

INFECTION CONTROL & BLOOD BORNE PATHOGENS

Infection Control

Illnesses are caused by germs entering the body. There are many ways a germ can enter the body. If we understand the ways germs enter the body, we can better protect ourselves from becoming ill. Some common ways that germs enter the body are through the skin, breathing in air that has germs in it, drinking or eating food with germs in it, or sexual contact with someone infected by a disease. Another major way that germs enter the body is by touching a surface with germs on it, and then the germs can enter our bodies when we touch our eyes, nose, or mouth.

Now that we know some common ways germs enter the body, we can help protect ourselves with the following:

Hand Washing

- Good hand washing is the **best way** to protect yourself and your client from bacteria or viruses that may be transmitted from one person to another. When washing your hands, use running water and a non-abrasive soap. Dry them with a paper towel or clean towel. Be sure to wash your hands before and after client care, before eating or food preparation, and after using the restroom or handling soiled objects.

Cover Your Mouth

- Cover your mouth with a tissue or your hand when coughing or sneezing. Make sure that you wash your hands after or you can spread the germs by touching something such as a door knob, then someone else can touch the same door knob and “catch” your cold.

Disinfect Surfaces

- Clean commonly used surfaces frequently, such as counter tops, door knobs, hand rails, faucets, and phones.

Blood Borne Pathogens

Blood Borne Pathogens are germs that live in the blood and can cause illness. They can be passed to another person who comes in contact with the infected person’s blood or certain body fluids. Examples of blood borne pathogens include human immunodeficiency virus (HIV) and hepatitis B virus (HBV). HIV is the virus that becomes AIDS. HBV is a virus that causes liver failure. There are other diseases as well that can be spread by contact with an infected person’s blood and certain body fluids.

Universal Precautions

“Universal precautions,” as defined by the CDC, are a set of guidelines to prevent transmission of HIV, HBV, and other blood borne pathogens when providing first aid or health care. Under universal precautions, blood and certain body fluids of **all** patients are considered potentially infectious for HIV, HBV and other blood borne pathogens.

Universal precautions were developed in the 1980’s as a way to protect health care workers and others from diseases such as HIV and HBV among others. Obviously, if you know a patient has an infectious disease, you would be more careful in dealing with potentially contaminated materials. However, some patients may have a blood borne disease and not be diagnosed or have any symptoms yet. You can not tell if someone is infected by one of these diseases by

simply looking at them. As a result, the CDC recommends treating everyone the same, as though **everyone** has infectious fluids.

Universal precautions apply to blood, semen, vaginal secretions and other body fluids containing visible blood. Universal precautions also apply to tissues and to the following fluids: cerebrospinal (brain and spine), synovial (joint), pleural (lung), peritoneal (abdominal), pericardial (heart), and amniotic (uterus) fluids. Universal precautions do not apply to feces, nasal secretions, sputum (secretions coughed up from the lungs), saliva, sweat, tears, urine, and vomit **unless** they contain visible blood. Universal precautions should be used when blood or potentially infectious body fluid exposure may be predicted such shaving with a razor blade or doing pericare on a client.

Universal precautions involve the use of protective barriers such as gloves, gowns, aprons, masks, or protective eye wear, which can reduce the risk of exposure of the health care worker's skin or mucous membrane to potentially infective materials. In addition, under universal precautions, it is recommended that all health care workers take precautions to prevent injuries caused by needles, scalpels, and other sharp instruments.

Protective Barriers

All health care workers should routinely use appropriate barrier precautions to prevent skin and mucous membrane exposure during contact with any patient's blood or body fluids that require universal precautions.

Gloves should be worn:

- for touching blood and body fluids requiring universal precautions, mucous membranes, or non-intact skin of all clients;
- for handling items or surfaces soiled with blood or body fluids; and
- for washing the groin area of clients.

Gloves should be changed and thrown away after contact with each client. They should not be re-used under **any** circumstances. Hands should be washed **immediately** -- as soon as client safety allows-- after gloves are removed. If you don't have access to running water, you may use a waterless antiseptic hand cleaner. It is highly recommended that gloves be worn for any of the above conditions. If gloves are not in the home, and the clients care requires it, we will provide them for you at your request. Generally speaking, gloves will be the only barrier used in the home setting when caring for clients.

Other protective barriers recommended by universal precautions include:

- Masks and protective eyewear or face shield worn by health care workers to prevent exposure of mucous membranes of the mouth, nose, and eyes during procedures that are likely to generate droplets of blood or other body fluids requiring universal precautions, such as dental work.
- Gowns or aprons worn during procedures that are likely to generate splashes of blood or body fluids, such as surgery.

Disposal of Contaminated Material

In providing care to clients you will need to know what to do with waste materials. Caring for clients in the home setting is different than in institutions such as hospitals and nursing homes.

- In the home setting, any materials contaminated with blood or other body fluids requiring universal precautions should be placed in a plastic bag and placed outside in the general trash as soon as possible.
- Any bedding or incontinent pads that require laundering should be washed separately from other laundry.

- PCA's should not handle client needles. You may bring the sharps container to the client if needed and set it beside them. It is **not** a good idea to hold the container while they are putting the needle in. If you must handle a needle, be very careful. **Do not** attempt to recap needles.
- Any needles and syringes used by your client should be immediately placed in a commercially made "sharps" container or a bottle made of heavy plastic, or a coffee can. It should be labeled "sharps" or "medical waste" to alert the local disposal company. Check with local recycling authorities to see where the container can be taken for proper disposal. **Do not** put the "sharps" container in the general garbage unless instructed to by local authorities.

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