

Blood / Body Fluid Exposure Report Form

To be completed and returned with laboratory request forms and blood specimens to your nearest Awanui Laboratory branch.

Immediate notification to Awanui Laboratories is required after exposure to possible HIV positive source.

RECIPIENT DETAILS

Surname: _____
 First Names: _____
 Telephone: (Private): _____ (Bus): _____ Date of Birth: _____
 Occupation: _____
 Company Name: _____
 Doctor / GP: _____ Telephone: _____
 Recipient consent to be tested for (Signature): _____ HIV / HBV / HCV
 (Delete any not requested)
 Blood Collected and Sent for Testing of Affected Recipient: Yes / No
 Has Recipient had Hepatitis B Vaccination? Yes / No / Unsure

INCIDENT DETAILS

Date of Incident: ____ / ____ / ____ Time of Incident: _____ am / pm
 Description of Incident: _____
 Occupational Health Notified: Yes / No

SOURCE DETAILS

Surname: _____
 First Names: _____
 Telephone: (Private): _____ (Bus): _____ Date of Birth: _____
 Doctor / GP: _____ Telephone: _____
 Hepatitis / HIV Status (if known): _____
 Recipient consent to be tested for (Signature): _____ HIV / HBV / HCV
 (Delete any not requested)
 Blood Collected and Sent for Testing of Source: _____ Yes / No

LABORATORY RESULTS *(This section is for Laboratory use only)*

Date Received in Laboratory: ____ / ____ / ____ Signature: _____

Test For	Recipient				Source
	At Time of Incident	Follow Up (1)	Follow Up (2)	Follow Up (3)	At Time of Incident
HBsAg					
HBsAb					
HIV					
HCV					

PROPHYLAXIS / TREATMENT GIVEN

Hepatitis B Vaccination Commenced: ____ / ____ / ____
 Hepatitis B Immunoglobulin Given: ____ / ____ / ____
 Antibiotics Commenced: ____ / ____ / ____
 Signature of Person Completing Follow Up: _____

NOTE: Immediate notification if required if source is HIV Positive or is High Risk for HIV

Southern Blood Body Fluid Exposure Report - External Blood / Body Fluid Exposure Incident Reporting Procedure

1. In the event of a blood or body fluid exposure (after providing any necessary first aid), the incident **MUST** be reported. Routine notifications should be received within 24 hours. **Immediate notification is required if the source is HIV positive, or a high-risk.**

Refer to the Awanui Laboratory booklet “Managing Body Fluid Exposure Incidents” for full details.
2. Fill out a “Blood/Body Fluid Exposure Report Form”. Ensure that as many details as practically possible are completed.
 - Within Awanui Laboratory, report forms are held by the Safety Officer, Nurse, or Infection Control Practitioner and on the Awanui Intranet H&S page.
 - For workplaces other than Awanui Laboratories refer to your workplace protocol or supervisor or contact your nearest Awanui Laboratories branch for advice.
3. Obtain blood for testing from the recipient and source of the exposure (if known). A 10 ml sample of blood in a plain tube is required.
 - Informed consent is required from both the recipient and the source (if known), prior to collection of blood.
 - Specific informed consent is required for HIV testing.
 - The recipient and the source blood samples are routinely tested for HBsAg, HBsAb, HCV and HIV if consent is given.
4. Send the completed “Blood/Body Fluid Exposure Report Form” along with blood samples from the recipient and source (if known) to Awanui Laboratories as soon as possible. It is recommended that the Infection Control Practitioner/Microbiology Department be advised in advance by telephone.
 - If samples and the “Blood/Body Fluid Exposure Report Form” are sent separately, please ensure that sufficient information is on the Laboratory requisition forms to alert the laboratory that they are specimens from a blood or body fluid exposure incident.
5. The recipient and source forms must indicate who the results are to go to, for example, General Practitioner.
6. The recipient’s nominated person will be contacted with their results and will be advised of any follow-up that is necessary.