What’s All the Fuss About
Standard Precautions?

As scientists learn more and more about what causes disease, they try harder to control the spread of infection. For example, one event that triggered new infection control guidelines was the outbreak of HIV/AIDS. Because of this disease, the US Centers for Disease Control (the CDC) developed *Universal Precautions* in 1985.

In 1996, the CDC took another look at universal precautions and decided to make some changes. They wanted to be sure that their guidelines made sense and were easy to follow. As a result, healthcare workers have infection control guidelines called **Standard Precautions** and **Additional Precautions**.

What Are Additional Precautions?
Additional Precautions are guidelines for protecting yourself and/or clients who need more than just basic infection control. These extra precautions are divided into categories according to how a disease is spread:
- Airborne Transmission
- Droplet Transmission
- Contact Transmission

This inservice will teach you about these different kinds of disease transmission. You’ll also learn how and when to use Additional Precautions.
Some Basic Infection Control Terms

**Pathogens:** Germs that can cause disease.

**Bloodborne Pathogens:** Viruses or bacteria (such as hepatitis or HIV) that can cause disease and are carried in a person’s blood.

**Airborne Pathogens:** Viruses or bacteria (such as tuberculosis or measles) that can cause disease and are spread by germs that can float through the air.

**Droplet Pathogens:** Viruses or bacteria that can cause disease (such as mumps or the flu) and are spread by germs that are too heavy to float in the air. They are usually spread during coughing, sneezing and talking.

**Contact Pathogens:** Viruses or bacteria (such as “pink eye” or E. coli) that can cause disease and are spread through direct contact with an infected person’s skin.

**Bacteria:** Tiny germs (similar to viruses, but larger) that can carry disease.

**Viruses:** Tiny germs (similar to bacteria, but smaller) that carry disease (like AIDS and Ebola).

**Disease:** Sickness caused by bacteria or viruses.

**Microorganisms:** Bacteria, viruses and fungi.

**Transmission:** The spread of germs from one person to another.

**Exposure:** Coming into contact with disease-causing bacteria and viruses.

**Isolation:** Keeping infected people away from others who are not infected.

**Cross-infection:** Spreading infection from one area of a client’s body to another.

**Contagious:** The type of germ that is easily spread from one person to another.

**Infectious:** The type of germ that is capable of causing disease. (Not all infectious germs are contagious.)

**Contaminated:** Soiled, stained or infected with bacteria or a virus.

**Soiled:** Stained with bodily fluids or secretions.

**Sterilizing:** Removing or destroying bacteria or viruses. (Also known as decontaminating, disinfecting or sanitizing.)

**Antiseptic:** A substance that prevents the growth of bacteria, viruses and fungi.

**Antimicrobial:** A substance that stops the growth of microbes (bacteria, viruses and fungi).

**Infectious Waste:** Items contaminated with blood or other bodily fluids that may contain disease-causing bacteria or viruses.

**Respirator Mask:** A face mask that prevents exposure to disease by filtering the air a person breathes.

**Sharps:** A slang term for medical instruments, such as needles and scalpels, that can cut through skin.
Facts About How Infections Are Spread

Infections are spread by contact with body fluids (blood, mucous, etc.) of an infected person. Among healthcare workers, infections are spread most often because workers do not wash their hands often enough or do not wash them correctly.

Studies have shown that most healthcare workers think they wash their hands more often than they really do. For example, for one study, doctors were asked how often they washed their hands between clients. Most answered that they washed their hands at least 57% of the time. However, when secretly watched, some only washed their hands 9% of the time!

It is extremely important to remember to follow basic Standard Precautions. Infections are spread when healthcare workers:

- Do not wash their hands often enough.
- Do not use correct handwashing methods.
- Let using gloves take the place of handwashing.
- Do not wear barriers (gloves, gowns or masks) when they should.
- Do not change barriers between clients.
- Do not properly clean equipment that has been used on an infected client.

