

# **Safety Training (Clinical)**

## Introduction

This training is for staff and Licensed Independent Practitioners on the Environment of Care and Safety Programs at Stanford Hospital and Clinics and Lucile Packard Children's Hospital. This course reviews the topics of Environment of Care & Safety Program, emergency preparedness, and infection control.

Environment of Care Program consists of six sections. Each of these sections is monitored and maintained to ensure safety at SHC and LPCH.



## Course Topics

This course contains 12 topics:

- Topic 1: General Safety
- Topic 2: Fire Safety
- Topic 3: Electrical Safety
- Topic 4: Radiation Safety
- Topic 5: Ergonomics
- Topic 6: Slips, Trips & Falls
- Topic 7: Latex Allergy
- Topic 8: Hazard Communication
- Topic 9: Security & Workplace Violence
- Topic 10: Reporting Incidents
- Topic 11: Emergency Preparedness
- Topic 12: Infection Control

## Topic 1. General Safety

### Five Categories



Healthcare facilities have many potential hazards. **OSHA** (Occupational Safety and Health Administration) separates these hazards into five general categories:

- Biological
- Chemical
- Psychological
- Physical
- Environmental/Mechanical

# Topic 1. General Safety

## Hazard and Safeguards

As explained in the table below, take appropriate measures to:

- Eliminate as many of these hazards as possible
- Safeguard against exposure to the hazards that cannot be eliminated

Hazard Category	Definition	Examples	Safeguards
Biological	Pathogens	HIV, VRE, MRSA, HBV, HCV, TB	Infection-control measures
Chemical	Toxic or irritating materials	Detergents, solvents, disinfectants, sterilizing agents, waste anesthetic gases, hazardous drugs, mercury	Engineering controls, work-practice controls, appropriate personal protective equipment (PPE)
Psychological	Factors that create or increase emotional stress or strain	Working with terminally ill patients, patient deaths, overwork, understaffing, tight schedules, equipment malfunctions	Stress management, relaxation exercises, meditation
Physical	Agents with the ability to cause physical harm	Radiation, lasers, noise, electricity and electrical equipment, extreme temperatures	Various, depending on the hazard
Environmental & mechanical	Factors that cause or increase the risk of accident, injury, strain, or discomfort	Lifting and moving patients, tripping hazards, poor air quality, slippery floors, cluttered or obstructed work areas or passageways	Maintenance of a safe work environment, prompt reporting of hazardous conditions



## Topic 2. Fire Safety

### Fire Prevention

Prevention is the best defense against fire.

To help prevent fires related to causes of electrical malfunction:

- Remove damaged or faulty equipment from service
- Submit malfunctioning equipment for repair

To help prevent fires related to causes of equipment misuse:

- Do not use any piece of equipment that you have not been trained to use



SHC and LPCH are **100% smoke-free environments**. The smoking ban applies to areas bounded by Welch Rd, Quarry Rd and campus Dr West.

Contact Occupational Health Services for options to help you quit smoking.

All staff is responsible for helping enforce our **Smoke Free** policy. If you see smokers on campus, remind them of our policy and hand them one of our "No Smoking" business card. These are available for order via ProdigyPress.

## Topic 2. Fire Safety

### Safeguards in the Event of Fire

Even with the best efforts at prevention, fires sometimes occur. Therefore, your facility is equipped with fire safety features. These features include:

- Fire alarm systems
- Fire extinguishers
- Emergency exit routes and doors
- Smoke and fire doors and partitions
- Fire plan

Be familiar with the location, use and operation of each of these features.



## Topic 2. Fire Safety

### Response - RACER/PASS

In an emergency, respond using the **RACER/PASS** Protocol.



**R**  
Rescue  
patients in  
immediate  
danger



**A**  
Active (Pull)  
fire alarm  
and Call  
211/9-911



**C**  
Contain  
smoke &  
fire - close  
doors



**E**  
Extinguish  
fire if trained  
(and fire is  
trash can  
sized) -  
**PASS:**  
- Pull the pin  
- Aim at the  
base of the fire  
- Squeeze the  
trigger  
- Sweep side to  
side in a slow  
motion



**R**  
Ready to  
Evacuate  
(Hospital) /  
Relocate  
(Off-site  
locations  
must  
evacuate  
upon alarm)



## Topic 2. Fire Safety

### Fire Drills

We are required to conduct regular, unannounced fire drills (once per shift per quarter). When you hear the fire alarm in your facility, you may not know if it is a drill or a true fire. Treat the alarm (Code Red) as if it were a true emergency.

