**Student Bloodborne Pathogens Policy**

This policy has been developed regarding responsibilities for adherence to the Centers for Disease Control (CDC) and Occupational Safety and Health Administration (OSHA) guidelines for prevention of transmission of bloodborne pathogens. This policy recognizes individual rights, confidentiality of test results and health records for students. The policies and procedures outlined here are to protect students, staff, faculty and patients from the spread of disease and to maintain a safe learning and work environment.

Minnesota West Community and Technical College (MWCTC) respects the rights of individuals with communicable diseases. The college will not discriminate against any person on the basis of disability as defined by the Americans with Disabilities Act, including individuals with communicable diseases. Individuals with communicable diseases will not be excluded from participating in the programs, services and activities of the college unless their participation creates a substantial risk to the health and safety of other individuals which cannot be eliminated by reasonable accommodation and the use of standard precautions.

MWCTC respects the privacy rights of individuals with communicable diseases. The college will comply with the Minnesota Data Practices Act and the Family and Education Records Protection Act in maintaining records containing sensitive health information pertaining to students or employees and will not disclose health data in violation of these laws.

**Education**

Before engaging in activities where there is a potential risk for exposure to blood or body fluids, all students in the healthcare fields will be educated about bloodborne pathogens and recommendations for safe practice. The Administration/Faculty of Minnesota West Community and Technical College are responsible for disseminating information about bloodborne pathogens and their transmission to their students. The curriculum must reflect content related to bloodborne pathogens and the practice of standard precautions.

**Bloodborne Pathogens Education will be provided as follows:**

<table>
<thead>
<tr>
<th>PROGRAM</th>
<th>COURSE</th>
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<tbody>
<tr>
<td>Practical Nursing</td>
<td>NURS 1120 Nursing Care of the Adult I</td>
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<tr>
<td></td>
<td>NURS 1140 Nursing Skills Lab</td>
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<tr>
<td></td>
<td>NURS 1180 Clinical Application</td>
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<tr>
<td>Associate Science Nursing</td>
<td>NURS 2140 Professional Nursing Skills</td>
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<td></td>
<td>NURS 2180 Clinical Application</td>
</tr>
<tr>
<td>Medical Laboratory Technician</td>
<td>MDLT 1100 Introduction to Lab Science</td>
</tr>
<tr>
<td>Medical Assistant</td>
<td>MDLT 1100 Introduction to Lab Science</td>
</tr>
<tr>
<td>Dental Assisting</td>
<td>DEN 1130 Preclinical Dental Assisting</td>
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<tr>
<td>Surgical Technology</td>
<td>SURG 1110 Surgical Microbiology</td>
</tr>
<tr>
<td>Radiology Technology</td>
<td>RADT 1100 Introduction to Rad Tech and Patient Care</td>
</tr>
<tr>
<td>Massage Therapy</td>
<td>MSTH 1100 Introduction to Massage</td>
</tr>
<tr>
<td>Emergency Medical Services</td>
<td>All EMS courses</td>
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</tbody>
</table>

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Students may be participating in activities within courses that have potential for exposure to infectious diseases. All measures must be exercised to minimize risk. Students who fail to adhere to the Blood Borne Pathogens Policy pose a risk to themselves and others and may be withdrawn from the program.

Definitions:

Bloodborne Pathogens: Pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to Hepatitis B Virus (HBV), Hepatitis C Virus (HCV), and Human Immunodeficiency Virus (HIV).

Contaminated: The presence of blood or other potentially infectious materials on an item or surface.

Engineering Controls: Controls that isolate or remove the bloodborne pathogens hazard from the environment. Examples of environmental controls include sharps disposal containers, self-sheathing needles, and needleless systems.

Exposure: Skin, eye, mucous membrane, non-intact skin, or other parenteral contact with blood or other potentially infectious materials. Exposure may occur because of a percutaneous injury, or contact with mucous membranes or non-intact skin.

