Appendix 10: Best practice – management of occupational exposure incidents

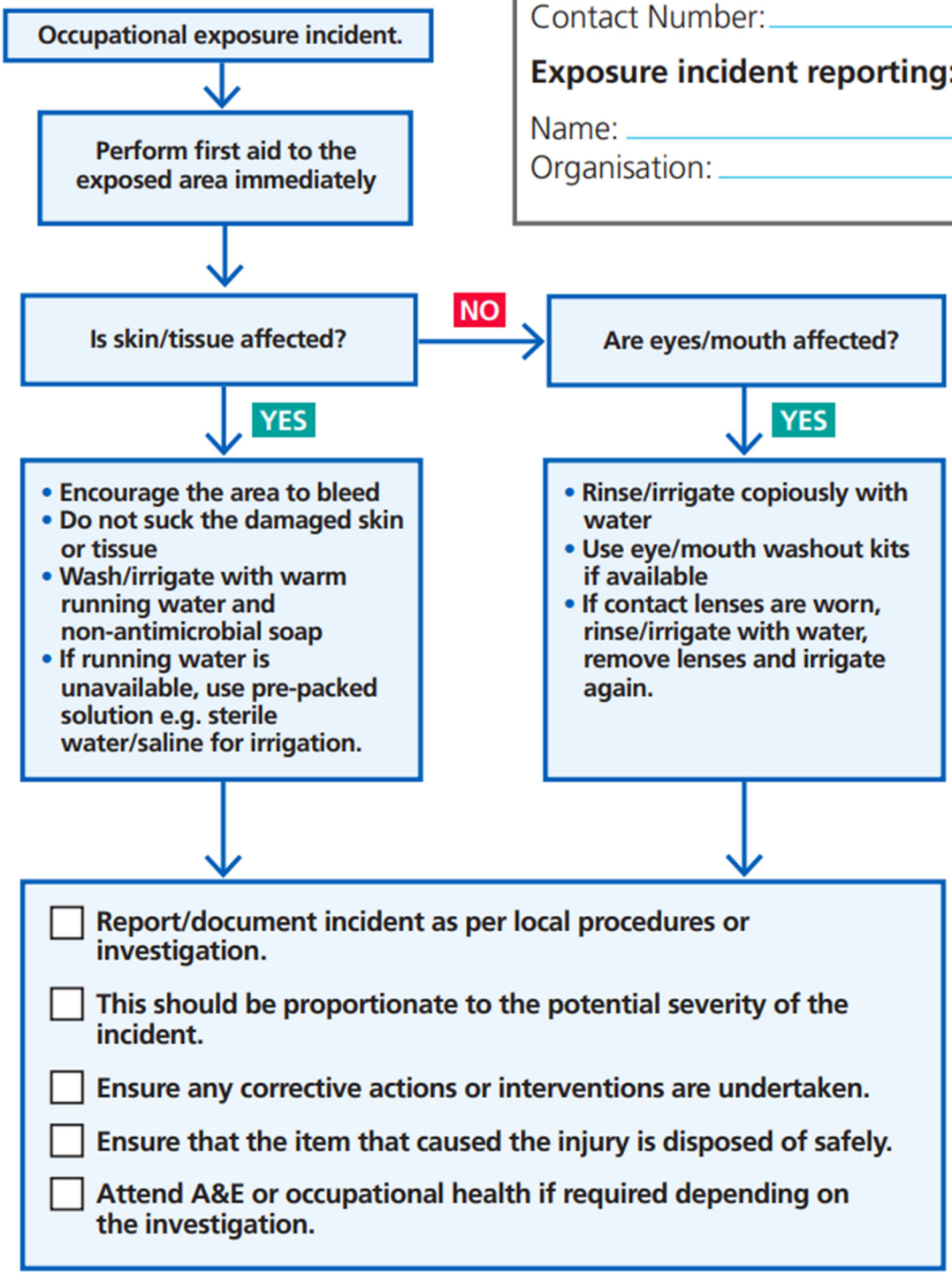
Infection prevention and control team/health protection team:

Name: _____

Designation: _____

Contact Number: _____

Exposure incident reporting:

Name: _____

Organisation: _____