- Close doors
- Clear hallways
- Man fire extinguishers
- Notify patients and visitors of our procedure in event of alarm (hospital - shelter in place; off-site - evacuate)
- Observers are posted and will be grading staff response and competency (the results are reported to leadership; failed drills require staff re-training and a re-drill)

To request additional training in your area, contact Environmental Health & Safety Department.



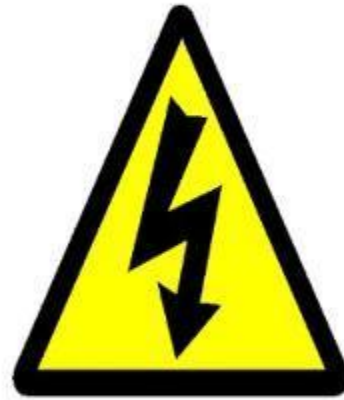
## Topic 3. Electrical Safety

### Risk of Electric Shock

Most equipment in the healthcare setting is electric. This means there is risk of electric shock from medical equipment.

Electric shock can cause:

- Burns
- Muscle spasms
- Ventricular fibrillation
- Respiratory arrest
- Death



## Topic 3. Electrical Safety

### Preventing Accidents

Remove electrical equipment from service if it:

- Malfunctions
- Shows signs of damage
- Shows signs of unusual heating
- Produces a burning smell during operation
- Shocks staff or patients

Report the hazard according to facility protocol. Submit the equipment for repair.

Use equipment safely:

- Learn proper equipment operation before use
- Do not use damaged equipment
- Do not use equipment on which liquid has been spilled
- Do not operate electrical equipment with wet hands or when standing in water
- Do not stack anything on or behind electrical equipment
- Turn equipment off before plugging in or unplugging

## Topic 3. Electrical Safety

### Preventing Accidents

All medical equipment should be inspected and tested on a regular schedule.  
The CTBE Electrical Checks:

- Any equipment used for patient care must first undergo electrical safety checks by the clinical Technology & Biomedical Engineering (CTBE) Department. Call 5-5000 to request.

Extension Cords:

- Extension cords are not allowed except in case of emergency. They must be requested from Engineering & Maintenance by calling 8-4400.
- Multi plug strips may not be mounted directly to any building surface.

## Topic 3. Electrical Safety

### Hazards

Electrical Safety: Hazards	
Use cords and outlets properly	<ul style="list-style-type: none"><li>•Do not use outlets or cords with exposed wiring.</li><li>•Report damaged outlets or cords.</li><li>•A hot outlet can be an indication of unsafe wiring.</li><li>•Unplug cords from the outlet. Report the hazard.</li><li>•Do not bend, stretch, or kink power cords excessively.</li><li>•Do not jerk cords from outlets. Pull on the plug.</li><li>•Do not staple, tack, or nail power cords to walls or floors. Use tape, if necessary.</li><li>•Do not rest equipment on power cords.</li><li>•Use only power cords with three-prong plugs.</li><li>•Never use adapters, two-prong plugs, or broken three-prong plugs.</li></ul>
Use circuits safely	<ul style="list-style-type: none"><li>•Do not overload circuits.</li><li>•Label each circuit breaker clearly.</li><li>•Breaker boxes should be accessible at all times.</li></ul>
Protect patients	<ul style="list-style-type: none"><li>•Place electrical equipment at a distance from patients.</li><li>•Maintain patient areas, keeping floors dry at all times.</li><li>•Do not touch patients and electrical equipment at the same time.</li></ul>



## Topic 4. Radiation Safety

### Protection against Exposure

Exposure to radiation can increase the risk of cancer. Therefore, it is important to protect against exposure. SHC/LPCH Radiation Safety is managed by the Stanford University Health Physics Department. The three key factors for limiting exposure are:

- **Time**: minimize the amount of time that you are exposed
- **Distance**: maximize your distance from the radiation source
- **Shielding**: use appropriate shielding to absorb the energy of radioactive particles



The goal is to keep your radiation exposure **As Low As Reasonably Achievable** (ALARA).

## Topic 4. Radiation Safety

### MRI Safety

An MRI system is not an inherent biological hazard. However, hazards can arise when certain items enter the MRI system:

- Ferromagnetic objects are attracted to the magnet at the center of the MRI system. They can become dangerous projectiles (the "projectile effect").
- Electronic devices that enter the magnetic field of the MRI system can malfunction due to interference.
- Metal implants or wires can conduct electrical currents resulting in burns.

