

DIVISION OF PHYSICIAN ASSISTANT STUDIES EXPOSURE TO INFECTIOUS AND ENVIRONMENTAL HAZARDS POLICY

PREVENTION

The Division of Physician Assistant Studies at West Virginia University follows the guidelines and recommendations of the Centers for Disease Control and Prevention (CDC) and the Occupational Safety and Health Administration (OSHA) regarding the use of Standard Precautions to prevent the spread of infection and reduce occupational exposure to blood and body fluid pathogens.

Current CDC recommendations include:

1. Perform proper hand hygiene

According to the <u>CDC</u>, alcohol-based hand sanitizers are the most effective products for reducing the number of germs on the hands of healthcare providers. Alcohol-based hand sanitizers are the preferred method for cleaning your hands in most clinical situations including:

- Immediately before touching a patient
- Before performing an aseptic task (e.g., placing an indwelling device) or handling invasive medical devices
- Before moving from work on a soiled body site to a clean body site on the same patient
- After touching a patient or the patient's immediate environment
- After contact with blood, body fluids or contaminated surfaces
- Immediately after glove removal

Wash your hands with soap and water whenever they are visibly dirty, before eating, and after using the restroom. Hands should also be washed with soap and water after caring for a patient with known or suspected infectious diarrhea or known or suspected exposure to spores (during B. anthracis, C difficile outbreaks).

2. Use of personal protective equipment (gloves, gown, mask, etc.)

• Gloves must be worn when there is a risk of contact with or when handling blood or body fluids or when there is potential for contact with mucous membranes, non-intact skin, or contaminated equipment

• Masks, protective eyewear, and gowns must be worn along with gloves when performing or assisting with procedures with a risk of body fluid or other hazardous materials splash or spray

• Health care providers who enter the room of a patient with suspected or confirmed SARS-CoV-2 infection should adhere to Standard Precautions and use a NIOSH-approved N95 or equivalent or higher-level respirator, gown, gloves, and eye protection (i.e., goggles or a face shield that covers the front and sides of the face).

3. Safe use of injections and sharps

Preparation

- Organize your work area with appropriate sharps disposal containers within reach
- Work in well-lit areas
- Receive training on how to use sharps safety devices
- Before handling sharps, assess any hazards-get help if needed

Awareness

- Keep the exposed sharp in view
- Be aware of people around you
- Stop if you feel rushed or distracted
- Focus on your task
- Avoid hand-passing sharps and use verbal alerts when moving sharps
- Watch for sharps in linen, beds, on the floor, or in waste containers

Disposal of sharps

- Be responsible for the device you use
- Activate safety features after use
- Dispose of devices in rigid sharps containers; do not overfill containers
- Keep fingers away from the opening of sharps containers

4. Safe handling of potentially contaminated surfaces or equipment

- Areas in which patient care activities are performed should be cleaned and disinfected at the conclusion of the procedure.
- disinfected at the conclusion of the procedure
- Reusable medical equipment should be cleaned and disinfected (or sterilized) according to the manufacturer's instructions

5. Respiratory hygiene/cough etiquette

- Cover your mouth with a tissue when coughing or sneezing
- Use the nearest waste receptacle to dispose of tissue after use
- Perform hand hygiene after contact with respiratory secretions and contaminated objects
- Health care providers who enter the room of a patient with suspected or confirmed SARS-CoV-

2 infection should adhere to Standard Precautions and use a NIOSH-approved N95 or equivalent or higher-level respirator, gown, gloves, and eye protection (i.e., goggles or a face shield that covers the front and sides of the face).

Before any patient care or laboratory experience occurs, all WVU physician assistant students must complete yearly OSHA training which includes education regarding proper use of sharps and prevention of blood borne pathogens. The course is available in SOLE as a course called "OSHA."

Before beginning any clinical rotation, a student must complete any site-specific safety and security training requirements.

Post-exposure protocol

Should an exposure to blood, other body fluid or other hazardous agent occur, the procedure for obtaining appropriate medical care is as follows:

1. When an exposure occurs: Wounds and skin sites that have been in contact with blood or body fluids should be washed with soap and water; eyes and mucous membranes should be flushed with water if there has been a contact with blood or body fluids. There is no evidence that the use of antiseptics for wound care or expressing fluid by squeezing the wound further reduces the risk for HIV transmission. However, the use of antiseptics is not contraindicated. Use of caustic agents, e.g., bleach, is not recommended.

2. The student must notify the supervising clinical staff at the rotation site immediately after washing or irrigating the area as described above. Clinical staff at the rotation site are expected to facilitate the obtaining of consent from the source person for drawing of a blood sample for appropriate testing for infectious agents. Following an exposure, a student is to be excused from all clinical duties in order to seek IMMEDIATE evaluation in the nearest Emergency Department.

3. Medical Evaluation: It is extremely important that medical evaluation take place immediately following an exposure. All exposures to blood, body fluids, or other hazardous agent must be reported IMMEDIATELY to the supervising clinical staff/preceptor.

4. If the clinical site has an employee health office, this office should be notified as soon as possible following the exposure when an exposure occurs during normal business hours. When an exposure occurs outside of normal business hours, notification of employee health should occur by no later than the morning of the next business day. Notification of employee health is essential in order to ensure proper follow-up and ongoing treatment, as necessary. Follow-up care shall be consistent with the current guidelines of the Centers for Disease Control and Prevention (CDC) and the community's standard of care.

4. Students must notify the program's Director of Clinical Education and/or Program Director as soon as possible following any exposure to bodily fluids or potentially serious infectious disease. Notification of program officials should not delay the student from seeking care in the nearest Emergency Department.

Financial responsibility and program participation

1. Financial responsibility: Students will be financially responsible for all costs incurred during compliance with this policy which are not covered under their health insurance; this includes emergency treatment, laboratory evaluation, medical treatment, and follow-up care. All students in the program are required to have health insurance as per University policy and the program's *Immunization and Health Policy*.

2. Program Participation: Continued participation in the activities of the PA program will not be affected by any injury or illness that occurs while enrolled provided the student continues to meet all technical standards and fulfill all defined requirements for program progression and is not directly infectious by way of routine contact.

Applicable ARC-PA Standards

A1.02 The sponsoring institution is responsible for:

g) documenting appropriate security and personal safety measures for PA students and faculty in

all locations where instruction occurs,

A3.08 The program must define, publish, make readily available and consistently apply policies addressing student exposure to infectious and environmental hazards before students undertake any educational activities which would place them at risk. Those polices must: a) address methods of prevention,

b) address procedures for care and treatment after exposure, and

c) clearly define financial responsibility.

Updated December 2022 Next review December 2023