



UW Bloodborne Pathogen Training

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Are you a new employee? Get a Hepatitis B vaccine OR sign a Declination Form

Hepatitis B Vaccine

Must be offered within 10 days of initial assignment (if needed).

- Series of 3 injections at 0, 2 and 6 months
- 96-99% effective
- Want the vaccine? Let your manager or supervisor know.
- Don't want the vaccine? Sign the Declination Form. If you want the vaccine at a later time, let your supervisor know.
- Currently boosters are not recommended.

Bloodborne Pathogen Training

- Required by law
- For *YOUR* safety
- Covers all workplaces with occupational exposure
- Annual training required

Outline

- ❑ What are Bloodborne Pathogens (BBPs)?
- ❑ What diseases are caused by BBPs?
- ❑ Are YOU exposed at work?
- ❑ Protect Yourself - Exposure Control Plan
- ❑ Exposed? Take Action.

Bloodborne Pathogens (BBPs)

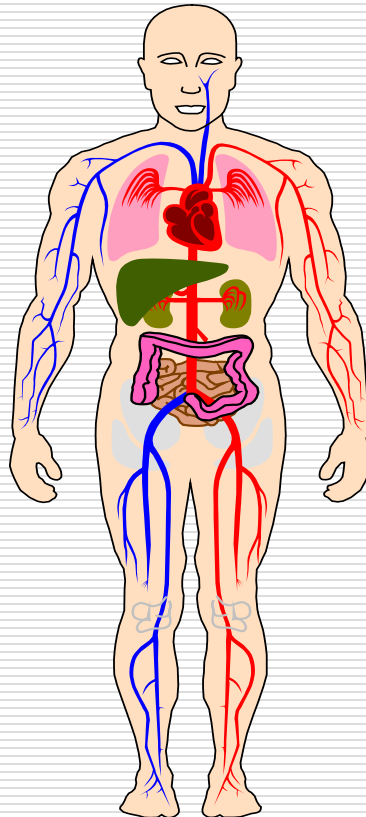
Tiny microorganisms
spread by blood

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VIRUS can cause disease

Found in

Blood



or

Other
Potentially
Infectious
Materials

Other Potentially Infectious Materials (OPIM)

- ❑ Semen
- ❑ Vaginal secretions
- ❑ Cultures containing HIV, HBV, HCV
- ❑ Organs or blood from animals with HIV, HCV, HBV
- ❑ Unfixed tissues or organs
- ❑ Any body fluid contaminated with blood or OPIM

These items are not considered infectious for BBPs...

- ...unless you can SEE the blood in them
 - Urine
 - Feces
 - Vomit
 - Sweat
 - Tears
 - Saliva

Bloodborne Pathogens can enter your body through



- injection – via needles, contaminated sharps
 - a break in the skin (cut, burn, lesion, etc.)
 - mucous membranes (eyes, nose, mouth)
-

- sexual contact
- sharing needles

BBP Risk: Occupational Exposure

- ❑ Accidental needle sticks or contaminated sharps injuries (the most common exposure routes)
- ❑ Direct contact of blood or OPIIM with skin cuts or rashes
- ❑ Mucous membrane exposure
 - Eyes
 - Nose
 - Mouth

BBP Diseases

- Hepatitis B Virus - causes liver disease
- Hepatitis C Virus - causes liver disease
- Human Immunodeficiency Virus (HIV) - causes Acquired Immunodeficiency Syndrome (AIDS)

Hepatitis Symptoms (HBV or HCV)

