

***Brucella* Laboratory Minimal-, Low-, and High-Risk Assessment and Post-Exposure Prophylaxis**

<i>Brucella</i> Laboratory Risk Assessment and Post-Exposure Prophylaxis (PEP): Minimal Risk			
Specimen handling	Exposure scenario	PEP	Follow-up/monitoring
Routine clinical specimen (e.g., blood, serum, cerebrospinal fluid)	Person who manipulated a routine clinical specimen in a certified Class II biosafety cabinet, with appropriate personal protective equipment (PPE) (i.e., gloves, gown, eye protection).	None	<p style="text-align: center;">N/A</p> <p>May consider symptom watch for following scenarios:</p> <ul style="list-style-type: none"> ● Person who manipulated a routine clinical specimen on an open bench with or without appropriate PPE, or in a certified Class II biosafety cabinet without appropriate PPE. ● Person present in the lab while someone manipulated a routine clinical specimen on an open bench, resulting in aerosol-generating events.
	Everyone present in the lab while someone manipulated a routine clinical specimen in a certified Class II biosafety cabinet, or on an open bench where manipulation did not involve occurrence of aerosol-generating events (e.g., centrifuging without sealed carriers, vortexing, sonicating, spillage/splashes).		
Enriched material (e.g., a <i>Brucella</i> isolate, positive blood bottle) or reproductive clinical specimen (e.g., amniotic fluid, placental products)	Person who manipulated enriched material or reproductive clinical specimen in a certified Class II biosafety cabinet, with appropriate PPE.		
	Everyone present in the lab while someone manipulated enriched material or reproductive clinical specimen in a certified Class II biosafety cabinet.		

***Brucella* Laboratory Risk Assessment and Post-Exposure Prophylaxis (PEP): Low Risk**

Specimen handling	Exposure scenario	PEP	Follow-up/ monitoring
<p>Enriched material (e.g., a <i>Brucella</i> isolate, positive blood bottle) or reproductive clinical specimen (e.g., amniotic fluid, placental products)</p>	<p>Everyone present in the lab at a distance of > 5 feet from someone manipulating enriched material or reproductive clinical specimen, on an open bench, with no occurrence of aerosol-generating events (e.g., centrifuging without sealed carriers, vortexing, sonicating, spillage/splashes).</p>	<p>May consider if immunocompromised or pregnant.</p> <p>Discuss with health care provider (HCP).</p> <p>Note: RB51 is resistant to rifampin <i>in vitro</i>, and therefore this drug should not be used for PEP or treatment courses.</p>	<p>Regular symptom watch (e.g., weekly) and daily self-fever checks through 24 weeks after last known exposure.</p> <p>Sequential serological monitoring at 0 (baseline), 6, 12, 18, and 24 weeks after last known exposure.</p> <p>Note: no serological monitoring currently available for RB51 and <i>B. canis</i> exposures in humans.</p>

***Brucella* Laboratory Risk Assessment and Post-Exposure Prophylaxis (PEP): High Risk**

Specimen handling	Exposure scenario	PEP	Follow-up/ monitoring
<p>Routine clinical specimen (e.g., blood, serum, cerebrospinal fluid)</p>	<p>Person who manipulated a routine clinical specimen, resulting in contact with broken skin or mucous membranes, regardless of working in a certified Class II biosafety cabinet, with or without appropriate personal protective equipment (PPE) (i.e., gloves, gown, eye protection).</p>	<p>Doxycycline 100mg twice daily, and rifampin 600 mg once daily, for three weeks.</p> <p>For patients with contraindications to doxycycline or rifampin, consider TMP-SMZ in addition to another appropriate antimicrobial. Two antimicrobials effective against <i>Brucella</i> should be given.</p> <p>Pregnant women should consult their obstetrician.</p>	<p>Regular symptom watch (e.g., weekly) and daily self-fever checks through 24 weeks after last known exposure.</p>
<p>Enriched material (e.g., a <i>Brucella</i> isolate, positive blood bottle) or reproductive clinical specimen (e.g., amniotic fluid, placental products)</p>	<p>Person who manipulated or is ≤ 5 feet from someone manipulating enriched material or reproductive clinical specimen, outside of a certified Class II biosafety cabinet.</p>	<p>Pregnant women should consult their obstetrician.</p>	<p>Sequential serological monitoring at 0 (baseline), 6, 12, 18, and 24 weeks after last known exposure.</p>
	<p>Person who manipulated enriched material or reproductive clinical specimen, within a certified Class II biosafety cabinet, without appropriate personal protective equipment (PPE).</p>	<p>Pregnant women should consult their obstetrician.</p>	<p>Note: no serological monitoring currently available for RB51 and <i>B. canis</i> exposures in humans.</p>
	<p>Everyone present when aerosol-generating events occurred (e.g., centrifuging without sealed carriers, vortexing, sonicating, spillage/splashes) with manipulation of enriched material or reproductive clinical specimen on an open bench.</p>	<p>Note: RB51 is resistant to rifampin <i>in vitro</i>, and therefore this drug should not be used for PEP or treatment courses.</p>	