Remember that gloves mainly protect you—not the client. If you have dirty hands when you pick up a pair of gloves, you will contaminate them—and your client. Wash your hands before you put on gloves! Also, do not touch your face during client care. Your eyes, nose and mouth are places where germs can enter your body.

If you ever feel like infection control procedures are wasting too much of your time, consider these facts:

- At least half of all cases of food poisoning are caused by people not washing their hands before preparing food.
- Studies show that over 1.5 million nursing home residents catch an infection every year from germs spread by healthcare workers' hands.
- Every year, thousands of healthcare workers catch a cold, flu or other infection from their clients because they fail to follow proper infection control procedures.

Remember - the best way to prevent the spread of infection is to use Standard Precautions with every client!

A Little History of Infection Control

- In the 1830's, parents protected their children from infections by having them wear a piece of leather across their chests. It was also believed that sunlight and fresh air were enough to kill germs.

- Up until the mid-1800's, surgeons didn't spend much time washing their hands and a patient's skin was hardly ever cleaned before surgery. Surgical instruments were only rinsed off and sponges were reused.

- In 1860, Joseph Lister began to spray carbolic acid on surgical wounds, instruments and dressings. This reduced the number of deaths from surgery.

- Gloves were first used in the early 1900's to protect nurses' hands from chemicals used during surgery. Years later, gloves became a barrier, protecting patients and healthcare workers from infection.

- Until 50 years ago, patients with all different kinds of diseases stayed in the same room or ward.
Diseases caused by Bloodborne Transmission include:
HIV/AIDS and Hepatitis C.

Standard Precautions for Bloodborne Transmission

Bloodborne transmission means that a disease is spread when the blood of an infected person reaches the bloodstream of another person. Standard Precautions are what you should do to practice basic infection control against bloodborne disease. This includes things like washing your hands before and after client care and wearing gloves when you might come in contact with body fluids.

KEY POINTS TO REMEMBER:
- Standard Precautions apply to all your clients, no matter what their diagnosis—even if they don’t seem sick!
- Handwashing is the most important thing you can do to prevent the spread of infection. (You might want to review In the Know’s Handwashing inservice and the handwashing policy for your workplace.)
- Wearing gloves does not take the place of handwashing.
- If you don’t change your gloves in between clients, you may be spreading infections to all your clients.
- Take off dirty gloves as soon as possible. Just think how many germs you could spread if you empty a bed pan then touch the skin, the toilet, the light switch, the doorknob, your pen and clipboard and the client—with those same dirty gloves!

You should use Standard Precautions with every client and when you have contact with:
- Blood.
- All other body fluids, except sweat—even if you don’t see blood.
- Broken skin.
- Mucous membranes (like the inside of the eyelids, nose or mouth).
- Dried blood and body fluids.

Standard Precautions include:
- Washing your hands after you touch blood, body fluids or contaminated items—even if you were wearing gloves!
- Washing your hands whenever you remove a pair of gloves.
- Washing your hands between clients.
- Washing hands between tasks performed on different body sites on the same client.
- Putting on clean gloves before you touch a client’s broken skin or mucous membranes.
- Changing gloves between tasks and between clients.
- Wearing a gown if needed to protect your skin and clothing from getting splashed with blood or body fluids.
- Wearing a waterproof gown if you are likely to be heavily splashed with body fluids.
- Removing a dirty gown as soon as possible and then washing your hands.
- Wearing a mask and eye protection to protect your mucous membranes if you might get splashed by blood or body fluids.
- Cleaning up spills and client care areas promptly.
- Removing any contaminated items and disposing of them immediately.
Additional Precautions for Airborne Transmission

Airborne Precautions At a Glance

Some diseases are known to be spread by airborne transmission. This means that the germs that cause these diseases are so tiny that they can float in the air for long periods of time. These germs can also "catch a ride" on dust particles, traveling wherever the dust particles go. So, keep in mind:

- Germs that are spread by airborne transmission can travel across a room or even farther.
- Airborne germs can be helped to spread by things like an electric fan.
- Airborne diseases are often very contagious since the germs can travel a long way and be breathed in by many people.
- It can be more difficult to control the spread of airborne diseases. For example, to control the spread of tuberculosis, it's not enough to wear a mask. You have to wear a special respirator mask.

