

Do you know your blood-borne virus status?



Health-care professionals have a moral obligation to manage the risk of transmitting blood-borne viral (BBV) infections. There is a small but real risk of transmitting these viral infections if a registrant has a poorly controlled infection and performs or assists in exposure-prone procedures (EPPs) such as surgery, obstetrics or working in an emergency room. Medical students and postgraduate students in their first year of residency are considered to be performing EPPs. All College registrants are expected to have had the hepatitis B vaccine (if they do not have natural immunity) and know their immune status with respect to this virus. Furthermore, College registrants who perform EPPs are expected to know their human immunodeficiency virus (HIV), and hepatitis C (HCV) status, and to get tested at least every three years, and after an exposure event.

With the revolution in managing blood-borne viral infections, health-care professionals with a blood-borne viral infection can remain in practice and perform EPPs safely. Safe vaccines and treatment exist for HBV to prevent infection or reduce viral loads to levels that make transmission impossible. In most cases, HCV is now a curable infection, and HIV can be managed to the point where viral loads are undetectable and risk of transmission negligible.

In 2019, the Public Health Agency of Canada (PHAC) published guidelines on the *Prevention of Transmission of Bloodborne Viruses from Infected Healthcare Workers in Healthcare Settings* for health-care professionals with a BBV doing EPPs. The document articulates the balance between reasonable expectations of the public (protection from harm), and reasonable expectations of health-care professionals (right to privacy and professional autonomy). It also sets out key recommendations for health-care professionals, health authorities, and regulators to ensure safe practice for clinicians and patients.

The PHAC document recommends testing for blood-borne viral infections at “appropriate intervals as determined by their level of risk.” The College’s practice standard *Blood-borne Viruses in Registrants* aligns with all of the PHAC recommendations. In particular, the standard sets minimum requirements for testing for BBVs—it recommends that registrants who perform or assist in performing EPPs get tested every three years, and that they get tested after an exposure event (needlestick injury or other exposure).

Each year, registrants are asked on their Annual Licence Renewal Form whether they do EPPs, and if they do, whether they have a BBV. This year they are also being asked if they are in compliance with the minimum testing requirements (three years) outlined by the standard.

The College’s [health monitoring department](#) handles this information sensitively and confidentially with the utmost attention to the privacy of the individual. Registrants who have a BBV and do EPPs have a duty to report this to the College. The College’s Blood Borne Communicable Disease Committee is composed of experts in the field of hepatology, infectious diseases, and public health. It meets in camera and considers the anonymized cases of these registrants. It makes recommendations on treatment and conditions necessary for the safe return or continuation of medical practice.

Physicians may also benefit from support from the [Physician Health Program](#). The 24-hour helpline can be reached at 1-800-663-6729 or 604-398-4300.