

STANDARD PRECAUTIONS

I. Policy

SHSU employees will use universal precautions when coming in contact with potentially infectious materials.

II. Definitions.

Standard Precautions-All blood and other potentially infectious materials (OPIM) will be handled as if infectious.

Other potentially infectious materials (OPIM)-includes the following human bodily fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva, any body fluid visibly contaminated with blood, and all body fluids where it is difficult or impossible to differentiate between body fluids. Also includes unfixed human tissue.

Note: Feces, nasal discharge, saliva, sputum, sweat, tears, urine and vomitus meet the definition of OPIM, medical waste, biohazard waste, regulated waste, and hazardous waste only when grossly contaminated with blood.

III. Procedures

A. Hygiene practices

1. Employees will wash their hands with soap and water after removing their gloves or alcohol based (at least 60%) hand sanitizer. (see [Hand Hygiene](#) policy).
2. Clothing that has come in contact with potentially infectious material will be immediately removed and placed in a contaminated laundry receptacle for proper handling. Saturated clothing will be disposed of as biohazardous waste.
3. Employees will not eat, drink, or apply cosmetics in the lab or treatment rooms.
4. All tasks involving blood or OPIM must be performed in a manner that minimizes splashing, spraying, spattering, and/or generation of droplets of these substances.

B. Disposal practices

1. All clinical items coming in contact with potentially infectious materials will be disposed of as biohazardous waste (see *Managing Regulated Waste*).
2. **Sharps Injury Prevention**
 - a. Self-sheathing needles and/or syringes will be used by employing the one-handed technique in this facility and will be inspected before use.
 - b. Specimens gathered in the treatment rooms will be capped or covered before they are transported to the lab. All specimens are to be placed in biohazard bags, sealed and transported to the lab wearing gloves (see [Transportation of Lab Specimens from the Exam Room to the Laboratory Protocol](#)).
 - c. Sharps containers will be used and will be inspected for integrity and capacity daily by **staff using the container**. They will be replaced when the fill line is reached.

- d. In the laboratory, a centrifuge cover will be used. The cover will be inspected at each use and maintenance will be scheduled as needed, but at least semi-annually.
 - e. In the laboratory, the microscope will be inspected daily and maintenance will be performed as needed, but at least annually.
3. Needles and Other Sharps
- a. Contaminated needles and other sharps will not be bent, recapped, removed, sheared, or purposely broken unless the action is required by the medical procedure. If such action is required, the recapping or removal of the needle must be accomplished by the use of a mechanical device or one handed technique.
 - b. All needles will be equipped with a needle stick protection device. These devices must be engaged after the needle is used.
 - c. In the case of a needle stick, the provider will assess the injury and refer to the OSHA Documentation Manual and the SHC [Needle Stick or Other Sharps Injury](#) policy.
 - d. Employees will, after removing their gloves, immediately wash their hands and any potentially contaminated skin area with soap and water.
- C. Personal Protective Equipment (PPE)
- 1. Based upon the potentially infectious material, the likelihood of exposure, the potential volume of the material, the probable route of exposure, and the overall working conditions, the SHC will provide and require use of appropriate protective equipment by its employees
 - 2. If there is potential for splashes, protective eye wear, shields, or masks will be utilized. Care will be taken to minimize splashing, spraying, splattering, and generating droplets of blood or other infectious materials.
 - 3. Gloves and impervious gowns will be used during potential exposures to infectious materials.
- D. Contaminated Equipment
- If equipment becomes contaminated during a procedure, it will be decontaminated according to manufacturer's guidelines. Single use equipment will be discarded.

IV. References

- 1. OSHA Blood Borne Pathogen Standard, 29 CFR 1910.1030
- 2. SHC [Hand Hygiene](#) policy
- 3. SHC [Transportation of Lab Specimens from the Exam Room to the Laboratory Protocol](#)
- 4. SHC [Needle Stick or Other Sharps Injury](#) policy.