## Topic 4. Radiation Safety

### MRI Safety

MRI safety is largely a matter of ensuring that potentially hazardous items stay outside the MRI field. Therefore:

- Control access to the magnetic field.
- Post signs outside the magnetic field, warning of the projectile effect and the danger of metallic implants.
- Remove metallic objects from clothing and pockets before entering the magnetic fields.
- Thoroughly screen patients prior to MRI. Ensure that patients do not have MRI-unsafe implants or embedded objects.
- Properly position patients for MRI so that electrically conductive loops are not formed. This will prevent burns.
- Use equipment approved for MRI.
- Restrict access to the MRI suite.



## Topic 4. Radiation Safety

### Laser Safety

SHC/LPCH Laser Safety Program includes administrative and operational controls to ensure compliance with ANSI Z136 Laser Safety Standards. Please contact the Laser Safety Officer for questions if your department is considering using lasers.

Smoke plume is generated during many surgical procedures, either by laser or ESU use. Smoke plume is a hazardous vapor and should be evacuated via suction filtration devices. Smoke Plume Evacuation Program exists via the Laser Safety Committee.

## Topic 5. Ergonomics

### Definition

Ergonomics means designing work equipment and tasks to fit the "natural laws" of the human body. Good ergonomics practices can lead to fewer work-related injuries.



## Topic 5. Ergonomics

### Best Practices

Ergonomics best practices are:

- Avoid fixed or awkward postures.
- Avoid lifting without using proper devices or equipment.
- Avoid highly repetitive tasks.
- Avoid forceful exertions.
- Provide support for your limbs.
- Use proper posture and body mechanics when sitting, standing, or lifting.
- Keep tools close to you, to avoid reaching, twisting, and bending.
- Use supportive equipment and ergonomics tools (e.g. wrist supports for keyboards).
- Respond promptly to aches and pains to prevent slight injuries from becoming severe or debilitating.

## Topic 5. Ergonomics

### Back Safety

Healthcare is a high-risk setting for back pain and injury. Healthcare workers who lift and move patients are at especially high risk for injury.

Injury may be prevented through:

- **Proper care and operation of the spine**
- **Proper posture**
- **Regular exercise**

Next the three prevention ways will be explained.

Work station ergonomic evaluations are available  
For more information, please contact  
Occupational Health Services.



## Topic 5. Ergonomics

### Back Safety - Proper Care and Operation of the Spine

Take proper care of the spine while:

Sleeping	Standing	Sitting	Lifting (static load vertically)	Lifting (transfer a patient)
<ul style="list-style-type: none"><li>• Sleeping on the back is best for back health.</li><li>• Sleeping on the side is next best.</li><li>• Sleeping on the stomach is least healthy.</li></ul>	<ul style="list-style-type: none"><li>• Wear good comfortable shoes.</li><li>• Stand up straight.</li><li>• Keep knees flexed.</li><li>• Use a footrest, alternating feet every few minutes.</li></ul>	<ul style="list-style-type: none"><li>• Form 90-degree angles at the knees and the hips.</li><li>• When the hands are on a desk or keyboard, also form 90-degree angles at the elbows. The wrists should be kept straight.</li></ul>	<ul style="list-style-type: none"><li>• Bend at the hips and knees.</li><li>• Keep the head up.</li><li>• Maintain the three natural curves of the spine.</li><li>• Hold the load close to the body.</li></ul>	<ul style="list-style-type: none"><li>• Avoid manual lifting.</li><li>• Use motorized lifts or other assistive devices.</li></ul>

## Topic 5. Ergonomics

### Back Safety - Proper Posture

To stand with proper posture, imagine a cord dropped through the center of your head to your feet. If the spine is properly aligned, the cord should pass through the center of the body, in the right-to-left plane.

In the front-to-back plane of the body, the cord should pass through: Ear, front of the shoulder, center of the hip, area behind the kneecap, and ankle.

To practice good posture, imagine the cord attached to the crown of your head. As the cord pulls up:

- It holds the head high.
- It pulls the three natural curves of the spine into alignment.

## Topic 5. Ergonomics

### Back Safety - Regular Exercise

Regular exercise can help prevent back injury. Exercise should include:

Aerobic  
exercise



Do aerobic exercise at least three times a week. This contributes to overall fitness and increases blood flow to the spine.

