MAS MEDICAL STAFFING
PERM • TRAVEL • PER DIEM • HOME CARE

156 Harvey Road
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Call us toll free 800 657 6517

OCCUPATIONAL SAFETY & HEALTH: BLOODBORNE PATHOGENS

Standard Precautions

Standard Precautions, formerly referred to as Universal Precautions, refers to a concept of bloodborne disease control which requires that all human blood and certain human body fluids be treated as if known to be infectious for HIV, HBV, and other bloodborne pathogens. The employees of MAS will adopt and implement the use of Standard Precautions whenever handling any human blood or Other Potentially Infectious Material (OPIM).

In addition, it is important to note that this policy is intended to serve as a supplement to procedures already in place such as; routine hand washing and utilization of protective gloves to preclude exposure to blood or OPIM. Standard Precautions are intended to prevent parenteral, mucous membrane, and non-intact skin exposures of MAS employees to bloodborne pathogens by providing proper awareness training and protective equipment.

Exposure Incidents

An exposure incident is defined as skin, eye, mucous membrane, or parenteral contact with blood or OPIM that has resulted from the performance of the employee's duties.

In the event of an exposure incident, the affected employee must immediately seek medical attention. The employee's supervisor should be notified as soon as possible. An investigation will be conducted and recommendations will be made as to how to avoid future events.

Post Exposure Evaluation and Follow Up Procedures

In the event a employee is exposed to blood or OPIM, the following procedures will be followed:

- Employee will seek immediate medical attention at the acute care facility to which the employee is assigned. The employee will contact MAS supervisor as soon as possible for further direction.

Follow Up Examination

The employee will be sent to a local health care facililty where laboratory tests will be conducted by the laboratory at no cost to the employee. The follow up examination will include a confidential medical evaluation documenting the circumstances of exposure, identifying and testing the source individual if feasible, testing the exposed employee's blood if he/she consents, post-exposure prophylaxis, counseling and evaluation of reported illnesses.
The healthcare professional conducting the examination will be provided with specific information to facilitate the evaluation and their written opinion on the need for hepatitis B vaccination following the exposure. Information such as the employee's ability to receive the hepatitis B vaccine will be supplied to the employer. All diagnoses will remain confidential.

Hepatitis B Vaccinations

Hepatitis B Virus (HBV) causes an infection of the liver. Symptoms of HBV infection may range from none to flu-like symptoms, jaundice and serious illness. If symptoms do occur, they may not be evident until 2 to 6 months after the person is infected. Infection with HBV can lead to chronic diseases later in life, such as cirrhosis and liver cancer and

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death.

- Hepatitis B can be transmitted in many of the same ways as HIV - parenteral and mucous membrane exposures to infected body fluids. It can also be spread perinatally and through sexual intercourse.

  A few key points to remember:

- HBV can survive for up to 7 days outside of the host in dried blood.
- 140,000 - 320,000 people become infected with HBV every year in the United States.
- Between 6 and 10% of these people become carriers.
- 1.25 million people in the United States are chronic carriers.

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Personal Protective Equipment (PPE)

Personal Protective Equipment (PPE) will be utilized as a barrier between the employee and blood or OPIM. At a minimum, those employees identified as being at risk will always be wearing gloves provided by the facility to which the employee is assigned and safety glasses with side shields or goggles. The facility will provide, at no cost to the employee, PPE such as gloves and safety glasses/goggles. All of these safety items will be replaced as necessary to ensure an adequate supply is always on hand. The financial responsibility for repairing, replacing, cleaning, and disposing of PPE will be that of the facility to which the employee is assigned.

All contaminated sharps shall be disposed of in red sharps containers. These containers will be supplied by the client facility, which will regularly perform waste pick-ups. All disposal of sharps and other red bag waste will be coordinated through the policy developed by the facility to which the employee is assigned.

PPE Selection Procedures

Sterile surgical gloves will be provided whenever an employee must handle blood or OPIM contaminated material. All gloves used shall be thrown away in red bag receptacles immediately after use. These gloves will not be washed or disinfected for reuse. General purpose gloves (i.e. rubber household gloves) will be used for housekeeping chores involving the potential for contact with blood or OPIM. Hypoallergenic gloves, glove liners, powderless gloves or other similar alternatives will be provided for employees who are allergic to the gloves that are normally provided.

- Inspect disposable gloves frequently for holes, tears, or deterioration. Do not wash or re-use.
- Gloves should be changed and discarded as infectious waste after 60 minutes of continuous use; if punctured; or if the surface is deteriorated.
- For everyone's protection, do not wear protective equipment such as gloves, lab coats, and masks outside of the work area.
- Lab coats or any other materials that are soiled with blood or body fluids may not be taken home for laundering. Employees will not be permitted to take their protective equipment home and launder it. It is the responsibility of the employer to provide, launder, repair, replace, and dispose of personal protective equipment. All gloves should be examined prior to use for cuts, tears, or punctures.

To prevent exposure of mucous membranes of the mouth, nose and eyes, masks and protective eyewear (i.e. safety

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glasses or goggles) shall be worn for procedures that are likely to generate droplets or splashes of blood or OPIM.

Handwashing Procedures

- Hands and other skin surfaces must be washed immediately, and thoroughly, if contaminated with blood or other body fluid.
- Hands must also be washed immediately after gloves are removed.
- Use soap and water
- Lather 10-15 seconds
- Wash all surfaces
- Rinse with warm water
- Towel dry

Latex Allergy

Latex gloves have proved effective in preventing transmission of many infectious diseases. But for some workers, exposures to latex may result in allergic reactions. Reports of such reactions have increased in recent years.

