

Medical News

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Hospital Offers Free HIV Testing to Patients Exposed to Lab Tech

A major San Francisco hospital is offering free HIV testing to thousands of patients following an investigation into a laboratory technician's alleged disclosure that he infected patients with HIV.

A spokesperson for the hospital said they are offering free HIV testing to allay public fears even though they believe that it is extremely unlikely that the former phlebotomist actually infected anyone with HIV.

The phlebotomist, who worked at the hospital for eight years, was fired after allegedly boasting to a friend that he had infected patients during phlebotomy and kept a list of the patients. The phlebotomist has denied the allegations.

The hospital is offering free HIV testing to any patient who had blood drawn by a male phlebotomist at the blood station beginning January 1985. The hospital decided to take this unprecedented action after consulting with the San Francisco Department of Health and a medical ethicist. The hospital does not know if the former employee is HIV positive. Approximately one in eight patients are opting to be tested.

The hospital said that it is not clear how the phlebotomist could have infected a patient with HIV since the hospital uses sterile disposable needles that can only be used to draw blood and are promptly disposed of after use.

Court Supports Hospital's Decision to Transfer HIV-Infected Surgical Technician

The U.S. Court of Appeals for the Fifth Circuit has cleared the decision of a Houston hospital to transfer an HIV-infected surgical technician to a clerical position. The technician claimed that his reassignment was in retaliation for an interview with the local newspaper in which he revealed his HIV status. He also argued that the transfer violated Section 504 of the Rehabilitation Act.

The appeals court held that the technician was not "otherwise qualified" to perform the functions of his job as part of surgery because of the risk of transmitting HIV when surgery is being performed. The surgical technician's duties included placing his

hands in the body cavity during surgery and handing sharp instruments to surgeons. He admits that accidents occur despite care and that he has had five needlestick accidents during his work.

The court found that the employee's HIV status gave the hospital grounds to reassign him and the fact that he informed the hospital of his status in a newspaper article does not change the hospital's right in this situation. (*Bradley v University of Texas MD Anderson Cancer Center*, CA 5, 93-227, Oct. 7, 1993).

First Documented Report of Needlestick Transmission of TB from AIDS Patient

Dr. Francoise Kramer and colleagues of the University of Southern California Medical Center reported the first documented case of a needlestick transmission of *Mycobacterium tuberculosis* from an AIDS patient. The case involved a previously healthy nurse who received a superficial laceration of her forearm from a needle that had been in the port of a central-line catheter of a patient with AIDS. The lesion was treated locally, and the nurse was placed on zidovudine. A baseline HIV antibody test on the nurse was negative. A blood culture from the patient grew more than 100 colonies/ml of *M. tuberculosis*.

During the next five weeks, the nurse experienced increasing erythema with abscess formation at the site of the laceration. Six weeks after the injury, a culture of the lesion grew *M. tuberculosis*. After treatment with pyrazinamide for two months and isoniazid and rifampin for six months, the skin lesion resolved. Twelve months following the needlestick injury, the nurse remained HIV antibody negative.

This case represents primary cutaneous tuberculosis, a rare presentation of TB.

FROM: Kramer F, et al. *Ann Intern Med* 1993;119:594-595.

Additional news items in this issue: *International Conference on the Prevention of Infection* (page 718), *CDC Publishes Draft Revised Guidelines for Preventing Transmission of Tuberculosis* (page 722), *Tuberculin Boosting Common in Southeast Asian Refugees* (page 729), *Congressional Office of Technology Assessment Releases Report on TB* (page 749).
