BLOODBORNE PATHOGENS

Exposure to bloodborne pathogens is an ongoing concern for health care workers. *Bloodborne pathogens are disease causing microorganisms found in human blood as well as human blood components and products*. While there are a number of bloodborne pathogens, those caused by the Hepatitis B virus and human immunodeficiency virus pose the greatest threat to health care workers.

HIV-AIDS

The human immunodeficiency virus (**HIV**) is the newest of the bloodborne diseases. It is estimated that by the end of 1992 infected over 2 million people were infected with the HIV virus. Health care workers have a slightly higher risk of contracting the virus than the public. Symptoms may vary but include weakness, fever, sore throat, nausea, headaches, diarrhea, and other flu-like symptoms. However, *many people show no apparent symptoms for years after the infection. The general belief is that those who contract the HIV virus will ultimately develop* ***Acquired Immunodeficiency Syndrome*** *or* ***AIDS.***

Currently, no vaccine exists to prevent the occurrence of HIV and there is no cure.

HEPATITIS B

Hepatitis B is a liver disease; and usually results in inflammation of the liver and can progress to many serious conditions such as cancer and cirrhosis. Each year 300,000 new cases of Hepatitis B occur. *It estimated that one out of every 500 healthy Americans is a carrier of the Hepatitis B virus*. A carrier is a person who has had Hepatitis B and no longer shows any symptoms. However, *the virus can remain in the body and is able to be transmitted to others*. Some of our consumers are carriers of the Hepatitis B virus.

After exposure, it can take 2 weeks to 6 months for Hepatitis B to develop. *Initial symptoms resemble those of a mild flu-like illness and therefore may go undiagnosed,* or may be very mild or absent. Symptoms include fatigue, nausea, loss of appetite, muscles or joint aches, vague abdominal pain, and sometimes, diarrhea. Some individuals will develop dark urine and light colored stools, followed by jaundice in which the skin and whites of the eyes appear yellow.

There is no medical cure for hepatitis B. Most people recover within 6-10 weeks but 10-20% may still have abnormal test results six months after onset of the illness. Between 6 to 10 people out of 100 who catch Hepatitis B, become chronic carriers. About one-fourth of these carriers develop chronic active Hepatitis which has the potential to progress to more serious liver diseases. Progression may be slow or rapid or it may continue unchanged, or subside spontaneously. There is a probability of death (1-2%).

Although there is no cure, **Recombivax HB**, a vaccine against Hepatitis B, can be available through our agency. It is a noninfectious vaccine cloned from the Hepatitis B surface antigen and grown in yeast cells, and is free of human blood products. Each batch of the vaccine is tested for safety. Two doses of vaccine by injection in the deltoid muscle of the upper arm one month apart, followed by a third dose five months after the second, are needed to achieve maximum immunity. *After three doses, the Hepatitis B vaccine is 85-95% effective* in preventing Hepatitis B infection in those who have received the vaccine. Protection for normal, healthy adults lasts at least seven years. In addition, vaccination begun immediately after exposure to the Hepatitis B virus can often prevent infection.

The incidence of side effects from the vaccine is very low. There has been no allergic reaction reported. The most common side effects have been mild soreness at the site of the injection, fever, and fatigue. Women who think they are pregnant should check with their physicians before receiving the vaccine.

UNIVERSAL PRECAUTIONS

The Center for Disease Control and the American Hospital Association have recommended that blood and body fluid precautions has to be used for all patients, and that all *patients be considered potentially infectious*. This practice is referred to as universal precautions.

Universal precautions for blood and body fluids is a set of guidelines designed to protect you from pathogens that might be transmitted through contact with blood or other body fluids. It involves the use of barriers such as gloves, gowns, masks; face shields, foot wear, and head protection, as well as the safe handling of needles and sharp objects.

Wear protective attire when being exposed to blood, body tissues, and some body fluids such as breast milk, semen, vaginal and cervical secretions, and cerebrospinal, peritoneal, pericardial, and amniotic fluids. Other body fluids, such as feces, nasal secretions, sputum, sweat, tears, urine, and vomits are included only when they contain visible blood. When these body fluids do not contain visible blood, they are not associated with the transmission of AIDS or Hepatitis B, but they may be associated with other types of infection.

In health care settings, bloodborne diseases most often enter the body through breaks in the skin or mucous membranes. These exposures most often occur through needle sticks; human bites, skin abrasions & cuts.

