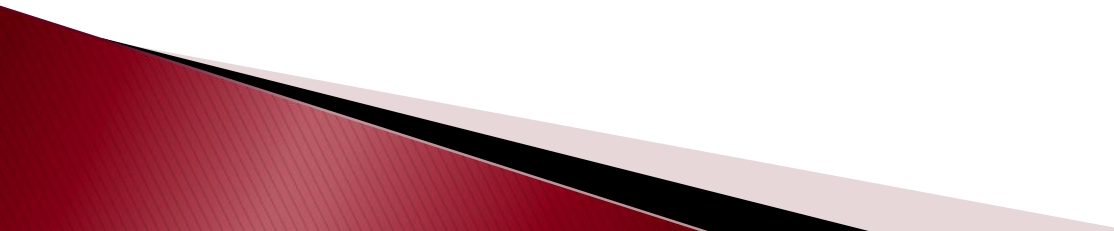


Springfield Public Schools



Bloodborne Pathogens Training

What's in it for me?

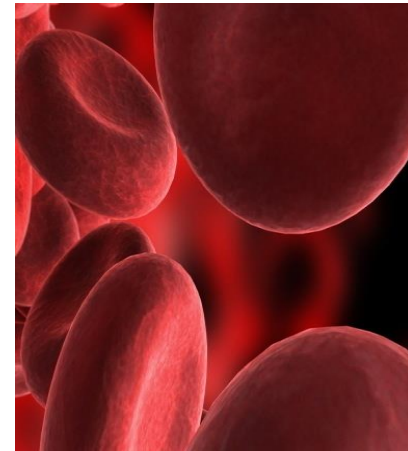
- ▶ Review the potential hazard of exposure to blood and other potentially infectious materials (OPIMs).
 - ▶ Review safe work practices to prevent occupational exposure
 - ▶ Review procedures for post-exposure incidents
 - ▶ Satisfy OSHA requirement for annual training of affected employees
- 

Definition of Bloodborne Pathogen

- ▶ Pathogenic microorganism
- ▶ Causing or capable of causing disease in humans
- ▶ Can be present in human blood

Most common BBPs are:

- Hepatitis B
- Hepatitis C
- HIV



Infectious Body Fluids

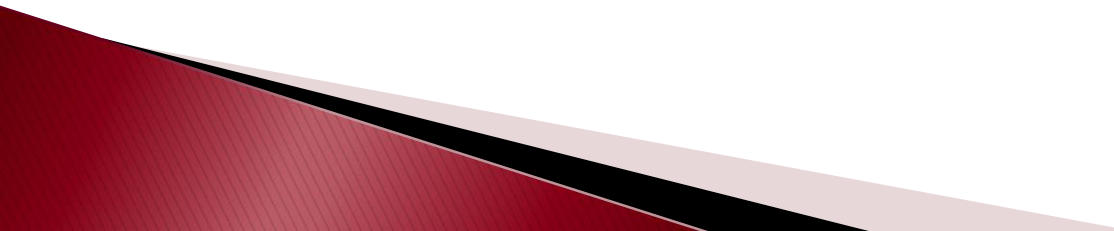
- Blood
- Other Potentially Infectious Materials (OPIMs)
 - Semen
 - Vaginal Secretions
 - Cerebrospinal Fluid
 - Pleural Fluid (or Lung Fluid)
 - Synovial Fluid (or Fluid from Your Joints)
 - Amniotic Fluid (or Uterine Fluid)
 - Peritoneal Fluid (or Fluid that fills your body cavity)
 - Saliva in Dental Procedures
 - Any Body Fluid that is Visibly Contaminated with Blood

BBPs Are NOT Spread By...

- Urine
- Feces
- Vomit
- Saliva
- Nasal Secretions
- Air
- Food
- Water

....Unless Visibly Contaminated with Blood!!!

