



DEDER GENERAL HOSPITAL

Standard Operating Procedure (SOP) for

Healthcare Workers Protection:

Postexposure Prophylaxis and Vaccinations

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1. Purpose

The purpose of this SOP is to provide comprehensive guidelines for protecting healthcare workers (HCWs) through the administration of postexposure prophylaxis (PEP) and vaccinations. This aims to prevent occupationally acquired infections and ensure effective management following exposure to potentially infectious agents.

2. Scope

This SOP is applicable to all healthcare workers within the facility, including physicians, nurses, medical assistants, and other personnel who may be at risk of exposure to infectious agents during their duties.

3. Definitions

Postexposure Prophylaxis (PEP): Medical treatment administered after exposure to an infectious agent to prevent infection.

Vaccination: Administration of a vaccine to confer immunity against specific infectious diseases.

Exposure: Contact with blood, body fluids, or potentially infectious materials, which may include needlesticks, cuts, or mucous membrane exposure.

4. Responsibilities

Healthcare Workers: Responsible for reporting exposures promptly, following recommended procedures for PEP and vaccinations, and participating in relevant training programs.

Infection Control Officer: Oversees the implementation of PEP and vaccination protocols, and ensures compliance with this SOP.

Management: Provides resources, training, and support for PEP and vaccination programs, ensuring adherence to safety protocols.

5. Procedures

5.1. Postexposure Prophylaxis (PEP)

1. Exposure Assessment:

- ☒ **Type of Exposure:** Determine the type of exposure (e.g., needlestick injury, splash to mucous membranes, or contact with body fluids).
- ☒ **Risk Assessment:** Evaluate the risk based on the source patient's infection status and the nature of the exposure.

2. Immediate Actions:

- ☒ **Clean the Area:** Wash needlestick injuries or cuts thoroughly with soap and water. For mucous membrane exposure, rinse the area with water or saline.

- **Report Exposure:** Notify a supervisor or designated person immediately and seek medical evaluation without delay.

3. Medical Evaluation:

- **Assessment:** A healthcare professional will assess the exposure risk and recommend appropriate PEP based on current guidelines.
- **Testing:** The source patient may need to be tested for bloodborne pathogens (e.g., HIV, Hepatitis B, Hepatitis C), if known or feasible.

4. PEP Administration:

- **HIV Exposure:** Initiate antiretroviral therapy (ART) as soon as possible, ideally within 72 hours of exposure. Follow current guidelines for drug regimens.
- **Hepatitis B Exposure:** Administer Hepatitis B immune globulin (HBIG) and the Hepatitis B vaccine if the HCW is not already vaccinated or immune.
- **Hepatitis C Management:** There is no specific PEP for Hepatitis C, but regular monitoring and follow-up are recommended for early detection and treatment.

5. Follow-up:

➤ **Monitoring:** Schedule follow-up appointments for ongoing medical evaluation and testing as needed.

➤ **Documentation:** Document the exposure incident, PEP administered, and follow-up actions in the HCW's medical record.

5.2. Vaccinations

1. Vaccination Requirements:

➤ **Hepatitis B:** Ensure all HCWs are vaccinated against Hepatitis B. Document vaccination status and provide booster doses as required.

➤ **Influenza:** Administer the annual influenza vaccine to all HCWs.

➤ **Measles, Mumps, and Rubella (MMR):** Ensure HCWs are up-to-date on MMR vaccinations.

➤ **Varicella (Chickenpox):** HCWs with no history of varicella or documented immunity should receive the varicella vaccine.

➤ **Tetanus, Diphtheria, Pertussis (Tdap):** Administer Td or Tdap booster every 10 years.

2. Vaccination Program:

- **Vaccination Schedule:** Implement a schedule for routine vaccinations and booster doses, ensuring compliance with recommended vaccination timelines.
- **Records:** Maintain accurate records of vaccinations and provide reminders for upcoming doses or boosters.
- **Training:** Educate HCWs about the importance of vaccinations and the procedures for receiving them.

3. Vaccine Administration:

- **Vaccine Storage:** Store vaccines according to manufacturer guidelines to maintain efficacy, including maintaining appropriate temperature controls.
- **Administration:** Follow proper procedures for administering vaccines, including aseptic techniques and accurate documentation.

4. Adverse Reactions:

- **Monitor for Reactions:** Observe HCWs for any immediate adverse reactions following vaccination.
- **Report:** Report any serious adverse reactions to the appropriate health authorities and ensure follow-up care as needed.

6. Training and Awareness

1. Training Programs:

- Provide comprehensive training for all HCWs on PEP and vaccination protocols, including recognition of exposure incidents and procedures for reporting and management.
- Include information on infection prevention and the importance of adherence to safety protocols.

2. Awareness Campaigns:

- Conduct regular awareness campaigns to reinforce the importance of PEP, vaccinations, and prompt reporting of exposures.

7. Monitoring and Auditing

1. Regular Audits:

- Perform regular audits of PEP and vaccination records to ensure compliance with protocols and identify any areas for improvement.

2. Feedback and Improvement:

- Use audit findings and feedback to continuously improve PEP and vaccination practices and update training programs as necessary.

8. Compliance and Regulations

- ☒ Adhere to national and local regulations and guidelines for PEP and vaccinations as issued by health authorities, such as the Centers for Disease Control and Prevention (CDC) and World Health Organization (WHO).

9. Review of SOP

- ☒ Review and update this SOP every 2 years or as needed to incorporate changes in best practices, regulations, or facility policies.

10. References

1. Centers for Disease Control and Prevention (CDC) guidelines for postexposure prophylaxis and vaccinations.
2. World Health Organization (WHO) recommendations for healthcare worker protection.
3. Local health regulations and standards.