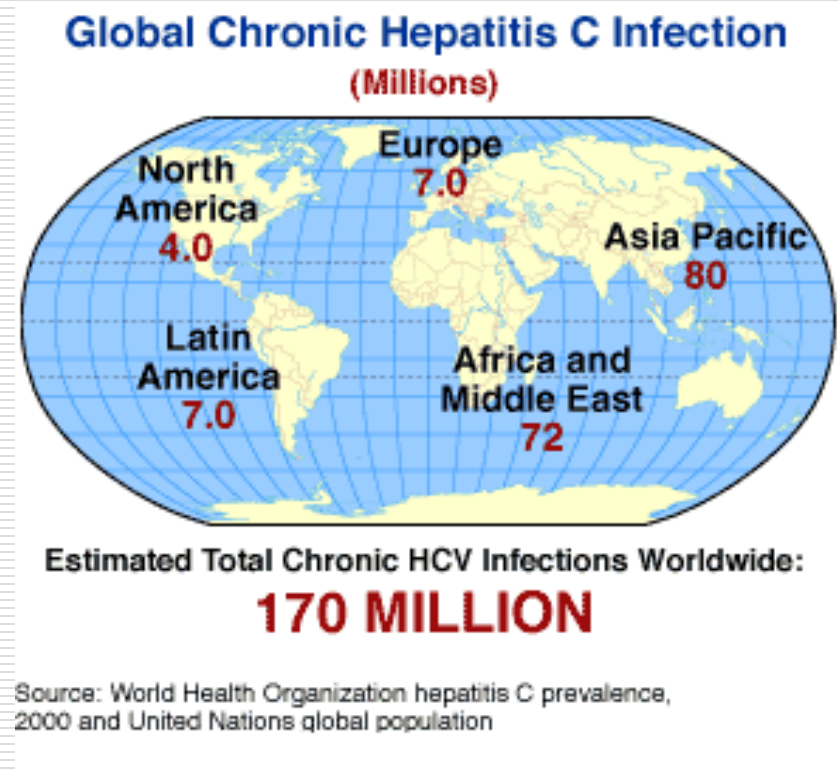
- Flu-like symptoms: fatigue, loss of appetite, nausea, abdominal discomfort
- dark urine
- clay-colored stool
- jaundice (yellow skin)

Hepatitis B

- ❑ More infectious than Hepatitis C or HIV
- ❑ Very stable- able to survive on surfaces at room temp for 7days
- ❑ Incubation period 45-180 days
- ❑ May become chronic carrier (it is in the body all the time)
- ❑ **VACCINE AVAILABLE**

Hepatitis C

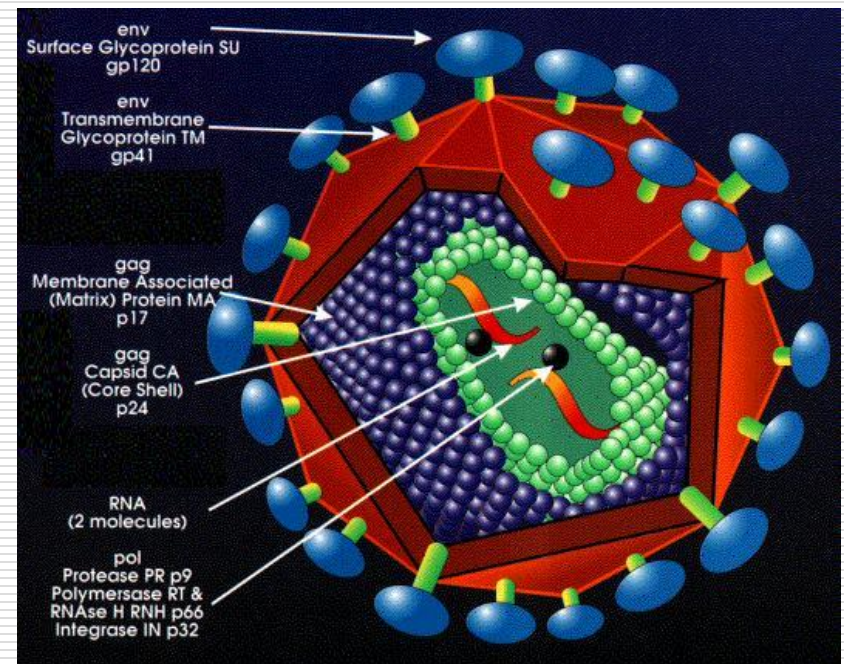
- ❑ Most common chronic bloodborne infection worldwide
- ❑ 80% without symptoms
- ❑ 70% develop chronic liver symptoms
- ❑ Incubation period 2 weeks-6 months
- ❑ **NO VACCINE**



HIV

(Human Immunodeficiency Virus)

- ❑ Causes AIDS
- ❑ Doesn't live long outside host
- ❑ Flu-like illness can occur 1-6 weeks after infection
- ❑ Incubation period 5 years or more
- ❑ NO VACCINE



Are YOU exposed at work?

