Student Guide Preview



Bloodborne Pathogens

in the Workplace







Bloodborne Pathogens in the Workplace

Student Guide

Version 7.0

Purpose of this Guide

This MEDIC First Aid Bloodborne Pathogens Version 7.0 Student Guide is solely intended to facilitate certification in a MEDIC First Aid Bloodborne Pathogens In the Workplace training class. The information in this guide is furnished for that purpose and is subject to change without notice.

MEDIC First Aid certification may only be issued when a MEDIC First Aid-authorized Instructor verifies a student has successfully completed the required core knowledge and skill objectives of the program.

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Bloodborne Pathogens in the Workplace



he Occupational Safety and Health Administration (OSHA) has recognized that some employees face a significant health risk as a result of occupational exposure to blood or other potentially infectious material.

In 1991, OSHA issued the Bloodborne Pathogens Standard, 29 CFR 1910.1030, which applies to all employees who can reasonably come into contact with human blood and other potentially infectious material (OPIM) in the course of their job activities.

The purpose of the standard is to protect employees by minimizing or eliminating occupational exposure to disease-carrying microorganisms or "pathogens" that can be found in human blood and other body fluids.

The primary bloodborne pathogens are:

- Hepatitis B Virus (HBV)
- Hepatitis C Virus (HCV)
- Human Immunodeficiency Virus (HIV)

Other commonly recognized serious diseases include:

- West Nile Virus
- Syphilis
- Tuberculosis
- Influenza

OSHA has concluded that employers can minimize or even eliminate occupational bloodborne hazards by developing and enforcing a combination of exposure control strategies that work for all bloodborne diseases.



The Needlestick Safety and Prevention Act

An estimated 385,000 needlestick injuries occur annually in hospital settings. Nurses are the most frequently injured, but laboratory staff, physicians, housekeepers, and other healthcare workers are also injured.

In response to concern over these exposures, Congress passed the Needlestick Safety and Prevention Act, directing OSHA to revise the Bloodborne Pathogens Standard. This revision became effective in April 2001.

The revised standard states that "safer medical devices, such as sharps with engineered sharps injury protections and needleless systems, must be used where feasible." Safer needles have built-in safety control devices, such as those that use a self-sheathing needle, to help prevent injuries before, during, and after use through safer design features.

Since the act was implemented, there has been a 31.6% decrease in sharps injuries in non-surgical settings. For more information, OSHA has developed an excellent website dedicated to safety and prevention of needlesticks and sharps injuries. See the Hospital eTool (HealthCare Wide Hazards Module) at http://www.osha.gov. (Last accessed October, 2011)



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