- Special air ventilation must be used to prevent the spread of airborne disease. These precautions are used in addition to Standard Precautions for clients who have (or might have) airborne infections.

It's important to know if you are immune to certain airborne infections like measles or chickenpox. If you are, you can work with infected clients without worrying about getting the disease yourself. You still have to follow all infection control precautions ordered for that client.

For Clients on Airborne Precautions, You May Have To:

- Place them in private rooms or in rooms with patients who have the same diagnosis. Some facilities have rooms with special air filter systems for clients on Airborne Precautions.
- Keep the door to their room closed.
- Wear a special respirator mask when you work with clients who have (or might have) TB.
- Encourage them to cover their nose and mouth when sneezing and coughing.
- Put surgical masks on these clients if they need to be around uninfected people for a short period of time.
- Avoid moving them from the room unless it is absolutely necessary. If the client must be moved, cover the person's mouth with a surgical mask to reduce the risk of spreading germs.
Additional Precautions for Droplet Transmission

Droplet Precautions At a Glance

Some diseases are spread through droplet transmission. This means that these germs fly through the air, but are **too heavy** to float. They drop quickly—and so it's called “droplet” transmission. Because droplets are too heavy to float, they usually don't travel more than 3 feet. These diseases are commonly spread during coughing, sneezing and talking. Here are some examples of droplet transmission:

- You might be transferring a client with the flu and he sneezes on you. The droplets from the sneeze go in your eyes.

- You are bathing a child with the mumps. She coughs and the droplets from her cough fly up your nose.

These precautions are used **in addition to** Standard Precautions for clients who have (or might have) infections spread by droplets.

Remember that droplets can only travel a short distance, but you can get “hit” by many droplets at once because:

- A sneeze zooms out of the nose at over 100 miles per hour!

- A cough sends out an explosion of air going over 60 miles per hour!

For Clients on Droplet Precautions, You May Have To:

- Place them in private rooms or in an area with other clients who have the same disease. (The door to their room may stay open.)

- Wear a surgical mask when working within 3 feet of the client.

- Put surgical masks on these clients if they need to be around uninfected people for a short period of time.

- Resist moving them from the room unless it is absolutely necessary. If the client must be moved, place a surgical mask on the client to reduce the risk of spreading germs.
Additional Precautions for Contact Transmission

Contact Precautions At a Glance
Diseases that are spread by contact transmission are spread by people directly or indirectly touching the germ. Direct contact means that the skin of an infected person touches the skin of an uninfected person. Indirect contact means that an uninfected person touches an object that has been touched by an infected person.

Here are some examples of contact transmission:
- Without wearing gloves, you change the clothes of a client who has a rash infected with staph germs (MRSA). Then, you bathe your next client without washing your hands and without wearing gloves.
- You wear gloves when you turn a client with scabies, but since the gloves are still dry, you forget to change them for the next client.

These precautions are used in addition to Standard Precautions for clients who have (or might have) infections spread by contact.

Remember...every square inch of the human body has about 32 million bacteria on it! Most are harmless—or even good for us—but some can cause disease.

Studies have shown that in health care facilities, the most common way infections are spread is by indirect contact from the hands of healthcare workers!

