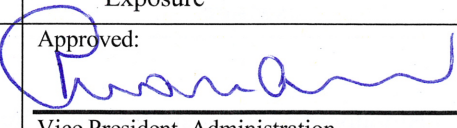
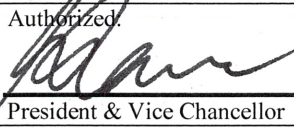
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<p>Submitted: Risk Management Support Group</p>	<p>Approved:  Vice President, Administration</p>	<p>Authorized:  President & Vice Chancellor</p>

1. PURPOSE

- 1.1. To provide guidelines for those exposed to human blood, body fluids, tissue or sharps during the course of their work and/or studies.
- 1.2. To identify and follow up with employees, learners, working visitors and volunteers who sustain injuries and/or body fluid exposure.
- 1.3. To provide an integrated approach for employees and students who may sustain injuries and/or body fluid exposure in the course of their work/studies.

2. SCOPE


- 2.1. All McMaster University faculty, staff, student learners, working visitors and volunteers.

3. RELATED DOCUMENTS

- 3.1. Occupational Health & Safety Act (OHSA) R.S.O 1990
- 3.2. Workplace Safety & Insurance Act of Ontario, 1997
- 3.3. Bloodborne Diseases Surveillance Protocol for Ontario Hospitals (Publication #206)
- 3.4. Canadian Immunization Guide, 7th Edition
- 3.5. McMaster University Injury/Incident Report Form
- 3.6. McMaster University Work/Education Agreement form for Students on Formal Unpaid Work Placements
- 3.7. First Aid Program, RMM# 1204
- 3.8. Reporting & Investigating Injury/Incident/Occupational Disease Program, RMM# 1000
- 3.9. WSIB/ LTD Management Program, RMM# 902
- 3.10. Biosafety Program, RMM# 600
- 3.11. Hepatitis B Policy, RMM# 601
- 3.12. Human Pathogens and Toxins Act

4. DEFINITIONS & ACRONYMS

Body Fluid – All body fluids with the capability of transmitting disease organisms, eg: blood, seminal fluid, vaginal secretions, cerebral spinal fluid, synovial fluid, pleural fluid, peritoneal fluid, pericardial fluid, amniotic fluid and tissues.

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Bloodborne Pathogens – Bloodborne pathogens are agents that have the potential to cause illness in individuals who are exposed to them. Public Health Agency of Canada has advised that the pathogens of greatest concern in the workplace are the Hepatitis B Virus (HBV), the Hepatitis C Virus (HCV) and the Human Immunodeficiency Virus (HIV).

Hepatitis B – is a serious disease caused by a virus that attacks the liver. The virus, which is called Hepatitis B Virus (HBV), can cause lifelong infection, cirrhosis (scarring) of the liver, liver cancer, liver failure, and death. Immunization is a very effective method of preventing Hepatitis B.

Hepatitis C – is an infectious virus that is carried in the blood and affects the liver, which can cause cirrhosis (scarring) of the liver, liver cancer, liver failure, and death. There is no vaccine available to prevent Hepatitis C.

Human Immunodeficiency Virus – is the virus that causes Acquired Immunodeficiency Syndrome (AIDS). HIV attacks the immune system, resulting in a chronic, progressive illness and leaving infected people vulnerable to opportunistic infections and cancers. There is no vaccine for HIV, but drugs are available and if administered immediately after exposure can reduce the risk of becoming infected with the virus.

Learner – means a person who, although not under a contract of service or apprenticeship, becomes subject to the hazards of an industry for the purpose of undergoing training, evaluation or probationary work.

Sharps – Needles, syringes, blades, lancets, clinical glass and any other items that may be contaminated with blood or body fluids and could cause a cut, puncture or abrasion.


Supervisor – A person who has charge of a workplace or authority over a worker.

Working Visitor/Volunteer – means a worker who performs work or supplies a service but who receives no monetary compensation for doing so other than an allowance for expenses or an honorarium.

Worker – A worker is a person who performs work or supplies services for monetary compensation.

