



## **Recommendations on Human Bite Management in Schools**

### **Rationale:**

Each year there are numerous incidents where a student has bitten a classmate or a staff member. The availability of new preventative therapies after a bite and the fear of HIV infection have made bite management decisions less certain. Blood-borne pathogens (HIV, Hepatitis B) and bacterial infections (with organisms that live in the mouth) need to be considered.

### **Procedure:**

1. Wash wound with soap and irrigation under pressure with normal saline (water if saline unavailable).
2. Assess the extent of damage; describe on an *accident report*.
3. Apply dry sterile dressing.
4. Notify parents.
5. Deep puncture bites and open wounds often require physician treatment. Therefore, recommend contact with their physician and/or emergency room.
6. If bitten party is a staff member, follow Risk Management's Workmen's Compensation protocols.

### **Commonly Asked Questions and Answers:**

**Question:** Do I recommend that the bitten individual get Hepatitis B prophylaxis, get tested for HIV or go for preventative HIV chemoprophylaxis?

**Answer:** It is important for school nurses to be up to date on what measures can be taken after a human bite. However, it is always up to their doctor whether to go ahead with any of these measures.

**HIV is not readily transmitted through bites.** However, a theoretical risk exists and some prudent doctors will have their patients tested at the time of the bite and again months later. Because anti-viral prophylaxis is now available for people exposed to HIV, this may be considered -- but only in some of the severest cases.

**Hepatitis B is more likely than HIV to be transmitted through bites.** It is also more readily prevented with after-bite prophylaxis (Hepatitis B Immunoglobulin). The severity of a bite, Hepatitis B immunization status, and other information are taken into account by doctors. The depth and character of a bite helps doctors determine whether antibiotics will be prescribed.

**Question:** What is the school nurse's role in making these decisions?

**Answer:** The school nurse should make sure that the bitten person (or parent) and his/her doctor receive all the pertinent information about the biting incident so that an informed decision can be made. This is confidential information. Often in medicine, decisions are based on the possibility that anyone could be a carrier. If there are extenuating circumstances or a doctor is making the request, refer the case to the central health office for further action.

**Question:** Can the school nurse provide information about the Hepatitis B immunization status to someone who is concerned about being exposed? Does one party (biter or bitten individual) have the right to extract medical information or even HIV testing from the other party?

**Answer:** The school nurses may ask the parent of a child or a staff member to permit release of that information. The school nurse may also ask the parent of a child or a staff member if they agree to be tested for HIV or Hepatitis B. But there is no obligation on the part of that party to release that information or be subjected to testing.