



## Information for healthcare workers

The new *Australian national guidelines for the management of healthcare workers living with blood borne viruses and healthcare workers who perform exposure prone procedures at risk of exposure to blood borne viruses (the Guidelines)* have been updated and reflect the effectiveness of antiviral treatment for the following blood borne viruses – hepatitis B virus (HBV), hepatitis C virus (HCV) and HIV.

Previously, some healthcare workers living with a blood borne virus (BBV) were excluded from performing exposure prone procedures (EPPs). The Guidelines allow healthcare workers living with a BBV to perform EPPs, provided they comply with these Guidelines.

The Guidelines also support timely testing and treatment of healthcare workers. All healthcare workers who are performing EPPs are required to take reasonable steps to know their BBV status and should be tested for BBVs at least once every three years, and are required to have appropriate and timely testing after potential BBV exposures, both occupational and non-occupational.

### Who are the Guidelines for?

The Guidelines are for healthcare workers who perform EPPs. They provide information and recommendations for:

- all healthcare workers who perform EPPs
- healthcare workers living with the blood borne viruses HIV, hepatitis B and hepatitis C
- doctors who treat healthcare workers living with a BBV
- public health authorities

### Why do we have these Guidelines?

There is a very low risk of transmission from a healthcare worker with a BBV to a patient during the performance of EPPs, even with best practice infection prevention and control. Due to the nature of EPPs, healthcare workers who perform these procedures are at a higher risk of acquiring a BBV from a patient and, rarely, also of transmitting a BBV to a patient. The purpose of the Guidelines is to mitigate the risk of transmission of a BBV from a healthcare worker to a patient.

## Why have the Guidelines been updated?

These Guidelines have been updated based on increasing medical evidence around the effectiveness of antiviral treatment for hepatitis B, hepatitis C and HIV.

Worldwide, since widespread availability of antiviral medication, there has not been a published case of transmission of a BBV from an effectively treated healthcare worker to a patient.

During the development of these Guidelines a broad range of health professional groups were consulted and provided feedback.

## What is different in the new Guidelines?

The Guidelines allow healthcare workers living with a BBV, who were excluded from performing EPPs under the previous guidelines to be eligible to perform EPPs again provided they comply with these Guidelines.

Healthcare workers who perform EPPs must take reasonable steps to know their BBV status and should be tested for BBVs at least once every three years. They are also expected to:

- have appropriate and timely testing and follow up care after a potential occupational exposure associated with a risk of BBV acquisition
- have appropriate testing and follow up care after potential non-occupational exposure, with testing frequency related to risk factors for virus acquisition
- cease performing all EPPs if diagnosed with a BBV until the criteria in the Guidelines are met
- confirm that they comply with these Guidelines when applying for renewal of registration if requested by their Board

## When will the Guidelines apply?

The updated Guidelines apply now. Health practitioner Boards who register practitioners who may perform EPPs are developing their own guidelines to support implementation of these Guidelines.

## What are exposure prone procedures (EPPs)?

EPPs are procedures where there is a risk of injury to the healthcare worker resulting in exposure of the patient's open tissue to the blood of the healthcare worker.

These procedures include those where the healthcare worker's hands, even when gloved, may be in contact with sharp instruments, needle tips or sharp tissues (spicules of bone or teeth) inside a patient's open body cavity, wound or confined anatomical space where the hands or fingertips may not be completely visible at all times.

More information on which procedures are exposure prone can be found in the [Guidance on classification of exposure prone and non-exposure prone procedures in Australia 2017](#).

The relevant specialist college for your profession can provide further advice and guidance on which procedures in your particular specialty constitute an EPP.

### What are non-exposure prone procedures (non-EPPs)?

These are procedures where the hands and fingers of the healthcare worker are visible and outside of the body at all times, and procedures or internal examinations that do not involve possible injury to the healthcare worker's hands by sharp instruments and/or tissues, provided routine infection prevention and control procedures are adhered to at all times.

### What if I don't perform EPPs?

The Guidelines do not apply to a healthcare worker who does not perform EPPs.

### What happens if I do not comply with the Guidelines?

A healthcare worker performing EPPs who does not comply with the Guidelines can be notified to AHPRA, to the relevant Board and to the public health authorities in the relevant jurisdiction.

### Where can I get more information?

Additional information can be found in the [Guidelines and other supporting material](#). Support and advice for healthcare workers living with a blood borne virus is available from your specialist college or from the [Australasian Society for HIV, Viral Hepatitis and Sexual Health Medicine](#).