

MANAGING EXPOSURE TO HUMAN BLOOD/BODY FLUIDS (Bloodborne Pathogen Precautions)

PURPOSE

The information in this policy is particularly applicable to workers in non-health care situations where the possibility of contact with blood or certain body fluids is not expected (e.g. hand cut on a machine at work). However, even in these settings, awareness of basic precautions is important because it is possible to become infected with a single exposure incident.

BACKGROUND

Health and Safety authorities throughout the world agree that blood and certain other body fluids (B/BF) should be considered a hazard for the potential of bloodborne pathogen infection in directly exposed workers. "Bloodborne Pathogen Precautions" (formerly Universal Precautions) is the standard practice for preventing exposure to B/BF.

There are a number of bloodborne pathogens, of which Hepatitis B and C and HIV (AIDS) are the most important. Transmission occurs by direct contact with infected blood or certain other body fluids (e.g. semen, vaginal secretions, blood-tinged body cavity fluids, etc.). Exposure to feces, urine, vomitus, sputum, tears, nasal secretions are not considered risky unless visibly blood-tinged. For workplaces where workers are exposed to sharp objects (e.g. knives, saws, scissors, needles), procedure for safe handling and first aid are required.

WHAT IS A SIGNIFICANT EXPOSURE?

Significant exposure to blood or body fluids where there is risk of infection happens only in certain ways:

- Puncturing the skin with a sharp object coated with B/BF (e.g. needlestick, razor, broken glass, scissors, knife, etc.).
- Splashing blood onto mucous membrane (eyes, nose, mouth).
- Splashing blood onto non-intact skin (e.g. abrasion, eczema, other damaged skin).

REDUCING THE RISK OF INFECTION

Seven Oaks School Division, in consultation with the Safety and Health Committee, has developed and implemented this Bloodborne Pathogen Precaution Policy and Procedures appropriate to the workplace, incorporating the information contained herein.

SAFE WORK PRACTICES

PERSONAL PROTECTION

Handwashing

Handwashing is the most important aspect of infection control, regardless of the appropriate use of gloves. Hands must be washed thoroughly with soap and water after all direct contact with B/BF.

Gloves

Latex or vinyl gloves are to be worn:

- When handling any items soiled with B/BF.
- When there is direct contact with B/BF.
- When in contact with open wounds or sores.

Respiratory Protection

Disposable devices with a one-way valve mechanism should be available for mouth-to-mouth cardiopulmonary resuscitation (CPR). All first-aiders should carry this device with them at all times.

WORKPLACE CLEAN-UP PROCEDURES

Spills

Floor areas or benches which have been contaminated with B/BF should be promptly cleaned with absorbent disposable paper towelling which is then disposed into plastic bags. The area should then be cleaned with water and detergent followed by disinfecting, and allowed to air-dry. If mops have been used in the cleanup, they should be thoroughly washed in soap and water and dried before re-use.

Soiled Clothing

Clothing soiled with B/BF should be removed and laundered in the usual fashion.

Soiled Tools and Instruments

Tools, chisels, drill bits, etc. which come in contact with B/BF should be cleaned with paper towels, washed and decontaminated with an appropriate disinfectant.

Cleaning Products

Soap (and water) is the most common and most easily accessible cleaning product. For decontamination of aluminum or electronic equipment, use 70% isopropyl alcohol solution applied for 10 minutes.

Sharps Disposal Procedures

Safe pickup procedures to be practised. Do not place in regular garbage. Safe garbage handling procedures to be used.

What To Do When An Exposure Incident Occurs

1. Determine whether a ***significant exposure*** has occurred (see definition).
2. Get first aid immediately – flush thoroughly.
3. Report the incident to appropriate supervisors or occupational health personnel.
4. Seek medical attention immediately if a *significant exposure* occurred – preferably within 2 hours. Timely assessment is necessary for the initiation of preventative medication and/or vaccination. (Reference: the Manitoba Health “Integrated Post Exposure Protocol”)

NOTE:

- B/BF contact with intact skin is not considered to be a risk for the spread of bloodborne pathogens.
- Vaccination against Hepatitis B is highly recommended for workers at risk of exposure to B/BF in their usual duties.

Visit the MB Health website for more information at:

<http://www.gov.mb.ca/health/publichealth/index.html>