

## BLOODBORNE PATHOGENS POST-EXPOSURE EVALUATION/HEALTHCARE PROFESSIONAL'S WRITTEN OPINION

- Note:** Prior to the evaluation, the healthcare professional will be provided with the following:
1. A copy of the OSHA standard on bloodborne pathogens
  2. A description of the exposed employee's duties as they relate to the exposure incident
  3. Documentation of the route of exposure and circumstances under which exposure occurred
  4. Results of the source individual's blood testing
  5. Relevant medical records including vaccination status
- This requirement will be met by providing the healthcare professional with the completed form, "Post-Exposure Evaluation and Follow-Up."

<b>WRITTEN OPINION</b>	
I have assessed _____ on _____ employee date for an exposure incident which occurred on _____. date	
<input type="checkbox"/> I have a copy of the 2001 revised OSHA standard, the "Post-Exposure Evaluation and Follow-Up" form from the employer and a copy of the 2001 "USPHS Recommendations for Hepatitis B prophylaxis Following Percutaneous or Permucosal Exposure."	
<b>I. HEPATITIS B IMMUNIZATION (Check one)</b>	
<input type="checkbox"/> Hepatitis prophylaxis is indicated.	<input type="checkbox"/> Hepatitis B prophylaxis is not indicated.
<b>II. HEPATITIS C TESTING/EVALUATION FOLLOW-UP.</b>	<input type="checkbox"/> Indicated <input type="checkbox"/> Not Indicated
<b>III. POST EXPOSURE EVALUATION AND FOLLOW-UP (Check all that apply)</b>	
The employee has been informed of the results of my evaluation.	<input type="checkbox"/>
The employee has been informed of any medical conditions resulting from exposure to blood or other potentially infectious materials which require further evaluation or treatment.	<input type="checkbox"/>
Signature of healthcare professional	Date
Signature of exposed employee	Date
Witness of employee's signature	

*This form must be received by the employer and a copy provided to the employee within 15 days of the evaluation.*