

Bloodborne Pathogens Key Points

Be Aware. Be Safe. Be Certified.

What Are Bloodborne Pathogens?

- **Bloodborne pathogens** are **infectious microorganisms** present in human blood and certain bodily fluids that can cause disease.
 - Common examples include:
 - **Hepatitis A, B, C**
 - **HIV** (Human Immunodeficiency Virus)
 - **AIDS** (Acquired Immunodeficiency Syndrome)
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How Are They Transmitted?

Bloodborne pathogens are transmitted through **direct contact with infected bodily fluids**, especially when entering:

- Cuts
- Open wounds
- Mucous membranes (eyes, nose, mouth)

Fluids that *can* transmit pathogens:

- Blood
- Semen
- Vaginal fluid
- **Pleural fluid** (lungs)
- **Synovial fluid** (joints)
- **Cerebrospinal fluid** (brain/spinal cord)

Fluids that *cannot* transmit pathogens (unless visibly contaminated with blood):

- Saliva
 - Tears
 - Sweat
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- Vomit
- Urine
- Sputum
- Nasal secretions

Who Needs Bloodborne Pathogen Training?

OSHA requires training for individuals at risk of exposure, including:

- First responders (EMTs, paramedics)
- Health care workers (doctors, nurses, dentists)
- Lab technicians
- Janitorial and cleaning staff
- Tattoo artists, body piercers, and other professionals handling sharp tools

OSHA & CDC Guidelines

- **OSHA Standard** (29 CFR 1910.1030) outlines strict policies for worker protection.
- According to the **CDC**, healthcare workers have a **2–4% risk** of transmission, which is greatly reduced with proper training.

OSHA's 5 Key Prevention Categories

1. Engineering Controls

- Use **SESIP** (Sharps with Engineered Sharps Injury Protections)
- **Label biohazards** clearly
- Transport waste using approved containers

2. Work Practice Controls

- Proper **sharps disposal** (e.g., never recap used needles)
- **Sanitize surfaces** using bleach (1:10 ratio standard)
- Clean up spills safely and correctly

3. Personal Protective Equipment (PPE)

- Always wear:
 - **Gloves**
 - **Face masks**
 - **Gowns**
 - **Eye protection** when needed
- Dispose of PPE **safely after use**

4. Universal Precautions

- Treat **all blood and OPIM (Other Potentially Infectious Materials)** as infectious
- Assume **all patients** may be carriers

5. Post-Exposure Protocols

- **Immediately wash** the area with soap and water
- **Report** the incident
- **Follow-up** with medical testing and post-exposure prophylaxis (PEP)
- **HIV:** Antivirals may be prescribed within 72 hours
- **Hepatitis B:** Hep B immune globulin and vaccine



Vaccination

- **Hepatitis A and B vaccines** are **highly recommended** for all at-risk workers
- Hepatitis C currently **has no vaccine**, but can be treated if detected early



Exposure Risks

- **Needlesticks**
- **Abrasions or cuts**
- **Broken skin contact** with infectious fluids
- **Sexual contact**
- **Childbirth (mother to baby transmission)**

Symptoms to Watch For

Hepatitis A/B/C:

- Fatigue
- Jaundice (yellowing of skin/eyes)
- Nausea/vomiting
- Dark urine
- Abdominal pain

HIV/AIDS:

- Flu-like symptoms early on
- Weakened immune system
- Weight loss, fever, chronic infections

Quick Reference Summary Table

Category	Details
High-Risk Fluids	Blood, semen, vaginal, pleural, synovial, cerebrospinal fluids
Cannot Transmit (Typically)	Saliva, tears, sweat, urine, vomit, nasal fluids
PPE Examples	Gloves, masks, gowns, eye shields
Universal Precaution	Treat all fluids as infectious
Post-Exposure Protocol	Clean area, report, medical follow-up, PEP if necessary
At-Risk Professionals	EMTs, nurses, janitors, lab techs, tattoo artists
Vaccinations Recommended	Hepatitis A & B

Remember:

- **Training is required annually** under OSHA regulations.
- Always be alert, equipped, and follow protocol.
- **You are legally protected** under OSHA when following guidelines and using PPE.



EVERYONES TALKING CPR