

SHEA Newsletter

Edited by Robert A. Weinstein, MD

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of Hospital
Epidemiologists
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SHEA Survey Result- Management of Health Care Workers with HIV Infection

The Centers for Disease Control report that 5.8% of adults with AIDS are health care workers.¹ This would be expected, assuming that high-risk populations are represented in the health care industry in the same proportions as the general population, because approximately 5.6% of the work force is employed in health care. It can also be assumed that if 5.8% have AIDS, a much higher proportion are infected with human immunodeficiency virus (HIV). Anecdotal reports indicate that some health care workers have been removed from their jobs, particularly if performing invasive procedures is involved, but there is no specific information available as to how often this occurs. A survey of SHEA members was undertaken to provide information on the way in which hospitals are currently managing HIV-infected health care workers.

The survey was distributed to all SHEA members with the November 1987 newsletter. By the time of data analysis in February 1988, 196 questionnaires had been returned. The respondents represented 175 hospitals in which SHEA members were responsible for infection control (Table 1). However, despite the fact that the survey was anonymous, four

respondents declined to identify the job category of HIV-positive workers because of concern that the answers might violate confidentiality laws. Of 171 hospital epidemiologists who completed the entire questionnaire, 69 (40%) reported that they had known HIV-positive employees working in their hospitals.

Fifty-four percent of government hospitals reported HIV-positive workers, compared with 41% of university hospitals, and 36% of private hospitals (Table 2). The percentage of hospitals

**TABLE 1
RESPONSE TO SHEA SURVEY
ON HEALTH CARE WORKERS
WITH HIV INFECTION**

Responsibilities of Respondents	No.
Total responses	196
Responsible for infection control	
in their hospitals	175
With HIV-positive workers	69
Without HIV-positive workers	102
Declined to answer	4
Not responsible for infection control	21

**TABLE 2
CHARACTERISTICS OF HOSPITALS RESPONDING TO SHEA
SURVEY ON HEALTH CARE WORKERS WITH HIV INFECTION***

Characteristic	No.	No. with HIV-positive Employees (%)
Type of hospital		
Private	120	43 (36)
University	29	12 (41)
Government	26	14 (54)
No. of beds		
≤300	41	6 (15)
300-600	91	39 (43)
>600	43	24 (56)
Geographical location†:		
East coast	70	28 (40)
East central	47	14 (30)
West central	30	12 (40)
West coast	20	11 (55)
Other North American	2	4 (50)

* Includes four hospitals that did not identify worker category

† Noncoastal states divided by the Mississippi River into East and West central.

reporting HIV positive health care workers increased with increasing size. The largest number of responses came from the East coast, but the West coast had the highest percent of hospitals reporting HIV-positive health care workers.

The 69 hospitals with known HIV-positive health care workers reported a total of 197 HIV-positive employees, including 17 physicians, 55 registered nurses, 6 licensed practical nurses, 40 technicians, and 79 other hospital employees (Table 3).

In the survey, 166 (84%) of the 197 HIV-positive health care workers had been allowed to continue working without restrictions. Work restrictions occurred more frequently among physicians, and included four who were reassigned to noninvasive work, two who retired, and one who was put on leave. The major restriction on both nurses and technicians was also reassignment to noninvasive work. Only one nurse was reassigned to nonpatient care, and one was prohibited from doing cardiopulmonary resuscitation.

In addition to completing the survey, many respondents included comments on how their institutions have been managing HIV-positive health care workers. Most hospitals have been educating these workers about the potential risk to patients and themselves, and instructing them in proper infection control precautions. Many have been monitored by supervisors or other selected persons in the institution such as personnel health physicians, and some institutions have

**TABLE 3
RESULTS OF SHEA SURVEY ON HEALTH
CARE WORKERS WITH HIV INFECTION**

Worker Category	No.	No. (%) Allowed to Work Without Restrictions*
MD†	17	10 (59)
RN	55	45 (82)
LPN	6	6 (100)
Technician	40	29 (72)
Other	79	76 (96)
Total	197	166 (84)

* Other than education and surveillance
† Includes one dentist.

asked HIV-positive employees to avoid invasive procedures. Surgery is the most obvious, but some hospitals have developed a list of other invasive procedures they have requested HIV-positive health care workers avoid.

In summary, 40% of 171 hospitals reported that HIV-positive health care workers had been identified among their employees, and 84% of the 197 HIV-positive employees have been allowed to continue their work without restrictions. Physicians were reported to be restricted in their work more often than other categories of workers, but most of these restrictions involved limitations on performance of invasive procedures. This survey shows that HIV-positive health care workers are not being dismissed from their jobs, but are on occasion being placed under limited restrictions to avoid any potential for transmission to patients.

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REFERENCE

- Centers for Disease Control: Recommendations for prevention of HIV transmission in health care settings. *MMWR* 1987; 36(suppl 25): 1S-8S.

Editorial Note: This survey and the article by Miller and Farr in last month's issue of the journal (A survey of SHEA members on universal precautions and HIV screening 9(4):163-165) demonstrate that SHEA is a unique resource for rapidly obtaining and providing information on hospital infection control practices. Each survey was performed, analyzed, summarized, and published within a few months—yielding timely, practical information that hospital epidemiologists can use when determining policies, teaching, and providing consultations in their own institutions. Future surveys over the next few years might help document changing practices in the management of health care workers who have HIV infection and may provide further detail about performance/restriction of invasive procedures by such personnel.

Brief items of interest for the SHEA Newsletter may be sent to Robert A. Weinstein, MD, SHEA Newsletter Editor, Division of Infectious Diseases, Michael Reese Hospital, Lake Shore Drive at 31st St., Chicago, IL 60616. Copy must be typed, double-spaced, and may not exceed five pages.

SHEA-CDC Training Course

The SHEA-CDC training program for new hospital epidemiologists and for infectious disease fellows interested in careers in infection control and hospital epidemiology (see February SHEA news) will have a pilot course August 11-13, 1988 in Atlanta, Georgia. Because this is a pilot course, enrollment will be limited to approximately 20 students and the course fee will be waived. Individuals interested in attending should contact Allen B. Kaiser, MD, Chief, Department of Medicine, St. Thomas Hospital, PO Box 380, Nashville, TN 37202.