



## **USC Protocol for Post-Exposure Evaluation and Follow-Up**

### **Procedures for an Exposure Incident Involving a Potentially Infectious Material**

This protocol applies to all University faculty, staff, student employees, and other students that have a laboratory exposure incident involving a potentially infectious biological material. An *exposure incident* means a specific eye, mouth, other mucous membrane, non-intact skin, parenteral contact (e.g., needle stick) or inhalation of aerosols involving a potentially infectious material that results from the performance of an employee's duties. A *potentially infectious material* or biological hazard may include an incident involving a microorganism (e.g., bacterial agent, viral agent, fungal agent), human-derived material, biological toxin, or an incident involving recombinant DNA research.

#### **Procedures for needle sticks or other exposures to a potentially infectious material:**

- \* Report the lab incident immediately to your supervisor to authorize medical evaluation. Supervisors are responsible for ensuring staff are offered immediate medical care, appropriate diagnostics and treatment.
  - Percutaneous Exposure (e.g. needle stick, cut, animal bite) – Immediately wash or flush the exposed area with soap and water for 10 minutes.
  - Mucous Membrane Exposure (i.e. eyes, nose or mouth) – Flush the exposed area with water. If exposure is to the eyes, flush eyes (holding open) using the eyewash station for 10 minutes.
- \* Seek medical treatment as soon as possible after the incident (see below for specific instructions)
- \* Complete a [USC Laboratory Incident Report Form](#) after post-exposure evaluation has been initiated. Then email the completed form to the Biosafety Officer at [smiths69@mailbox.sc.edu](mailto:smiths69@mailbox.sc.edu).

The exposed individual will ensure the health care professional evaluating the exposure incident receives a description of the job duties relevant to the exposure incident, route(s) of exposure, circumstances of exposure, agent or hazard involved in the incident (e.g., HIV+ blood, *Vibrio parahaemolyticus*, lentiviral vector), and relevant medical records.

- 1) For **non-life-threatening** injuries or illnesses, in which medical treatment may be necessary, the supervisor and injured employee together will **immediately** call CompEndium Services (**available 24/7**) at **877-709- 2667** to report the injury. If a supervisor is not available, another supervisor or HR Contact may assist the injured employee with this process.

**Note:** In case of a life-threatening injury or illness, dial 911 or go to the nearest emergency room and contact your supervisor and CompEndium as soon as possible.

- 2) CompEndium will assist in processing and scheduling the employee's work-related injury for treatment and claims handling with the university's insurance provider.

- 3) **CompEndium will direct the injured employee to a medical provider for treatment.** They will also issue a treating authorization number to the medical provider, which will authorize treatment of the injured employee.
- 4) The injured employee will complete the [Employee Injury Report Form \(81-B\)](#) and the supervisor will complete the [Supervisor Report of Injury Form \(81-C\)](#). These completed forms are required to be faxed to CompEndium at **877-710-2667** **AND** emailed to the Central Benefits Office at [workerscomp@mailbox.sc.edu](mailto:workerscomp@mailbox.sc.edu).

### **Procedures for employee/student exposures occurring in facilities outside Columbia, SC:**

(Note: This guidance applies to personnel participating in academic training at an area hospital or facility)

Students with a potential exposure to blood or other potentially infectious materials as a result of participating in activities required for their academic studies may be covered under the USC worker's compensation policy. All programs or courses with students that have an exposure risk should be documented as being covered under the policy. The USC Office of Risk Management should have a record of the program/course name, main contact, estimated number of students, and weeks per semester these students perform activities that may result in an exposure incident. The [USC Risk Management website](#) includes contact information if you have questions regarding coverage of students under the University's worker's compensation policy.

### **Providing exposed individual with evaluating healthcare professional's written opinion:**

The University must obtain and provide an exposed employee a copy of the evaluating healthcare professional's written opinion within 15 days of completion of the evaluation. The written opinion for post-exposure evaluation must include information that the employee has been informed of the results of the evaluation and told about any medical conditions resulting from exposure that may require further evaluation and treatment. All other findings or diagnoses must be kept confidential and not included in the written report. Post-exposure counseling should also be given to employees following an exposure incident. Counseling concerning infection status, including results and interpretation of all tests, will assist the employee in understanding the potential risk of infection and in making decisions regarding the protection of personal contacts. Counseling based on the USPHS recommendations must also be provided for HBV and HCV and other bloodborne pathogens, as appropriate. The institution or medical practice that provides medical services is responsible for providing the employee with a copy of the evaluating health care professional's written opinion after completion of the evaluation.

### **Special requirements for reporting incidents related to research subject to the NIH Guidelines for Research Involving Recombinant or Synthetic Nucleic Acid Molecules to the NIH OSP:**

The *NIH Guidelines for Research Involving Recombinant or Synthetic Nucleic Acid Molecules (NIH Guidelines)* states that "...any significant problems, violations of the *NIH Guidelines*, or any significant research-related accidents and illnesses" must be reported to NIH Office of Science Policy (OSP) within 30 days. Certain types of accidents must be reported on a more expedited basis. Spills or accidents in BL2 laboratories resulting in an overt exposure must be immediately reported to NIH OSP.

Any spill or accident involving recombinant DNA research of the nature described above or that otherwise leads to personal injury or illness or to a breach of containment must be reported to OSP. These kinds of events might include skin punctures with needles containing recombinant DNA, the escape or improper disposition of a transgenic animal, or spills of high-risk recombinant materials occurring outside of a biosafety cabinet. Failure to adhere to the containment and biosafety practices articulated in the NIH Guidelines must also be reported to OSP. Minor spills of low-risk agents not involving a breach of containment that were properly cleaned and decontaminated generally do not need to be reported.

All incidents related to research subject to the *NIH Guidelines* must be reported by emailing a completed copy of the [USC Laboratory Incident Report Form](#) to USC's Institutional Biosafety Officer (BSO) at [smiths69@mailbox.sc.edu](mailto:smiths69@mailbox.sc.edu). For incidents in BL2 labs resulting in an overt exposure that must be immediately reported to NIH OSP, the Principal Investigator must submit the Incident Report Form as soon as possible to the BSO with sufficient information to understand the nature and consequences of the incident, as well as its cause. Following the initial reporting, a more detailed report can be provided to the NIH OSP at a later date that includes the measures taken in response to mitigate the problem and to preclude its reoccurrence.