

## **UNIVERSAL (STANDARD) PRECAUTIONS**

Universal (or Standard) Precautions are the set of guidelines designed to help prevent transmission and minimize job-related exposure to blood-borne pathogens and other potentially infectious materials. The use of these precautions is required where possible, to eliminate the risk of transmission of infection, particularly those caused by bloodborne viruses. Everyone can carry infectious microorganisms. As such, it must be assumed that all blood and other bodily fluids/substances are potentially infectious.

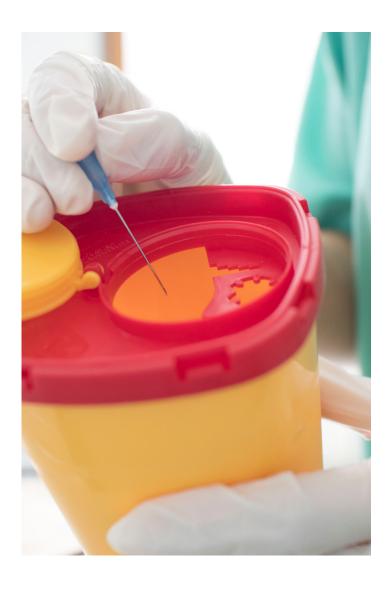
All organizations should have clear policies and procedures on using universal precautions and ensure that the training and resources to follow those guidelines are available and current.

## BODILY FLUIDS TO WHICH UNIVERSAL PRECAUTIONS APPLY<sup>2</sup>

- Blood
- Vaginal Secretions
- Semen
- Tissues
- Fluids (cerebrospinal, synovial, pleural, peritoneal, pericardial, and amniotic)
- Any bodily fluid that is visibly contaminated with blood

## BODILY FLUIDS TO WHICH UNIVERSAL PRECAUTIONS DO NOT APPLY<sup>2</sup>

- Feces
- Saliva or Nasal Secretions
- Breast milk
- Sputum
- Sweat
- Tears
- Urine
- Vomit



Learn More About NNEDV.ORG



#### **UNIVERSAL PRECAUTIONS**

### **CONSIST OF THE FOLLOWING PRACTICES:**

#### **HAND HYGIENE**

Considered one of the most important control measures for reducing the spread of infection.

- Hands should be washed with soap and water for at least 20 seconds, using a personal towel or disposable paper towels to dry your hands.
- Wash hands thoroughly after contact with blood, bodily fluids, or contaminated surfaces.
- Hands should also be washed immediately after glove removal.
- Hand sanitizer is an alternative way to clean hands when soap and water are unavailable.
- The CDC recommends using sanitizer with at least 60% alcohol when hands are not visibly soiled.

#### **ENVIRONMENTAL CLEANING**

Proper cleaning is important for preventing and controlling infections. Ensure that policies and procedures are in place that outline routine cleaning and disinfection of work and living spaces. Thorough cleaning is essential for infection control – particularly in work areas – because deposits of dust, soil, and microbes on surfaces can transmit infection.

- All surfaces, including countertops, handrails, and doorknobs, should be cleaned (wiped over) regularly with a neutral pH solution and warm water solution, rinsed, and dried.
  - Neutral cleaning solutions are neither acidic nor alkaline. They should not contain hydroxides, silicates, or phosphates.
- Clean any exposed surfaces to blood or other bodily fluids with a mild bleach solution of 1 part water to 10 parts water.
  - Bleach solution should be left on for at least 2 minutes before being wiped off.

#### PERSONAL PROTECTIVE EQUIPMENT (PPE)

A variety of barriers used alone or in combination to protect mucous membranes, skin, and clothing from contact with infectious agents. PPE includes gloves, masks, respirators, goggles, face shields, and gowns

#### MASKS, EYE PROTECTION, FACE SHIELDS

Wear a mask and eye protection, or a face shield, to protect eyes, nose, and mouth during cleaning procedures with blood and other bodily fluids

#### **GOWNS**

- Gowns can be used to protect clothes and the body when cleaning up blood and other bodily fluids or supporting an injured client.
- Dispose of potentially infectious or soiled waste in accordance with federal, state, and local regulations.

#### **GLOVES**

A protective barrier used when in contact with blood or other bodily fluids. Gloves are not an alternative to performing hand hygiene. Hand washing is required before putting on gloves and immediately after removal.

