

Appendix C: Bloodborne Pathogens Overview

As an observer of clinical care, there is an inherent risk of exposure to blood and other potentially infectious materials (OPIM). The information in this document provides an overview of bloodborne pathogens (BBPs), how to prevent exposure, and actions to take in the event of exposure. Please sign the back of this form attesting that you have read and understand this information.

OVERVIEW

Bloodborne pathogens can be transmitted when infectious blood or OPIM is introduced into the bloodstream of a person. Transmission of bloodborne pathogens in the workplace can occur through the following routes of transmission:

- Needle sticks/sharps injuries
- Splashes to the mucous membranes (eyes, nose, and mouth) or to non-intact skin.

There are several diseases that are caused by bloodborne pathogens. A few BBPs are fairly common and present a risk to you if you come in direct contact with other potentially infectious materials (OPIM) such as human blood and certain body fluids. The three that are most common are **HIV, Hepatitis B, and Hepatitis C**. There are no vaccines for HIV or Hepatitis C but there is a vaccine for Hepatitis B. This is a series of 3 shots that is given at the initial clinic visit, a month later, and then 6 months later.

HOW TO PREVENT EXPOSURE TO BLOODBORNE PATHOGENS

1. Practice good hand hygiene.
2. Wear Personal Protective Equipment (PPE) as directed by the patient's condition. This may include gloves, goggles, and face shields.
3. Consider all patients and body fluids/blood to be infectious.
4. Remove PPE before leaving the work area.
5. Dispose of all contaminated items into approved medical/infectious waste containers.
6. Dispose of all sharps into an approved sharps container.
7. Needles shall never be recapped, broken, or sheared off.
8. If you have broken glassware, it shall be swept up and placed into a sharps container. Do not directly pick it up with your hands.

9. Unless gloves or other non-sharp items are capable of releasing liquid or dried blood when compressed, they can be disposed of in standard trash containers. When in doubt, dispose of in red trash bags.
10. If you are working in an area where there is a risk of exposure, you should never eat, drink, handle contact lenses, or apply makeup in that area.
11. Food and drink must be stored in separate areas from where blood and body fluids are present. This includes refrigerators.

WHAT TO DO IN THE EVENT OF EXPOSURE

1. Wash the exposed site.
2. Call the 24-hour hot line **5-STIX** (410-955-7849).
3. Inform your sponsoring clinician/designee.
4. **If recommended by your sponsoring clinician/designee**, initiate Post-Exposure Prophylaxis (PEP) for possible HIV exposure **within 1 - 2 hours after exposure** for optimum efficacy.
5. Complete an incident report and report to the injury clinic (Blalock 139).

SIGNATURE

By signing below, I assert that I have read the Bloodborne Pathogen Overview for Student Observers and understand the risks associated with being an observer of clinical care in a hospital setting. I agree to take the recommended precautions to prevent contact with bloodborne pathogens and will follow the hospital's protocol in the event of exposure.

Name of Student Observer: _____

Signature: _____ Date: _____

Name of Sponsoring Clinician: _____

Department: _____