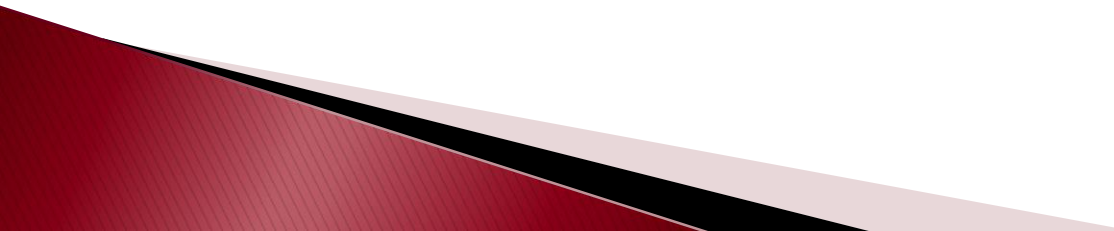
Purpose of OSHA Standard

- To reduce or eliminate occupational exposure to blood and other potentially infectious materials (OPIMs) which could cause disease or death.
 - Designed to protect 5.6 million workers in healthcare and related occupations.
- 

Who Does it Cover?

- ▶ All employees for whom exposure can be “reasonably anticipated” as part of their normal job duties
- ▶ Health care occupation primary focus
- ▶ Your employer is responsible for evaluating potential for exposure
- ▶ Excludes Good Samaritan activities (i.e. teacher breaking up a fight)

BBP Program Requirements

- ▶ Evaluation of employee job descriptions
 - ▶ Develop Exposure Control written plan
 - ▶ Practice Universal Precautions
 - ▶ Hepatitis B vaccinations and titers
 - ▶ Post exposure procedures
 - ▶ Personal protective equipment
 - ▶ Training
 - ▶ Annual review
 - ▶ Recordkeeping
- 

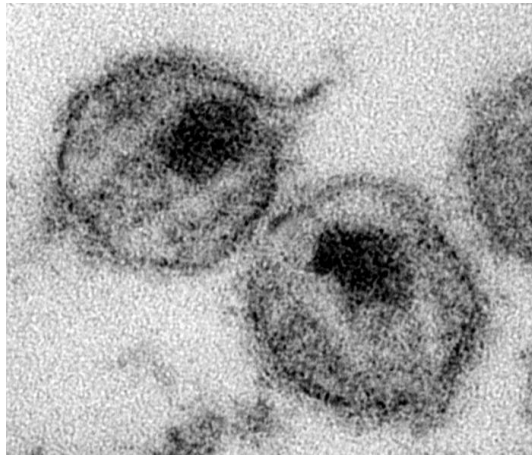
Exposure Control Written Plan

- A written plan in which potential exposures are listed along with appropriate responses
- The plan is available through the school nurse (Phyllis Affeldt) or through the Exposure Control Officer (Mr. Kottke)
- Accessible to all employees & OSHA
- Reviewed/updated annually



Human Immunodeficiency Virus

- ▶ Virus that causes A.I.D.S
- ▶ Attacks immune system
- ▶ Not vaccine preventable
- ▶ Virus is killed easily outside the body



From the Public Health Image
Library – Center for Disease
Control and Prevention

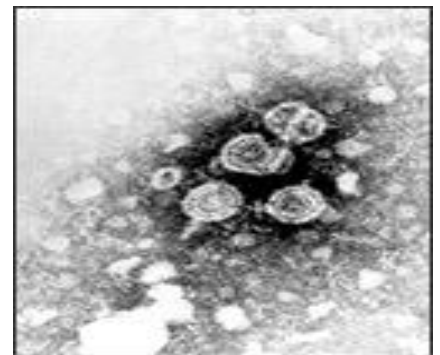
Symptoms of HIV

- ▶ Weakness / Fatigue
- ▶ Fever
- ▶ Sore throat
- ▶ Nausea
- ▶ Headaches
- ▶ Swollen lymph glands
- ▶ **Sometimes no immediate symptoms**