Stretching  
exercise



Stretches are gradual, gentle exercises that lengthen important muscles, increasing their ability to be put through the range of motion for which they are designed. Stretch seven days a week.

Strengthening  
exercise



Strengthening exercises help build muscle mass and definition by forcing the muscles to work against weight or resistance. Do this exercise four to five days a week.

## Topic 5. Ergonomics

### Safe Patient Handling

For years, nurses have been trained to use proper body mechanics and safe lifting techniques to protect against injury during manual patient handling. However, many patient handling tasks are simply unsafe when performed manually. In other words, nurses risk injury even if they use proper body mechanics.

Therefore, OSHA recommends that manual lifting should be minimized. If possible, it should be eliminated. State of California AB 1136 - Safe Patient Handling Law requires hospitals to adopt a safe handling policy. For questions, please contact Occupational Health Services.





## Topic 5. Ergonomics

### Safe Patient Handling - Risk Factors

Healthcare staff who lift and transfer patients are repeatedly exposed to the three major risk factors for injury during physical tasks.

- **Awkward posture:** Manual patient handling often involves awkward postures. For example, bending and reaching while lifting or lowering creates an awkward posture.
- **Force:** Force refers to how hard the muscles have to work. A lot of force is required to lift patients who typically weigh 100 pounds or more.
- **Repetition:** This risk factor refers to performing the same motion or series of motions over and over again. Nurses and aides might perform dozens of lifts and transfers in a single shift. They might perform thousands of lifts over a lifetime of nursing.

## Topic 5. Ergonomics

### Minimize and Eliminate Manual Lifting

To minimize or eliminate manual lifting, use devices to help with patient lifts and transfers. Available devices include:

- Motorized lifts
- Non-motorized transfer devices such as gait belts, transfer boards, etc.

Before any lift or transfer, the patient should be assessed to determine how to do the transfer safely. Patient factors (such as the patient's ability to bear weight) and environmental factors should be looked at. Staff can then decide on:

- The best method for the transfer
- What equipment or devices will be needed
- How many staff members will be needed

## Topic 6. Slips, Trips & Falls

### Preventing Slips

Slips, trips, and falls in the workplace cause injuries and deaths every year. To help prevent slips:

- Keep floors **clean and dry**
- **Increase the friction** of floors with abrasive coatings, nonskid strips, or rubber mats
- **Secure rugs** with skid-resistant backing
- Choose **slip-resistant shoes** with:
  - a. Soft rubber soles
  - b. A large amount of surface area in contact with the floor (i.e. no high heels)
  - c. Patterned soles that increase friction
- Post **Safety signs** around slip hazards (icy sidewalks, wet floors, etc.)



## Topic 6. Slips, Trips & Falls

### Preventing Slips

Most falls in the workplace are foot-level falls. In a foot-level fall, a person slips or trips on a walking or standing surface. This results in a short-fall. Falls-to-below carry a higher risk of injury:

#### Stairs

- Keep staircases clean and well lit.
- Stair cases should have sturdy handrails on both sides.
- Take one step at a time.
- Maintain your center of balance when stepping.

#### Ladders

- Use a ladder of the height you need.
- Lock the spreader into position before climbing the ladder.
- Climb straight up and do not lean to either side.
- Hold onto the side rails with both hands while climbing up or down.

## Topic 6. Slips, Trips & Falls

### Minimizing Risks

When conditions are hazardous (icy sidewalks, wet floors), avoid slipping and falling by **walking like a duck**:

- Keep your feet flat and slightly spread apart
- Point your toes slightly outward
- Take slow, short steps
- Keep your center of balance under you
- Make wide turns at corners
- Keep your arms at your sides: This gives additional balance and keeps your arms available for support if you fall.



Many accidents can occur from walking while texting or emailing on mobile devices. Be aware of your surroundings to avoid injury.

## Topic 7. Latex Allergy

### Definition

Latex allergy means sensitivity to contact with certain proteins in latex. Latex allergy is becoming more and more common.

Most reactions to latex are mild. But some can be life-threatening. Screening questions provide good tools for identifying patients at risk for latex allergy. This can help prevent future problem.



