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Routine Practices for MANAGING EXPOSURE TO HUMAN BLOOD/BODY FLUIDS

(Bloodborne Pathogen Precautions)



PURPOSE

The information in this bulletin 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 <u>direct contact</u> with <u>infected</u> blood or certain other body fluids (e.g. semen, vaginal secretions, blood tinged body cavity fluids, etc.). Exposure to faeces, 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), procedures 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 <u>non-intact</u> skin (e.g. abrasion, eczema, other damaged skin).



To prevent exposure, develop a policy and procedure appropriate to the workplace.

REDUCING THE RISK OF INFECTION

The employer, in consultation with the joint health and safety committee, shall develop and implement a Bloodborne Pathogen Precaution policy and procedures appropriate to the workplace incorporating the information contained within this bulletin. This shall include the provision of necessary personal protective devices and education of all employees. Where exposure to B/BF is expected as <u>usual for the job</u> (e.g. Health Care Work) the plan must include exposure controls and for the minimization of specific risks and hazards.

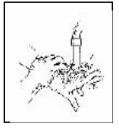
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SAFE WORK PRACTICES

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.



Illustrations courtesy the W.C.B. – B.C.

<u>Gloves</u>



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:

<u>Spills</u>

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 with household bleach, one part bleach to nine parts water (1:10 dilution), 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 into 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. A commonly used disinfectant is household bleach solution, one part bleach to nine parts water (1:10 dilution) prepared daily. 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 web site for more information at http://www.gov.mb.ca/health/publichealth/index.html