Hepatitis B Virus (HBV)

- ▶ Attacks liver
- ▶ 90% of infected adults are ACUTE carriers (i.e. will eventually get rid of the disease)
- ▶ Death occurs in 15–25% of chronically infected people
- ▶ Virus can survive for 7–14 days outside the body (need proper disinfectant!!!)
- ▶ Vaccine preventable

From the Public Health Image
Library – Center for Disease
Control and Prevention



Symptoms of Hepatitis B

- ▶ Fatigue
- ▶ Possible stomach pain
- ▶ Loss of appetite
- ▶ Nausea
- Jaundice
- Darkened urine
- **Sometimes asymptomatic (~30%)**

Hepatitis C (HCV)

- ▶ Attacks liver
- ▶ No vaccine
- ▶ 80% of infected people are chronic carriers
- ▶ 50–55% develop chronic liver disease
- ▶ Treatment with interferon but has side effects

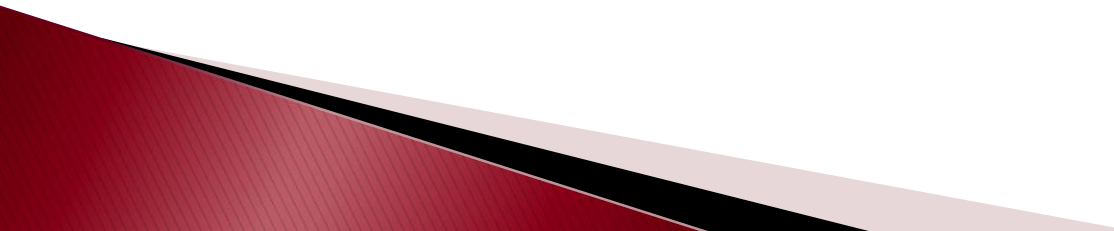
Symptoms of Hepatitis C

- ▶ Fatigue
- ▶ Joint pain
- ▶ Belly pain
- ▶ Itchy skin
- ▶ Sore muscles
- ▶ Dark urine
- ▶ 80% of carriers are asymptomatic and may be for 20–30 years

Modes of Transmission

- ▶ Sexual contact
- ▶ Exposure to another person's blood
 - Contaminated needle sharing
 - Blood contact with non-intact skin
 - Blood contact with mucous membranes (i.e. eyes, nose, mouth)
 - Blood transfusions
- ▶ Infected mother to child

Common Occupational Transmissions

- Needle–sticks (80% mostly in healthcare field)
 - Contaminated sharps /glass /ceramics
 - Mucous membranes (eyes, nose, mouth)
 - Non–intact skin that is exposed to
- 

Methods of protection

Universal Precautions

- Treat ALL blood/body fluids as potentially infectious!!!
- Avoid skin exposure to blood and OPIM
- Use an impervious barrier to keep fluids from contacting skin (e.g. gloves)
- Dispose of sharps in a puncture resistant container
- Dispose of soiled items in leak –proof bags/containers
- Wash Hands for 20 seconds with friction/soap/water
- Contact custodian to clean/disinfect blood spill ASAP!

Vaccinations

▶ HIV

- There is NO vaccine for HIV. Some treatments can improve length of life dramatically.

▶ Hepatitis B Virus

- The HBV vaccination is administered in a series of 3 injections
 - Given at 0, 1, and 4–6 month intervals
 - Effective in 95% of people who complete series of all three shots
 - Series may continue if exceeded interval (i.e. do not have to start over even if 1st shot was 2 years ago)

▶ Hepatitis C Virus

- There is NO vaccine. Treatment is only effective in 40% of cases.

Engineering Controls

- Sharps containers
 - Closable, leak proof, puncture resistant
 - Used for disposal of used needles and other contaminated sharp objects (e.g. broken glass)
 - Located in school health offices
- Self-Sheathing Needles
 - Avoid having to re-cap needles!



