APPENDIX **Universal Precautions**

INTRODUCTION

In recognition of the increased awareness, and presence of, infectious diseases among the general public, every effort will be made by all pre-hospital personnel to prevent the transmission of disease to employees or between patients. The procedures outlined in this document are mandated for all personnel while performing their regular duties as patient care providers. The Texas Department of Health and Human Services requires certain procedures and tasks be outlined by the employer and followed.

PROCEDURE

- A. Personnel who are at risk of exposure to blood borne pathogens:
 - 1. Paramedics
 - 2. First Responders
 - 3. Fire Department Personnel
 - 4. Law Enforcement Personnel
- B. Personal Protective Equipment The following equipment should be immediately available to all personnel whenever providing patient care:
 - 1. Disposable latex gloves, for direct patient contact.
 - 2. Mask/Shield devices for protection of the eyes, mouth, and nose.
 - 3. Impervious membrane gowns.
 - 4. Bag-Valve Mask Device.
 - 5. Hep-filter mask (for protection from airborne pathogens such as TB).
- C. Pre-hospital personnel will be responsible for using appropriate protective equipment while performing specific skills. The following list of skills and required protective equipment shall be used:
 - 1. Patient Assessment: Gloves shall be worn throughout the patient assessment. It is recommended to don gloves prior to arriving at the patients side. Gloves should be directly available at all times.

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- 2. Venipuncture: Gloves shall be worn on both hands while performing any venipuncture, including IV starts and "blood draws". A sharps container shall be immediately present for the Paramedics use when performing the venipuncture.
- 3. All Advanced Airway Procedures/Suctioning: Gloves shall be worn on both hands during all advanced airway/suctioning procedures. A face shield/mask combination will be worn during the entire airway/suctioning procedure. Regular eyeglasses are not sufficient to protect against exposures.
- 4. Combi-Tube/Oropharyngeal Airways: Use the same precautions as for suctioning (item 3).
- 5. Major Bleeding: Gloves, mask/shield, and an impervious membrane suit/gown shall be worn to prevent contamination of clothing (use a suit/gown when appropriate).
- 6. Coughing/Spitting by Patient: Masks may be placed on the patient if it will not interfere with the airway or other patient care procedures. EMS personnel should wear gloves, mask/shield, and gown (use a gown when appropriate and will not interfere with patient care).
- 7. Contact With Any Body Fluids: Gloves must be worn when any contact with body fluids exists regardless of type or cause. Gloves should be worn if mechanisms or probability exists for fluids to be present.
- 8. Contact With Saliva: Although saliva has not been implicated in blood borne pathogen transmissions, it is a mode of transmission for other illness. Equipment will be utilized to prevent contact during resuscitation efforts. A pocket mask should be immediately available to all personnel. A disposable BVM will also be available in an immediately accessible location and should be used in all resuscitative efforts.
- D. Engineering and Work Practice Controls
 - Hand Washing: All personnel who perform a task where there is a risk of exposure to blood or body fluids shall wash their hands as soon as feasible, after removing Personal Protective Equipment (gloves, mask/shield, etc.). When it is not feasible to wash hands, personnel are to use antiseptic hand cleaner. Hands should be washed with warm water and soap at the earliest convenience.

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- Eating/Grooming: Personnel shall not eat, drink, smoke, apply cosmetics
 or lip balm, or handle contact lenses until hands are washed. Even though
 hands are washed following patient contact, personnel shall also wash
 their hands following cleaning of the emergency vehicle and its
 equipment.
- 3. Sharps Handling: Needles or any other types of sharps shall not be bent, sheared, or recapped. All sharps shall be placed in the appropriate sharps container provided in the work area. The containers shall be kept in all patient care areas, or in "kits" that carry portable equipment that is intended to provide this procedure at the location of the patient. Sharps shall be disposed of according to the LPEMS' procedures.
- 4. Restricted Activity in the Work Area: No eating, drinking, smoking, applying cosmetics, or handling of contact lenses will be permitted in ambulances or designated dirty utility areas.
- 5. Transport of Contaminates: All blood samples, avulsed, amputated or expelled tissue removed and transported to a hospital will be placed in a container and appropriately labeled. The container must be leak-proof, puncture-resistant, and sealed to prevent spillage.

SPECIAL CONSIDERATIONS/NOTES/PRECAUTIONS:

- 1. When cleaning equipment or unit, use a bleach water mixture (or equivalent) with at least 1:10 concentration (bleach/water). For cleansing of suspected TB infected equipment, one should use a 1:1 mixture.
- 2. If you believe you've been exposed ('exposure') to a patient;
 - a. Immediately stop exposure, protect yourself.
 - b. Cleanse the exposure site ASAP with disinfectant soap and water.
 - c. Report the incident to your Immediate Supervisor for guidance ASAP.