

August 2021 Bloodborne Pathogens (BBP) Education: Narration script

Topics covered in this course

Welcome to the August 2021 bloodborne pathogens education online course! Narration is provided by selecting the play button for audio at the top of each section, but audio is not required to complete this education. A transcript of the narration can be accessed by selecting the linked document at the bottom of this section.

Important note about linked content

Please note that linked resources included in the content take you outside of the course. For desktop and laptop computers, use the Alt-Tab keyboard buttons (or command-Tab on Apple) to tab back to this course and continue after viewing the linked resource. For mobile devices, navigation can vary but typically there is a back button to return to the course. Also, for mobile devices the links to policies in the Novant Health Document Manager will not be available but are not required for the purposes of completing this education.

Before we review the course topics, let's review a few more navigation tips so that you have a great experience exploring the content pages. Navigation is easy! You will scroll down through each section until directed to continue to the next section. You may also use the table of contents to select a topic and track your progress. After you review all the topics, there is a post-quiz to complete at the end of the course.

Now, let's review the topics shared in this course - they include:

- Occupational Safety and Health Administration (OSHA) bloodborne pathogens (BBP) standard
- Novant Health Exposure and Control Plan
- Epidemiology, symptoms, and transmission of BBP disease
- Hepatitis B vaccine
- Engineering, work practice controls, and personal protective equipment (PPE)
- Housekeeping, laundry, signs, and labels
- Tasks that may lead to blood and bodily fluid exposure (BBFE)
- Post-exposure evaluation and follow-up

On the following page, we'll begin by reviewing OSHA standards regarding bloodborne pathogens.

Setting the standards

In order to protect team members against exposure to bloodborne pathogens, the Occupational Safety and Health Administration (OSHA) created specific regulations known as the Bloodborne Pathogen (BBP) Standard.

Novant Health's Exposure Control Plan

To comply with OSHA and the Bloodborne Pathogen Standard, Novant Health has a written exposure control plan (located on the I-Connect homepage under "Policies & procedures").

Key components of our Novant Health Exposure Control Plan:

- Standard Precautions AKA Universal Precautions.
- Standard Precautions are the minimum infection prevention practices that apply to all patient care, regardless of suspected or confirmed infection status of the patient, in any setting where healthcare is delivered.

BBP defined

Bloodborne pathogens (BBPs) are germs carried by blood, body fluids and other potentially infectious material (OPIM) that can cause disease.

OPIM can include:

- Semen and vaginal secretions, cerebrospinal fluid, synovial fluid, peritoneal fluid, pleural fluid, pericardial fluid, amniotic fluid, human tissue (living or dead), and saliva in dental procedures.
- Saliva, urine, feces, sweat, tears, respiratory/nasal secretions, vomitus and gastric fluids can NOT transmit HIV or Hepatitis UNLESS they contain visible blood.

Transmission routes

The following are transmission routes for bloodborne pathogens:

- Percutaneous injuries such as needle sticks and puncture wounds
- Tasks and other activities that could result in a splash or splatter of blood or OPIM into mucous membranes (inside of mouth, nose, or in the eyes)
- Non-intact skin

The most common BBP exposure in healthcare is a needle stick.

Common bloodborne pathogens

Select each disease listed below to see more details about the symptoms:

HIV is the virus that causes Acquired Immunodeficiency Syndrome (AIDS)

Symptoms include (but are not limited to):

- Flu-like symptoms
- Fever
- Diarrhea
- Fatigue
- Swollen lymph nodes
- Night sweats
- Unexplained weight loss

The Hepatitis B virus poses the greatest risk to healthcare workers after exposure. It may cause severe illness, liver damage, and death.

Symptoms Include (but are not limited to):

- Fatigue
- Jaundice
- Abnormal liver tests
- Nausea
- Abdominal pain
- Loss of appetite

Did you know that hepatitis B virus can live up to seven days at room temperature on an environmental surface in dried blood?

The Hepatitis C virus is recognized as a significant BBP risk to healthcare workers.