## Topic 7. Latex Allergy

### Screening Questions

Surgery	Dental Exam	Balloons	Food Allergies	Medical Exams	Allergy/Skin Problem
Have you ever had an unexplained problem during surgery?	Have you ever experienced breathing problems during a dental exam?	Have you ever experienced swelling or wheezing when blowing up balloons?	Are you allergic to any foods, specially bananas, avocados or kiwis?	Have you ever developed a rash or discomfort after having a medical exam or using a condom?	Do you have a history of allergy or skin problems?

If a patient answers "Yes" to one or more of these questions, the patient may be at risk for latex allergy. A careful and thorough medical history and physical exam should be performed. For a more definitive diagnosis of latex allergy, tests that measure blood levels of anti-latex antibodies may be ordered.

## Topic 7. Latex Allergy

### Management

Anyone who is allergic to latex should avoid latex products. To help protect a patient from exposure to latex in the healthcare setting:

- Clearly indicate "latex allergy" in the medical record.
- Do not use any latex products, including latex cleaning gloves, in the patient's room.
- Before entering the patient's room, remove latex gloves. Wash hands thoroughly with soap and water.

If you are allergic to latex:

- Inform your employer.
- Encourage your facility to provide as many latex-free products as possible.
- Use silk or plastic tape instead of adhesive tape.
- Use non-latex gloves only.





## Topic 8. Hazard Communication

### MSDS

SHC/LPCH Intranets contain link to Material Data Safety Sheets online. MSDS are available via search, or by department. If you have questions, ask your manager or Environment Health & Safety Department.

A HazMat Spill Response Team exists at SHC/LPCH. For any chemical spills that you are not trained to clean, contact the spill team by calling Security or 8-4400 to have the HazMat Team paged.

## Topic 8. Hazard Communication

To protect workers from exposure to hazardous chemicals, the following groups of people have hazard communication **duties**:

### Manufacturers

- Research, create, and distribute a material safety data sheet (MSDS), which lists the specific hazards of the chemical.
- Label all containers of hazardous materials with the name of the product, appropriate hazard warnings, and the name and address of the manufacturer.

### Employers

- Maintain a file of MSDS's for all hazardous chemicals used by workers.
- Inspect incoming chemicals to verify proper labeling. If a chemical is transferred to an unlabeled container at the facility, the new container must be labeled appropriately.
- Train employees in the use of hazardous chemicals.

### Employees

- Know which hazardous chemicals are used in their work area.
- Know where MSDS's are located on their unit.
- Know how to read an MSDS.
- Read all relevant MSDS's before starting a job that may require the use of a hazardous chemical.
- Read product labels carefully. Follow all instructions. Heed all warnings.
- Attend all required hazardous chemical training sessions.

## Topic 9. Security and Workplace Violence

Workplace violence is any violence committed in a work setting.

To help keep your workplace safe from violence:

- Recognize aggressive behavior and warning signs of potential violence.
- Respond appropriately to the level of aggressive behavior.
- Report all unsafe situations immediately.

Workplace violence training is offered by the Security Department. If you have questions or concerns about Workplace Violence, ask your manager or call Security.



## Topic 9. Security and Workplace Violence

### Response to Aggressive Behaviors

SHC/LPCH

#### **Tension**

Remain calm, listen, and acknowledge the person's frustration. Try to solve the problem.



#### **Disruptiveness**

Set clear limits. Remain calm and choose your words carefully to avoid aggravating the situation. Call security privately if the disruptive behavior continues.



#### **Loss of Control**

Remove yourself from danger and get help. Do NOT try to restrain the person yourself.



## Topic 10. Reporting Incidents

A breach in safety is referred to as an incident. Common examples of incidents can include:

- Equipment malfunction
- Exposure to radiation
- MRI injury
- Latex allergic reaction
- Back injury
- Slip, trip, or fall
- Exposure to hazardous chemicals
- Workplace violence

All incidents should be reported immediately. Check with your supervisor if you are not familiar with facility procedures for reporting incidents. SHC uses the SAFE online incident reporting system; LPCH uses the Quantros online incident reporting system. Report incidents, near incidents, safety concerns via these online systems as well as calling the General Services Response Center at 498-4400.



## Topic 11. Emergency Preparedness

### Types of Disaster Events

Emergencies happen almost every day. Some emergencies are large, some are small. All emergencies need an effective response.

Healthcare organizations must be prepared to respond to disasters such as:

- Natural disasters
- Technological disasters
- Major transportation accidents
- Terrorism
- Nuclear, biological, chemical and radiologic events

To prepare, each facility must:

- Identify events that could occur internally or in the area
- Determine the probability that each event will occur
- Develop strategies for dealing with each event



## Topic 11. Emergency Preparedness

### Hospital Disaster and Emergency Planning Critical Elements

The hospital includes the following 6 critical elements of performance into all disaster plans so we can respond effectively regardless of the cause(s) of an emergency.