Blood is the single most important mode of transmission for bloodborne diseases. Whenever there is the potential to meet blood or body fluid, wear gloves. Latex and vinyl gloves are equally effective as barriers against infection. Use new disposable gloves for one person or task at a time. Gloves are not to be recycled. You should wear gloves when encountering broken skin or mucous membranes. If your hands are chapped, or if you have broken skin, wear double gloves.

- A mask is required whenever there is a possibility of splatter or airbornesecretions, or an undiagnosed cough.
- A disposable face shield is required whenever there is a possibility of splatterto the eyes and face.

- A disposable apron or gown is required whenever there is a possibility ofsplatter to the clothes.
- Protective hair cover is required whenever there is a possibility of splatter tothe hair.

After use, all protective garments are contaminated. Do not wear in other areas. You are required to remove them carefully to prevent exposure to the pathogens on the outside surfaces.

Procedures for Removal of Contaminated Protective Garment

1. Untie waist strings of the gown first (They are contaminated). Untie neck stringsof gown. Remove gown without touching outside of gown. You can grasp the neckband or back neck of gown to pull off gown. Turn gown inside out and dropin designated biohazard container. (Neck strings or back of neck of gown is clean. Outside of the gown is contaminated.)
2. Grasp outside of one glove and turn inside out gently to remove. Slide a finger under the cuff of the other glove, and grasping the inside of the other glove, turn itinside out while removing gently. Dispose of gloves in designated staff biohazardcontainer. (The outside of the glove is contaminated. You must remove gloves by turning them inside out. You touch only the inside of the glove to avoid coming into contact with pathogens.)
3. Untie mask and drop by strings into waste container. (Center of mask iscontaminated.)
4. Wash your hands immediately.

Hand washing is the most important part of universal precautions. Good hand washing techniques is the best defense against acquiring any diseases. To wash your hands:

- Turn the faucet on using a paper towel. Use warm water whenever possible.
- Apply soap (preferably anti-bacterial) from dispenser.
- Work up a good lather.
- Interlace your fingers. Be sure the soap gets under your nails.
- Wash 2-3 inches above the wrist.
- Rinse well with your fingertips downward.
- Dry your hands with paper towels. Turn the faucet off using the paper towels.

Location & Removal of Designated Biohazard Container

This container should be in a common area. The container should be clearly marked BIOHAZARD. All contaminated items such as disposable gloves, gauze, sanitary napkins, dressings, Kleenex, Band-Aids, etc. must be disposed in this container only.

Remember the biohazard container should be disposed of at least once a day. Tie the bag shut then place tied bag inside regular trash container. This will create a double-bagged system. (The biohazard container lined with a plastic bag; the regular trash lined with a plastic bag. You tie the biohazard container bag shut then disposed of it in the regular trash bag therefore creating the double-bagged system.)

Tasks	Risk Analysis	P.P.E	Work Practice Control
Dental Hygiene: Unless it is done in such a way that staff could not possibly be sprayed	Body Fluids	Glove Goggles	Dispose of gloves and related material (gauze etc.) in designated biohazard container.
Personal hygiene cares and/or diapers changes where contact with urine and/or stool may occur, including care to the anal and/or peroneal area.	Body Fluids	Gloves	Dispose of gloves and related materials in designated biohazard container. Dispose of soiled laundry in designated laundry bag. Bring laundry bag to the laundry room for rinsing & washing with detergent containing bleach.
Any injection of medication or changing *sharps. *Needles, disposable razors, lancets.	Body Fluids	Gloves	Dispose of gloves in designated biohazard container. Disposal of sharps in designated sharps container. (Empty & thick plastic detergent container). ***See enclosed handout***
Care of person who is vomiting, including handling clothing which has visible body fluids	Body Fluids	Gloves	Dispose of soiled laundry in designated laundry bag. Bring laundry bag to the laundry room for rinsing & washing with detergent containing bleach
Handling and cleaning of equipmentwhich been contaminated with bodysecretions such as tracheostomy & colostomy cannulas	Body Fluids	Glove Gown Mask	Dispose of gloves and related materials in designatedbiohazard container. Empty colostomy cannulas first followed with disposal
Routine First Aid	Body Fluids	Gloves	Dispose of gloves in designated biohazard container.
Menses care, including the handling of used sanitary napkins and any hygiene to the perineal area.	Body Fluids	Gloves	Dispose of used soiled napkin and gloves in designatedbiohazard container. Dispose of laundry in designated laundry bag. *** See enclosed handout***
Wound care, either first aid or routinedressing care.	Body Fluids	Gloves	Dispose of gloves and any related material (gauze, bandages, etc.) in designated biohazard container.
Diabetic testing	Body Fluids	Gloves	Dispose of gloves in designated biohazard container. Disposal of sharps in designated sharps container.
Any handling of clothing which hasblood on it.	Body Fluids	Gloves	Dispose of gloves in designated biohazard container. Disposal of sharps in designated sharps container.
Nail grooming (Fingernail clipper - 1per client) ****Diabetic patients: Performed bylicensed medical personnel only.***	Body Fluids	Gloves	Disinfect with alcohol wipes.