Symptoms include (but are not limited to):

- Anorexia
- Vague abdominal discomfort
- Nausea
- Vomiting
- Jaundice

Hepatitis B vaccination: Key points

- Cost - Protect yourself against hepatitis B by participating in the free vaccination program administered by Employee Occupational Health (EOH).
- Safety and efficacy - The hepatitis B vaccination is a non-infectious vaccine prepared from recombinant yeast cultures, rather than human blood or plasma. There is no risk of contamination from other bloodborne pathogens nor is there any chance of developing HBV from the vaccine.
- Method of administration - Hepatitis B vaccination is a series intramuscular injections.
- Benefit of vaccination - The majority of those vaccinated will develop immunity to the Hepatitis B virus.
- Availability - Every job category in Novant Health is offered the Hepatitis B vaccine. You can accept the vaccine at any time, even if you have declined this offer in the past.
- Declination - In the event you decline, a declination form must be completed.

Additional resources:

- Visit the OSHA website for the Fact Sheet.
- Contact the EOH team for more information.

Engineering and work practice controls

Engineering controls and work practices are designed to eliminate or reduce the risk of exposure to the lowest feasible extent by using a device or design that isolates or removes the bloodborne hazard or modifies the way a risky practice or procedure is performed.

Engineering controls (not all inclusive):

- Hand hygiene facilities (i.e. sinks)
- Sharps Safety devices:
 - Sharps containers – easily accessible and located close to the area of use
 - Needleless IV systems
 - Sheathed or retractable needles, non-breakable plastic vacuum and capillary tubes
- Biosafety cabinets/hoods used in the laboratory
- Regulated waste containers that are closeable, leak proof and identified with a biohazard label
- Transport containers:
 - Specimen transport bags
 - Biohazard labeled instrument containers with latches to prevent spills and splashes

Work practice controls (list not all inclusive):

- Perform hand hygiene as soon as possible after glove removal or contact with body fluids.
- Remove all personal protective equipment as soon as possible after leaving work area and placed in designated container for storage, decontamination or disposal.
- Safe handling and disposal of sharps in sharps containers appropriately:
 - Used needles and sharps shall not be sheared, bent, broken, recapped or re-sheathed by hand. If re-capping is unavoidable, use single handed technique or device designed for this purpose.
 - Use approved safety sharp devices and always activate the safety mechanism.
 - Change sharps containers as indicated by facility procedure, do not attempt to overfill containers.
 - Sharps should be passed off safely utilizing a "Neutral Zone" or other hands-free technique in surgical/procedural areas.
- Do not eat, drink, apply cosmetics, smoke, or handle contact lenses in work areas where blood exposure could occur.

Work restrictions:

Work restrictions are the limitations of job duties placed upon a team member due to a condition or injury. Team members with draining lesions, oozing rashes, or any condition which prevents them from washing their hands (e.g., casts, splints) are prohibited from all direct patient care and from handling patient care equipment until the condition resolves.

Personal protective equipment (PPE)

- PPE is special clothing or equipment worn by a team member for protection against a potential hazard.
- PPE is donned when:
 - exposure to blood/body fluids is anticipated based on task being performed.
 - engineering and work practice controls cannot eliminate the risk.
- PPE must be provided by the employer at no cost to the team member and available in appropriate sizes.
- PPE includes, but is not limited to: Gloves, gowns, face shields, masks, eye protection, and resuscitation bags.
- "Appropriate" PPE does not permit blood or OPIM (other potentially infectious material) to pass through to, or reach the team member's work clothes, street clothes, undergarments, skin, eyes, mouth, or mucous membranes under normal conditions and for the duration of its use.

PPE equipment specifics are provided under the tabs shown here for gloves, gowns, and face protection. Please select each tab to view details for each type of PPE.

Gloves are used when touching blood, body fluids (OPIM), mucous membranes, or non-intact skin.

Helpful tips for using gloves:

- For single use only
- Change gloves and perform hand hygiene if:
 - Gloves become damaged
 - Gloves become visibly soiled
 - Moving from soiled body site to clean body site
- Do not wash or dry

Remember!

