

Company Name

Orientation Packet

Infection Control

WHAT IS EXPOSURE?

Significant exposure to blood or body fluids is defined as:

1. Injury with a contaminated sharp object (e.g., needle sticks, scalpel cuts)
2. Spills or splashes of blood or body fluids into non-intact skin (e.g., cuts, hangnails, dermatitis, abrasions, chapped skin) or into a mucous membrane (i.e., mouth, nose, eyes)
3. Blood exposure covering a large area of apparently intact skin.

Here is a list of examples of exposures.

1. Getting blood or body fluids in cuts or in breaks in your skin, or in skin sores or on large areas of skin.
2. Getting blood or body fluids in your eyes, mouth, or nose.
3. Getting cut or stabbed with any needles or sharp instruments which were used on a patient.
4. Getting cut on the broken glass that was used to hold blood, body fluids, or human tissue (glass tubes, blood collection tubes, bottles, jars, etc.)

WHAT IS NOT EXPOSURE?

1. Handling food trays or furniture.
2. Handling assistive devices or wheelchairs with patients.
3. Using public bathrooms or telephones.
4. Personal contacts with patients such as shaking hands, giving information, touching intact skin as when bathing intact skin or giving a back rub.
5. Doing clerical or administrative duties for a patient.

UNIVERSAL PRECAUTIONS

1. You must wear gloves if you touch blood, body fluids, mucous membranes or human tissue of any patient. To touch a patient's skin that is broken or cut, wear gloves. Gloves must be worn when cleaning and debriding a surgical incision or open wound, while performing any EMG/NCV diagnostic testing procedure, or suctioning a patient. You must wear gloves when performing any vascular access procedures – such as venipuncture. You must wear gloves when touching any surface or object which is reasonably anticipated to be contaminated even if not visibly contaminated, such as the outside of patient specimens. Always change gloves when they are torn. Always change gloves after contact with each patient. Always remove contaminated gloves before touching clean items such as door knobs, light switches, etc. Always wash hands immediately after taking off gloves. Do not wash or disinfect surgical or examination gloves for reuse. Do not use non-intact or discolored gloves.
2. When mucous membranes (i.e., mouth, nose, or eyes) come in contact with blood or body fluids, you must flush (irrigate) them with large amounts of water. If you have blood or a body fluid splashed into a skin cut, skin puncture or skin lesion, first wash the area with soap and water for at least 10 seconds, then put 70% isopropyl alcohol on the area. You must report any exposure that occurs either as a part of your job or through an emergency outside the scope of your job to The Company as soon as possible. Follow the same procedures used for incident reporting.

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3. Do not eat, drink, apply cosmetics, lip balm or handle contact lenses in work areas where there is a potential for occupational exposure to blood or body fluid contaminated surfaces or objects.
4. Wear fluid resistant gowns or plastic aprons if soiling of clothes with blood or body fluids is likely.
5. You must wear a mask and eye protection or a face shield if spraying, splashing, or splatter to your face is possible. Minimal facial protection would consist of a surgical mask and eye glasses with solid side shields. Eyeglasses without solid side shields are never acceptable for the purpose of protection.
6. All personal protective equipment (gloves, masks, eye protection, and fluid resistant gowns or aprons) shall be removed immediately upon leaving the work area and placed in a designated container for washing or disposal. If contaminated, personal protection equipment should be removed immediately or as soon as feasible. If a pullover item is contaminated, remove it in a way that contamination of head or face does not occur. If this is not feasible, then pullover item should be cut off with scissors.
7. CPR masks are essential when performing mouth-to-mouth resuscitation, and are available at the clinic. Gloves, CPR masks, and proper hand washing are essential.
8. Handle anything sharp with care to prevent accidental cuts or punctures. Do not recap, bend or break used disposable needles. Discard all sharp items immediately by placing them in a puncture-resistant needle box or a puncture-resistant contaminated materials container (CMC). Broken glassware that may be contaminated shall not be picked up directly with the hands. Use a mechanical device such as brush and dustpan, tongs or forceps. Remove vacutainer needles only from clean vacutainer holders. Use the needle removal device to do this. Do not remove needles from visibly bloody vacutainer holders. Discard both holders and needles if they are visibly bloody. Needle boxes and CMCs should be closed when nearly full. They should never be allowed to become overfilled. They should also never be placed above eye level.
9. Clean blood or body fluid spills promptly. Wear gloves and use a freshly made dilution of one part chlorine bleach to 9 parts of water to clean a spill. Place paper towels over spill. Flood the spill area with bleach dilution. Leave on for 10 minutes. Discard the paper towels in a contaminated materials container.
10. All patient specimens may be contaminated on the outside of the container and must be handled with gloves. Place them inside plastic bags before sending them to a laboratory. Be careful not to contaminate the outside of the plastic bag by handling it with potentially contaminated gloves. If the container is enclosed in a clean dry plastic bag, gloves need not be used for handling the bag. Do not send soiled containers to a laboratory. Do not place food or drink in refrigerators, freezers, cabinets or other areas where any patient specimens are placed.
11. A provider should report to The Company if you have a draining skin cut or sore. You must report before you take care of patients or touch patient care equipment. If there is a question about a provider's ability to safely care for patients, they should be cleared through The Company. Cover any non-draining lesions with waterproof dressing before entering the home environment.

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12. Laundry visibly soiled with blood or body fluids must be handled with gloves. All laundry must be placed in a fluid proof bag. Do not place laundry in a red bag. If the outside of the bag is visibly soiled with blood or body fluids, the bag must be placed inside another bag. If personal clothing becomes contaminated with blood or other potentially infectious material, it cannot be taken home until it is laundered or disinfected.
13. To get rid of large quantities of blood or body fluids, carefully pour them down a toilet. The drain connects to a sewer system. If splash or splatter is likely, you must wear protection for your eyes and a mask or a face shield. You must also protect your cloths – wear a fluid resistant gown or apron. Place small, closed samples of blood in a puncture-resistant contaminated materials container. **DO NOT SQUIRT IT IN!**
14. **ANY MATERIALS OR ITEMS VISIBLY CONTAMINATED WITH BLOOD, BODY FLUIDS OR HUMAN TISSUE MUST BE PUT INTO A CONTAMINATED MATERIALS CONTAINER (CMC).** A CMC must be available at your work site if you work with contaminated materials.
15. The following policies and documents are available for your review at the office of The Company. A copy of any or all of the following policies or documents is available to you upon request.
 - a. Occupational Exposure Training Policy
 - b. Hepatitis B Vaccine for Employees Policy
 - c. Blood borne Pathogens Exposure Control Plan Policy
 - d. Provision of Personal Protective Equipment Policy
 - e. CPL 2-2.60 - "Exposure Control Plan for OSHA Personnel with Occupational Exposure to Blood borne Pathogens."
 - f. Federal Register, "Blood borne Pathogens Regulatory Text", OSHA Standard 1910.1030