HIGHLIGHTS

Dressings, Band-Aids, or small items with blood or body fluids place in designated biohazard container then inserted in a regular trash bag. Remember always wear gloves to dispose of any waste.

Laundry contaminated with blood or body fluid handle as little as possible. Place in designated laundry bag for cleaning on site. If heavily soiled, rinse before washing & sanitize with detergents containing bleach and hot water is all that is necessary to decontaminate.

"Sharps", i.e. disposable contaminated syringes, lancets and disposable razors used at the work place, dispose of them in a puncture resistant container (large, thick detergent containers). To avoid accidental needle sticks, do not bend or manipulate needles by hand. Do not recap any sharp items. Fingernail clippers are to be sanitized after each use (Do not share fingernail clippers.)

When cleaning an area which is contaminated:

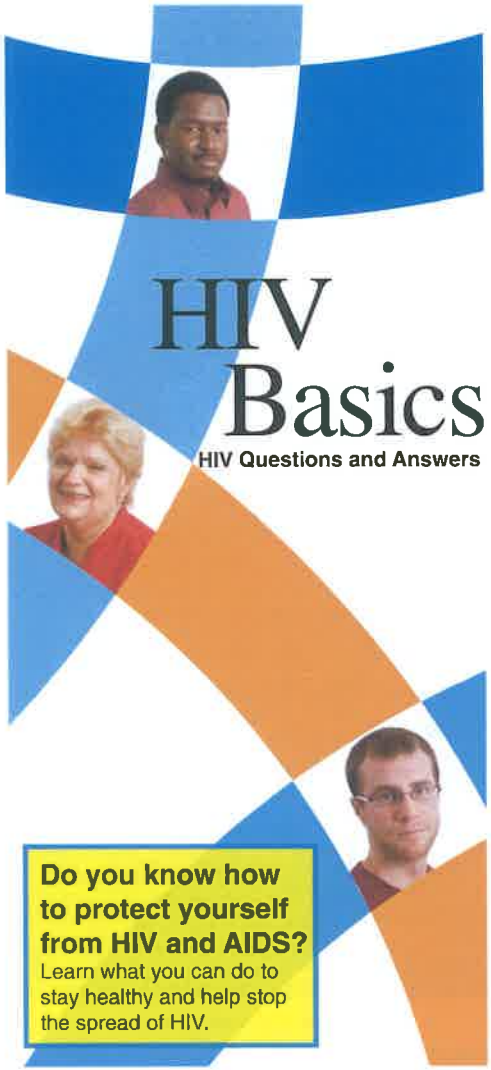
- Wear proper personal protective equipment – especially gloves.
- Clean up contaminant with a paper towel.
- Disinfect the area with an approved cleaning solution. (Bleach solution: 1 partbleach/10 parts water)
- Dispose of personal protective equipment and contaminated materials in thedesignated biohazard container.
- Wash hands.

Should you receive a direct exposure, wash the area immediately. Report the incident to your supervisor he/or she will send you for the following:

Occupational Health + Rehabilitation Inc.,
140 Carando Drive
Springfield, MA 01104
(413) 746-4006

- **A confidential medical examination and follow-up.**
- **Collection and testing of HBV and HIV status.**
- **Post exposure prophylaxis when indicated as recommended by the U.S. Public Health Service.**
  *(Note: Antiviral prophylaxis is effective within 24 hrs. of suspected exposure.)

If you would like HBV vaccine, fill out enclosed form and call (413) 794-5860



HIV Basics

HIV Questions and Answers

Do you know how to protect yourself from HIV and AIDS?
Learn what you can do to stay healthy and help stop the spread of HIV.