Yes, when:

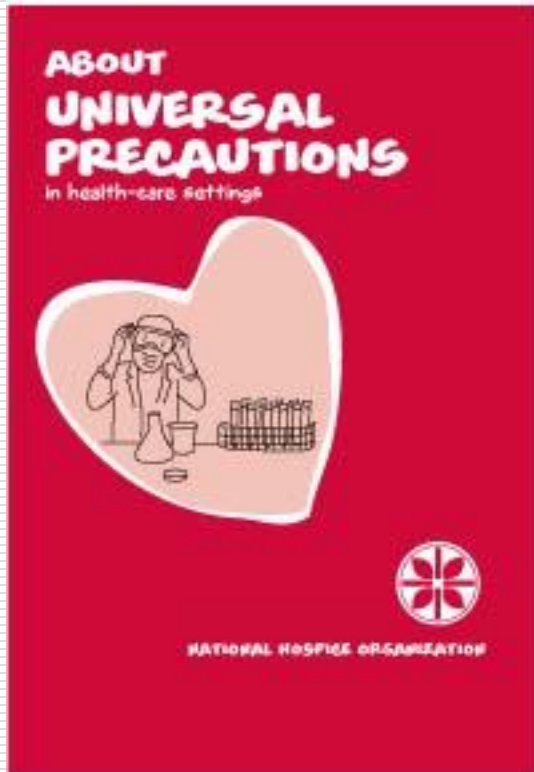
- You're working with sharps containers or picking up needles.
- You're cleaning up human blood or OPIM.
- You're emptying feminine product holders.

Protect Yourself. How?

Follow the Exposure Control Plan

- Universal precautions
- Engineering controls
- Work practices

Universal Precautions



- Blood and OPIM from ALL sources considered infectious
- Appropriate barriers, PPE and procedures must be used when contact with blood or OPIM is anticipated
- Perform all tasks in a manner that reduces spraying, splashing or aerosolization.

Engineering Controls-

Keep us from touching blood

- Tongs, dustpan, brush
- Sharps disposal containers
 - Inspect sharps container before picking up to see that there are no needles sticking through. If needles are sticking out, **CALL YOUR SUPERVISOR.**
 - Make sure they are closed and autoclaved. If not, **CALL YOUR SUPERVISOR.**

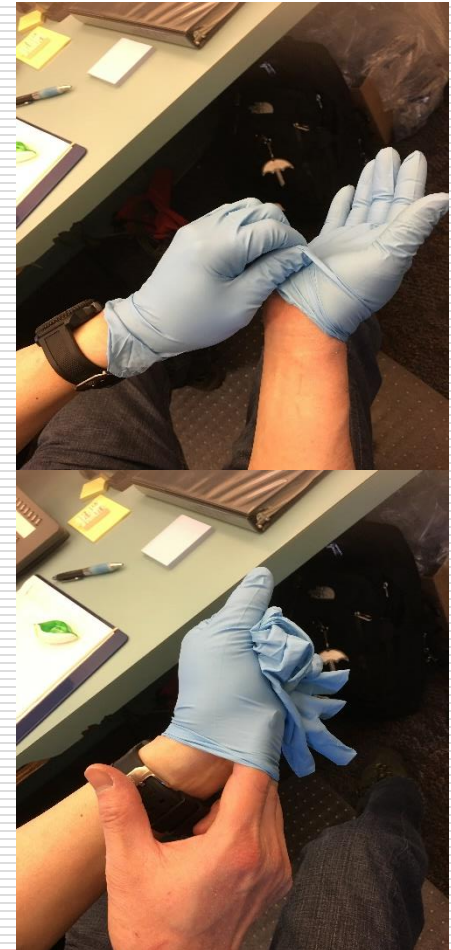


Work Practices--Personal Protective Equipment (PPE)

- The type and amount of PPE required on the task and anticipated exposure
 - *Gloves, Goggles/Safety Glasses, Facemask, Respirator, Gown/Tyvek suit*
- If clothing becomes contaminated, immediately remove it. Wash skin if needed.
- Must be removed prior to leaving the work area. PPE must not be worn in common areas.
- Provided at no cost to employee

Remove gloves safely and properly

- ❑ Grasp near cuff of glove and turn it inside out. Hold in the gloved hand.
- ❑ Place fingers of bare hand inside cuff of gloved hand and also turn inside out and over the first glove.
- ❑ Dispose gloves into proper waste container



Wash Your Hands

- After removing gloves, wash hands for 20 seconds
- After exposure incident for 15 minutes
- Use sudsing soap



Safe Work Practices

- **Do not eat, drink, smoke, apply cosmetics or lip balm, or handle contact lenses in any work areas where there is the possibility of exposure to blood or OPIM.**



Biohazard Signs


- These signs are on doors of labs where blood or OPIM are being worked with. It tells you:

the name of the agent
requirements to enter

If one of these signs are on the door, do not enter. If you have questions, call your supervisor.

