Innoculation injury



Contents

- Condition
- Individual at risk
- Guidance at RECRUITMENT for adult volunteer donor and maternal donor (cord blood donation)
- Guidance at CT /WORK-UP
- Justification for guidance
- References

This page was last modified on 18 May 2016, at 10:26.

Condition

Accidental penetration of the skin, or splash in the eye, with an object potentially contaminated with human bodily fluids.

Individual at risk

Recipient

Guidance at RECRUITMENT for adult volunteer donor and maternal donor (cord blood donation)

ACCEPTABLE

Guidance at CT/WORK-UP

Acceptable if four months have passed since injury and validated nucleic acid testing (NAT) is used for hepatitis B and C.

Unacceptable if needle/instrument may have been contaminated with abnormal prion protein.

This deferral period may be shortened at the discretion of the requesting transplant centre.

Justification for guidance

There is a risk of transmission of blood-borne viruses through an accidental innoculation injury if the offending instrument is contaminated with bodily fluids.

References

Scaggiante R, Chemello L, Rinaldi R, Bartolucci GB, Trevisan A. Acute hepatitis C virus infection in a nurse trainee following a needlestick injury. World J Gastroenterol 2013; 19(4): 581-5.

Res S, Bowden FJ. Acute hepatitis B infection following a community-acquired needlestick injury. J Infect 2011; 62(6): 487-9.

Morand P, Dutertre N, Minazzi H, Burnichon J, Pernollet M, Baud M et al. Lack of seroconversion in a health care worker after polymerase chain reaction-documented acute hepatitis C resulting from a needlestick injury. Clin Infect Dis 2001; 33(5): 727-9.

Wormser GP. Estimation of risk of transmission of non-A, non-B hepatitis by needlestick injury. Gastroenterology 1991; 101(3): 871-2.