What are HIV and AIDS?

- HIV is the virus that causes AIDS.
- AIDS is a late-stage disease that involves severe damage to the immune system.

Does a person with HIV always have AIDS?

- No. People can live for years with HIV without getting AIDS, especially if they receive treatment.
- Sometimes people have HIV for years and do not show any signs or symptoms.

Is there a cure?

- There is not a cure for HIV or AIDS, but there are many effective treatments for HIV infection.
- People with HIV can get free or low-cost medical care to help them live long and healthy lives.

How is HIV spread?

- Through blood, semen, fluid from the vagina, and breast milk.
- Having vaginal or anal sex without a condom.
- Sharing needles and works when injecting drugs.
- Contact with blood from another person.
- Women with HIV can pass the virus to their children before or during birth or when they breastfeed.

Is there a link between HIV and other diseases?

- Yes. Unprotected sex can also put you at risk for sexually transmitted diseases such as gonorrhea, syphilis, chlamydia, herpes, and genital warts.
- People who have a sexually transmitted disease can get and pass HIV much more easily than people who don't.
- Contact with blood from another person can also spread hepatitis B or C.

Can HIV be spread in other ways?

- You cannot get HIV from casual contact like a hug or a handshake or by sharing a glass with someone who has the virus.
- You cannot get HIV from someone coughing or sneezing.
- HIV can sometimes be spread through oral sex, but it is low risk.

Am I at risk?

- Any time you have sex with a man or a woman or share needles you may be at risk for getting or passing HIV.
- Your risk goes up each time you take part in these behaviors.
- If your partner has sex or shares needles with other people, it increases your risk.

How can I lower my HIV risk?

Here are three ways to reduce your risk:

- Use condoms *every time* you have sex.
- Have oral sex instead of anal or vaginal sex.
- Reduce your number of sex partners.

Here are some other things you can do:

- Know your own and your partner's HIV and STD status and level of risk. This can help you make smart choices about sex with your partner.
- If your partner has HIV, do what you can to help him or her get treatment and stay healthy.

Massachusetts Department of Public Health
HIV/AIDS Bureau
www.mass.gov/dph/aids

HA1655 Revised Feb 2008

HIV Questions and Answers

If you inject drugs, these steps might help cut your risk:

- Use a new sterile needle and syringe each time you inject drugs. You can get clean needles at many pharmacies in Massachusetts or from needle exchange programs.
- Do not share needles, cotton, cookers, or other equipment.
- If you must share, share with as few people as possible. Clean needles and equipment between uses.
- If you do re-use needles or syringes, clean them before each use by first rinsing them with water three times. Then fill with bleach, shake for two minutes, get rid of the bleach, then repeat two more times with new bleach. Rinse with water three times.

What should I know about HIV if I am pregnant or thinking about getting pregnant?

- Women with HIV can pass it to their children before or during birth or through breastfeeding.
- Learn your HIV status. If you are at risk for HIV, you may want to get tested more than once.
- If you are HIV positive and pregnant, you can take certain medicines to reduce the risk of passing HIV to your baby. Most babies born to women who have received treatment do not get HIV.
- Bottle-feed with formula instead of breastfeed so that you don't pass HIV to your baby.

Why should I get tested?

- A test is the only way to know for sure if you have HIV.
- All test sites can point the way to medical care and support services to help you stay healthy.
- Since people sometimes pass on HIV even if they do not have any symptoms, knowing your HIV status can help you prevent passing HIV to your partner.

Where can I go to get an HIV test?

- You can get tested at your doctor's office.
- There are also test sites across Massachusetts.
- Some sites offer tests where they give you a number instead of using your name.
- To find a test site near you, ask your health care provider, call 800-235-2331, or go to **www.mass.gov/dph/aids.**

What else should I know about HIV testing?

- No one can force you to take a test, and you must give written consent before one is performed.
- There are different kinds of tests. Some test your blood, others use a swab to take fluids from your mouth. There is also a rapid test that gives you a result the same day.
- Test sites often offer screening for other sexually transmitted diseases and hepatitis.

Where can I get more information?

AIDS Action Hotline
English and Español: 800-235-2331
TTY: 617-437-1372
www.aac.org

Massachusetts Substance Abuse Information Help Line
English and Español: 800-327-5050
TTY: 617-536-5372

Public Health Fact Sheet — Hepatitis C

Massachusetts Department of Public Health, 305 South Street, Jamaica Plain, MA 02130

What is hepatitis?

