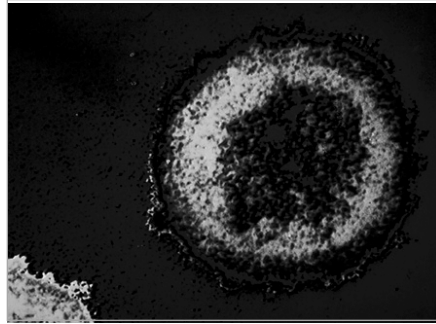


BLR's Safety Training Presentations

Bloodborne Pathogens 29 CFR 1910.1030

Revised OSHA Bloodborne Pathogens Compliance Directive (CPL2-2.44D)



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I. Background for the Trainer:

- This training session is intended for employees who are likely to be exposed to potentially infected bodily fluids, including first-aid responders, maintenance personnel, janitorial staff, and any personnel assigned to clean up body fluids after an industrial accident.
- Other employees can receive the same training for awareness purposes so they understand that they should not touch blood or bodily fluids and they understand to whom they should report a spill of blood or bodily fluids so it can be cleaned up correctly.
- A written Bloodborne Pathogens Exposure Control Plan (ECP) is required according to the OSHA standard in 29 CFR 1910.1030. This program should be written prior to conducting the training. Writing this program will help you determine which employees are potentially exposed and how you will protect these employees from exposure. A model ECP can be found in Appendix D of the new directive (CPL2-2.44D) that can be found at www.osha.gov.

II. Speaker's Notes:

- In this session, we will discuss how you might be exposed to bodily fluids in the workplace, how you can protect yourself from exposure, how to clean up bodily fluids, how to manage contaminated waste, and your right to medical evaluations.

Could You Contract a Disease at Work?

- Administering first aid?
- Cleaning the restrooms?
- Using a tool covered with dried blood?
- A co-worker sneezes on you?

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I. Speaker's Notes:

- In today's training session, we will discuss how you may potentially be infected with a bloodborne pathogen while at work.
- We will also discuss the many procedures and safe work practices that have been established to prevent your exposure to potentially infectious bodily fluids.
- We will also attempt to dispel some of the myths surrounding how bloodborne diseases can be contracted in the workplace.

Bloodborne Pathogens Goals

- Basics of Bloodborne Diseases
- Exposure Prevention
- Quiz

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I. Speaker's Notes:

- We will begin by discussing the basics of bloodborne pathogens, including general information on the diseases, how they are transmitted, and potential exposure at work.
- Then we will discuss the many ways that the exposure can be prevented.
- Finally, we will wrap up this training session with a summary and a quiz.

Bloodborne Pathogens

- Pathogenic microorganisms present in human blood that can lead to diseases
- Human Immunodeficiency Virus (HIV)
- Hepatitis B (HBV)
- Hepatitis C (HCV)

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I. Background for the Trainer:

- Pathogens are disease-producing bacteria or microorganisms.

II. Speaker's Notes:

- OSHA defines bloodborne pathogens as pathogenic microorganisms present in human blood that can lead to diseases.
- There are many disease-causing pathogenic microorganisms that are covered by this standard; however, the most common and those of primary concern are:
 - Human Immunodeficiency Virus (HIV)
 - Hepatitis B (HBV)
 - Hepatitis C (HCV)

Human Immunodeficiency Virus (HIV)

- HIV is the virus that leads to AIDS
- HIV depletes the immune system
- HIV does not survive well outside the body
- Saliva, tears, sweat

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I. Background for the Trainer:

- This information is from the Center for Disease Control and Prevention—HIV and Its Transmission Fact Sheet.

II. Speaker's Notes:

- HIV is the virus that leads to acquired immunodeficiency syndrome (AIDS). A person can carry HIV for many years and not have symptoms until it turns into full-blown AIDS.
- AIDS attacks the person's immune system, which makes it difficult for the body to fight off disease.
- Scientists and medical authorities agree that HIV does not survive well outside the body. Drying of HIV-infected human blood or other body fluids reduces the risk of environmental transmission to essentially zero.
- HIV is found in very low quantities in saliva and tears from some AIDS patients. HIV has not been found in the sweat of HIV-infected persons. Contact with saliva, tears, or sweat has never been shown to result in the transmission of HIV.

