



## Bloodborne Pathogens Trainer | Bloodborne Pathogens

Many of us may assume that bloodborne pathogens affect only healthcare workers, but that is not true. You could be exposed to bloodborne pathogens in many work situations.

### **First of all, we need to define exposure to bloodborne pathogens:**

Any tissue injury caused by a “sharp” such as a needle or other sharp object where the sharp object was contaminated with blood, tissue, or other bodily fluids. It can also be a non-puncture occurrence, such as, a splash to mucous membranes (eyes, mouth, or nose) or splash onto broken skin (open sores, nicks, or cuts). The pathogens of primary concern are the human immunodeficiency virus (HIV), hepatitis B virus (HBV), and hepatitis C virus (HCV).

How might these exposures occur in our workday? The most common instances are emptying trash into which someone has discarded a contaminated needle or broken glass. This could occur in any business that is open to the public including retail stores, hotels, restaurants, etc. Exposure could occur when cleaning a hotel room and finding a contaminated needle or other object among the sheets or towels. You could also be exposed by administering first aid to someone who is bleeding, cleaning toilets and sinks, or doing laundry.

### **Prevention**

Customers, guests, or even fellow employees may leave these sharps behind for various reasons but they do not usually do it for malicious reasons. They may simply have nowhere else to discard them; so we need to be able to provide a receptacle for them. Sharps containers should be labeled or color-coded, leak-proof, hard-sided containers that are closable and easily accessible to those who use them. If feasible, they could be left out for the customers, guests, or employees, or they could be kept behind a counter or desk with signs notifying people that they are available just by asking.

Another prevention method is personal protective equipment (PPE) and includes gloves, eye protection, face shields or masks, and aprons, gowns, or lab coats.

Chances are, your employees do not need to wear all of this PPE in their jobs, but you need to evaluate what the exposure is and what can be used to protect your employees in each situation. Additional prevention methods include hand washing and HBV vaccine. Each situation should be evaluated based on the exposure.

## Reporting

An exposure to bloodborne pathogens should always be considered an urgent medical concern. Assume that all body fluids are infectious and report the incident immediately to ensure timely post-exposure management. Early treatment can significantly reduce the chance of disease transmission.

All exposures should be reported immediately to your workers' compensation insurance carrier.

## Recordkeeping

You must record all work-related needle stick injuries and cuts from sharp objects that are contaminated with another person's blood or other potentially infectious material on the Cal/OSHA Form 300 as an injury. To protect the employee's privacy, you may leave off the employee's name on the Cal/OSHA Form 300. This requirement is not limited to healthcare and related establishments.

A cut or needle stick from a potentially infected source is classified as an "injury" until the individual tests positive for a disease. You must then go back and reclassify it as an "illness" on the Cal/OSHA Form 300. If an employee is splashed or exposed to blood or other potentially infectious material without being cut or scratched, you need to record it as an incident on the Cal/OSHA Form 300 as an "illness" only if it results in the diagnosis of a bloodborne illness, such as, HIV, hepatitis B, or hepatitis C.

Medical records must be kept for each employee with an occupational exposure for the duration of employment plus 30 years. Disposal of medical records must be in accordance with standards covering access to records.

Training records must be maintained and include dates, contents of the training program or a summary, trainer's name and qualifications, and names and job titles of all persons attending the sessions.

## Employee Training

When you meet with your employees to discuss bloodborne pathogens, you need to emphasize awareness in regard to the possibility that contaminated needles can be in their workplace. A common scenario is a dirty needle discarded in the trash, whether in an office, hotel room, or restaurant bathroom. In fact, we should assume that there is a contaminated needle in the trash and handle it accordingly, such as, handling trash in a hard-sided container.

For instance, if your trash containers are affixed to the wall and you use trash bags in them, you can tie the trash bags, lift them from the wall trash can using the knot only (do not put a hand anywhere else on the bag) and put it into another hard-sided container for transport to the outside trash bin. That way, you are not touching the bag, which a needle could puncture. And NEVER push down trash with hands, feet, or other body parts. If trash must be compacted, provide a tool, such as, a stamper or tamper, so employees do not come into contact with needles or other sharps.

Care should also be taken whenever handling sheets or towels due to the possibility of sharps and bodily fluids, whether stripping a bed or handling dirty laundry. When stripping a bed, one layer at a time should be removed so you are more likely to see a needle if there is one in the bedding. When handling dirty towels, they should also be handled one at a time so a needle or other sharp can fall out rather than gathering towels in a bundle and risking being punctured by a needle among the towels. In the laundry room, dirty laundry should be handled in small bundles to help reduce the risk of needle punctures.

These are some examples of common exposures to dirty needles outside the healthcare industry. Employees should always be aware that there is the possibility of contact with contaminated sharp objects. In your discussion with your employees, add exposures specific to your workplace.

## Cal/OSHA Publications

A Best Practices Approach for Reducing Bloodborne Pathogens Exposure

[http://www.dir.ca.gov/dosh/dosh\\_publications/BBPBest1.pdf](http://www.dir.ca.gov/dosh/dosh_publications/BBPBest1.pdf)

Don't Risk Your Health

[http://www.dir.ca.gov/dosh/dosh\\_publications/dontrisk.html](http://www.dir.ca.gov/dosh/dosh_publications/dontrisk.html)

Exposure Control Plan for Bloodborne Pathogens

[http://www.dir.ca.gov/dosh/dosh\\_publications/expplan2.pdf](http://www.dir.ca.gov/dosh/dosh_publications/expplan2.pdf)

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Safety tips developed based on generally accepted safety standards believed to be reliable at the date of publication. Information is for general guidance only and should not be relied upon for legal compliance purposes.

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The company has \$4.8 billion in total assets and an enterprise surplus of \$1.4 billion. The CopperPoint Family of Insurance Companies include CopperPoint, Alaska National and PacificComp. All companies are rated A (Excellent) by AM Best.