Acronyms:

- **EFRT** – Emergency First Response Team
- **EHS** – Employee Health Services
- **EOHSS** – Environmental & Occupational Health Support Services
- **FHSc** – Faculty of Health Sciences Safety Office
- **HBV** – Hepatitis B Virus
- **HCV** – Hepatitis C Virus
- **HIV** – Human Immunodeficiency Virus

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- **JHSC** – Joint Health & Safety Committee
- **OHSA** – Occupational Health and Safety Act
- **PBAC** – Presidential Biosafety Advisory Committee
- **WSIA** – Workplace Safety & Insurance Act
- **WSIB** – Workplace Safety & Insurance Board

5. RESPONSIBILITIES

5.1. Role of Senior Managers (Deans/Directors/Chairs/Managers):

Senior Managers or Their Designates shall:

- 5.1.1. Provide the resources and direction necessary to maintain the program.
- 5.1.2. Review and sign Injury/Incident Reports, as required.
- 5.1.3. Ensure that recommendations for corrective action have been implemented.
- 5.1.4. Ensure direct reports are aware and understand responsibilities under this program.

5.2. Role of Supervisor


The Supervisor shall:

- 5.2.1. Ensure that first aid is provided in case of injury/exposure.
- 5.2.2. Ensure that transportation for the injured person (worker or student), is provided to a health care practitioner.
- 5.2.3. Conduct the injury/incident investigation as soon as possible upon learning of the injury/incident.
- 5.2.4. Report all injuries/incidents within 24 hours of learning of the injury/incident by completing McMaster University Injury/Incident Report Form and send to FHSc or EOHSS and EHS.
- 5.2.5. Ensure employees are following up on the *Human Blood/Body Fluid Post Exposure* procedure and completion of the required forms.
- 5.2.6. Provide training to employees.
- 5.2.7. Ensure employees are following protocol and complete a Blood/Body Fluid Exposure Report, see Appendix #1.

5.3. Role of Worker or Student

The Worker/Student shall:

- 5.3.1. Immediately report incidents /injuries to the supervisor.
- 5.3.2. Obtain immediate treatment at a hospital emergency department, urgent care centre or family physician's office.

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- 5.3.3. Report all injuries/incidents by completing McMaster University Injury/Incident Report Form within 24 hours of occurrence, when possible.
- 5.3.4. Follow the *Human Blood/Body Fluid Post Exposure* procedure.
- 5.3.5. If health care is sought, complete WSIB paperwork as required.

5.4. Role of Security and Parking Services (Central Campus Only – 1280 Main Street West) **Security and Parking Services shall:**


- 5.4.1. Monitor the “88” emergency telephone line on a continuous basis.
- 5.4.2. Dispatch Security Officers to the scene of the medical emergency and assist in providing emergency first aid.
- 5.4.3. Dispatch the Student Emergency First Response Team when available to the scene of the medical emergency.
- 5.4.4. Provide copies of all medical emergency response reports to EOHSS.
- 5.4.5. Ensure all Security Officers are trained in First Aid/CPR.

5.5. Role of Employee Health Services **EHS shall:**

- 5.5.1. Report injuries to the Workplace Safety & Insurance Board (WSIB) using the appropriate documentation for the purposes of WSIB claim registration and entitlement.
- 5.5.2. Maintain post exposure records for employees who are exposed to bloodborne pathogens.

5.6. Role of EOHSS and FHSc **EOHSS & FHSc Shall:**

- 5.6.1. Assist supervisors (as required) in completing Incident/Injury investigations and determining root causes and appropriate corrective actions.
- 5.6.2. Ensure employees and supervisors follow the *Human Blood/Body Fluid post exposure* procedure (see section 6).
- 5.6.3. Notify the appropriate JHSC and Employee/Union Representative (if applicable) by providing copies of Injury/ Incident reports.
- 5.6.4. Provide education and training.

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6. HUMAN BLOOD/BODY FLUID POST EXPOSURE PROCEDURE

6.1. Following exposure to bloodborne pathogens the worker/student should:

- Remove contaminated clothing and gloves;
- Allow area to bleed freely, do not cover or apply pressure;
- Wash the affected area with soap and water and/or antiseptic product;
- If the eyes, nose or mouth are affected, use eyewash or shower station and flush with large amounts of water or normal saline for 15 minutes;
- The wound should be covered with a band-aid or dressing after first aid has been given;
- Report to supervisor or designate immediately of exposure for transport to medical care and for completion of injury/incident report;
- Seek medical advise for follow-up care immediately; and
- Supervisor to contact EOHSS/FHSc Safety Office immediately.

6.2. Supervisor and employee shall complete and submit an injury/incident report form within 24 hours of the occurrence.

6.3. EHS shall report occurrences involving employees which result in healthcare treatment and/or lost time from work to the WSIB.

6.4. EOHSS/FHSc Safety Office, EHS and Campus Health will liaise with one another, as appropriate, and communicate between departments any incidents/follow-up required.

7. RECORDS

7.1. EHS and the FHS Safety Office will keep copies of the Injury/Incident reports indefinitely and EHS will maintain all records relating to the WSIB claim.

7.2. Confidential medical information as well as post exposure follow up records will be maintained by the Occupational Health Nurse in EHS.

7.3. This information is collected and is being protected pursuant to section 39(2) and section 42 of the *Freedom of Information and Protection of Privacy Act* of Ontario (RSO 1990).



APPENDIX 1



Human Blood/Body Fluid Exposure Report

Last Name		First Name		ID Number	
<input type="checkbox"/> Employee <input type="checkbox"/> Volunteer	Department/Unit			Extension	
<input type="checkbox"/> Student <input type="checkbox"/> Visitor					
D/M/Y of Exposure	Time of Exposure	D/M/Y Reported		Location of Exposure	

1. Exposure Information *(To be completed by employee/supervisor)*

Type of Injury: (check all applicable)

Needlestick: ☐ Yes ☐ No

Splash: ☐ Yes ☐ No

Cut: ☐ Yes ☐ No

Bite: ☐ Yes ☐ No

Other: ☐ Yes ☐ No

If yes please specify: _____

Site of Injury: (check all applicable)

☐ Finger

☐ Hand

☐ Head

☐ Leg (lower)

☐ Leg (upper)

☐ Eye(s)

☐ Nose or Mouth

☐ Foot

☐ Arm

☐ Torso

☐ Skin: ☐ Surface ☐ Deep

Was the skin intact prior to puncture? ☐ Yes ☐ No

Was any protective equipment/clothing used?

☐ Gloves

☐ Mask


☐ Footwear

☐ Goggles/safety glasses

☐ Gown

☐ Face shield

☐ No protection

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Describe in detail how the exposure occurred: (what specific procedure were you doing and what happened)


Conditions contributing to accident: (e.g. awkward position, poor visibility, etc.)

2. Medical Attention *(To be completed by Attending Physician)*

Name: _____ Contact Number: _____

Signature of Attending Physician: _____ Date: _____

<p>Received Medical Attention</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>If yes, where:</p> <p><input type="checkbox"/> Emergency</p> <p><input type="checkbox"/> Wellington Medical Centre</p> <p><input type="checkbox"/> Other Health Facility: _____</p> <p style="text-align: right;">Please Specify</p>
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Describe first aid given:

Source Material and Risk of Transmission

<p>Risk of HIV:</p> <p><input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High</p>	<p>Risk of Hepatitis B/C</p> <p><input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High</p>
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Source material known to contain:

- ☐ Human Immune Virus (HIV)
- ☐ Hepatitis C Virus (HCV)
- ☐ Hepatitis B Virus (HBV)
- ☐ Unknown

<p>Employee Agreed to Testing:</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Necessary</p>
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Signature of Injured Person: _____ Date: _____

Supervisor Name: _____ Date: _____

Please return completed form to:

Occupational Health Nurse, Employee Health Services

Tel: 905-525-9140 ext. 20310

Confidential Fax: 905-528-0449