- Change and discard gloves after every use.
- Wear gloves (single-use, non-sterile) when there is potential contact with blood, bodily fluids, mucous membranes, or non-intact skin.
- Hand sanitizer should not be used on gloves to decontaminate them, nor should gloves be washed with soap and water and continued to be reused.

Learn More About NNEDV.ORG ©Date



#### UNIVERSAL PRECAUTIONS PRACTICES CONTINUED

#### SHARP OBJECTS HANDLING AND DISPOSAL

- All sharp objects must be disposed of in a closable, puncture-resistant container that is red or labeled with a biohazard symbol. It must be leakproof on the sides and bottom and kept upright throughout use and disposal.
  - Filled containers can sometimes be disposed of at doctors' offices, hospitals, health departments, or fire departments.
     Do not overfill containers.
  - Certain FDA-cleared sharps disposal containers may qualify to be mailed to a disposal site.
  - Learn more about the disposal of medical sharp objects at SafeNeedleDisposal.org [https://safeneedledisposal.org/]
- Sharp object containers might be kept in bathrooms and mounted to the wall or in a high cabinet.
  - Inform staff and survivors/residents on how to use the container and safety precautions.
  - These containers should be kept out of reach of children.
- Contaminated needles must never be recapped or be removed from disposable syringes by hand.

#### OTHER PRECAUTIONS TO EMPLOY

- Wash soiled laundry in hot water and dry on high.
- Cover all open wounds on your body.
- Sterilize any personal care products that may be exposed to blood or other bodily fluids.
- Employ caution when storing bleach and other cleaning chemicals, especially when children are present.
  - Never mix bleach and ammonia, as these produce a poisonous gas.

#### POST-COVID ILLNESS PRECAUTIONS

While these precautions came from the COVID-19 pandemic, these should be employed when staff and residents are sick with other illnesses such as the flu, RSV, or strep throat.

- Provide COVID testing to residents and staff when needed and when requested.
- Wear a mask if a resident is sick.
- Provide free masks to all residents and staff.
- Provide disinfecting wipes throughout the shelter and regularly wipe down surfaces.
- For residents who are sick, provide isolation space where they can recover.
  - If the resident is accompanied by children, a discussion with the parent regarding family isolation should occur.
  - Offer transportation to medical appointments so residents can receive timely testing and treatment.

Stay informed on changing COVID-19 precautions and isolation recommendations from the Centers for Disease Control and Prevention.

https://www.cdc.gov/coronavirus/2019-ncov/your-health/isolation.html

# CONCERNS ABOUT IMPLEMENTING UNIVERSAL PRECAUTIONS?

Health Departments are well-trained in local and state requirements. They are able to assist and answer any questions.

Learn More About NNEDV.ORG ©Date



#### REFERENCES

#### UNIVERSAL (OR STANDARD) PRECAUTIONS & OPIM

1https://www.ncbi.nlm.nih.gov/books/NBK470223 reference 1,2,3

Yasin J, Fisseha R, Mekonnen F, Yirdaw K. Occupational exposure to blood and body fluids and associated factors among health care workers at the University of Gondar Hospital, Northwest Ethiopia. Environ Health Prev Med. 2019 Mar 09;24(1):18.<sup>1</sup>

Larson C, Oronsky B, Varner G, Caroen S, Burbano E, Insel E, Hedjran F, Carter CA, Reid TR. A practical guide to the handling and administration of personalized transcriptionally attenuated oncolytic adenoviruses (PTAVs). Oncoimmunology. 2018;7(9):e1478648.<sup>2</sup>

Brooks C, Ballinger C, Nutbeam D, Mander C, Adams J. Nursing and allied health professionals' views about using health literacy screening tools and a universal precautions approach to communication with older adults: a qualitative study. Disabil Rehabil. 2020 Jun;42(13):1819-1825.<sup>3</sup>

#### UNIVERSAL PRECAUTIONS DO & DO NOT APPLY

<sup>2</sup>https://www.cdc.gov/mmwr/preview/mmwrhtml/0000039. htm#:~:text=For%20universal%20precautions%2C%20protective%20 barriers,%2C%20masks%2C%20and%20protective%20eyewear https://www.osha.gov/bloodborne-pathogens/worker-protections

#### **HANDWASHING**

<sup>3</sup>https://www.cdc.gov/handwashing/show-me-the-science-handwashing. html reference 15,17,18.