Hepatitis B (HBV)

- 1—1.25 million Americans are chronically infected
- Symptoms include: jaundice, fatigue, abdominal pain, loss of appetite, intermittent nausea, vomiting
- May lead to chronic liver disease, liver cancer, and death
- Vaccination available since 1982
- HBV can survive for at least one week in dried blood

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I. Background for the Trainer:

- This information is from the Center for Disease Control and Prevention—Viral Hepatitis B Fact Sheet available at www.cdc.gov.

Hepatitis C (HCV)

- Hepatitis C is the most common chronic bloodborne infection in the United States
- Symptoms include: jaundice, fatigue, abdominal pain, loss of appetite, intermittent nausea, vomiting
- May lead to chronic liver disease and death

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I. Speaker's Notes:

- An estimated 3.9 million Americans have been infected with HCV of whom 2.7 million are chronically infected.
- Persons chronically infected with HCV may not be aware of it because they are not clinically ill. Sometimes it can take two decades before symptoms are recognized.
- Chronic liver disease occurs in approximately 70 percent of infected persons.
- 8,000–10,000 deaths occur each year as a result of the chronic liver disease.
- There are some drugs that have been licensed for treatment of HCV; however, they are only effective in 10–40 percent of persons.

Potentially Infectious Bodily Fluids

- Blood
- Saliva, vomit, urine
- Semen or vaginal secretions
- Skin, tissue, cell cultures
- Other body fluids

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I. Background for the Trainer:

- Make changes to the slide above to reflect the types of bodily fluids that may be encountered in your workplace. If your facility is a medical hospital/clinic or a laboratory with human cell cultures, you will have more potential exposure to bodily fluids than a general industrial facility would have.

II. Speaker's Notes:

- The bodily fluids that you are most likely to encounter in the general industrial workplace are blood, saliva, vomit, or urine.
- If blood is not present in a bodily fluid, bloodborne pathogens cannot be present.
- Remember, sometimes the blood may be present in microscopic quantities and difficult to see with the naked eye.
- To be safe, you must assume that all bodily fluids are contaminated with infectious blood. This is called universal precautions. We will discuss this in further detail later.

Potential Transmission

- Contact with another person's blood or bodily fluid that may contain blood
- Mucous membranes: eyes, mouth, nose
- Non-intact skin
- Contaminated sharps/needles



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I. Background for the Trainer:

- The slide discusses potential transmission of bloodborne pathogens at the workplace. Adjust the slide to accurately reflect the potential transmission points at your facility. Other ways of transmission not usually associated with the workplace include unprotected sexual contact and drug use with unclean needles.

II. Speaker's Notes:

- Bloodborne pathogens can only be transmitted to you if you physically make contact with an infected person's blood or bodily fluid containing blood.
- Even then, your healthy skin is an excellent barrier to bloodborne pathogens.
- The contaminated blood or bodily fluid can enter your body through mucous membranes such as your eyes, mouth, or nose.
- If your skin is not intact at the point of contact with the contaminated blood or bodily fluid, the bloodborne pathogen could potentially be transmitted. Examples of nonintact skin include: dermatitis, hangnails, cuts, abrasions, acne, etc.
- Obviously, a contaminated sharp, such as a needle or broken glass, could potentially transmit bloodborne pathogens because of the penetration of the skin.

Potential Exposure

- Industrial accident
- Administering first aid
- Postaccident cleanup
- Janitorial or maintenance work

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I. Background for the Trainer:

- The potential exposures listed on the slide are probably typical for most general industrial workplaces. If necessary, change the slide to reflect the potential exposure to bodily fluids at your company. These potential exposures should be the same as those listed in your written Bloodborne Pathogens Exposure Control Plan.

II. Speaker's Notes:

- The Bloodborne Pathogens standard requires employers to identify the jobs, tasks, and activities that could expose employees to potentially infected blood or bodily fluids.
- Exposure could occur when near someone who is involved in an industrial accident.
- Obviously, when administering first aid to someone who is bleeding, you are potentially exposed.
- Employees expected to clean up work surfaces, equipment, or machinery after an accident are also potentially exposed.
- Janitorial workers are potentially exposed when cleaning up urine, vomit, sanitary napkins, etc.
- Maintenance workers might potentially be exposed when repairing the plumbing on a toilet.

