



General Information

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 current antiviral treatment for the following blood borne viruses – hepatitis B virus (HBV), hepatitis C virus (HCV) and human immunodeficiency virus (HIV). Previously, 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 blood borne virus, who are following the Guidelines to perform EPPs. All healthcare workers who perform EPPs are required to take reasonable steps to know their blood borne virus status and to follow the Guidelines.

Why do we have these Guidelines?

Some procedures undertaken as part of medical care carry an extremely low chance of patients becoming infected with a blood borne virus (BBV) from a healthcare worker living with a BBV even when usual infection prevention and control practices are followed. While still extremely unlikely, there are certain procedures where the healthcare workers are at a higher risk of getting a BBV from a patient and also of passing a BBV to a patient. These are referred to as exposure prone procedures (EPPs). When healthcare workers living with a BBV are complying with the Guidelines, this risk is minimised.

The Guidelines also support healthcare workers to get timely testing and treatment.

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

What are the procedures which are exposure prone (EPPs)?

Exposure Prone Procedures (EPPs) are procedures where there is an increased likelihood of injury to the healthcare worker, which can mean that the healthcare worker's blood can then reach the patient's blood.

These procedures are ones where the healthcare worker's hands may be in contact with sharp instruments, needle tips or sharp spikes of bone or teeth while inside the patient's body and the hands or fingertips may not be clearly seen at all times.

Non-exposure prone procedures are ones where the hands and fingers of the healthcare worker can be clearly seen and are outside of the patient's body at all times, such as stitching a wound. Procedures or internal examinations that do not involve possible injury to the healthcare worker's hands by sharp instruments and/or tissues, are also considered non-exposure prone.

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](#).

Can I catch a blood borne virus if I have a procedure and my doctor or other healthcare professional has a blood borne virus?

Provided a healthcare worker living with a BBV is following the Guidelines, the already extremely low risk of transmission of a BBV from a healthcare worker to a patient is reduced even further. 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.

Will I know if my doctor or other healthcare professional has a BBV?

No. Healthcare workers have the same right to confidentiality and access to confidential testing, counselling and treatment as the general population. The Guidelines are in place so that all patients can feel confident that their procedure is being performed in a way that protects their health and safety.

Why has there been a change to allow health care workers with a BBV to perform Exposure Prone Procedures?

Current treatment of hepatitis B, hepatitis C and HIV is very effective in preventing spread of BBVs and the Guidelines were updated to reflect this.

Where can I get more information?

Additional information can be found in the [Guidelines](#).