Other Potentially Infectious Materials: Blood as well as cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, semen, and vaginal fluids are considered to be contaminated. Standard precautions do not apply to feces, emesis, urine, nasal secretions, sputum, sweat, or tears unless they are visibly contaminated with blood.

Personal Protective Equipment (PPE): Specialized clothing or equipment worn for protection against a hazard. General work clothes (uniforms) are not considered PPE.

Post-Exposure Prophylaxis: Drug and/or immunization interventions administered to help prevent acquiring a blood-borne infection.

Standard Precautions: This is an approach that treats blood and certain body fluids. These are a set of precautions designed to prevent transmission of bloodborne pathogens. They involve the use of appropriate hand washing combined with the use of appropriate protective barriers, such as gloves, gowns, masks, protective goggles or face shields, which can reduce the risk of exposure of the health care worker’s skin or mucous membranes to potentially infective materials. Standard precautions also include the concept whereby health care workers take all necessary precautions to prevent injuries caused by sharp instruments or devices.

Standard Precautions:

Minnesota West Community and Technical College requires use of standard precautions in healthcare programs. Education is provided to students by faculty in classes where there is an anticipated potential for exposure. (See information about education above).

Engineering Controls:

These include sharps disposal containers, needleless systems, self-sheathing needles, and other mechanical devices. Annual review of appropriate engineering controls will be performed by instructors teaching in programs utilizing engineering controls.

Hand washing:

Hand washing is the single most effective method to prevent the transmission of infection. Various hand washing agents, plain or antimicrobial and alcohol based hand sanitizers are available in campus labs and clinical sites. Students, faculty and staff should follow the recommendations published by the CDC for hand washing.

http://www.cdc.gov/handhygiene/

A. Hands should be washed with soap and water when hands are visibly dirty, contaminated with blood or body fluids, contaminated with protein-based substances, and at the beginning of the clinical or lab experience.

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B. The preferred method of hand hygiene is with an alcohol based hand sanitizer when hands are not visibly dirty.

Hand hygiene should be performed at the following times:

- Before direct contact with all patients
- Before donning gloves
- After removing gloves
- After contact with patient intact skin
- After contact with blood, body fluids, excretions, mucous membranes, non-intact skin, or wound dressings
- During patient care, if hands are moving from a contaminated body site to a clean body site
- After personal contact such as nose blowing, sneezing, or using the bathroom
- Before preparing or eating food
- After touching the patients surroundings

Food and drink may not be stored in refrigerators, freezers, shelves, cabinets, or on countertops where blood or other potentially infectious materials are present. Eating, drinking, applying cosmetics, handling contact lenses is prohibited in work areas where there is reasonable likelihood of occupational exposure.

Personal Protective Equipment (PPE):

Students must use appropriate PPE whenever there is risk of occupational exposure. Gloves must be worn whenever the student expects to have hand contact with blood or other potentially contaminated surfaces. Gloves must be changed between patients and hands must be washed before applying and after removing gloves.

Masks and eye protection devices with various types of shields must be worn during activities that could generate aerosols, splashes or splatters to protect the mucous membranes of the nose, mouth, and eyes. The protection provided by any mask is compromised if it does not fit well, because a poor fit may allow splatter to enter around the edges of the mask. Adjust it so that it fits snugly against the face. Keep beard and mustache groomed so that the mask fits well and can be worn effectively. Change the mask between patients or if the mask gets wet. Remove the mask as soon as treatment is over. Don’t leave it dangling around your neck or leave the room with a mask on. When removing a mask, handle it only by the elastic or cloth tie strings. Never touch the mask itself.

Protective eyewear may include goggles, safety glasses with side shields, or regular glasses with solid side shields. Protective body clothing that is fluid resistant must be worn during activities that could generate aerosols, splashes, or splatters.

Laundry—Student clothing or uniforms that have become contaminated with blood or body fluids must be transported in a tied fluid resistant bag and laundered separately in hot water. Handle contaminated clothing as little as possible. It is the responsibility of the student to take their contaminated laundry home.