Bloodborne Pathogens Goals

- Basics of Bloodborne Diseases
- Exposure Prevention
- Quiz

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I. Speaker's Notes:

- Are there any questions on HIV or Hepatitis B or C, how they are transmitted, or the potential exposure at work?
- Now, let's discuss the many ways to prevent exposure to bloodborne pathogens.

Exposure Control Plan (ECP)

- Potential exposure determination
- Safe work practices
- Decontaminating equipment
- Selecting and using PPE
- Handling biowaste
- Labels and signs
- Training requirements
- Recordkeeping requirements

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I. Background for the Trainer:

- You can either pass out copies of your ECP to the employees in the class or you can just tell them where the ECP is located within your facility. The ECP must be available at all times to all employees.

II. Speaker's Notes:

- The OSHA Bloodborne Pathogens Standard requires us to have a written ECP. Tell the employees that the ECP is available at all times, and tell them where it is located.
- The goal of the ECP is to identify potential exposure and define work practices for preventing exposure.
- The ECP addresses many elements, all of which we will discuss in this training session.
- In addition to your right to access the ECP, you also have a right to access the OSHA Bloodborne Pathogens Standard. If any of you want to have a copy of the actual standard, all you have to do is ask.

Who Must be Trained

- All employees with occupational exposure to blood or other potentially infectious material (OPIM)
- Employees who are trained in first aid and CPR

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I. Background for the Trainer:

- The Bloodborne Pathogens Standard covers all employers who require employees to perform duties that may expose them to bloodborne pathogens.

II. Speaker's Notes:

- Training is the next step in preventing potential exposure to bloodborne pathogens.
- All employees whose jobs, duties, or actions could potentially expose them to blood or contaminated bodily fluids must understand the ECP and be trained at the time of initial assignment and annually thereafter. We have already discussed the jobs that have potential exposure.
- Also, all employees who are trained first aid and CPR responders obviously must also participate in this training.
- Remember, the dangers of bloodborne pathogens do not exist in medical or patient care facilities only. Any type of facility that may have potential exposures to bloodborne pathogens must have a written program and must conduct training.

Universal Precautions

- Treat all blood and bodily fluids as if they are contaminated
- Proper cleanup and decontamination



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I. Speaker's Notes:

- OSHA defines universal precautions as “an approach to infection control.” According to the concept of Universal Precautions, all human blood and certain human bodily fluids are treated as known to be infectious for HIV, HBV, and other bloodborne pathogens.
- The appropriate precautionary methods will enable a worker to avoid contact with infectious materials. By avoiding contact, there is no exposure; thus we can avoid contracting a bloodborne disease.
- Universal precautions protect individuals who are directly involved with the clean-up process and who will possibly be in direct contact with the spill of bodily fluids.
- Always wear appropriate PPE when handling any type of bodily fluid.
- Universal precautions require adequate cleanup and decontamination of yourself, equipment, and tools. Always wash your hands after handling any type of bodily fluid, even when wearing gloves.

Protective Equipment

- Bleeding control—latex gloves
- Spurting blood—latex gloves, protective clothing (smocks or aprons), respiratory mask, eye/face protection (goggles, glasses, or face shield)
- Postaccident cleanup—latex gloves
- Janitorial work—latex gloves



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I. Background for the Trainer:

- Determine what kind of protective equipment your company has available. Is the equipment located in the first aid kits? Many first aid cabinets contain bodily fluid disposal kits that have PPE such as gloves, masks, aprons, face shields, etc.
- If your company has bodily fluid disposal kits, bring one to the class. Take out the PPE and use it for demonstration. Discuss the types, proper use, location, removal, handling, decontamination, and disposal of PPE.
- The location of available PPE should be specified in your Exposure Control Plan.
- Change the above slide to specify the appropriate PPE for the different potential exposures that your facility might have. Match the hazard with the appropriate PPE.

II. Speaker's Notes:

- PPE is a vital part of preventing potential exposure. Tell the employees what kind of PPE is available and where it is located in your facility.
- As all first aid responders know, universal precautions are required. Protect yourself first. For normal bleeding, gloves (such as latex) are required. Work gloves, rags, plastic, or even paper will work as barriers if latex gloves are not available. The point is to use something as a barrier between your skin and the victim's blood or bodily fluids.
- For spurting blood, more than just gloves is required. Protect your mucous membranes (i.e., eyes, mouth, nose) with a face shield or mask. Wear protective clothing such as an apron, smock, and shoe covers to protect your skin.
- For postaccident cleanup, generally, just gloves are needed to protect your hands when disinfecting surfaces or equipment.
- Janitorial workers should always wear gloves, particularly when cleaning bathrooms.

