This information sheet identifies immediate first aid actions that should be taken following a bloodborne pathogen (BBP) exposure.

Seek medical assistance immediately after a BBP exposure, and take this document to the medical staff providing treatment. Be sure also to display your Weill Cornell Medicine employee ID card when visiting the medical provider.

Note: This guidance document provides information that medical personnel can reference but does not give individualized medical care or treatment protocols.

How to Seek Medical Assistance

- For exposures Monday to Friday, 8:00 am – 4:00 pm:
  - WCM Upper East Side Employees: Go to the Payson House basement Workforce Health and Safety (WHS) Clinic at 1315 York Avenue or call 212-746-4370.
  - Lower Manhattan Employees: Go to the NewYork-Presbyterian (NYP) Lower Manhattan WHS Clinic at 170 William Street, Rooms G73A and G73B or call 212-312-5249.
  - Students: Go to Student Health Services (SHS) at 230 E. 69th Street, Suite 2BB (between 2nd and 3rd Avenue) or call 646-962-6942.
- For exposures after business hours:
  - WCM Upper East Side Employees and Students: Go to the NYP Emergency Room at 525 East 68th Street or call 212-472-2222.
  - Lower Manhattan Employees: Go to the NYP Lower Manhattan Hospital Emergency Room at 170 William Street or call 212-312-5070.

Give this sheet to the physician so they understand that you may have been exposed to BBP, and that this is a medical emergency.

You can contact the NYP ER at 212-472-2222 or by dialing 2-2222 from any campus phone.

Hazard Summary

All human blood or bodily fluids that are not your own should be treated as potentially infectious. Potential exposure to Hepatitis B Virus (HBV), Hepatitis C Virus (HCV), Human Immunodeficiency Virus (HIV), and other bloodborne pathogens (BBP) require serious attention. The Weill Cornell Medicine BBP Exposure Control Plan ([https://ehs.weill.cornell.edu/sites/default/files/3.1bbp_0.pdf](https://ehs.weill.cornell.edu/sites/default/files/3.1bbp_0.pdf)) describes the full BBP program.

Post-Exposure Medical Evaluation & Treatment

1. VERIFY THAT FIRST AID WAS PERFORMED
   - Wash skin thoroughly with soap and water for at least 5 minutes, and wash mucus membranes or eyes with plain water for at least 10 minutes.
   - Do not squeeze the area of injury or use chemicals like bleach, as they are not known to be beneficial and may break down the skin's barrier function.

2. DOCUMENT AND UNDERSTAND THE EXPOSURE
   - Confirm if the exposure was mucocutaneous or percutaneous.
   - Determine the nature of the material (e.g., blood, human cell line, unfixed tissue, otherwise potentially infectious material) and how large the exposure was (e.g., blood visible on injury device, deep stick with hollow bore needles vs. scratch with dental probe).
   - Identify the type of sharp involved (e.g., manufacturer, model, whether it was an engineered sharp).
   - Identify the task being performed when the exposure occurred.
   - Determine HIV/Hepatitis status of material or source patient involved in the exposure (use name and medical record number, if available).
   - If needed, contact the principal investigator (PI) with the exposed individuals’ permission to understand the potential hazards.
3. MEDICATION
   - The medical provider and exposed individual should discuss the nature of the exposure in the context of the CDC guidelines for post-exposure prophylaxis (PEP) for HIV (https://stacks.cdc.gov/view/cdc/20711). The decision whether to accept or decline PEP is then made by the exposed individual.
   - HBV vaccination can also be offered as a post-exposure prophylaxis measure. A tetanus booster may be offered as well.

4. TESTING AND FOLLOW-UP
   - When applicable, inform the source patient of the exposure and obtain permission for blood testing (HBV, HCV, HIV).
   - Blood tests for HBV and HCV will be ordered on the source patient, and consent will be requested from the source patient for HIV testing. If the source patient is already known to be HIV, HCV and/or HBV positive, new testing does not need to be performed. In New York State, specific, informed consent for HIV testing is required. Informed consent is not required for anonymous HIV testing of a person who is the source of an occupational exposure if that person is deceased, comatose, or otherwise unable to provide consent, and no person authorized to consent on behalf of the source patient is immediately available.
   - The initial doses of PEP medication are dispensed by the medical providers. A prescription will need to be filled at a local pharmacy to complete the course of medication.
   - Follow up HIV/Hepatitis virus testing may be warranted.

Next Steps for Exposed Individual
   - If evaluated at the ER, follow up with your respective campus provider (WHS or Student Health) the following business day and complete an accident report there.
   - Notify your supervisor of the incident.
   - Notify Environmental Health and Safety so the appropriate reports can be submitted to the Institutional Biosafety Committee and National Institutes of Health Office of Science Policy (NIH-OSP). This is required by law for all accidents that result in overt exposure to materials containing recombinant or synthetic nucleic acid molecules. EHS will handle subsequent reporting.

Contact Information
   - EHS: 646-962-7233, ehs@med.cornell.edu
   - NYP-ER: 212-472-2222
   - Security: 212-746-0911
   - Workforce Health and Safety: 212-746-4370 (NYP Weill Cornell), 212-312-5249 (NYP Lower Manhattan)
   - Student Health Services: 646-962-6942

References