Housekeeping:

Student should contact both instructor and facility staff member prior to cleaning contaminated areas. Contaminated work surfaces must be decontaminated with an appropriate disinfectant after completion of procedures. Students must wear gloves when cleaning contaminated surfaces. Students must use mechanical means to pick up broken glassware that may be contaminated. Broken contaminated glassware must never be picked up by hand, even if gloves are worn.

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Regulated Waste:

Liquid, semi-liquid blood items that are caked with dried blood (or other potentially infectious materials capable of being released during handling) should be placed in appropriate containers. Containers must be closable, able to fully contain all contents, and prevent leakage of fluids during handling, storage, and transport. They must be labeled with a biohazard label and/or color-coded red. All regulated waste is disposed of according to applicable local, state, and federal laws.

Hepatitis B vaccination:

Students are required to receive the Hepatitis B vaccination series. The expense of the vaccination is the student’s responsibility. If a student is not medically eligible to receive the Hepatitis B vaccination series, they must sign a Hepatitis B waiver form (see appendix). Refusal to receive Hepatitis B vaccination may limit clinical opportunities or placement in a clinical site.

Procedure Following an Occupational Exposure to Blood/Body Fluid

Student Exposure/Injury:

1. Remove all soiled clothing.
2. Wash wounds and skin with soap and water. Flush mucous membranes copiously with water for at least 15 minutes.
3. **Immediately** report the exposure to your supervising instructor after cleansing the area.
4. Follow up consultation will be required. This may involve treatment at an emergency department or public health department for an evaluation.
5. If the clinical institution has an established protocol, follow their protocol.
6. Fill out Student Report of Blood/Body Fluid Exposure and give to your supervising instructor.
7. Expenses as a result of this exposure are the student’s responsibility, not the responsibility of MWCTC. (Note: Expenses may also include laboratory testing of patient’s blood.)

Supervising Instructor responsibilities when student is exposed or injured:

1. Have student prepare a Student Report of Blood/Body Fluid Exposure
2. Give the report to the Administrative Secretary.
3. Inform the student of the importance of getting medical care.
4. Inform the student that they will be responsible for all expenses incurred.
5. Follow-up with the student in one week.

Record Keeping:

A confidential medical record is maintained for each student with occupational exposure. The medical record includes:

- Student name
- Exposure incident report
- Form refusing Hepatitis B vaccination (if applicable)
- Form refusing post exposure evaluation and follow-up (if applicable)

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Additional information may be accessed at the following websites:


http://www.osha.gov/Publications/osha3186.pdf

http://www.health.state.mn.us/divs/idepc/dtopics/bloodborne/hcp.html

References

Centers for Disease Control and Prevention (2012). Workplace safety and health topics

Retrieved from http://www.cdc.gov/niosh/topics/bbp/genres.html

Minnesota Department of Health (2012). Information about bloodborne pathogens for health professionals. Retrieved from

http://www.health.state.mn.us/divs/idepc/dtopics/bloodborne/hcp.html

Occupational Safety and Health Administration (2012). Model plans and programs for the OSHA bloodborne pathogens and hazard communications standard. Retrieved from

http://www.osha.gov/Publications/osha3186.pdf
MINNESOTA WEST COMMUNITY AND TECHNICAL COLLEGE
STUDENT REPORT OF BLOOD/BODY FLUID EXPOSURE

Name: __________________________________________
Address: _______________________________________
Phone: ________________________________________

Date of Birth ________________________________
Date of Injury: ________________________________ Time: ____________________
Date of Report: ________________________________ Time: ____________________
Facility where incident occurred: ____________________________________________

Describe the incident in detail: (Attach extra sheets if needed)

Was the affected area washed/flushed?

Describe where the incident occurred. (pt. room, lab, hallway)

What potentially infectious materials were involved in the incident? (Type, blood, wound drainage, etc.)

What were the circumstances that contributed to the incident?

List the Personal Protective Equipment that was being used at the time of the incident.

Did you receive any follow up care after the incident? Describe the care that you received. (Wash and bandage wound, went to ER, received prophylactic medications, etc.).

Student Signature_______________________________________Date__________________

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