Decontamination

- Wear protective gloves
- Disinfectant/cleaner provided in bodily fluid disposal kit
- Solution of 1/4 cup bleach per gallon of water
- Properly dispose of contaminated PPE, towels, rags

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I. Background for the Trainer:

- If your company has a bodily fluid disposal/cleanup kit, does it contain a disinfectant or cleaner? If so, bring in the cleaner/disinfectant for demonstration purposes.
- Adjust the slide to accurately reflect the disinfectants/cleaners available at your facility.
- Before decontamination and cleanup can occur, personnel have to be assigned or designated to clean it up. Be sure those responsible for this duty understand their role and are prepared to clean up bodily fluids before an accident actually occurs.

II. Speaker's Notes:

- An important part of preventing exposure to bloodborne pathogens is proper decontamination and cleanup.
- As with all bodily fluids, assume contamination (universal precautions) and wear protective gloves. Latex gloves can be found in the first aid kit.
- The bodily fluid disposal kit contains fluid cleanup materials such as an absorbent powder, a disinfectant solution, and a disposal bag. The powder can be sprinkled on liquid body fluids, such as blood. When the powder absorbs the fluid, it can be scooped up and placed in the disposal bag.
- If no disinfectant solution is available, it can be substituted with a solution of 1/4 cup of bleach per gallon of water. Wipe down all contaminated surfaces with the disinfectant solution in order to ensure that all bloodborne pathogens are killed.
- Dispose of all contaminated gloves, towels, rags, absorbent powder, etc. Place it all in the disposal bag. We will discuss how to manage biowaste shortly.

Safe Work Practices

- Remove contaminated PPE or clothing as soon as possible
- Clean and disinfect contaminated equipment and work surfaces
- Thoroughly wash up immediately after exposure
- Properly dispose of contaminated items

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I. Speaker's Notes:

- These are some commonsense safe work practices that will help prevent exposure.
- Remove contaminated clothing or PPE as soon as possible. If blood were to splash onto your shoes, pants, or shirt, remove those items as soon as possible. Wash your skin in the area underneath the clothing that was contaminated with the bodily fluid. Remove contaminated PPE, such as gloves, as soon as you are done administering first aid or decontaminating equipment or work surfaces.
- Cleaning/disinfecting tools, work surfaces, or equipment will prevent the next user from unknowingly coming into contact with potentially infected bodily fluids.
- Thoroughly wash your hands, face, or any other areas of your skin that may have come into contact with bodily fluids. If you believe that blood or other potentially contaminated bodily fluid was splashed into your eyes, immediately go to an emergency eyewash station and flush your eyes.
- Properly disposing of contaminated items in appropriately labeled bags or containers will help prevent someone from accidentally being exposed.

Regulated Medical Waste

- Liquid or semiliquid blood or OPIM (other potentially infectious materials)
- Contaminated items that would release blood or OPIM when compressed
- Contaminated sharps
- Pathological and microbiological waste containing blood or OPIM

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I. Background for the Trainer:

- Most industrial facilities can handle blood or bodily fluids by simply absorbing any liquids, double bagging the contaminated items, and disposing in the dumpster. Be sure to clarify your company's procedures in your written ECP.
- If you feel that your company does have regulated medical waste that requires proper disposal, contact a medical waste disposal company to set up a program. You can probably find a medical waste disposal company in your local phone book.

II. Speaker's Notes:

- Regulated medical wastes include blood or other potentially infected bodily fluids that are in a liquid form.
- If absorbed liquids can be released when compressed (i.e., sponge) it is also a regulated medical waste.
- As a rule of thumb, items such as Band-Aids or tissues that we would typically throw in the wastebasket are not regulated medical wastes unless you are a medical facility where the amount of this type of waste is extensive.
- Otherwise, unless you could literally "wring out" the blood, it would not be considered regulated medical biowaste. A good rule to follow is, when in doubt, treat it as regulated waste to avoid violating any EPA laws for proper disposal of biohazard wastes.
- Make sure all sharps, including needles and broken glass, go in the appropriate sharps container to avoid contamination through impalement or laceration on the sharps.
- Pathological and microbiological waste containing blood or OPIM, such as from a medical laboratory, is also considered regulated medical waste.

