



Record of Accidental Exposure to Blood/Body Fluids

(Accidental puncture wounds, abrasions, and burns to client)

You do not have to see blood or body fluids on equipment or surfaces for an infection to occur.

Complete this form if a client is accidentally injured during service.

Keep records on-site in a secure location for a minimum of one year, and on file, whether on-site or off-site, for a minimum of two additional years.

Date of Incident:	
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Exposed Person:	
<i>Name (first and last):</i>	
<i>Phone Number:</i>	
<i>Mailing Address:</i>	

Details of Exposure:	
<i>Item(s) used:</i>	
<i>Service/Procedure being performed:</i>	
<i>Part of body injured or exposed:</i>	
<i>How exposure occurred:</i>	

Actions Taken on Client:

- ☐ Allow the wound to bleed freely
- ☐ Perform hand hygiene and put on single-use gloves prior to handling or dressing the wound
- ☐ Wash the area thoroughly with soap and water (do not scrub)
- ☐ Apply skin antiseptic and cover the wound with a sterile dressing or bandage
- ☐ The person injured instructed to watch for signs of infection (e.g. redness, swelling, pain, warmth around the wound) and contact health care provider if signs of infection occur
- ☐ If splashed in the eyes, thoroughly flush out the eyes with cold water
- ☐ If splashed in the mouth, thoroughly flush out the mouth with cold water
- ☐ If the person is exposed to another person's blood and/or other body fluids, they should consult with a healthcare provider as soon as possible regarding the need for post-exposure treatment, work restrictions, or other follow-up

Actions taken with instruments involved:

- ☐ Item discarded
- ☐ Cleaned and disinfected (name of disinfectant: _____)

Personal Service Worker Involved:	
<i>Name (first and last):</i>	
<i>Phone Number:</i>	