



OSHA Inservice

UEMS Occupational and Travel Health
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What does OSHA stand for?

- Occupational Safety and Health Administration
- OSHA requires all potentially occupationally exposed employees to be given, at no cost, information and inservice education annually.



Specific Requirements

■ Annual inservices

- What is an occupational exposure
- How to use PPE
 - Gloves, Goggles, Respirators
- What to do if an exposure occurs
- Exposure evaluation and follow up
- Record keeping
- Hepatitis B vaccine
 - Availability



OSHA Guidelines

- OSHA 29 CFR 1910.1030
 - Blood Borne Pathogens Standard
- DOHMH A1-00-02 (October 2000)
 - Management of occupational exposure to HIV
- MMWR Vol.59/No.RR-11 June 29, 2001
 - Use of respirators (12/31/2003)



Exposure Control Plan

- A written plan tailored to your worksite
 - Plan of implementation
 - Use of Standard Precautions
 - Provision of hand washing facilities
 - Disposal of hazardous waste
 - Hep B vaccine program
 - Infection control officer and record keeping procedures
 - Procedure to evaluate exposure incidents

Exposure Control Plan cont'd

- Must be reviewed annually
- Plan must be accessible to the employee (29 CFR 1910-1020 (e))



New Employee Inservices

- Must occur within 10 days of assignment
- Includes all information in annual training
- Hep B vaccine shall be made available after orientation and within 10 days of initial assignment in the field





Equipment

- All PPE must be supplied at no cost to the employee (including latex allergy type of PPE)
- Must have hand washing facilities
- Must have procedure to dispose of contaminated waste (define)
- Have proper labeling



Exposure Definition

- Any time an employee has been exposed to blood, saliva or body fluids containing **visible** blood from another person
- Two types of exposures
 - High risk
 - Low Risk

High Risk Exposure

- Contact between the blood, bloody saliva or body fluid with **visible** blood of the source and an open cut, burn, abrasion or dermatitis
- A bite from the source which breaks the skin of the recipient. The depth of the bite and length of exposure are considered during the evaluation





Low Risk Exposure

- Blood splashes of another person onto the **intact** skin of the employee
- A bite of the skin which does **not** penetrate
- A needle stick from a clean needle
- Contact between the blood or body fluid of a person determined to be at low risk or no risk for communicable disease

Treatment of High Risk Exposure

- Determine the risk probability
- Initiate ARV's within 1-2 hours post exposure
- No Hep B vaccine or incomplete series
 - HBIG and start vaccine series immediately or within 7 days
 - Failed converters?
- Complete series and determine titer
- Obtain baseline HIV, Hep B/C labs



Treatment of High Risk Exposure

- **DO NOT DELAY** treatment for paperwork or to obtain source patient status
- HIV ARV's are most effective if started within 1-2 hours of exposure



Low Risk Exposure

- Baseline Labs and follow up
- HIV, Hep B/C labs
- Follow up 1 week, 1 month, 3 months and 6 months
- Conversion time frames?



Follow Up Care

- Determine source patient status (methods and utility)
- Counseling of exposed employee
- Repeat testing schedule review





Infectious Disease Exposures

- TB
- MDRTB
- Chicken Pox
- Meningitis
- Community Acquired Pneumonia
- Protection N-95

Record Keeping

- Inservice records shall include
 - Date of inservice
 - Content Summary
 - Name and qualifications of educator
 - Names and titles of attendees
 - Inservice record maintenance for 3 years



Record Keeping

- Medical records shall include:
 - Name and SSN of employee
 - Hep B vaccine status and dates
 - Copy of all results of examination, testing and follow up procedures
 - Confidentiality
 - Written consent for release of information must be provided by employee



Record Keeping

- Medical records shall include:
 - Copy of all exposure reports and outcomes
 - Maintained by employer for duration of employment plus 30 years





Hepatitis C

- Method of transmission
- No current cure
- Liver Cancer risk
- High risk behaviours



Bioterrorism

- Anthrax
 - Cipro x 3 months
- Smallpox
 - Vaccine available
- Q Fever
 - Doxycycline x 3 weeks
- Ricin
 - Supportive treatment (ventilator etc)
- Protection via the N-95



Respirator Use

- Requires annual medical evaluation
- Requires annual fit testing
- Facial hair obstruction mustaches only

Summary

- Use Standard Precautions all the time/every time
- Report all exposures immediately
- Get treatment immediately
- Get tested via the guidelines
- Dispose of medical waste properly





Thank you!!!
Questions?????