Labels and Signs

- Labels must include the universal biohazard symbol, and the term “Biohazard” must be attached to:
 - containers of regulated biohazard waste
 - refrigerators or freezers containing blood or OPIM
 - containers used to store, transport, or ship blood or OPIM



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I. Background for the Trainer:

- Bring in a label or container, such as the red disposal bag, that has the biohazard symbol to use as a demonstration.

II. Speaker's Notes:

- Another way to prevent potential exposure is through communication, which includes appropriate labels and signs.
- All regulated medical wastes must be labeled in accordance with EPA requirements for biohazard wastes. If the material is not regulated (i.e., liquids that are adequately absorbed or Band-Aids) it can be disposed of in an unlabeled bag and discarded in the trash.
- Refrigerators that contain biohazards should be labeled.
- No food items should be placed in refrigerators that contain biohazards.
- Any container that may store potentially infectious materials must be adequately labeled.

Hepatitis B Vaccination

- Strongly endorsed by medical communities
- Shown to be safe for infants, children, and adults
- Offered to all potentially exposed employees
- Provided at no cost to employees
- Declination form

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I. Background for the Trainer:

- The Hepatitis B (HBV) vaccination must be offered to all potentially exposed employees within 10 days of their initial assignment.
- Contact your local occupational health clinic about setting up these shots.
- If employees decline the shots, they are required by the OSHA standard to sign the record of declination form. Bring copies of this form to the training session.
- Taking this vaccination is a personal decision, give the employees a few days to decide. If they want the shots, schedule an appointment. If they do not want the shots, have them sign the declination form.

II. Speaker's Notes:

- The use of the HBV vaccine is strongly endorsed by medical, scientific, and public health communities as a safe and effective way to prevent disease and death.
- There is no confirmed evidence that indicates the HBV vaccine can cause chronic illness. Reports of unusual illnesses following a vaccine are most often related to other causes and are not related to the vaccine.
- The hepatitis B vaccination is a series of three injections that are effective in preventing infection with hepatitis B. Currently, there is no requirement for routine boosters; however, this is still being assessed.
- This vaccination is paid for by the employer.
- If you decline the hepatitis B vaccination, you will be asked to sign a form that states you waived your opportunity to receive the vaccination. However, even if you sign the form now, you may still change your mind later and accept the vaccination. The form basically states that at this time you do not want to have the shots.
- The language on the declination form is straight out of the OSHA Bloodborne Pathogens standard.

Exposure Incident

- A specific incident of contact with potentially infectious bodily fluid
- If there are no infiltrations of mucous membranes or open skin surfaces, it is not considered an occupational exposure
- Report all accidents involving blood or bodily fluids
- Postexposure medical evaluations are offered

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I. Background for the Trainer:

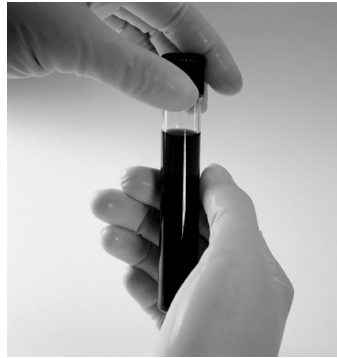
- Employees must report any exposure to bloodborne pathogens. For example, after an industrial accident, determine if any employees were exposed. If an employee has been exposed, the employee must be offered a postexposure evaluation.
- Your company should document this determination of exposure and whether or not the exposed employee accepted the offer of a postexposure medical evaluation.

II. Speaker's Notes:

- An exposure incident is a specific incident of contact with potentially infectious bodily fluid. If there was no infiltration of mucous membranes or open skin surfaces, it is not considered an occupational exposure. If an employee administering first aid on normal bleeding is wearing the appropriate gloves, then an exposure incident does not exist.
- Be sure to report all incidents involving blood or bodily fluid so the company can determine if an exposure occurred and then offer postexposure medical evaluations if necessary.
- After each accident, an accident investigation report must be completed. If blood is spilled, documentation of the spill location, who cleaned it up, the cleanup method, and waste disposal location must be kept.

