



STANDARD PRECAUTIONS PROCEDURE FOR INFECTION CONTROL

Standard Body Substance Precautions are measures intended to protect you and others from exposure to infectious agents such as HIV, Hepatitis B, Hepatitis C and even the common cold whether or not you know if a person is a carrier of an infectious substance or not. It is your responsibility to follow the precautions outlined in this document.

Since it is impossible to know who might be infectious, **assume everyone is potentially infectious.** Your use of precautions is determined by the risk of encountering a bodily substance rather than a person's diagnosis. Transmission of infections can be airborne, from droplets or through direct or indirect contact.

To reduce transmission infection risks:

1. Assess the infectious risk of any situation or interaction
2. Wash Your Hands
3. Wear Gloves
4. Use Other Protective Barriers as necessary
5. Clean Contaminated equipment and surfaces
6. Safe handling and Disposal of Contaminated Articles
7. Report Exposure

Standard Precautions is the concept that standard infection control precautions are to be followed for the care of all persons at all times.

The principals for Standard Precautions are:

- a) **Identify the procedure** you will be performing;
 - b) **Identify the body substance** you might be in contact with (ie. Blood, saliva, fecal matter, etc.);
 - c) **Determine the protection needed** such as personal protective equipment, barriers (ie. gloves, masks);
-
1. **Hand Washing/Sanitizing (The single most important infection control practice.)**
Wash hands with soap and water for 20 seconds or sanitize hands with an approved alcohol based hand rub, **before and after providing care.** Hands must be washed immediately if they may have been in contact with bodily substances. In many cases, good hand washing is adequate when there are no open cuts/sores. Hand washing with soap and running water must also be performed when hands are visibly soiled, after contact with your own or another's body fluids, after touching contaminated objects, before preparing/eating or feeding someone food and before and after putting on gloves. If running water is not available, clean hands with a damp towelette and scrub hands with about 5 ml of alcohol based hand sanitizer. Wash hands as soon as you have access to proper hand washing equipment.
 2. **Disposable Gloves**
Wear latex or vinyl gloves when it is likely hands will contact blood, bodily fluids, mucus membranes, or non-intact skin (open cuts/sores) and when giving first aid. The most important aspect of using gloves is to maintain an intact barrier. Gloves must be changed and discarded after contact with the person and when cleaning up surfaces. Hand washing/sanitizing must be performed before and after using the gloves. Put on gloves just before the task and remove them immediately upon completion. Remove gloves properly.

3. Other Protective Barriers as Necessary

Wear other protective barriers as necessary to reduce the risk of exposure to potentially infective body fluids on broken skin or mucous membranes. Always wear a protective barrier when there will be contact with blood and body fluids. If you have cuts or open sores on your skin, cover with a plastic bandage. If performing emergency mouth to mouth resuscitation, use a mouth shield if available even though the risk of infection remains extremely low. In certain circumstances the following personal protective barriers might be required:

Masks/Protective Eye Wear/Clothing are primarily intended for working in high risk environments. Wear protective eye glasses and/or masks during procedures where there is droplets, aerosols or splashes of blood or body fluids which may contact mucous membranes of eyes nose or mouth. Wear a gown or apron when skin or clothing are likely to be soiled.

4. Report direct exposure of blood on any open skin or in mucous membranes of eyes or mouth to your doctor if the risk is high (i.e. after a needle stick.) Advise your coordinator or supervisor as well.

5. Clean Contaminated Surfaces

Immediately wipe up spills of potentially infected material with paper towels and dispose carefully. Wash area with hot water and household cleaner. Rinse. Apply a fresh solution of 1 part bleach to 9 parts water to the area. Leave solution on for 10 minutes and wipe up. (Include contaminated counters, sinks, bathtubs.)

6. Dispose of Contaminated Articles

Dispose of soiled articles in plastic bags tied at the top. Double bag if leaking. Handle soiled laundry as little as possible and place in separate bag. Launder separately. Rinse in cold water, then machine wash in hot water and detergent. Sharps, including needles must be handled with caution. Wear gloves; dispose in a puncture resistant container with lid. Drop container at designated pharmacies. Always wear gloves when handling soiled laundry and wash hands after removing gloves.

7. Investigate immunizations and keep them up to date.

8. Refer to the EAFWR Procedures for “Health Care Precautions and Use of Personal Protective Equipment” and “Infection Control of Respiratory Illness” for additional information.