



Ambulatory Clinic Policy and Procedure

Title: STANDARD PRECAUTIONS AND TRANSMISSION BASED PRECAUTIONS	Policy Number: EP 7.2
Regulation CDC Reference:	Effective Date: 5/2017

Policy Statement:

It is the policy of Texas Tech University Health Science Center El Paso (TTUHSC El Paso) to control and reduce the risk of transmission of pathogens including bloodborne pathogens within the ambulatory clinics.

Scope and Distribution:

This policy applies and will be distributed to all Texas Tech Physicians of El Paso clinics.

Procedure:

1. **Standard Precautions:** Will be followed when there is a possibility of exposure to blood or other body fluids. Blood and body fluids from all patients or person’s will be considered infectious.
 - a. Gloves are to be worn when:
 - i. obtaining blood specimens
 - ii. placing intravascular catheters or IV access
 - iii. handling blood or other body fluids, or items soiled with blood or body fluids
 - iv. when changing dressings
 - v. when changing diapers
 - vi. when performing any invasive procedures or any diagnostic procedure
 - vii. when exposure to blood or body fluids may be anticipated
 - viii. when caring for patients undergoing invasive procedures and when cleaning or examining wounds
 - b. Goggles or face mask with eye shield should be worn when splashing of blood is likely to occur as in pin removal, wound irrigation, etc.
 - c. Gowns, masks, and goggles are to be worn during procedures involving more extensive contact with blood or body fluids. (i.e., endoscopic procedures, dental procedures, procedures that may involve blood spattering)
2. **Transmission-Based Precautions:** In addition to consistent use of standard precautions, additional transmission-based precautions are warranted when the patient is exhibiting symptoms of an active infection (e.g. diarrhea, rash, respiratory symptoms, draining wounds or lesions) which can include pathogens that are highly transmissible, and/or epidemiologically important agents based on the mode of transmission of the specific pathogen:



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- a. **Airborne Precautions:** Apply to patients known or suspected to be infected with a pathogen that can be transmitted by airborne route including but not limited to: tuberculosis, measles, and chickenpox/varicella (until lesion crusted).
PPE- Place surgical mask over patient as soon as patient enters facility with instructions to keep it on at all times. Staff should wear an N-95 mask/respirator if available.
 - b. **Droplet Precautions:** Applies to patients known or suspected to be infected with a pathogen that can be transmitted by droplet route; these include but not limited to respiratory viruses (e.g. influenza, parainfluenza, adenovirus, respiratory syncytial virus, and Bordetella pertussis).
PPE- Healthcare personnel should wear a surgical mask for close contact with infectious patient (within 3- feet of the patient); the mask is generally donned upon room entry. Patients on Droplet Precautions who must be transported outside of the room should wear a mask if tolerated and follow Respiratory Hygiene/Cough Etiquette.
 - c. **Contact Precautions.** Applies to patients with the presence of incontinence of stool, draining wounds, copious secretions, pressure ulcers, ostomy and/or tubes with draining fluids.
PPE- Gloves should be worn when touching the patient and touching the patient's immediate environment or belongings. Gowns should be worn if substantial and prolonged contact is anticipated. Includes vancomycin-resistant enterococcus (VRE), methicillin-resistant staphylococcus aureus (MRSA), and clostridium difficile.
 - d. **Hygiene.** Hand hygiene should be practiced after removing all.
PPE. Accidental contamination can easily occur when removing these items and effective hand hygiene is key to preventing accidental spread of the pathogen.
 - Wash hands thoroughly after any procedure and after removing gloves, gowns, or goggles involved in possible blood or body fluid contamination.
3. Any item contaminated with blood or other potentially infectious materials (OPIM), will be cleaned or properly disposed of in containers that are not readily accessible to patients or visitors.
 4. Do not recap contaminated needles under any circumstances. Dispose of needles as described in policy EP 7.17 Handling Disposing of Needles Sharps, into a Sharps Container.
 5. Clean up blood spills immediately with an EPA approved cleaner.
 6. Use a sealable plastic bag with, "biohazard" label, to transport blood or body fluids or tissue specimens.



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