Use gloves according to standard precautions when reasonably anticipated contact with blood or other potentially infectious materials, mucous membranes, non-intact skin, potentially contaminated skin or contaminated equipment could occur.

Gowns are used during procedures that may cause splashing or spraying of blood or body fluids (OPIM).

Helpful tips for using gowns:

All gowns are fluid resistant - be sure the gown is securely fastened at back of neck and waist.

- Gowns should fully cover torso, fit comfortably over the body & have long sleeves that fit snugly at the wrist.
- Use gowns if there is a potential for contamination to clothing from blood, body fluids or other potentially infectious materials.
- For single use only - discard disposable gowns in the trash can inside the patient's room.
- If your clothing becomes soiled with blood or body fluids, these items will be laundered by the facility.

Remember!

Use gowns during procedures or patient care that may cause splashing or spraying of blood or body fluids or contaminated.

Face protection is used during procedures that may cause splashing or spraying of blood or body fluids (OPIM).

Helpful tips for using face protection:

- Masks should fully cover nose & mouth
- Mask with shield or mask with goggles
- Personal glasses are NOT appropriate for eye protection and requires the use of additional equipment (goggles, face shield)

Remember!

Use face protection during procedures or patient care that may cause splashing or spraying of blood or body fluids.

Reuse of PPE

There are certain pieces of PPE that may be reused. Consider the following items regarding the reuse of PPE:

- These items must be cleaned and disinfected according to manufacturer recommendations.
- Check with your department leader on what is appropriate for reuse. Examples: goggles, utility gloves, etc.

PPE: Key points

Remember these key points about PPE:

- Keep PPE in all departments/units where exposure may occur.
- Remove PPE (immediately or as soon as possible) if it has been penetrated by blood or body substances.
- Remove all PPE prior to leaving the work area.
- Perform proper hand hygiene after removing PPE.

Shown on this page is an example of a PPE caddy on a patient door. The isolation precaution sign is placed on the caddy or door with instructions for appropriate PPE to be donned prior to entering the patient's room.

Safe handling and disposal tips:

Place in appropriate container for disposal for:

- Trash
- Biohazard container if saturated with blood or OPIM

The policy for Infectious or Regulated Medical Waste NH-EC-HZ-2702 is linked on this page.

OSHA housekeeping requirements

- Keep a clean and sanitary work environment to prevent contact with blood or OPIM.
- Follow the appropriate schedule for cleaning and methods of decontamination determined by the setting.
- All equipment, environmental and work surfaces are to be cleaned with an Environmental Protection Agency (EPA) approved disinfectant - follow the appropriate schedule for cleaning and methods of decontamination determined by the setting.
- Appropriate PPE will be worn when cleaning or disinfecting.
- For spill management, refer to policy for Infectious or Regulated Medical Waste NH-EC-HZ-2702.

Laundry

All used laundry is handled and treated as contaminated. This includes the following practices:

- Handle soiled linen as little as possible.
- Bag soiled linen at the site of use.
- Place wet contaminated laundry in leak-proof, labeled, or color-coded containers before transport.
- Wear appropriate PPE while handling soiled linen.
- Do not drag bagged soiled linen on the floor.

If a team member's uniform becomes contaminated with blood or OPIM during work, remove the clothing for laundering, replacement, or disposal according to the instructions in Appendix E in the BBP Exposure Control Plan.

Important reminder: Ensure sharps, patient belongings, and equipment are removed from linen prior to handling and bagging.

Hazard communication

The universal biohazard symbol is used to identify biohazardous materials. Team members should place biohazardous materials or OPIM in containers marked with the biohazard symbol.

Biohazard labels will:

- Be fluorescent orange or orange/red with lettering or symbols in a contrasting color.
- Contain the biohazard symbol or the word "Biohazard".

Important reminder - Regulated waste containers, refrigerators and freezers containing blood or OPIM, and all other containers used to store, transport or ship blood or OPIM shall be clearly labeled with the international biohazard symbol.

