Millsap, HR Manager
Program Managers
Site Managers
Richard Martinez, Safety Manager



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Hepatitis B and other Potentially Infectious Material (i.e. human bite, scratch)

What to do when an employee has an exposure incident at work involving blood or other potentially infectious material (i.e. human bite, scratch).

1. The employee will:

- a. Immediately report the incident to their supervisor.

2. The supervisor will:

- a. Send the employee to a local emergency room and/or health care professional, at no cost to the employee, for a post exposure evaluation and follow-up.
- b. Provide the employee a packet containing an "Employee Incident/Accident Report"; an "801" form; a physical assessment form; and a Workers' Compensation Associated Leave Choice form.

3. The employee will fill out the "801"; Employee Incident/Accident Report and Workers' Compensation Associated Leave Choice form and immediately give them to the supervisor.

4. The employee will give the physical assessment form to the health care professional to be filled out and included with to the other forms to be given to their supervisor.

- a. **The supervisor will send the completed forms to the SOCP Safety Office for processing. Must be done within 5 calendar days.**

5. If necessary, get **Statement of Consent for either employee exposed and/or person with possible exposure (client or co-worker).**

This consent form is confidential between patient and health care professional or health care professional to health care professional.