Hepatitis is any kind of inflammation (a reaction which can include swelling and pain) of the liver. Hepatitis can be caused by many things including viruses (type of germ), drugs, chemicals and alcohol. At this time, there are five viruses known to affect the liver in particular. In the United States, the most common types of viral hepatitis are hepatitis A, hepatitis B and hepatitis C. These viruses are very different from one another, but all are infectious and may cause similar symptoms. They differ in how they are spread, how long the infection lasts, and how they are treated. A healthcare provider can test a person's blood for hepatitis A, B and C virus infection.

What is hepatitis C?

Hepatitis C is a liver infection caused by the hepatitis C virus. The hepatitis C virus is found in the blood and liver of people with hepatitis C infection. Most people with hepatitis C will go on to have chronic infection (long-term infection) and can pass it on to others. Some of these people will develop liver damage and will feel very sick while others may remain healthy for many years. The virus can eventually cause cirrhosis (scarring of the liver) and/or liver cancer in some people.

How is it spread?

The hepatitis C virus is spread primarily by direct contact with the blood (or body fluids containing blood) of an infected person. The most common way that hepatitis C virus is spread is through the use of injection drugs. Sharing needles, works, cotton, water, or any other drug injection equipment with an infected person can spread the virus. In the past, some people became infected after receiving a blood transfusion or organ transplant. Since July 1992, however, the blood supply has been carefully checked for this virus, and the blood supply is considered safe. Health care workers can get infected through needlesticks or sharps exposures on the job. The virus can be spread by sharing personal items such as a toothbrush, razor, or anything else that has blood on it. It can also be spread by tattooing, body piercing or acupuncture needles that have not been sterilized.

The hepatitis C virus can spread through sexual activity, but this is not common among people with one steady, long-term partner. People who have multiple sex partners have a greater risk of getting hepatitis C infection. Infected mothers can pass it on to their babies at birth.

The hepatitis C virus is NOT spread by casual contact such as hugging, sneezing, coughing, or sharing food and drinks.

What are the symptoms?

Symptoms of hepatitis C may include yellowing of the skin and eyes (jaundice), tiredness, loss of appetite, weight loss, nausea, stomach ache, and dark urine. Years later, cirrhosis may occur in some who are infected, when scar tissue replaces healthy liver cells.

How soon do symptoms appear?

When first infected with hepatitis C, a person may have no symptoms at all, or may have only mild symptoms. For those who do develop symptoms, the symptoms usually appear between six weeks and six months after infection. Many people with chronic hepatitis C infection do not develop symptoms until years, sometimes even decades, later.

How is hepatitis C diagnosed?

Hepatitis C is diagnosed with blood tests.

How is hepatitis C treated?

Hepatitis C infection can be treated with special drugs that fight viruses. Persons infected with hepatitis C infection should be vaccinated for hepatitis A and hepatitis B, two other viruses that cause liver damage, if they are at risk for these infections. People with hepatitis C should not drink alcohol, use illegal drugs, or take certain medications or dietary supplements that may cause more damage to the liver. Ask your doctor about treatment options and steps you can take to protect your liver.

How can I prevent hepatitis C?

There is no vaccine for hepatitis C.

People are at risk for having hepatitis C if they:

- Have injected street drugs or shared drug injection equipment, even just once.
- Have received a blood transfusion, blood products, or an organ transplant before July 1992.
- Have had many sexual partners, especially if they did not use condoms.
- Are health care workers (like doctors or nurses) who may be exposed to blood or needles.
- Are babies born to mothers who have hepatitis C.
- Have been on kidney dialysis.

The best way to prevent hepatitis C infection is to avoid contact with the blood of infected people.
Other ways to prevent the spread of hepatitis C include the following:

- If you shoot drugs, never share works with anyone. Wash your hands before and after injecting drugs. Don't share cocaine or snorting straws, since these can get blood on them too. Find out about treatment programs that can help you stop using drugs.
- Use a latex condom every time you have sex.
- Only get tattoos or body piercings from places using sterile equipment.
- Health care workers and people who clean up in hospitals or other places where needles or sharps are found should follow standard (universal) precautions with **every** patient.
- Never share razors or toothbrushes.
- If you have hepatitis C, don't donate blood, sperm, or organs.

