



VERA Z. DWYER COLLEGE OF HEALTH SCIENCES

INDIANA UNIVERSITY SOUTH BEND

Bloodborne Pathogen Policy 7.30.B

About This Policy:

Effective Date: 02-24-2017

Approval Dates: Previously recorded as Policy C-5

Scope

This policy applies to all members of the university community on each campus of Indiana University.

Policy Statement

The purpose of this policy is to outline the IUSB Vera Z. Dwyer College of Health Sciences (IUSB-CHS)* guidelines for Bloodborne Pathogen Annual In-service Training and Education on Bloodborne Pathogens.

Procedure

Almost any transmittable infection may occur in the community at large or within healthcare organizations and can affect both healthcare personnel and patients. The Centers for Disease Control and Prevention (CDC) has periodically issued and updated recommendations for the prevention of transmission of bloodborne pathogens in healthcare settings which provide detailed information and guidance. In 1991, Occupational Safety and Health Administration published a bloodborne pathogen standard that was based on the concept of standard precautions to prevent occupation exposure to bloodborne pathogens (U.S. Department of Labor, 1991).

The use of standard precautions (which incorporates universal precautions), including appropriate hand washing and barrier precautions, will reduce contact with blood and body fluids. Currently the CDC (198) recommends that all healthcare personnel, including but not limited to physicians, nurses, technicians, therapists, pharmacists, nursing assistants, laboratory personnel, dental personnel, and students in all of these disciplines, complete an annual in-service training and education on infection control appropriate and specific for their work assignments, so that

personnel can maintain accurate and up-to-date knowledge about the essential elements of infection control.

The following topics should be included:

1. Hand washing.
2. Modes of transmission of infection and importance of complying with standard and transmission- based precautions.
3. Importance of reporting certain illnesses or conditions (whether work-related or acquired outside the healthcare facility), such as generalized rash or skin lesions that are vesicular, pustular, or weeping; jaundice; illnesses that do not resolve within a designated period (e.g., cough which persists for 2 weeks, gastrointestinal illness, or febrile illness with fever of 103 F lasting 2 days), and hospitalizations resulting from febrile or other contagious diseases.
4. Tuberculosis control.
5. Importance of complying with standard precautions and reporting exposure to blood and body fluids to prevent transmission of bloodborne pathogens.
6. Importance of cooperating with infection control personnel during outbreak investigations.
7. Importance of personnel screening and immunization programs.

To remain in compliance with the CDC recommendations, the CHS will conduct annual in-service training and education sessions for all students who enroll in courses requiring a clinical experience.

Centers for Disease Control and Prevention. (1998). Guideline for infection control in healthcare personnel, 1998. American Journal of Infection Control, 26, 289-354.

U.S. Department of Labor, Occupational Safety and Health Administration. (1991). Occupational exposure to bloodborne pathogens: final rule. Federal Register, 56, 64004-182.

http://www.cdc.gov/ncidod/dhqp/wrkrProtect_bp.html

*This policy applies to Health Science majors at the point of internship or community course specific.