



Physicians with Blood Borne Pathogens

[Including Hepatitis B Virus (HBV), Hepatitis C Virus (HCV) and Human Immunodeficiency Virus (HIV)]

PURPOSE

The purpose of this Statement is to inform physicians of their ethical obligations and the standards of practice expected of them in respect to managing and preventing the risk of transmission of blood borne communicable diseases to patients.

TERMINOLOGY

The following terms are defined for the purpose of this Statement. The definitions do not necessarily reflect the meaning of the terms used in other contexts.

Physician(s) –Yukon physicians providing medical care to patients.

Exposure Prone Procedures (EPP) - Interventions where there is a risk that injury to the physician may result in the exposure of the patient's open tissues to blood and body fluids of the physician (bleedback). These include procedures where the physician's gloved hand 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 finger tips may not be completely visible at times.

Non-Exposure Prone Procedures (NEPP) - Procedures where the hands and fingertips of the physician are visible and outside the patient's body at all times, and internal examinations or procedures that do not involve possible injury to the physician's gloved hands from sharp instruments and/or tissues, are **considered to be non-exposure prone** provided routine infection control procedures are adhered to at all times. [Such procedures should be performed in the **co-operative patient only**.]

Examples of non-exposure prone procedures include:

- Drawing blood
- Setting up and maintaining intravenous lines or central lines providing that there has been no skin tunneling and the procedure is performed in a non-exposure prone manner



- Minor surface suturing
- The incision of external abscesses
- Routine vaginal or rectal exams
- Simple endoscopic procedures

The decision whether an affected physician should continue to perform a procedure which in itself is not exposure prone should take into account the risk of complications arising which might necessitate the performance of an exposure prone procedure. Such procedures should be performed in cooperative patients only. Such procedures in the uncooperative patient are considered to be exposure prone procedures.

Routine Practices – A series of recommendations for the care of all patients incorporating the precautions necessary to prevent the transmission of microorganisms between patients and healthcare workers across the continuum of care, including previous precautions against blood borne pathogens (Universal Precautions).

MEDICAL, LEGAL AND ETHICAL CONTEXT

Physicians and their patients are concerned about the risk of transmission of blood borne pathogens from one to another.

Section 3 of the Yukon *Public Health Act* states:

- (3) Every person who believes or has reason to believe that he is infected with a communicable disease,
 - (a) shall notify as soon as possible the nearest medical practitioner or Medical health Officer by the quickest means available, and
 - (b) shall place himself under the care of, undergo the treatment and follow the course of action prescribed therefore by the medical practitioner or Medical Health Officer.

Physicians have a right to privacy and are entitled to confidentiality. These issues must be addressed in the context of the YMC's role to protect the public and physicians' ethical obligation to their patients to "consider first the well-being of the patient". This obligation requires physicians to consider any state of personal health which may pose risk to their patients and take all necessary steps to minimize transmission of blood borne infections to their patients.



The scientific literature indicates that, regarding transmission of blood borne pathogens:

- the overall risk of transmission from physician to patient is low and varies dependant on several factors, including:
 - characteristics of the pathogen itself;
 - nature of the procedure being performed;
 - health status of the physician and patient;
 - infectious status of the physician;
 - susceptibility of the patient;
 - nature of the trauma to the physician;
- immunization reduces transmission of disease;
- no measure can guarantee “zero risk” of transmission;
- rigorous application of routine practices is the best available means of protecting patients and physicians from transmission from one to another.

SCOPE

This Statement applies to all Yukon physicians.

REQUIREMENTS

- All Physicians:
 - have an ethical responsibility to be aware of their serological status with respect to blood borne communicable diseases, including HBV, HCV and HIV, if they are at personal or occupational risk and engaging in EPP;
 - must take all necessary steps to minimize the transmission of blood borne infections to patients, including conscientious and rigorous adherence to routine practices in their practice;
 - should be immunized for HBV before possible occupational exposure and should have their antibody status assessed and documented after immunization;
 - should seek re-testing of their serological status following a significant exposure to human blood or other body fluids.



- A physician who is known to have active infection with HBV and/or HCV and/or HIV must consult a physician to receive appropriate medical care and follow-up care;
- A physician who comes in contact with the blood or other body fluids of an individual who is known to carry a blood borne pathogen should consult Yukon Communicable Disease Control for testing and follow-up. If exposure occurs on a week-end or after hours, the physician should contact the Whitehorse General Hospital Emergency Department, physician on call.

PRACTICE ASSESSMENT AND ADVICE

This Statement is meant to advise physicians with a blood borne pathogen as to their general rights and obligations when practicing in Yukon. In those jurisdictions of Canada in which regulatory bodies have similar policy/guidelines, physician access is provided to an advisory committee or panel including at least one physician with specific expertise in the area of infectious diseases. This committee/panel provides confidential assessment and advice to the physician regarding any adjustments to his/her practice that may be required.

Yukon does not have the resources or expertise to provide a similar committee, however, work is currently underway to find another Canadian regulatory body willing to partner with the YMC to provide these confidential services.

Acknowledgements

The Yukon Medical Council wishes to acknowledge Statement No. 1580 – Physicians with Blood Borne Pathogens, provided by the College of Physicians and Surgeons of Manitoba. This Statement has been modified from the original to comply with the views of the Yukon Medical Council.