

Managing Blood-Borne Viruses in Healthcare

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Guidelines for registered health practitioners and students who perform exposure-prone procedures

On 6 July 2020, new guidelines in relation to blood-borne viruses (BBVs) came into effect. These guidelines will apply to:

- medical and dental practitioners registered under the National Law who perform exposure-prone procedures (EPPs)
- students registered under the National Law who perform EPPs
- registered healthcare practitioners who treat registered health practitioners or students living with a BBVs who carry out EPPs.

The new guidelines refer to human immunodeficiency virus (HIV), hepatitis B virus (HBV) and hepatitis C virus (HCV) only. They are not applicable to other infectious agents.

By following these updated guidelines, registered healthcare practitioners and students comply with the Communicable Diseases Network Australia (CDNA) Guidelines Australian National Guidelines for the management of healthcare workers (HCWs) living with BBVs and HCWs who perform EPP at risk of exposure to BBVs.

What has changed in the new BBVs guidelines?

HCWs that live with HIV, HBV and/or HCV, who were banned from undertaking EPPs under the previous guidelines, are now eligible to perform EPPs again, provided they comply with the new CDNA rules.

The guidelines also describe the circumstances in which a healthcare practitioner who treats another HCW or a student who performs EPPs, would have the responsibility to notify AHPRA if the patient does not comply with CDNA protocols and could represent a risk to the public.

In addition, at registration and renewal of registration, practitioners who perform EPPs will have to declare that they comply with the CDNA guidelines.

Key recommendations for ALL HCWs and students

- You should undertake regular testing for BBVs.
- You have the right to access confidential testing, counselling, support and treatment.
- You should be vaccinated against HBV or have confirmed immunity towards the virus due to prior infection.

Key recommendations for HCWs who perform EPPs

- You must take reasonable steps to know your HIV, HBV and HCV status.
- You should be tested for the above viruses at least once every three years.
- When applying for renewal of your registration, you must declare that you comply with the new guidelines and have been tested accordingly.
- Be aware of your obligation to report your BBV status, if required, under jurisdictional legislation and/or policies.
- Be aware of your obligation to report all sharps injuries, whether or not there was a risk of patient exposure.

Key recommendations for HCWs living with a BBV

- If you are diagnosed with HIV, HBV and/or HCV, you must cease performing EPPs immediately and seek appropriate and ongoing medical care.
- If you live with one or more BBVs, you must be tested for the respective BBV viral load levels, as well as for other BBVs, in accordance with CDNA Guidelines.
- If you are HBV deoxyribonucleic acid (DNA) positive, you are permitted to perform EPPs if your viral load is below 200

International Units (IU)/mL and meet the criteria set out in detail within the CDNA Guidelines.

- You must not perform EPPs while you are HCV ribonucleic acid (RNA) positive but may be permitted to return to EPPs after successful treatment or following spontaneous clearance of HCV RNA.
- If you are HIV positive, you are permitted to perform EPPs if you have a viral load below 200 copies/mL and meet the criteria set out in detail within the CDNA Guidelines.

Key recommendations for practitioners who treat HWCs living with BBVs who perform EEPs

- Ensure you have the necessary skills and expertise in the treatment of the relevant BBV(s), including contemporary treatment and prescribing guidelines.
- Ensure there is no conflict of interest (whether actual or perceived) in the management of the HCW.
- Ensure you understand and comply with the relevant jurisdictions' Health Practitioner Regulation National Law and the Medical Board of Australia's Good Medical Practice: A Code of Conduct for Doctors in Australia.
- Ensure the healthcare worker has scheduled appointments of appropriate frequency for the level of monitoring they require
- Actively follow up missed healthcare worker appointments to ensure timely rescheduling.
- You must report concerns regarding healthcare worker compliance with professional standards or noncompliance with the Guidelines to the relevant area of the jurisdictional health department in a timely manner, such as performing EPPs when not compliant with the Guidelines.
- You must report concerns regarding actual or potential exposures constituting a public health risk to the relevant area of the jurisdictional health department.
- You must consider whether to notify the healthcare worker to AHPRA if the healthcare worker is putting the public at risk, according to mandatory notifications guidelines.

References

[CDNA Guidelines](#)

[Guidelines: Registered health practitioners and students in relation to blood-borne viruses](#)

[Information for healthcare workers who perform exposure prone procedures who are NOT living with a blood borne virus](#)

[Classification of exposure-prone procedures and non-exposure-prone procedures](#)

[Information for doctors who care for healthcare workers living with a blood borne virus who perform exposure prone procedures](#)

[Guidelines for mandatory notifications](#)

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