

## **STUDENT Blood & Body Fluid Exposure Checklist**

***Employees or Residents call Employee Health 585-275-1164)***

\_\_\_\_\_ **Wash or irrigate the affected area immediately.**

\_\_\_\_\_ **Call UHS 585-275-2662** if you are a Student or EIOH Intern

***If the exposure occurred at the following sights:***

F.F. Thompson Hospital call 585-396-6457

Highland Hospital call 585-341-8017

Rochester General Hospital call 585-922-4026

\_\_\_\_\_ **Go to UHS website – Print consent form:** Link: [Authorization for Release of Health Information \(Including alcohol/drug treatment and mental health information\) and confidential hiv/aids related information \(rochester.edu\)](#)

\_\_\_\_\_ **Download & Review informational:** Link: [Microsoft Word - Risk of Transmission \(rochester.edu\)](#)

\_\_\_\_\_ **Speak with nurse manager or Resident.** They will coordinate HIV consent from source person and drawing the blood from source person (Give the nurse the consent form).

- ❖ Once signed, the consent should be email to UHS email:  
[uhsocchealth@uhs.rochester.edu](mailto:uhsocchealth@uhs.rochester.edu) OR fax it to UHS Fax 585-461-9636
- ❖ Any blood samples collected at UPMC should be sent to the lab, UHS will place the order. Blood tubes needed: **2 SST and 2 lavender tubes with source patient Name, DOB & MRN #.** Charge nurse or Medical Resident should send blood samples to **Micro lab @ tube station #911**

**DO NOT ORDER IN E-Record, UHS will send the order directly to Micro**

\_\_\_\_\_ **Pick up PEP medication (if indicated)** It will be ordered by UHS Provider at:

***Strong Memorial Outpatient Pharmacy*** (open 24 hours.) 601 Elmwood Avenue, Rochester, NY 14642, phone: [\(585\) 275-4931](tel:5852754931) (not the Employee Pharmacy)

\_\_\_\_\_ **Follow up with UHS Occ Health** the same day (preferred) or of the following business day if happened after hours. Call: 585-275-4955.

\_\_\_\_\_ **Report the incident to Environmental Health & Safety 585-275-3241.**

**Student & Non-employee injury / illness report**



Link to consent form:



Link to informational information: