

UNIVERSAL PRECAUTIONS

According to the Centers for Disease Control (CDC), universal precautions is a set of procedures designed to prevent the transmission of HIV, hepatitis, and other bloodborne pathogens. UP is a simple set of effective practices to protect the worker and the patient. These precautions apply to blood, other body fluids containing visible blood, semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, peritoneal fluid, pericardial fluid and amniotic fluid. Universal precautions do not apply to feces, nasal secretions, sputum, sweat, tears, urine or vomitus unless it contains visible blood. Typically, saliva contact does not require universal precautions unless there is visible blood or in the dental setting, where blood contamination of saliva is predictable. However, it is important to remember that universal precautions does not eliminate the need for other isolation precautions such as droplet precautions for influenza. Also, precautions should be based on the type of procedure or care to be delivered and NOT on the serological status of the patient.

**PRECAUTIONS ARE
BASED ON THE
PROCEDURE OR CARE –
NOT SEROLOGICAL
STATUS OF PATIENT**

Blood and other body fluids covered by universal precautions may place the health care worker at risk of contracting the viruses responsible for HIV, hepatitis B, and hepatitis C. The risk is dependent upon the prevalence of the specific disease within the patient population, and the nature and frequency of exposure. Exposure may result from:

- Percutaneous injury by a needle or sharp
- Mucocutaneous injury as through a splash into the nose, eyes or mouth
- Blood contact with non-intact skin.



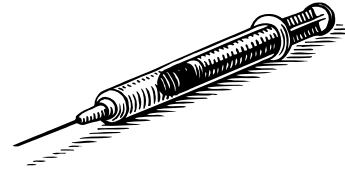
The most common form of percutaneous injury results from two handed re-capping of needles. Most blood exposures are preventable.

UNIVERSAL PRECAUTIONS (CONTINUED)

A good set of universal precautions should include the following:



- Handwashing before and after patient contact AND upon removal of gloves
- Elimination of 2 handed re-capping of needles
- Safe collection of needles and sharps in puncture resistant and liquid proof containers
- Wearing gloves when in contact with blood, body fluid requiring UP, mucous membranes or non-intact skin AND when handling items



contaminated with blood or body fluids to which UPs apply

- Wearing mask, eye protection and gowns whenever there is the potential for splash
- Covering cuts and abrasions (on the health care worker) with a water-proof dressing
- Promptly cleaning up spills of blood and other body fluids to which Ups apply
- Employing safe systems for the collection and disposal of healthcare waste and soiled linen
- Use of disposable mouth pieces resuscitation bags and other ventilatory devices
- Hepatitis B immunization
- Personal protective equipment that staff helps to choose and educated on its use.

Gloves should be available for phlebotomy and should be worn:

- when the health care worker has cuts or scratches or breaks in the skin;
- when the health care worker judges that contamination might occur, as in dealing with an uncooperative patient;
- during finger and heel sticks on infants and children; and
- during training.



In order to prevent transmission of the pathogens to those who will provide care in the home, including family members, it is vital that appropriate instructions be given to them. These instructions should include a guide on when to wear gloves, when to employ other protective equipment, how to deal with sharps (if in use) and how to dispose of contaminated waste. The attached sheet provides basic information however, the health care staff should ensure that the care givers understand the instructions and provide local resources that may be of assistance including the local health department. There is also a handout on the CMElectures website.