Infection Exposure Advisory Form

Purpose

- To inform all team members of potential communicable disease exposures while working in a health care environment and to reinforce the need to consistently use Standard Precautions and Isolation Precautions when indicated.
- To describe the expectations for all team members regarding vaccinations and immunity status for protection from potential communicable disease exposures.

Scope / Personnel

All team members

Procedures

Possible infectious disease exposures

- Team members will be advised while working at Children’s Hospital Colorado, that they may potentially be exposed to infectious diseases while in the healthcare environment. Many of these exposures can be avoided by consistently using Standard Precautions and abiding by Isolation Precautions when indicated.
- HCWs (including volunteers) are expected to care for any type of patient including those with infectious diseases at CHCO with the following exceptions:
  - Pregnant team members are excluded from caring for patients with hemolytic anemia who are infected with Parvovirus B-19. Refer to the Pregnant Employees and Patient Assignment policy for other restrictions

Prevention of infectious disease exposures

- The use of personal protective equipment (PPE) and hand hygiene is essential before and after all patient contact. Team members may initiate Isolation Precautions and the use of PPE based on the presence of symptoms.
- Personal immunity from vaccinations or history of the certain illnesses may also protect team members from acquiring infectious illnesses.
- The article “Occupational Hazards for Pregnant Nurses” (American Journal of Nursing, 2011; 111) will be individually distributed to healthcare workers by Occupation Health clinical staff, upon request.

Infectious disease exposure types include but are not limited to the following:

Cytomegalovirus Infection:

- Standard Precautions.
- No vaccine available.

Excretion rates from urine or saliva in symptomatic and asymptomatic children aged 1 to 3 years can range from 30-40% but can be as high as 70%.

Meningococcal Disease:

- Droplet Precautions.
- Vaccines are offered to team members at high risk of exposure. Prophylactic antibiotic treatment is provided for team members exposed to Neisseria meningitidis.
INFECTION EXPOSURE ADVISORY FOR HEALTHCARE WORKERS

Hepatitis B Infection:
- Standard Precautions.
- Immunity: Record of completed series and documentation of positive Hepatitis B surface antibody. Vaccine is offered to all team members at risk for exposure to blood or body fluids. If vaccine is indicated and vaccine is refused, team member must sign a declination form while recognizing the potential for serious preventable infection if exposed.
- Immune globulin (HBIG) administered shortly after exposure may modify the course of the disease.

Hepatitis C:
- Standard Precautions.
- No vaccine available

Human Immunodeficiency Virus (HIV):
- Standard Precautions
- No vaccine available

Measles (Rubeola), Mumps, Rubella (MMR):
- Airborne Precautions. Negative airflow room.
- Immunity: Record of 2 doses of MMR vaccine or proof of positive immunologic titers to measles, mumps, and rubella.
- If vaccine is needed and vaccine is refused, team member must sign a declination form recognizing the requirement for PTO or unpaid leave for time off during the designated incubation period for the specific disease to which they were exposed.

Varicella (VZV):
- Airborne Precautions. Negative airflow room.
- Immunity: Record of 2 doses of varicella vaccine or proof of positive varicella immunologic titers.
- If vaccine is required and vaccine is refused, team member must sign a declination form recognizing the requirement for PTO or unpaid leave for time off during the designated incubation period for varicella.

Pertussis:
- Droplet Precautions.
- Record of 1 dose of Tdap vaccine given on or after 11th birthday is required for employment. See Influenza bullet 2 for declination procedure for valid medical contraindication or personal belief/religious exemption to Tdap vaccine.
- A pertussis exposure warrants the need for prophylactic antibiotic treatment regardless of a history of the Tdap vaccine. If antibiotic prophylaxis is refused, employees must sign a declination form recognizing the requirement for PTO or unpaid leave for time off during the designated incubation period for pertussis.

Influenza:
- Annual Influenza immunization is required of all team members.
- If there is a valid medical contraindication for influenza vaccine or if there is a personal belief/religious exemption to influenza vaccine the team member must fill out and sign a declination form to be approved by Medical Director, Occupational Health for medical exemptions and by HR for personal belief/religious exemptions. Team member must wear a mask at all times when in any CHCO building/area for the duration of the influenza season.
- Epidemics typically occur October- April.
- Pandemics with influenza can occur at any time.

Notification process for exposure events
All team members with exposures will notify Occupational Health of suspected or actual exposures immediately, 720-777-6577. Refer to CHCO Policy and Procedures for details and After Hours resources.