Where can I get more information?

- Your doctor, nurse or clinic.
- Your local board of health (listed in the phone book under local government).
- The Massachusetts Department of Public Health (MDPH), Division of Epidemiology and Immunization at: (617) 983-6800 or toll-free at (888) 658-2850, or on the MDPH website at http://www.masshepc.org.
- The MDPH Hepatitis C Hotline at 1-888-443-hepC (4372).

How can getting hepatitis C be prevented?

There is no vaccine for hepatitis C, but you can take steps to protect yourself:

- Avoid any direct contact with blood.
- Never share drug injection equipment.
- Always use a latex condom when you have sex.
- If you get a tattoo or body piercing, be sure that it is at a licensed business that uses sterile inks and needles.

What should I do if I have hepatitis C?

You should talk to your health care provider about ways to protect your health. Don't drink alcohol. Check with a health care provider before taking any medications (prescription or non-prescription). Get vaccinated against hepatitis A and B if you are at risk for these diseases.

Learn how to avoid spreading the virus to others. For example, don't share razors, toothbrushes or any other items that might contain blood. Your health care provider can tell you about other basic things you can do to keep from spreading hepatitis C.

For more information about hepatitis C:

- Ask a health care provider or local health clinic;
- Call the Massachusetts Department of Public Health's hepatitis C hotline at 1-888-443-HepC (4372);
- Visit the Massachusetts Department of Public Health website at www.*mass*hepc.org (information about hepatitis A, B and C and other available resources); or
- Contact your local health department;
- Visit the Centers for Disease Control and Prevention (CDC) website at www.cdc.gov.

Massachusetts
Department of Public Health

www.state.ma.us/dph

www.*mass*hepc.org

June 2001

HEPATITIS C?

Learn more.

What is hepatitis C?

Hepatitis C is a virus that causes liver disease. Hepatitis C is a completely different disease from hepatitis A and B.

An estimated 100,000 people in Massachusetts have hepatitis C. Most of them don't know it—so they're not taking some important steps to protect their health.

How is hepatitis C spread?

People who have hepatitis C carry the virus in their blood. Hepatitis C spreads when infected blood enters an opening in the skin. This can happen if you share needles to inject drugs, for example.

Hepatitis C can be spread through sexual contact, although this appears to be rare. A pregnant woman can also give the virus to her unborn child.

Hepatitis C is ***not*** spread by casual contact like hugging, sneezing, coughing or sharing food and drinks.

Who is at highest risk for hepatitis C?

You are at risk if you:

- Received a blood transfusion or organ transplant before July 1992;
- Injected drugs, *even once*;
- Have had sex with many partners, especially if you didn't use condoms; or
- Have been on kidney dialysis.

How serious is hepatitis C?

Hepatitis C is very serious for some people, but not for others. Most people who have hepatitis C will carry the virus for the rest of their lives. At its worst, hepatitis C can cause liver failure and even death. It's not possible to know which people will develop serious problems.

What are the symptoms of hepatitis C?

Many people with hepatitis C have no symptoms. But even if you feel fine, the virus could be hurting your liver. And you could be spreading the disease to others.

Some people have flu-like symptoms such as extreme tiredness, nausea, and loss of appetite. However, it is often hard to know that these types of common complaints are due to hepatitis C. Some people with the virus may also have jaundice (yellowing of the eyes and skin).

How do I know if I have hepatitis C?

You need a simple blood test to know for sure. Talk to your health care provider about getting tested if you think you are at risk for hepatitis C.

Is there a treatment for hepatitis C?

Yes. A drug called interferon can be used to treat hepatitis C. It is usually used in combination with other drugs. Your health care provider can tell you more about treatment options and things you can do to keep your liver healthy.

Be sure.

PROTECT YOURSELF

How can nurses protect themselves from hepatitis C infection in the workplace?

Handwashing and standard precautions are the best lines of defense against the spread of all bloodborne pathogens in the health care setting. The precautions listed below will help protect you from exposure to bloodborne pathogens on the job:

Standard precautions

- Wear gloves whenever there is potential contact with any patient blood or body fluid.
- Wear recommended personal protective equipment whenever exposure to eyes, nose or mouth can be reasonably anticipated.

