

Core brief

Daily update

(8 February 2024, 11.30am)

Topics in this Core Brief:

- Flu treatment and prophylaxis guidance
- Management of occupational exposure to blood or body fluids

Remember, for all your latest news stories, visit our new Staffnet Hub:
[GGC-Staffnet Hub - Home \(sharepoint.com\)](#)

Flu treatment and prophylaxis guidance

Influenza cases remain high in Scotland, and the Infection Prevention and Control Team would like to remind staff of [current guidance on the treatment and prophylaxis of seasonal influenza](#).

For both oseltamivir and zanamivir (in immunocompetent patients), **treatment** is 12 hourly dosing for five days, and **prophylaxis** is once daily dosing for 10 days. Please see treatment dose table on page 15 and prophylaxis dose table on page 25 for more information.

Dose reduction guidance, if there's reduced creatinine clearance, can be found on pages 17 and 26. There is also a [Staffnet guideline](#) which details renal dosing for these medications.

Management of occupational exposure to blood or body fluids

Occupational exposure to blood or body fluids: How can you be exposed to blood or body fluids?

Exposure to blood or high risk body fluids can occur as a result of one of the following types of incident:

- Percutaneous injury e.g. from needles, medical instruments, teeth or bone fragments or bites which break the skin

- Exposure of broken skin (abrasions, cuts, eczema etc.)
- Splashes of blood or body fluids into mucous membranes including the mouth or eyes

Contamination on intact skin is **not** a risk of exposure.

What are High Risk Body Fluids?

In addition to blood, high risk body fluids are pleural fluid, blood stained low risk fluid, saliva associated with dentistry, semen, vaginal secretions, breast milk, CSF synovial fluid, pericardial fluid, unfixed tissues or organs.

These types of exposure present a risk of blood borne virus (BBV) transmission e.g. HIV, hepatitis B and C. However, the likelihood of transmission is influenced by a number of factors:

- the virus e.g. Hepatitis B is 50-100 times more infectious than HIV
- the amount of exposure and the amount of virus present in the fluid an individual is exposed to e.g. someone who is regularly taking HIV medication, is unlikely to pose a risk of transmission due to reduced viral load
- the immune status of the exposed person e.g. If you have received vaccination for hepatitis B.

What should you do following exposure?

- Immediate first aid
- Squeeze the affected area to encourage bleeding and wash with warm water and soap
- Do not suck the affected area and do not scrub or use bleach
- Splashes to eye - Rinse out with saline, then remove contact lenses if worn and then rinse eye again. Clean contact lenses with contact lenses cleaner
- Splash into mouth - rinse mouth out with saline and spit out, do not swallow the saline
- Report the injury to your Line Manager/ Supervisor.

Nurse in Charge of source patient

The nurse in charge of source patient (the patient whose body fluid the injured person has been exposed to) is responsible for the initial assessment and management of the source patient (if known) however this assessment can be delegated to a doctor or other clinician as appropriate.

Contact Occupational Health

Contact the Occupational Health needlestick line on 0141 201 0595 between 8.00am – 5.30pm Monday to Friday to report the injury, to obtain further advice and to arrange any necessary follow up.

Out with these hours you must attend your local Emergency Department (ED) for the initial assessment. Where you attend ED you must also report your injury to Occupational Health on the next working day to arrange for follow up.



Getting the right care this winter is as easy as ABC

<h3>A</h3> <h4>Ask yourself</h4> <p>Do I need to go out? For information on treating minor illnesses and injuries from home, go to NHS inform or download the NHS 24 App.</p>	<h3>B</h3> <h4>Be aware</h4> <p>There is help on your doorstep. Your local GP, pharmacy or optician offer a range of services.</p>	<h3>C</h3> <h4>Call 111</h4> <p>If it's urgent, or you're unsure, call NHS 24 on 111. They'll get you the care you need.</p>
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Unless it's an emergency think ABC before visiting A&E.
For more information: www.nhsggc.scot/rcrp



Staff are reminded to make sure their [personal contact details are up to date on eESS](#).

It is important to share Core Brief with colleagues who do not have access to a computer.

A full archive of printable PDFs are available on [website](#)