The Infectious or Regulated Medical Waste policy is linked on this page.

Exposure risk determination

Category type is assigned to the position:

- **Category I:** Task and/or activity that is reasonably anticipated to result in exposure to blood or OPIM.
- **Category II:** Task and/or activity that is NOT reasonably anticipated to result in exposure to blood or OPIM.

More details about category determination:

- Novant Health proactively informs all team members on the potential hazards of blood and body fluids through annual bloodborne pathogen training.
- All team members are entitled to evaluation following a potential blood & body fluid exposure.

Blood and body fluid exposure (BBFE)

Despite using appropriate engineering & workplace controls, an exposure may occur by:

- Needle stick, puncture, or cut.
- Fluids contacting the inside of the mouth/nose, in the eyes, or open wounds/broken skin.

Please carefully review the following details about the hospital and clinic/outpatient BBFE processes.

Hospital process

Steps to follow for a suspected exposure:

1. Immediately wash the affected area with soap and water. Or if eye splash, go the nearest eyewash station or sink and flush affected eye(s) with water for 5 minutes.
2. Notify your supervisor of the potential exposure.
3. Click on the “Blood Drop” tab in the lower right corner of the I-Connect homepage to start the reporting process and access BBFE resources.
4. Report exposure to Care Connections at 336-231-0933 BEFORE entering BBFE standing order set.
5. Draw SOURCE patient labs.
6. Enter iVOS/Ventiv injury report. This helps EOH ensure the team member’s BBFE is handled quickly and correctly.

Clinic & outpatient team members

Steps to follow for a suspected BBFEs:

1. Immediately wash the affected area with soap and water. If eye splash, go the nearest eyewash station or sink and flush affected eye(s) with water for 5 minutes.
2. Notify your immediate clinical supervisor of the potential BBFE.
3. Ask the SOURCE patient to remain at your clinic.
4. Click on the “Blood Drop” tab on the lower right corner of the I-Connect home page to start the reporting process and access BBFE resources.
5. Call Care Connections at 336-231-0933 to report the BBFE.

6. Enter and sign the BBFE smartset and print the lab slip.
7. Draw source patient labs to send to the closest Novant Health hospital lab or send source patient to the closest Novant Health outpatient registration department (if you cannot draw labs).
8. Enter iVOS/Ventiv injury report. This helps EOH ensure the team member's BBFE is handled quickly and correctly.

Things to remember

- Care Connections is ONLY for initial reporting of a suspected BBFE & notification of SOURCE patient rapid HIV results.
- Employee Occupational Health (EOH) is responsible for post-exposure management.
- Only call Care Connections ONCE per BBFE to avoid increased confusion.
- Exposure labs are processed by Novant Health hospital labs, not LabCorp.
- Clinic & outpatient team members: Do not let the SOURCE patient leave the clinic before determining if exposure labs are needed.
- A list of outlying clinics that cannot use the system-wide BBFE process can be found on the EOH main page in I-Connect.

I-Connect homepage blood drop tab & post-quiz

The Blood Drop tab is located in the lower right lower corner of the I-Connect homepage as shown in the image on this page. The blood drop tab links you to:

- BBFE Q&A handout for team members and non-Novant Health workers
- An interactive form guiding you through the BBFE reporting process
- EOH office contact information
- Injury reporting link

If you have any questions or concerns regarding bloodborne pathogen education, please call 704-533-1045.

Access the post-quiz to complete this education

You must score 80% on the following quiz to complete this education requirement. DO NOT skip any questions or the course will not complete. You may retake the quiz as many times as necessary to achieve a passing score. Please note that there is no narration on the quiz pages. When you are ready to begin, advance to the next page.

Course completion

Congratulations! You have completed your 2021 bloodborne pathogens education requirement. Your completion acknowledges that you will appropriately apply the information shared in this course in your job duties. If you have questions, please follow up with your leader.

Close the browser window displaying this course to move it to your completed transcript.