Sharps with Engineered Sharps Injury Protections:

- Use all sharps devices as recommended. Provide feedback on the effectiveness of new devices. If the sharps disposal container does not allow for the safe and easy disposal of sharps devices, ask for another.
- Alert your supervisor if recommended safety equipment is not available - including gloves for barrier protection, sharps disposal containers and sharps with engineered sharps injury protections.
- Take the time to discard all sharps equipment carefully and appropriately to ensure everyone's safety. Wash your hands after disposal of any contaminated device.
- Make sure sharps disposal containers are conveniently located in areas where patient care is provided. If a box is not available or securely positioned at eye level, notify your supervisor or occupational health nurse.
- Do not use overfilled containers! You have the right to prompt removal and replacement of filled containers. In the case of a problem, notify your supervisor or occupational health department.
- Take the time to learn how to use new safety devices. Attend training and practice sessions.

www.masshepc.org
1-888-443-HepC (4372)

www.cdc.gov
www.osha.gov

What should nurses know and do before and after a needle stick injury?

Understand recommended OSHA guidelines:

- Your employer is obligated under federal law to provide safety equipment:
  - Eye protection
  - Sharps with engineered sharps injury protections
  - Gloves
  - Sharps disposal containers
  - Face shields or masks
- Employers must provide free hepatitis B vaccination to workers at risk of exposure.
- Employers must provide immediate confidential testing, follow-up, treatment and prophylaxis when medically indicated, as recommended by the U.S. Public Health Service, after occupational exposures. (Employees are covered for occupational injuries or exposures under Workers' Compensation Law.)
- If you report an occupational exposure and your employer is unwilling to provide appropriate care or cover the cost of your care, contact the Massachusetts Department of Industrial Accidents in Boston (617) 727-4900.
- If you believe that your employer is not meeting its obligations, you have the right to file a complaint with the regional Occupational Safety and Health Administration (OSHA) office (617-565-9860 OR 800-321-OSHA). You can call OSHA at any time to talk about your concerns confidentially, without filing a formal report.
- If you have ever had an occupational exposure and were not tested for hepatitis C, consider being tested now.

If an exposure to bloodborne pathogens occurs:

- Clean the wound thoroughly with soap and water.
- Report your injury to your supervisor immediately.
- Go to the area designated for emergency care and evaluation.
- Complete an employee exposure form with as much detail as possible.
- Avoid attributing blame.
- Post-exposure prophylaxis (PEP) for HIV should be administered as soon as possible. CDC recommends a two- or three-drug combination. Be sure to complete the entire recommended course.
- If a source patient is identified, your supervisor or other designated agent should be responsible for seeking the patient's consent to be tested for HIV and hepatitis.
- Be aware of your employer's policy for baseline testing after exposure. The decision to be tested is yours.
- CDC recommends follow-up counseling and testing at 6 weeks, 12 weeks, and 6 months. If a source patient is found to be both HIV positive and hepatitis C positive, follow-up testing might be extended over a 12-month period.
- Consider seeking professional counseling for stress management.

OSHA standard (29 CFR 1910.1030)

Updated U.S. Public Health Service Guidelines for the Management of Occupational Exposures to HBV, HCV, and HIV and Recommendations for Post-Exposure Prophylaxis (MMWR June 29, 2001 / Vol. 50 / No. RR-11)

www.osha.gov
www.cdc.gov

Learn More. Be Sure.

Nurses need to know.

www.masshepc.org • 1-888-443-HepC (4372)

EDUCATE YOUR PATIENTS

Questions you can ask when assessing patient risk of hepatitis C infection:

- Did you receive a blood transfusion, blood products, or an organ transplant before July 1992?
- Have you ever (even once) injected drugs not prescribed for you?
- Have you worked in a profession or job where you were exposed to blood through a needle stick or sharps contact?
- Have you ever received kidney dialysis?
- Have you had unprotected sex with a known hepatitis C positive person?
- Have you had sex with many different partners without using condoms?

Patients who answer "yes" to one or more of these questions above may be at risk of hepatitis C infection.

What to tell patients who may be at risk (and haven't been tested):

Consider getting tested because if you have hepatitis C:

- There are steps you can take to avoid the progression of the disease (e.g., avoiding alcohol).
- You can avoid spreading hepatitis C to other people.
- There are treatment options.