Personal Protective Equipment

Possible PPE needed for protection from Bloodborne Pathogens:

-
- Smock/aprons
- Eye protection
- Paper face masks
- CPR masks
- Face shields
- Booties



Personal Protective Equipment (PPE)

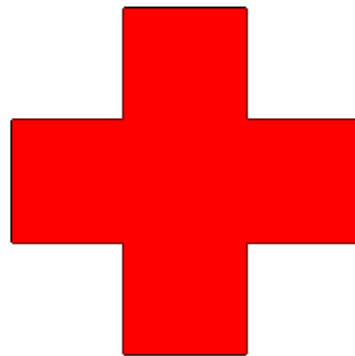
Gloves shall be worn when it can be reasonably anticipated that you may:

- Have hand contact with blood or other OPIMs
 - contact with mucous membranes
 - contact with non-intact skin
 - Handle or touch blood/OPIM contaminated items or surfaces

Need Additional PPE? Contact Your Supervisor!

First Aid Procedures

- ▶ Assess the situation – call nurse for assistance or send injured to health office
- ▶ Use personal protective equipment
- ▶ Instruct injured person on self-care
- ▶ Wash hands
- ▶ Report incident to your supervisor



Cleaning Procedures

- ▶ Custodial staff is primarily responsible for cleaning up Blood and Bodily Fluids:
 - Use gloves
 - Use disposable towels to absorb spill
 - Pre-clean spill area with soap and water
 - Apply disinfectant and let sit wet for required kill time (see label)
 - Dispose of waste in proper waste container

Disinfectants

- 1:10 Bleach-Water Solution (made fresh daily)
- High level commercial germicides
 - Products effective against HBV and HIV are approved by EPA
 - Follow label instructions
 - Personal Protective Equipment
 - Disposal
 - Kill time

Make Sure You Have a Proper Disinfectant!

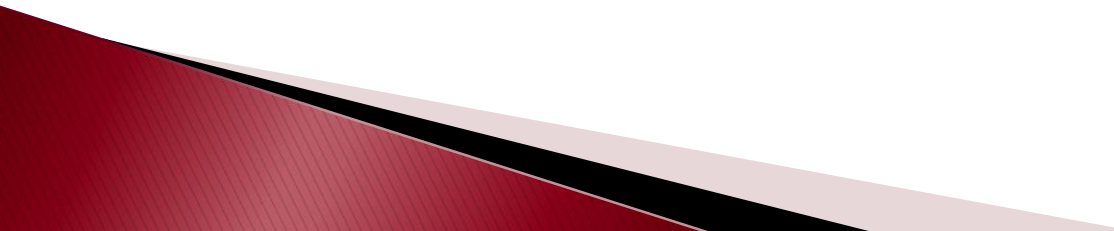
Infectious Waste

- Materials used to clean up blood spills (e.g. absorbent material, gloves) typically can go in general trash as long as they are bagged separately first
- Contaminated sharp objects (e.g. used needles and broken glass) should always go in sharps container
- Red biohazard bags require special disposal procedures. Use only if absorbent material is:
 - Saturated or dripping with blood
 - Pourable (avoid blood pooling in bottom of waste container)



Post-exposure procedures

Post-Exposure Procedures

1. Wash exposed area immediately (15 minutes)
 2. Report incident to supervisor & school nurse
 3. Document exposure incident
 4. Proceed to local health care provider for exam and follow-up testing
- 

Recordkeeping

Springfield Public Schools is required to keep the following BBP-Related Records:

- ***Medical***
 - duration of employment + 30 years
(confidential)
- ***Training***
 - 3 years
- ***Exposure Incident***
 - duration of employment + 30 years
(confidential)

Quiz Time

To finish this training, you must click on the link below and complete a short quiz.

[CLICK HERE](#)

Thank you for your attention!

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