Todd EC, Michaels BS, Smith D, Greig JD, Bartleson CA. Outbreaks where food workers have been implicated in the spread of foodborne disease. Part 9. Washing and drying of hands to reduce microbial contamination. external icon J Food Prot. 2010;73(10):1937-55. <sup>15</sup>

Fuls JL, Rodgers ND, Fischler GE, Howard JM, Patel M, Weidner PL, Duran MH. Alternative hand contamination technique to compare the activities of antimicrobial and nonantimicrobial soaps under different test conditions.external icon Appl Environ Microbiol. 2008;74(12):3739-44.<sup>17</sup> Jensen D, Danyluk M, Harris L, Schaffner D. Quantifying the effect of hand wash duration, soap use, ground beef debris, and drying methods on the removal of Enterobacter aerogenes on hands external icon. J Food Prot. 2015 Apr;78(4):685-690.<sup>18</sup>

https://pubmed.ncbi.nlm.nih.gov/34033323/ https://pubmed.ncbi.nlm.nih.gov/?term=Denault+D&cauthor\_id=34033323

**DENAULT D**, Gardner H. 2023 Jul 20. In: Stat Pearls [Internet]. Treasure Island (FL): Stat Pearls Publishing; 2023 Jan-. PMID: 34033323

#### PERSONAL PROTECTIVE EQUIPMENT (PPE)

https://www.cdc.gov/infectioncontrol/guidelines/isolation/index.html pg. 64 reference 862

Maki DG, Alvarado C, Hassemer C. Double-bagging of items from isolation rooms is unnecessary as an infection control measure: a comparative study of surface contamination with single- and double-bagging. Infect Control 1986;7(11):535-7.862

#### **GLOVES**

#### https://www.ncbi.nlm.nih.gov/books/NBK470223/

Hinkin J, Gammon J, Cutter J. Review of personal protection equipment used in practice. Br J Community Nurs. 2008 Jan;13(1):14-9. [PubMed] [Reference list]<sup>12</sup>

#### MASK

http://www.fda.gov/MedicalDevices/ProductsandMedicalProcedures/ GeneralHospitalDevicesandSupplies/PersonalProtectiveEquipment/ ucm055977.htm content current as of 3/10/2023

http://Knowlts.NIOSH.gov DHHS (NIOSH) Publication Number 2013-138 June 2013. CDC recommends the N95 Filtering Facepiece Respirator

- Tight-fitting. Tested and approved by NIOSH. Vs. the Surgical Mask
- Loose fit creates gaps where particles can enter. Cleared by the FDA found on page 3.

#### **GOWNS**

Apic.org/ shelter disasters

chromeextension://efaidnbmnnnibpcajpcglclefindmkaj/https://apic.org/Resource\_/TinyMceFileManager/Practice\_Guidance/Emergency\_Preparedness/Shelters\_Disasters.pdf pg.13 reference 6

Siegel, J. D., Rhinehart, E., Jackson, M., Chiarello, L., and the Healthcare Infection Control Practices Advisory Committee. Guideline for isolation precautions: Preventing transmission of infectious agents in healthcare settings 2007. Retrieved July 3, 2007 reference 6 pg.29

#### **ENVIROMENTAL CLEANING**

"CDC's Guidelines for Environmental Infection Control" (2019), downloaded from https://www.cdc.gov/infectioncontrol/pdf/guidelines/environmentalguidelines-P.pdf on February 11, 2021.

b. Cleaning Housekeeping Surfaces pg. 89; reference 973 Gable TS. Bactericidal effectiveness of floor cleaning methods in a hospital environment. Hospitals JAHA 1966; 40:107–11.

Guideline for Disinfection and Sterilization in Healthcare Facilities (2008) <a href="https://www.cdc.gov/infectioncontrol/guidelines/disinfection/">https://www.cdc.gov/infectioncontrol/guidelines/disinfection/</a> pg.43 reference 557 Chitnis V, Chitnis S, Patil S, Chitnis D. Practical limitations of disinfection of body fluid spills with 10,000 ppm sodium hypochlorite (NaOCI). Am. J. Infect. Control 2004; 32:306-8. 557

#### SHARP HANDLING AND DISPOSAL

OSHA Bloodborne Pathogen Standards. Engineering and Work Practice Controls

Post-COVID Illness Precautions

https://www.cdc.gov/coronavirus/2019-ncov/community/homeless-correctional-settings.html#:~:text=Offer%20high%2Dquality%20 masks%2Frespirators,for%20more%20information%20on%20PPE

Learn More About NNEDV.ORG ©Date