

Appendix**Universal Precautions and Infection Control**

In response to the increase in Hepatitis B, C, and human immunodeficiency virus (HIV) infections, the Centers for Disease Control have recommended "universal blood and body fluid precautions." These measures are intended to prevent transmission of these and other infections, as well as to decrease the risk of exposure for care providers and students. As it is currently not possible to identify all infected individuals, these precautions must be used with every student, regardless of their medical diagnosis.

Universal precautions pertain to blood and body fluids containing blood, cerebrospinal fluid, synovial fluid, vaginal secretions, semen, and pericardial fluid. These precautions do not apply to other body products such as saliva, sputum, feces, tears, nasal secretions, vomitus and urine unless blood is visible in the material. However, these other fluids and body wastes can be sources of other infections and should be handled as if they are infectious.

The single most important step in preventing exposure to and transmission of any infection is anticipating potential contact with infectious materials in routine as well as emergency situations. Based on the type of possible contact, the caregiver should be prepared to use the appropriate precautions and techniques prior to providing care. Diligent and proper hand washing, the use of barriers, appropriate disposal of waste products and needles, and proper decontamination of spills are essential techniques of infection control. Using common sense in the application of these measures will enhance protection of both the caregiver and the student.

Hand Washing (Non-Emergency Procedures)

Proper hand washing is crucial to preventing the spread of infection. Textured jewelry on the hands or wrists (such as rings with stones) should be removed prior to washing and kept off until completion of the care procedure and hands are rewashed. Use of running water, lathering with soap and using friction to clean all surfaces of remaining jewelry and hands is key. Rinse well with running water and dry hands with paper towels. If soap and water are unavailable, wet towelettes or "handi-wipes" may be used for initial cleaning prior to thorough hand washing.

- Hands shall be washed before physical contact with student and after the contact is completed.
- Hands shall be washed after contact with any equipment exposed to body fluids.
- If hands (or other skin) become soiled with blood or body fluids, they shall be washed immediately before touching anything else.
- Hands shall be washed whether gloves are worn or not and after gloves are removed.

Barriers

Barriers include disposable gloves, protective eyewear, masks and gowns (appropriate to task). The use of a barrier is intended to reduce the risk of contact with blood and body fluids for the caregiver as well as to control the spread of infectious agents from student to student. It is essential that appropriate barriers be used when contact with potentially infectious materials is possible.

Gloves shall be worn when direct care may involve contact with blood or body fluids. For infection control, it is recommended that gloves be worn as well for contact with urine, feces and respiratory secretions. Single use gloves shall be disposed of after each use.

- Gloves shall be worn when changing a diaper or catheterizing a student.
- Gloves shall be worn when changing dressings or sanitary napkins.
- Gloves shall be worn when providing mouth, nose, tracheal or gastric care.
- Gloves shall be worn if the caregiver has broken skin on the hands (even around the nails).
- Gloves appropriate to task shall be worn when cleaning up spills of blood (e.g., nosebleeds) or body fluids and wastes, and soiled supplies.

Gowns or aprons may be worn to protect the caregiver's clothing if spattering of body fluids is possible. The apron or gown shall be laundered or disposed of after each care session. Disposable items that have become contaminated shall not be reused. In addition, protective eyewear and masks shall be worn if splashing of body fluids is likely to occur (such as in suctioning).

Waterproof barriers shall be used to cover any work surfaces if drainage or splashing with blood or body fluids is possible. The barrier shall be disposed of after each care session.

In the event CPR is needed, a disposable mask with a one-way valve should be used. If this is unavailable, gauze or some other porous material should be placed over the mouth and mouth-to-mouth resuscitation given.

Disposal of Waste

Except for syringes, needles and other sharp implements, all used or contaminated supplies (including gloves and other barriers) shall be placed in a biohazard bag and sealed. Needles, syringes and other sharp objects shall be placed in a metal or other puncture proof container immediately after use. To reduce the risk of an accidental needle stick or cut, needles shall not be recapped, bent or removed from the syringe before disposal. The container shall be sealed prior to disposal. Both types of contaminated waste shall be disposed of according to local or state regulations for medical waste.

Large volumes of body wastes such as urine, vomitus or feces should be disposed of in the toilet. Body waste contained or absorbed into non-flushable materials such as paper towels shall be double bagged prior to disposal.

Clean-Up

Spills of blood and body fluids that are covered under universal precautions should be cleaned up immediately. The CDC method is as follows:

- Wear gloves appropriate to task (latex, vinyl or heavy utility).
- Clean up the spill with paper towels or other absorbent material.
- Thoroughly clean the area using an approved sanitizing solution such as solution of one part household bleach (sodium hypochlorite) in ten parts of water.
- Dispose of gloves, soiled towels and other waste in a sealed biohazard bag as outlined above.

Routine environmental clean up of facilities (such as the health room and bathrooms) does not require any modification unless contamination with blood or body fluids covered under universal precautions should occur. If so, the area shall be decontaminated using the procedure outlined above. Regular cleaning of non-contaminated surfaces such as toilet seats and tabletops can be done with a standard cleaning solution.

Laundry

Contaminated items such as sheets, towels, or clothing should be handled as little as possible and washed with hot water and detergent and machine dried. Cool water washing is also acceptable if an appropriate detergent is used for the water temperature.

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