Room No.:	Date Posted:
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BSL-2 Laboratory





BIOHAZARD
Admittance to Authorized Personnel Only

Biological Agent(s): _____

Special Procedures, PPE
or Precautions for Entry/Exit: _____

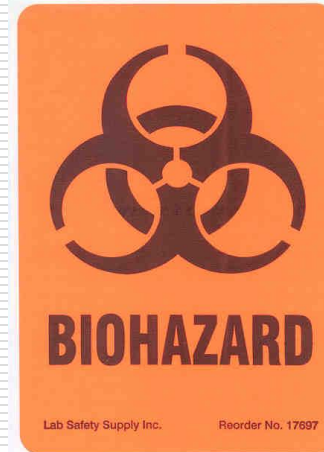
Principal Investigator(s)		Emergency Contact		Protocol# (s)
Name	Phone	Name	Phone	

 FORM #CHS-211
Revised: 4/15/04



Biohazard Labels

- ❑ Biohazard labels are put on containers of biohazardous waste, refrigerators, freezers, incubators and centrifuges that have blood or OPIM in them.
- ❑ Red bags will have biohazard symbol on it.



Decontamination Methods

1. Call your supervisor
2. Wearing appropriate PPE, soak up/wipe up spill with absorbent material (paper toweling), dispose all contents in non-biohazard liner (bag).
3. Gently squirt the Hydrogen Peroxide Cleaner/Disinfectant and wait for a minimum of three minutes before cleanup
4. Be sure you put plenty of the Hydrogen Peroxide Cleaner/Disinfectant on the area.
5. Remove liner with contents and dispose in dumpster.

Example of regular & sharps waste

Infectious waste must be autoclaved BEFORE putting into regular waste

REGULAR WASTE

PLASTIC URINE SAMPLE CUPS

FLEXIBLE PLASTIC PASTEUR PIPETTES

PLASTIC CENTRIFUGE TUBES
If High-Infectious
Rinsed and Cap Removed

PLASTIC PETRI DISHES
All Sizes, Single or Multi Well
CLEAN, No agar or cultures

TISSUE CULTURE FLASKS
Rinsed and cap removed

OTHER SMALL PLASTIC TUBES



SHARPS WASTE

PASTEUR PIPETTES
All Sizes
Clear, Unmarked

LANCETS
Capped

RAZOR BLADES

SCAPELS or SURGICAL BLADES

NEEDLES
Capped
Uncapped

MICROTOME BLADES
Steel
Glass

CAPILLARY TUBES

SYRINGES
With Needle
Without Needle

IV DRIP

LABORATORY GLASSWARE

SEROLOGICAL PIPETTES

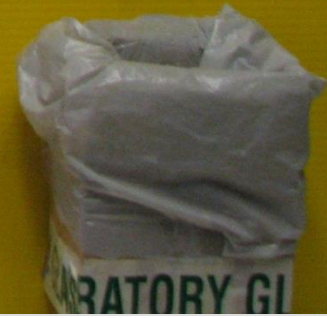
GLASS TUBES
ALL SIZES:
Broken/Unbroken

SCINTILLATION VIALS

GLASS SLIDES
SLIDE COVER SLIPS

PLASTIC PIPETTE TIPS

LABORATORY GLASS BOX



Important:

If you find blood or needles in
Regular Waste: DO NOT TOUCH!

- FIRST Call your Supervisor
- Place an "Improper Waste Disposal" notice on the bag / container

Exposed? Take Action.

- For needlestick/sharp injuries or if you get blood/OPIM on your skin:
 - Immediately thoroughly wash wound with sudsing soap and water—for 15 minutes.
 - Then seek medical treatment - UWMC Urgent Care

- If you splash blood/OPIM in eyes, nose mouth:
 - Immediately and thoroughly flush mucous membranes with water for 15 minutes.
 - Then seek medical treatment - UWMC Urgent Care

Post Exposure Evaluation

-What happens at the Emergency Department?

- They'll ask about your exposure incident.
- They'll identify and document source individual if possible.
- You will be asked if you want to be tested for HIV, HBV, and HCV. They'll draw Hepatitis B vaccine titer and additional tubes of blood for back up.
- You will receive treatment according to latest guidelines and get counseling. The type of treatment depends on your exposure.
- You may get a Hepatitis B vaccine booster.
- This medical record will be kept for the duration of your employment plus 30 years.

The UW Facilities BBP ECP online website link (listed below) and a paper copy of the ECP can be made upon request, if you prefer paper copy; please ask your supervisor.

[Bloodborne Exposure Control Plan.pdf](#)