Purpose and Scope

• This procedure is to ensure adequate protection for University of Notre Dame employees, faculty and staff against exposure to bloodborne pathogens.

• This procedure applies to all University of Notre Dame employees whose work involves the reasonably anticipated exposure to blood or other potentially infectious materials (OPIMs).
Training Requirements

• All employees in a job classification with reasonably anticipated occupational exposure to blood or OPIMs shall participate in training initially, and at least annually thereafter.

• Employees shall also participate in training covering lab-specific procedures.

• Training records shall be maintained for 3 years from the date on which training occurred.
University Personnel Responsibilities

• All University employees, faculty and staff listed in the Exposure Control Plan shall:
  – Adhere to this procedure;
  – Follow safe work practices;
  – Comply with personal protective equipment requirements;
  – Participate in required training.
Control Methods

• Universal precautions shall be observed to prevent contact with blood or OPIMs – meaning all body fluids shall be considered potentially infectious materials.
Engineering Control Methods

• Engineering controls shall be used in preference to other control methods to eliminate or minimize anticipated exposures.

• Examples:
  – Sharps disposable containers,
  – Self-sheathing needles,
  – Appropriate pipetting devices, and
  – Tools
Work Practice Control Methods

• Hands shall be washed thoroughly with soap and water as soon as possible after contact with body fluids or OPIMs, including immediately after removing protective gloves or other personal protective equipment.

• Contaminated needles and other sharps shall not be sheared, bent, broken, recapped, or resheathed by hand.
Work Practice Control Methods

- Eating, drinking, smoking, and applying cosmetics, hand lotion or lip balm, or handling contact lenses are prohibited in areas where blood and OPIMs are handled or stored.
- Food and drink shall not be stored in refrigerators, freezers, shelves, cabinets, or on countertops or bench tops where blood or OPIMs are handled or stored.
- All equipment and work surfaces contaminated with blood or OPIMs shall be cleaned and disinfected.
Personal Protective Equipment (PPE)

- PPE shall be chosen based on the anticipated exposure and is appropriate only if it does not permit blood or OPIMs to pass through or reach the employees' clothing, skin, eyes, mouth, or other mucous membranes.

- Surgical face masks in combination with eye protection devices (goggles or glasses with solid side shields) or chin-length face shields, shall be worn whenever splashes, spray, spatter, or droplets of blood or OPIM may be generated and eye, nose, or mouth contamination can be reasonably anticipated.
Housekeeping

- Work areas shall be maintained in a clean and sanitary condition.
- Contaminated work surfaces shall be decontaminated with an appropriate disinfectant (such as Lysol and bleach disinfectant of 1:10 dilution) after completion of procedures.
- Specimens of potentially infectious materials shall be placed in a closable, leak-proof container that is labeled with a Biohazard label or otherwise identified as required in this procedure.
- If transporting biohazard samples between labs or buildings, a secondary leak-proof container shall be used.
Infectious Waste

• All infectious wastes requiring handling, collecting and disposal shall be disposed of in accordance with the University of Notre Dame’s Safe Handling, Collecting and Disposal of Infectious Waste policy as well as applicable federal, state and local regulations.
Infectious Waste

• Immediately after use, sharps and other regulated waste shall be discarded and placed in closable, puncture-resistant, and leak-proof containers that are appropriately labeled.

• Secondary containers shall be used if leakage is possible and shall be biohazard labeled, sealed and constructed to contain all contents and prevent leakage.
Infectious Waste

- Contaminated laundry shall be placed in appropriately labeled bags or containers at the location where it was used and shall not be sorted or rinsed in the location of use.

- Whenever contaminated laundry is wet and presents a reasonable likelihood of soak-through or leakage from the bag or container, it shall be placed and transported in bags or containers which prevent soak-through and/or leakage of fluids to the exterior.
Infectious Waste

• Contaminated lab coats and clothing shall not be taken home to launder.

• Employees who have contact with contaminated laundry shall wear protective gloves and other appropriate personal protective equipment.

• Contaminated laundry shall be handled as little as possible with a minimum of agitation.
Labels and Signage

• Warning labels shall be affixed to containers of regulated waste, refrigerators and freezers containing blood or OPIMs; and other containers used to store, transport or ship blood or OPIMs.

• Labels shall include the word "Biohazard" and be predominantly florescent orange or orange-red with lettering and symbols. Some infectious waste labels may be white with a red symbol.
Labels and Signage

• Regulated waste that has been decontaminated does not need to be labeled or color-coded.

• If waste is autoclaved, it shall be double bagged in a dark colored bag and labeled “Safe For Trash Disposal”.

Hepatitis B Vaccinations (HBV)

- The vaccination shall be offered after initial employee training and within 10 days of assignment to all employees identified in the exposure determination.
- The vaccination shall be made available at no cost and at a reasonable time and place.
- The vaccination shall be performed by or under the supervision of a licensed physician at the University of Notre Dame Wellness Center.
- Employees refusing the vaccination shall sign the Hepatitis B Vaccine Declination
Post Exposure Follow-Up

• All exposure incidents are to be reported, investigated, and documented.

• All employees who incur an exposure incident shall be offered confidential, post-exposure medical evaluation and follow-up conducted at the Wellness Center.

• The evaluating physician shall provide the employee with a copy of a written evaluation within 15 days of the completion of the evaluation.
Sharps Injury Log

• A Sharps Injury Log shall be completed to record percutaneous injuries where the needle or other sharp device is contaminated with another individual’s blood or other potentially infectious material.

• The Sharps Injury Log shall be completed by the supervisor and forwarded to Risk Management & Safety.