

Registrants should know their blood-borne virus status



Blood-borne viral (BBV) infections can all be prevented, managed, or cured. Safe vaccines and treatment exist for hepatitis b (HBV) to prevent infection or reduce viral loads to levels that make transmission impossible. In most cases, hepatitis c (HCV) is now a curable infection, and human immunodeficiency virus (HIV) can be managed to the point where viral loads are undetectable and risk of transmission negligible.

The College believes that it is better for registrants to know their serological status in order to keep their patients safe, and to ensure that they get the health care they need. Those who learn that they have a new BBV infection can get treated, and can take the necessary measures to enable them to continue to work.

Health-care professionals have a moral obligation to manage the risk of transmitting 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 HIV and HCV status, and to get tested at least every three years, and after an exposure event.

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. In keeping with this document, the College's practice standard *Blood-borne Viruses in Registrants* recommends that those 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. Last year they were also asked if they are in compliance with the minimum testing requirements (three years) outlined by the standard, and this question will continue to be asked.

Registrants who have a BBV and do EPPs have a duty to report this to the College, but they may be assured that the [health monitoring department](#) handles this information sensitively and confidentially with the utmost attention to privacy.

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.