Bloodborne pathogens

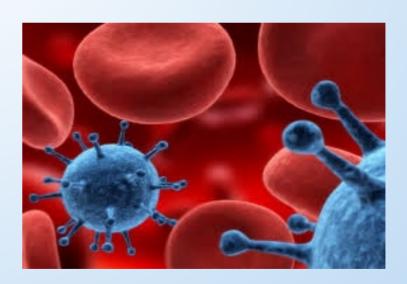


- Training and annual review are required by osha (29 cfr 1910.1030)
- Applies to all employees of any industries that may cause exposure to blood or other potentially infectious materials (opim)



• Viruses, bacteria and other such microorganisms that are present in human blood or secretions that can cause diseases in humans.

- Human immunodeficiency virus (hiv)
- Hepatitis b virus (hbv)
- Hepatitis c virus (hcv)





- Signs of illness may not be present for years
- Symptoms: flu like illness, weakness, diarrhea, weight loss
- Devastates the body's immune system
- The virus which causes AIDS
- ~1.1 million persons living with HIV/AIDS in U.S.; 39,782 new cases in 2015
- AIDS is chronic and fatal

Hepatitis B (HBV)

- Survives in dried blood for up to 1 week at room temperature
- 14,847 new infections each year, 2016;
- Attacks the liver
- Symptoms: fatigue, nausea, vomiting, abdominal pain, anorexia
- Can be chronic and fatal



Hepatitis C (HCV)

- Can lead to chronic hepatitis, cirrhosis and liver cancer
- Can be chronic and fatal
- No effective vaccine exists



- Any bodily fluid that cannot be identified
- Human bodily fluids such as: Semen, vaginal secretions, lung fluid
- BLOOD
- Any bodily fluid containing visible blood



- Puncture wounds caused by sharp objects
- Infectious materials contacting open wounds, cuts, or broken or damaged skin
- Infectious materials contacting mucous membranes of eyes, nose and mouth





Possible Exposure Incidents

- During an accident
- While administering
 First Aid
- During post-accident clean-up
- When performing routine maintenance or janitorial work





Exposure Control Plan

- Universal precautions
 - Treat all human blood and bodily fluids as if they are infected with HIV, HBV, HCV and other blood-borne pathogens.
- Work practice controls
 HANDWASHING, PERSONAL PROTECTIVE EQUIpment, SPILL CLEAN UP, LAUNDRY, Waste disposal
- Post-exposure follow-up



- First line of defense
- Limitations
- Rules:
 - Remove before leaving work area
 - Wash hands after removing
 - Properly dispose of contaminated PPE





First-Aid Response

- Adopt Universal Precautions
- Encourage self-care
- Use PPE
- Avoid applying pressure without barrier



Housekeeping: Spill Clean-up

- Use PPE & Universal Precautions
- Cover spill or area with paper towel or rags
- Pour disinfectant solution over towels or rags
- Leave for at least 10 minutes
- Place materials in appropriate container
- Arrange for pick-up and disposal



- Laundry soiled with blood or OPIM
- Use PPE
- Handle as little as possible
- Pre-soak all contaminated clothing
- If blood or OPIM gets on clothing, remove and thoroughly wash with detergent ASAP





- Contact with skin: wash exposed areas with antibacterial soap and running water
- Contact with eyes or mucous membranes: flush affected area with running water for at least 15 minutes
- Contact with clothing: remove contaminated clothing, wash underlying skin
- Report exposure to supervisor immediately



Post-Exposure Evaluation

- Confidential medical evaluation and follow-up after exposure incident
 - Identify and document source and circumstances of exposure
 - Test source individual's blood for HIV/HBV
 - Provide blood sample
- Healthcare professional's written opinion

