

# NEW SOUTH WALES MEDICAL BOARD

## POLICY

<b>TITLE</b>	Blood-Borne Viruses	<b>FILE REF</b>	DD10/10103
<b>NUMBER</b>	H2	<b>MPA REF</b>	regulations
<b>DATE CREATED</b>			
<b>REVISIONS</b>	January 2002		
<b>RELATED RECORDS</b>	97/200 (closed), 08/087		

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Medical Practitioners have a wide range of responsibilities towards their patients, colleagues and the general public. The emergence of blood borne viruses such as Hepatitis B, Hepatitis C and HIV has focused attention on the particular responsibilities of doctors in preventing transmission of blood borne viruses to patients or colleagues.

Registrants (Medical Practitioners and Medical Students) must use standard infection control precautions whenever patients are examined and treated. They must also ensure they are familiar with and comply with current Department of Health circulars dealing with infected health care workers. These can be accessed on the Department's website; [www.health.nsw.gov.au](http://www.health.nsw.gov.au)

Any registrant who undertakes exposure-prone procedures has a professional responsibility to know his or her infective status in relation to blood-borne viruses. It is strongly recommended that all registrants consider vaccination against HBV.

**A registrant who is aware that he or she is infected with a blood borne virus must not undertake exposure-prone procedures.** For a medical practitioner to do so would, prima facie, constitute unsatisfactory professional conduct and cause the practitioner to be subject to disciplinary proceedings.

Infected medical practitioners may continue to practise medicine, provided that public safety is not endangered by either their impaired health or their performance of exposure-prone procedures.

### **NSW Health Definition of Exposure-Prone Procedures**

Exposure prone procedures are those procedures where there is potential for contact between the skin (usually finger or thumb) of the health care worker and sharp surgical instruments, needles, or sharp tissues (splinters/pieces of bone/tooth) in body cavities or in poorly visualised or confined body sites including the mouth. Procedures which lack these

characteristics are unlikely to pose a risk of transmission of blood-borne viruses from infected health care worker to patient.

When another medical practitioner is aware that a registrant's physical or mental health is affecting their capacity to practise or train safely, then he or she is professionally and ethically obliged to counsel the registrant to seek help. Failure to do so may result in tragic consequences for the registrant or members of the public.

While reporting an infected registrant is not mandatory in NSW, medical practitioners should seriously consider the registrant's insight and capacity to practise or train safely, and notify the appropriate authority if public safety is compromised. Because of confidentiality provisions in the case of infection with HIV, notification should be to the Director-General of Health. In other circumstances, notification to the Medical Board should be considered. Any concerns may be discussed with the Board's Medical Director.