

November 2018 Bloodborne (BBP) Pathogens Education: Narration script

Title page:

Welcome to the November 2018 bloodborne pathogens education, we're glad you're here! If you have audio capability, you can listen to the narration, but audio is not required to complete this education. You may also print a copy of the narration by selecting the document icon at the bottom of this page. When you're ready to continue to the course overview, click the forward button in the lower left corner of the course window.

Course overview:

The following topics will be covered in this course:

- Transmission of bloodborne pathogens
- HIV
- Hepatitis B
- Hepatitis C
- OSHA compliance
- Exposure determination
- Facility-provided controls
- Work practice controls
- Personal protective equipment
- Hazard communication
- Inadvertent exposure
- Steps to follow for a suspected exposure

BBP defined:

Bloodborne pathogens (BBPs) are germs carried by blood and other body fluids and can cause disease in humans.

How is a BBP transmitted?:

The following are transmission routes for bloodborne pathogens:

- Puncture wounds/needle sticks
- Splash to mucous membranes or open areas of skin
- Sexual contact
- Mother to baby

The most common pathogens:

Let's review the most common bloodborne pathogens, which include:

- Human immunodeficiency virus (HIV)
- Hepatitis B virus (HBV)
- Hepatitis C virus (HCV)
- HIV is the virus that causes Acquired Immunodeficiency Syndrome (AIDS).

Symptoms include:

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

Hepatitis B virus:

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

Symptoms Include:

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

Hepatitis B vaccination protection!

What you need to know:

- Protect yourself against hepatitis B by participating in the free vaccination program
- You can accept the vaccine at any time, even if you have declined this offer in the past
- Contact employee occupational health (EOH) for more information

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

Hepatitis C virus:

This virus is recognized as a significant BBP risk to healthcare workers.

Symptoms Include:

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

OSHA compliance:

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

- Exposure determination
- Standard precautions
- Facility-provided controls
- Work practice controls
- Personal protective equipment
- Hazard communication
- Inadvertent exposures
- Immunizations

Exposure determinations:

Every job category in Novant Health is offered the Hepatitis B vaccine regardless of the team member's risk of exposure to bloodborne pathogens. These categories are:

- **Risk category 1** = risk of exposure to blood or body fluids
- **Risk category 2** = not at risk for exposure to blood or body fluid

Use standard precautions to reduce the spread of BBPs.

Important reminder!

Treat all blood and body fluids - not patients - as potentially infectious.

Facility-provided controls:

These controls isolate or remove the hazards bloodborne pathogens pose from the workplace.

Facility-provided controls include:

- Eye wash stations
- Hand hygiene facilities (i.e. sinks)
- Sharps containers – easily accessible and located close to the area of use
- Needleless IV systems
- Safety needles, syringes and vacutainers
- Specimen transport bags
- Splash guards
- Regulated waste containers that are closeable, leak proof and identified with a biohazard label

Work practice controls:

These controls are specific policies and procedures that team members follow to reduce their exposure to bloodborne pathogens.

Work practice controls include:

- Perform hand hygiene procedure after contact with blood or body substances
- Handle sharps carefully and dispose in sharps containers appropriately
- Do not re-cap needles - 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

Work practice controls (cont'd):

Carefully consider the following items:

- Minimize splashing or spraying of blood or body substances when performing procedures
- Follow procedures for routine cleaning and disinfection of the environment
- Handle soiled equipment in a way to protect you, your patients, and the environment from the spread of germs
- Clean, disinfect, or sterilize reusable equipment per manufacturer's guidelines between patients
- Do not store food or drink in areas where blood or body substances are present
- Do not eat, drink, apply cosmetics, smoke, or handle contact lenses in work areas where blood exposure could occur

Work practice controls (cont'd):

Important items to remember:

- Place specimens in appropriate containers during collecting, handling, processing, storing, transporting, and/or shipping (use appropriate biohazard labeling on these containers)
- Remove broken glass by mechanical means such as tongs, forceps, or dust pan and brush
- Do not reach into a container with bare hands

All soiled linens are considered contaminated:

- Handle soiled linen as little as possible
- Bag soiled linen at the site of use
- Place saturated linen into a leak proof bag

Personal protective equipment (PPE):

PPE is special clothing or equipment worn by a team member for protection against a potential hazard.

Examples:

- Gloves
- Gown
- Face protection

Use PPE when there is a potential for exposure to a BBP!

Remember these key points:

- 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 hand hygiene after removing PPE

Hazard communication:

The universal biohazard symbol is used to identify biohazardous materials.

Team members should place biohazardous materials or other potentially infectious materials (OPIM) in containers marked with the biohazard symbol.

Blood and body fluid exposure (BBFE):

A potential exposure may occur when a team member has contact with blood or other body fluids while working.

Exposure may occur by:

- Needle stick, puncture or cut
- Contact inside of mouth, inside of eyes, inside of nose
- Open wounds or broken skin

Important note: There will be a confidential medical evaluation after exposure.

Click the two checklist icons on this page to learn more about the BBP exposure steps followed by the Acute and Ambulatory care team members.

Acute care team members

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 immediate supervisor and or nursing supervisor and follow your location's process to report a BBFE exposure.
3. Print the 'Leader and Employee BBFE handouts' to determine if a true BBFE occurred.
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 so that labs are covered on the source patient under Workers Compensation.

Ambulatory care team members

Steps to follow for a suspected BBFEs:

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 immediate supervisor and or nursing supervisor and follow your location's process to report a BBFE exposure.
3. Ask the SOURCE patient to remain at your clinic.
4. Print the 'Leader and Employee BBFE handouts' to determine if a true BBFE occurred.
5. Call Care Connections at 336-231-0933.
6. Follow Care Connections instructions to draw SOURCE patient labs.
7. Enter iVOS/Ventiv injury report so that labs are covered on the source patient under Workers Compensation.

Blood and body fluid exposure (BBFE), *cont'd*:

Additional notes regarding BBFEs include:

- Only call Care Connections once per BBFE to avoid increased cost and confusion. Care Connections is only for reporting BBFE's and notification of source patient rapid HIV results. EOH is responsible for post-exposure management.
- Possible inadvertent exposures such as meningitis, pertussis, etc. are reported to Infection prevention.
- Bites, body fluid splashed on intact skin, or getting spit on rarely transmit HIV or Hepatitis.
- Source patient labs are the MOST important labs to draw in a BBFE.

Questions about the content?

If you have questions about this training module's content or BBP-related practices, please contact your supervisor. If your supervisor is not available, you can get assistance from the following Novant Health resources.

Please call:

- Infection prevention: 24 hours/7 days a week:
 - 336-813-4914 for on-call phone - Greater Winston-Salem Market
 - 980-395-4473 for on-call phone - Greater Charlotte Market

Employee occupational health (EOH):

- For BBFE resources and EOH contact info, click the blood drop tab on the far right of the I-Connect home page.
- Call Care Connections 24/7 at 336-231-0933 for assistance with BBFE exposures during or after business hours.

Congratulations, you have completed the content for this module. Also, this is the end of the narration. Thanks your participation in the November 2018 bloodborne pathogens education. Please click "forward" to access instructions for the post-test.