

# **Marathon County**

## **Blood/Body Fluids Exposure Guidelines**

**Always use protective equipment and take universal precautions whenever possible.**

### **In The Event of a Work-Related Blood/Body Fluids Exposure:**

1. **Immediate Cleaning:** The exposed employee should immediately clean the area with soap and water. If the exposure involves a mucous membrane (e.g., the eye), flush the area thoroughly with water.
2. **Reporting the Incident:** The employee must report the exposure to the supervisor as soon as possible.
3. **Contacting Worker's Compensation Nurse Triage Line:** The employee or supervisor should contact the **Worker's Compensation Nurse Triage Line** at **844-891-6020** (available 24/7). When possible, make this call before the employee leaves the job site. The Nurse Triage Line will document relevant information, guide the employee to appropriate care, and notify the supervisor if unavailable during the call.
4. **Following Medical Treatment Recommendation:**

If the Nurse Triage Line recommends medical treatment:

- The employee should complete Sections I, II, and III of the State of Wisconsin "Determination of Exposure to Blood/Body Fluid" form and provide it to the medical provider. The form is available from the supervisor or the HR Department.

Medical Provider Responsibilities:

- Assess the incident to determine if a significant exposure occurred, following Wisconsin State Statutes (included on the form).
- Provide necessary treatment, including administering a Hepatitis B vaccine if applicable.
- Complete Part IV of the "Determination of Exposure to Blood/Body Fluids" form.
- If required, arrange for testing of the source individual (if identified and with parent consent for minors).

Medical Facility – Distribution of Determination of Exposure to Blood/Body Fluids Form Copies:

- Copy 1 (yellow): Shredded by the provider after follow-up is complete.
- Copy 2 (green): Provided to the employee. The employee should forward a copy to the Human Resources Department for their worker's comp and medical files.
- Copy 3 (goldenrod): Filed in the employee's medical record at the healthcare facility.
- Copy 4 (white): Given to the employee for their record. The employee should provide copy to the Human Resources Department for their worker's comp and medical files.

5. **Forwarding Medical Charges:** Request healthcare provider to submit medical charges to Wisconsin Municipal Mutual Insurance Company (WMMIC) 2418 Crossroads Dr, Suite 1500, Madison, WI 53718. Phone: 608-246-3336.
6. **Completing the County's Work-Related Injury/Illness Report:**
  - The employees must complete Section A.
  - The supervisor must complete Section B.
  - Forward completed form to the Human Resources Department.
7. **Assistance and Inquiries:** For questions or assistance, contact Sharon Hernandez, Senior Human Resources Analyst at the County Human Resources Department at 715-261-1457.

**Know** The statutory definition for significant Bloodborne Pathogens Exposure is printed on the reverse side of the multiply State of Wisconsin "Determination of Exposure to Blood/Body Fluids" form.

**Remember** A medical provider must certify the exposure. They serve as a gatekeeper concerning whether by statutory definition a significant exposure has occurred. If a significant exposure has occurred, the source person may be asked to give consent to test, or court ordered to test if the source person will not give consent.