ACDC: Hepatitis B Case

Assess

Diagnose

Identify Outcome

Outcome Objective:
1. Prevent the spread of communicable diseases within families, communities, health facilities, or other sites.

Nursing Practice:
1. Determine and document specific health needs/goals for client/contact situation.

Implement

Plan

Evaluate

Other References
• Health Education Materials
• Public Health Nursing Practice Manual
• ACDC Manual (B-73)
• Control of Communicable Disease Manual

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Plan for the following Public Health Nursing Interventions:

1. Disease and Health Event Investigation:
   a. Review ACDC Manual (B-73) for:
      • Symptoms
      • Incubation period
      • Source
      • Mode of transmission
      • Period of communicability
      • Specific treatment
      • Control measures
   b. Obtain educational and resource materials.
   c. Obtain specimen containers, if applicable.
   d. Obtain referral information.
   e. Elicit epidemiological data.
   f. Relate case to time, place, person (when?, where?, who?).
   g. Analyze probable causative factor (how?, why?).
   h. Analyze actual/potential for spread of disease.
   i. Take appropriate action in the event of sensitive occupation or situation (see B-73).
   j. Provide instruction on appropriate specimen collection.
   k. Institute appropriate control measures.

2. Health Teaching/Counseling:
   a. Advise that disease may be transmitted by shared articles that become contaminated with blood (e.g., needles, syringes, razors, toothbrushes).
   b. Advise that regular sexual partners may be at increased risk. Advise of need for HBIG and/or vaccine. Use of condoms may reduce the risk to sexual partners.
   c. Individuals at continued risk for acquiring hepatitis B infection (occupation, male homosexuals) should be recommended to receive hepatitis B vaccine if not immune.
   d. Usage of HBIG based on exposure (type and time) and susceptibility.
   e. Instruct sanitary disposal of blood and other body secretions.
   f. Advise patient that persons with a history of viral hepatitis are excluded from blood donor programs.
   g. Advise case if HBsAg test should be repeated at 3 and 6 months. If still positive after 6 months, then the patient is considered a carrier and should be evaluated for the possibility of active liver disease.
   h. Instruct patient of risk of re-infection and the importance of not engaging in behaviors that may result in exposure to blood or blood products.

3. Referral and follow-up:
   a. Refer for treatment/prophylaxis if indicated.
   b. Follow up with client(s) to determine if treatment/prophylaxis is taken as indicated.
   c. Complete PHN Assessment form and make referrals as needed.
   d. File Foodborne Illness Report (H-26) with district registrar if illness relates to a commercial establishment or product.

4. Surveillance:
   a. Monitor case/contact until cleared/closed.
   b. Submit specimens as indicated by B-73.

5. Other:
   a. PHN interventions are implemented as stated in the plan.

Public Health Nursing Practice Manual

ACDC Manual (B-73)

Control of Communicable Disease Manual

Implementation

1. Evaluate the effectiveness of interventions on the health of the client/contact(s); e.g. document client understands disease process and prevention of transmission.
2. Determine and document action for non-adherent client/contact(s):
   a. Consult with PHNS.
   b. Refer for follow-up (see B-73) or submit for closure.
3. Complete investigation forms:
   a. Submit report within 5 working days or timeframe agreed upon in consultation with the PHNS.
   b. Submit interim reports as needed until case is closed.
4. Document in the NPMS:
   a. File a copy of the PHN Assessment per PHN Assessment Form instructions.
5. Evaluate client satisfaction:
   a. Give client satisfaction form to the client/carer for completion and submission in a pre-addressed, stamped envelope.

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