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Info for Clinicians Health Alert Regarding Safe Injections and Hepatitis C Screening

Outbreaks of hepatitis C virus linked to transmission in outpatient and inpatient healthcare settings continue to occur, typically because of poor infection control and unsafe injection practices

Please consider the following:

- (1) Take this opportunity to review your clinic practices for absolute adherence to proper infection control practices throughout preparation and administration of injected medications, every time:
 - <u>Never</u> administer medications from the same syringe to more than one patient, even if the needle is changed
 - Do not enter a vial with a used syringe or needle, even when drawing up additional medication
 - Do not administer medications from a single-dose vial or IV bag to multiple patients.
 - Limit the use of multi-dose vials (exceptions: approved multi-dose vaccination vials), and dedicate them to a single patient whenever possible.
 - Speak up if you see a colleague not following safe injection practices.

For educational tools, just-in-time training videos, and posters, vist:

CDC's One and Only Campaign: http://www.cdc.gov/injectionsafety/

Helpful links to make sure your clinic practices are safe:

- 1) Impact of Unsafe Injections
- http://oneandonlycampaign.org/sites/default/files/upload/image/infographic 508 final.pdf
- 2) Safe Injections http://oneandonlycampaign.org/sites/default/files/upload/pdf/Provider%20Brochure-508.pdf
- 3) Injection Safety Checklist http://oneandonlycampaign.org/sites/default/files/upload/pdf/Injection%20Safety%20Checklist-508.pdf
- (2) Patients born during 1945–1965 are at increased risk of hepatitis C carriage; one-time screening test is recommended by the U.S. Preventive Services Task Force (USPSTF) and the Centers for Disease Control and Prevention: http://www.aafp.org/news/health-of-the-public/20130625uspstf-hep-c-final-rec.html

When evaluating a patient with exposure to a hepatitis C source:

- (3) If the patient's most recent exposure occurred during the last 6 months, order:
 - HepC: HepCAB Total, HCV RNA Quantitative

- HepB: HepBsAg, HepBsAB Qual/Quant, HepBcAB Total, HepBcAb IgM
- HIV: HIV-1 IgM and IgG AB, p24 antigen

(4) If the patient's most recent exposure was greater than 6 months ago, order:

• HepC: HepCAB Total, with reflex to HCV RNA quantitative

HepB: HepBsAgHIV: HIV AB

(5) All viral hepatitis (A, B, C, D, E) and HIV cases are reportable to your local health department: Reportable Diseases, Oregon Local Health Departments.

If you have any questions about viral hepatitis, please go to our webpage: https://public.health.oregon.gov/DiseasesConditions/HIVSTDViralHepatitis/AdultViralHepatitis/Pages/index.aspx

You can also reach the Public Health Division Epidemiologist on call, 24/7, at (971) 673-1111.

Thank you,

Oregon Public Health Division

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