Postexposure Evaluation

- Confidential medical evaluation
- Document route of exposure
- Identify source individual
- Test source individuals blood (with individuals consent)
- Provide results to exposed employee



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I. Background for the Trainer:

- Contact your local occupational health clinic to get more details on exactly what kind of testing would be done for a postexposure medical evaluation.

II. Speaker's Notes:

- The postexposure medical evaluation is designed to help determine if the person was exposed to infected bodily fluids.
- The medical evaluation is completely confidential for both the exposed person and the source person. Not even the company will know the results of such testing.
- The evaluation will document the route of exposure and will identify the source individual.
- If the source individual gives consent, the evaluation includes testing his or her blood.
- The results of such testing are provided by the medical personnel to both the source individual and the exposed employee.

Recordkeeping

Medical records include:

- Hepatitis B vaccination status
- Postexposure evaluation and follow-up results

Training records include:

- Training dates
- Contents of the training
- Name and qualifications of trainer

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I. Background for the Trainer:

- Medical records must be kept confidential, maintained for employment plus 30 years, available to employees upon request, and made available to authorized agencies such as OSHA or NIOSH.
- Training records must be maintained for three years.
- Records must be transferred to successor employers, or if no successor employer, the current employer must ask the director of NIOSH for proper disposition of the records.

II. Speaker's Notes:

- Medical records are kept confidential; however, they are available to each employee upon request. The records will include your Hepatitis B vaccination status, any postexposure evaluation and follow-up results, and any written opinions or other specific information provided by the health care professionals.
- Training records include today's date, content of today's training, my qualifications as a trainer, and, of course, your names and job titles.

Bloodborne Pathogens Goals

- Basics of Bloodborne Diseases
- Exposure Prevention
- Quiz

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I. Speaker's Notes:

- Are there any questions on the written Exposure Control Plan, universal precautions, PPE, safe work practices, labels, handling regulated waste, or the HBV vaccination?
- Now, let's wrap up this training session with a summary and a quiz.

Summary

- Universal precautions
- PPE and safe work practices
- Decontamination
- Exposure incident

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I. Speaker's Notes:

- Remember to assume that all blood or bodily fluid is infected with bloodborne pathogens such as HIV or HBV.
- Wear the appropriate PPE as barriers to prevent the transmission of bloodborne pathogens, and use safe work practices such as labeling and proper disposal.
- Decontaminate yourself by thoroughly washing up and washing any contaminated equipment or tools.
- Report all incidents involving bodily fluids so they can be evaluated for potential exposure.

Quiz

1. Name two of the most common bloodborne pathogens:

2. After exposure to potentially infected bodily fluids, you should immediately:

3. HIV and HBV can be transmitted when infected bodily fluids directly contact the eyes or nonintact skin.
True or False
4. The risk of exposure to bloodborne pathogens is only possible when blood is present in the bodily fluid.
True or False
5. Treating all body fluids as infected is known as _____
_____ Precautions.

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I. Background for the Trainer:

- Hand out the quiz copies. Go over the questions orally and have the employees write their answers on their quiz sheets.

Quiz (cont.)

6. HIV stays alive in dried blood. True or False
7. Name one way you might be exposed to human blood at your workplace: _____
8. What minimum PPE should be worn when controlling normal bleeding? _____
9. Besides the disinfectant/cleaner provided in first aid kits, what other solutions can be used to decontaminate equipment or surfaces?
10. How do you dispose of absorbed bodily fluids?

Quiz Answers

1. HIV and Hepatitis B (HBV).
2. You should immediately wash any exposed areas.
3. True. Infected bodily fluids need to directly contact mucous membranes or nonintact skin.
4. True. Although many bodily fluids may be infectious, they must contain blood to carry bloodborne pathogens.
5. Treating all bodily fluids as infected is known as Universal Precautions.

Quiz Answers (cont.)

6. False. HIV dies almost immediately. HBV can live as long as one week.
7. Administering first aid, decontaminating equipment, doing janitorial work, etc.
8. Gloves must be worn, at a minimum, when controlling normal bleeding. When controlling spurting blood, additional PPE must be worn including: a face shield, an apron, shoe covers, etc.
9. A solution of bleach and water.
10. Absorbed bodily fluids from a general industry facility can usually be double bagged and discarded with the normal garbage.

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