Latex allergy is a reaction to certain proteins in latex rubber. The amount of latex exposure needed to produce sensitization or allergic reaction is unknown. Mild reactions may involve respiratory symptoms such as runny nose, sneezing, itchy eyes, scratchy throat, and asthma. Rarely, shock may occur; however, a life threatening reaction is seldom the first sign of latex allergy.

Tips on preventing latex allergy:

- Use non-latex gloves for activities that are not likely to involve contact with infectious materials (ex. routine housekeeping).
- If you choose latex gloves, use powder-free gloves with reduced protein content.
- Use appropriate work practices to reduce the chance of reactions to latex
- When wearing latex gloves, do not use oil-based creams or lotions.
- After removing latex gloves, wash hands with a mild soap and dry thoroughly.
- Practice good housekeeping: frequently clean areas and equipment contaminated with latex-containing dust

Preventing Needlesticks

Employees will take precautions to prevent injuries by needles, scalpels, and other sharp instruments or devices. To prevent needlestick injuries, contaminated needles shall not be recapped, purposely bent or broken by hand, removed from disposable syringes, or otherwise manipulated by hand.

After they are used, disposable syringes and needles, scalpel blades, and other sharp items shall be placed in the provided sharps containers.

When emptying trash receptacles the following procedures should be implemented to reduce needlesticks:

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- Tie the bag liners
- Lift bag from the top only
- Place full bag into appropriate receptacle
- Never reach into a receptacle to remove contents
- Never sort through bags of waste

If you are stuck by a needle or other sharp or get blood or other potentially infectious materials in your eyes, nose, mouth, or on broken skin, immediately flood the exposed area with water and clean any wound with soap and water or a skin disinfectant if available. Report this immediately to your employer and seek immediate medical attention.

Sharps Containers

Sharps Containers provided will be:

- Non-breakable
- Leak-proof
- Impervious to moisture
- Rigid
- Tightly lidded
- Puncture resistant
- Identified with biohazard symbol.

Each sharps container will be labeled with the universal biohazard symbol and the word "biohazard", or be red in color. Sharps containers shall be maintained upright throughout use, replaced routinely, and not be allowed to overfill when removing sharps containers from the area of use, the containers shall be:

- Closed immediately prior to removal or replacement to prevent spillage or protrusion of contents during handling, storage, transport, or shipping.
- Labeled or color-coded according to this policy.

Reusable containers shall not be opened, emptied, or cleaned manually or in any other manner which would expose employees to the risk of percutaneous injury.

Biohazard Labels

All areas which contain biohazards agents: refrigerators, sharps containers, storage areas must be labeled with a biohazard warning label. It must be red or orange in color with a biohazard symbol and lettering in black as illustrated below:

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Blood - Defined as human blood, human blood components, and products made from human blood.

Bloodborne Pathogens - Pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, Hepatitis B Virus (HBV), Hepatitis C Virus (HCV), and the Human Immunodeficiency Virus (HIV).

Contamination - Contamination refers to the presence or reasonably anticipated presence of blood or other potentially infectious materials on an item or surface.

Contaminated sharps - Any contaminated object that can penetrate the skin including, but not limited to needles, scalpels, broken glass, broken capillary tubes, and plasticware.

Decontamination - The use of physical or chemical means to remove, inactivate, or destroy bloodborne pathogens on a surface or item. As a result, the surface or item is no longer capable of transmitting infectious particles and the surface is rendered safe for handling, use or disposal.

Engineering Controls - Mechanical devices that isolate or remove the bloodborne pathogens hazard from the workplace. Includes sharps containers, shielding, or self-sheathing needles.

Occupational Exposure - Defined as "reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or OPIM that may result from the performance of the employee's duties."

Other Potentially Infectious Materials (OPIM) - Defined as the following human body fluids: saliva in dental procedures, semen, vaginal secretions, cerebrospinal, synovial, pleural, pericardial, peritoneal, and amniotic fluids; body fluids visibly contaminated with blood; along with all body fluids in situations where it is difficult or impossible to differentiate between body fluids; unfixed human tissues or organs (other than intact skin); HIV-containing cell or tissue cultures, organ cultures, and HIV- or HBV- containing culture media or other solutions; and blood, organs, or other tissues from experimental animals infected with HIV or HBV.

Parenteral - Piercing of mucous membranes or the skin through such events as: needlesticks, human bites, cuts, and

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abrasions.

Regulated Waste - refers to the following categories of waste which require special handling at a minimum; (1) liquid or semi-liquid blood or OPIM; (2) items contaminated with blood or OPIM and which would release these substances in a liquid or semi-liquid state if compressed; (3) items that are caked with dried blood or OPIM and are capable of releasing these materials during handling; (4) contaminated sharps; and (5) pathological and microbiological wastes containing blood or OPIM.

Seroconversion - The development of detectable specific antibodies in the serum as a result of infection or immunization.

Standard Precautions - An approach to infection control. According to the concept of Standard Precautions, all human blood and all human body fluids are treated as if infectious. Formerly referred to as Universal Precautions.

I have reviewed and understand the information provided above and will comply with all required OSHA standards.

Employee Signature: _____

Printed Name: _____

Date: _____