Communications	Resources and Assets	Safety and Security	Staff Responsibilities	Utilities	Patient Clinical and Support Activities
How we communicate with staff, patients and the community.	How we identify, use and account for staff, supplies and equipment.	How we ensure safety and security during an emergency.	How staff are to perform their duties.	How we ensure that electricity, water, telephone and other utilities are working.	How we ensure that patient care continues effectively.

## Topic 11. Emergency Preparedness

### Beyond Emergency Operations Plans

A written plan alone is not enough to ensure an effective response. Staff must be:

- Educated on the procedures in the plan
- Trained and drilled to respond to disaster according to the plan

Make sure that YOU are ready to respond to disaster:

- Know the disaster events that pose a risk for your facility
- Participate in all emergency response training and drills

The Office of Emergency Management conducts disaster preparedness training and emergency response training. Each department has created an **annual updated disaster plan** for their specific area. It includes response plans for different types and evacuation locations. All staff should be familiar with their department plan.





## Topic 11. Emergency Preparedness

### Hospital Incident Command

The Hospital Incident Command Center is located at SHC H3210 and LPCH Boardroom. In the event of a hospital emergency, the activation of the hospital command center staffed by trained, key individuals is required to coordinate response, mitigation and recovery of the incident.

## Topic 12. Infection Control

### HAI - Cause

Healthcare-associated infection (HAI) is an infection that develops after contact with the healthcare system. HAI can be costly in terms of patient life and health & healthcare dollars. HAI may be caused by bacteria, viruses or fungi. These infectious organisms may come from:

- Environmental sources (dust, etc.)
- Patients
- Staff members
- Hospital visitors



## Topic 12. Infection Control

### **Antibiotic Use - Resistance**

Widespread use of antibiotics began in the 1940's - Penicillin and other antibiotics were hailed as miracle drugs.


However, bacteria is very adaptable. They have the ability to change genetically to resist the effects of antibiotics. The more antibiotics are used, the more common resistant strains of bacteria become.

Healthcare professionals must take an active role in preventing the spread of antibiotic resistance.

## Topic 12. Infection Control

### Antibiotic Use - Prevention of Resistance

Prevent Infection	Diagnose and Treat Infection Effectively	Use Antibiotics Prudently	Prevent Spread of Infection
<p>One of the best techniques we have to prevent infection is vaccination.</p> <ul style="list-style-type: none"><li>• Patients should be kept up on appropriate vaccinations.</li><li>• Healthcare workers also should receive appropriate vaccinations.</li></ul>	<ul style="list-style-type: none"><li>• Effective diagnosis means identifying the cause of infection so that the right treatment may be given.</li><li>• Effective treatment includes using specific antibiotics when antibiotics are necessary. A specific antibiotic is targeted to the identified infectious agent. Use of broad-spectrum antibiotic or multiple antibiotics should be avoided.</li></ul>	<ul style="list-style-type: none"><li>• An important part of using antibiotics prudently is NOT giving into patient demands for antibiotics for viral illnesses (colds, flu, etc.).</li><li>• Patients must be educated accordingly.</li></ul>	<ul style="list-style-type: none"><li>• Remember: The single best method for preventing spread of infection is hand hygiene. This makes proper hand hygiene an important tool in the fight against antibiotic resistance, as well.</li><li>• Appropriate Isolation Precautions (as discussed later in the lesson) should also be used to prevent spread of infection in the healthcare setting.</li></ul>

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## Topic 12. Infection Control

### Bloodborne Pathogens

Bloodborne diseases are spread from person to person as a result of unprotected exposure to:

- Infected blood
- Other bodily fluids
- Non-intact skin
- Moist body tissues

Important bloodborne diseases include:

- HIV infection (AIDS)
- Hepatitis B
- Hepatitis C

## Topic 12. Infection Control

### **Bloodborne Pathogens**

The Bloodborne Pathogens Standard (BPS) helps protect workers from exposure to HIV and other bloodborne pathogens.

The Bloodborne Pathogens Standard:

- Covers any worker who might come in contact with blood or other potentially infectious materials (OPIM) as part of his or her job
- Requires employers to take certain steps to help protect these workers

One of the key parts of the Bloodborne Pathogens Standard is to require the use of Standard Precautions.