Take these precautions:

- If injecting drugs, never share any drug injection equipment that could be contaminated with blood (syringes, cookers, cottons, etc.).
- If injecting drugs, enter a drug treatment program and/or consider using a needle exchange.
- Get vaccinated for hepatitis A and hepatitis B.
- Don't share razors, toothbrushes or other household items that may be contaminated with blood.
- Use a latex condom every time you have sex.



What to tell patients who have tested POSITIVE for hepatitis C:

- Many people live with the disease for a lifetime without any symptoms. Others may experience serious liver damage.
- There are things you can do to reduce the risk of disease progression. Getting primary care is important and there may be treatment options.
  - Eliminate alcohol intake. If you need help, ask for it so that you can take steps towards this goal.
  - Get vaccinated for hepatitis A and hepatitis B. These infections can cause additional damage to the liver.
  - Talk to your health care provider before taking any medication or herbal remedies, since some medications and herbs can harm your liver. This includes non-prescription medications.
- You can avoid spreading hepatitis C to other people by:
  - Never sharing any drug injection equipment. Enter a drug treatment program and/or consider using a needle exchange.
  - Using a latex condom every time you have sex if you are not in a long-term relationship with a single partner. While sexual transmission of hepatitis C is rare, using condoms will help protect the non-infected partner from hepatitis C and can protect both partners from many other sexually transmitted diseases.
  - Never sharing razors, toothbrushes or other household items that can be contaminated with blood.

What to tell patients who have recently tested NEGATIVE for hepatitis C, but are still at high risk for becoming infected:

- Although you have tested negative, remember that you may still be at risk.
- If injecting drugs, never share any drug injection equipment. Enter a drug treatment program and/or consider using a needle exchange.
- Get vaccinated for hepatitis A and hepatitis B.
- Don't share razors, toothbrushes or other household items that can be contaminated with blood.
- Use a latex condom every time you have sex if you are not in a long-term relationship with a single partner. While sexual transmission of hepatitis C is rare, using condoms will help protect the non-infected partner from hepatitis C and can protect both partners from many other sexually transmitted diseases.

www.masshepc.org 1-888-443-HepC (4372)

What is hepatitis C?

Hepatitis C is a virus that causes liver disease. Hepatitis C is a completely different disease from hepatitis A and B.

An estimated 100,000 people in Massachusetts have hepatitis C. Most of them don't know it—so they may not be taking important steps to protect their health.

Tips on Counseling About Safer Sex and Drug Use

Sex practices and drug use are difficult topics to discuss, but they are necessary to provide patients with critical information about protecting themselves and others.

- Assure patient confidentiality.
- Help your patients explore their options for reducing sexual or drug-using behavior risks.
- Let your patient know that issues about disease transmission are important.
- Listen to your patient.
- Accept that your patient's values may be different from your own.
- Be sensitive to expressions and gestures (both yours and your patient's). Eye contact, tone of voice, posture, and physical distance from your patient can confirm or contradict what is being said.
- If appropriate, a sense of humor can sometimes help communication.
- Avoid judgements about a patient's personal behavior.

Tips for Sensitive Conversations

To open the conversation, ask:

- "What over-the-counter or prescription drugs are you taking?"
- "How often do you use alcohol?"
- "Do you have a close friend or relative with hepatitis C?"

Honest answers may be more forthcoming if the behaviors discussed are normalized:

- "Some of my patients who use drugs inject them or snort them through shared straws. Have you ever shared injection drug equipment or a straw to snort drugs?"
- "Some of my patients who inject drugs don't share needles but use a common syringe (or rig) to mix and measure the drugs. Have you ever been in this situation?"

Ask direct questions:

- "Have you ever injected drugs or used drugs not prescribed for you?"
- "When was the last time you ...?"
- "How often do you ...?"
- "Do you use a latex condom when you have sex?"

Stop the Spread of Germs

Help prevent the spread of respiratory diseases like the flu and COVID-19:

Wash your hands often with soap and warm water, or use an alcohol-based hand sanitizer.

Avoid touching your eyes, nose and mouth.

Clean things that are frequently touched (like doorknobs and countertops) with household cleaning spray or wipes.

Cover your mouth when you cough or sneeze. Use a tissue or your inner elbow, not your hands.

Stay home if you are sick and avoid close contact with others.

Think ahead about how to take care of yourself and your loved ones. Visit **mass.gov/KnowPlanPrepare** for preparedness tips.

For more, visit: **www.mass.gov/2019coronavirus**

Massachusetts Department of Public Health

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