## Topic 12. Infection Control

### Bloodborne Pathogens - Standard Precautions

Standard Precautions should be used in the care of all patients, regardless of their diagnosis. These precautions apply to patient:

- Blood
- Body fluids
- Secretions and excretions (except sweat)
- Non-intact skin
- Mucous membranes



Note: In the table, the term "bodily fluids" is used to indicate all patient fluids to which Standard Precautions apply (i.e., blood, body fluids, secretions, excretions).

## Topic 12. Infection Control

### **Bloodborne Pathogens**

In case of needle stick or similar exposure, page the oncall Occupational Health Services needlestick line at Pager "1-STIX".

The SHC/LPCH Sharps Committee is responsible for reviewing, tracking and trending BBP exposure incidents. All sharp devices must go through this committee for review and approval to ensure safe devices are used, or an exception is clearly documented. For more information, contact Occupational Health Services.

See the Blood Borne Pathogen Control located in the intranet's Safety Manual for more information.



## Topic 12. Infection Control

Standard Precautions are to be used in the care of all patients.	
Hand washing	<p>Wash / decontaminate hands:</p> <ul style="list-style-type: none"> <li>• After touching bodily fluids or contaminated items</li> <li>• After removing gloves</li> <li>• Between patient contacts</li> </ul>
Gloves	<ul style="list-style-type: none"> <li>• Wear gloves when touching bodily fluids or contaminated items.</li> <li>• Put on clean gloves before touching mucous membranes or non-intact skin.</li> <li>• Change gloves between "dirty" and "clean" tasks on the same patient.</li> <li>• Remove gloves promptly after use (before going to another patient). Perform hand hygiene immediately.</li> </ul>
Mask, Eye Protection, Face Shield, Gown	<ul style="list-style-type: none"> <li>• Use personal protective equipment (PPE) as necessary to protect against splashes or sprays of bodily fluids.</li> <li>• Use masks for catheter insertion or injection into spinal or epidural spaces</li> </ul>
Patient-Care Equipment and Linens	<ul style="list-style-type: none"> <li>• Equipment and linens soiled with bodily fluids should be handled in a way that avoids cross-contamination.</li> <li>• Clean and reprocess reusable equipment appropriately before use on another patient.</li> <li>• Discard single-use items appropriately.</li> </ul>
Environmental Control	<ul style="list-style-type: none"> <li>• Environmental surfaces should be cleaned and disinfected on a routine basis.</li> </ul>
Bloodborne Pathogens	<ul style="list-style-type: none"> <li>• Use sharps (needles, scalpels, etc.) carefully and appropriately. For example, do not bend or recap needles.</li> <li>• Use safe injection practices.</li> <li>• Take care to prevent accidental sticks.</li> </ul>
Patient Placement	<ul style="list-style-type: none"> <li>• Patients who contaminate the environment should be placed in private rooms.</li> </ul>



## Topic 12. Infection Control

### Droplet Pathogens - Recommendations

Droplet precautions are to be used, along with Standard Precautions, in the care of all patients with a diagnosed or suspected droplet-transmitted disease.

Droplet Precaution Recommendations	
<b>Patient Placement</b>	Patients on Droplet Precautions should be isolated in private rooms or cohorted. If a private room is not available and cohorting is not possible, patients should be placed at least three feet away from the nearest other patient or visitor.
<b>Masks</b>	Healthcare staff should don a mask with a faceshield when entering the room of a patient on Droplet Precautions.
<b>Patient Transport</b>	Patient transport should be limited as much as possible.

## Topic 12. Infection Control

### Personal Protective Equipment

Personal protective equipment (PPE) is an important component of infection control. PPE helps to prevent the spread of microorganisms both from patient to healthcare worker and from healthcare worker to patient. PPEs include:

#### Gloves

Wear gloves to touch:

- Blood
- Body fluids
- Secretions
- Excretions
- OPIM

#### Face Protection

To protect the face, you may use the following: Mask, Goggles, Face Shields. Wear this type of PPE during tasks that may expose you to splashes or sprays of:

- Blood
- Body fluids
- Secretions
- Excretions

#### Protective Clothing

Protective clothing includes:

- Gowns
- Surgical caps
- Lab coats

These items are used to protect skin and street clothes from contamination. Wear protective clothing during tasks that may expose you to splashes and sprays of blood or OPIM.