For Clients On Contact Precautions, You May Have To:
- Place them in a private room or area with other clients who have the same kind of infection.
- Place them in a private room if they cannot or will not help with personal hygiene.
- Put gloves on before you enter the client’s room (or home).
- Change your gloves during client care, especially after contact with highly contaminated items.
- Take your gloves off right before you leave the client’s room (or home). Be careful not to touch contaminated items on your way out and wash your hands immediately!
- Use a waterless, alcohol-based hand rub if you must wash your hands often. They save time and more than twenty published studies show that they are more effective than soap in reducing bacteria on your hands.
- Wear a gown while in the client care area if the patient is incontinent, has diarrhea or drainage from an unbandaged wound. Remove the gown right before leaving the area.
- Use a mouthpiece, resuscitation bag or ventilation device when performing mouth-to-mouth resuscitation.
- Disinfect any client care equipment used on a client with a contact infection.
Wearing Gloves

Proper hand preparation and removal of gloves is extremely important in preventing the spread of infection. Here are a few reminders:

- Keep your fingernails clean and short. You should avoid wearing nail polish or artificial nails.
- Do not wear rings or other hand jewelry. The skin underneath will have more bacteria because jewelry can block soap and water from reaching those areas.
- Make sure that you cover any cuts or abrasions with a waterproof dressing.
- When taking gloves off, remove your first glove by peeling it off inside out. Then place the fingers of your ungloved hand inside the cuff of the other glove and peel it off inside out. Holding the gloves inside out, throw them away immediately.
- Be sure to wash your hands before and after wearing gloves.

What If I Am Allergic To Latex?

If you have a latex allergy, you should let your supervisor know immediately so you can take steps to avoid contact with latex. You may be able to use powder-free latex gloves. If that is not the case, gloves made with Nitrile are the most popular alternative to latex. Vinyl gloves are another option.

Even if you change to one of these materials, you may still have problems from being in contact with others who are wearing latex gloves. If you cannot remove all latex from your work area, you may be able to make certain areas “latex-free zones.”

If none of these options is possible, and your allergy symptoms continue, you may have to speak with your supervisor about reassignment to duties that do not require wearing gloves.

Exposure to Bodily Fluids

- If you think you have been exposed to body fluids from a needle-stick or splash, wash the area immediately and thoroughly with antibacterial soap and water. Tell your supervisor as soon as possible.
- If fluid is splashed in your eyes or nose, flush with running water for at least 15 minutes.
- If you have been exposed to Hepatitis B and have not been vaccinated, you may request the vaccination now.
- If you are exposed to sexually transmitted diseases such as HIV or syphilis, you may be given preventive medicines.
- Talk with your supervisor about tests to determine if you have been infected.
- You may be required to fill out an exposure report form.
Standard Precautions for Handling Client Care Equipment

Client care equipment includes everything you use during your work with a client such as thermometers, blood pressure cuffs, bath basins, bed pans, bedside commodes, walkers and wheelchairs.

Make sure that equipment does not get passed from one client to another without being cleaned properly. If possible, limit equipment to only a single client. Any "used" client care equipment should be cleaned according to your workplace policy. Remember that this equipment may be soiled with germs from blood, body fluids, body secretions or body excretions.

If a client care item is only meant to be used once, be sure to throw it away after using it.

Disposing of Sharps

- Be extra careful with any client care equipment that might cut or stick you.
- Never recap used needles.
- Use only one hand or a mechanical device and hold the needle with the point away from any part of the body.
- Never remove used needles from disposable syringes by hand.
- Never bend or break needles by hand. Dispose of them in a puncture-resistant container.

Linens and Beds

- Do not shake dirty client linens. Instead, roll them up and place them in a hamper or bag for cleaning.
- Be careful when you handle dirty linens so that you don't soil your clothes. Hold dirty linen away from your body.
- Linen that is soiled with blood and/or other body fluids should be washed according to your workplace policy. It does not have to be washed separately from other laundry.
- Follow your workplace procedures for cleaning client equipment such as beds, bedrails, bedside tables and other frequently touched surfaces. If you work in clients' homes, be sure you know what cleaning solutions you are using. Never use any unlabelled solutions.
- Remember that sponges and cleaning rags carry lots of germs. If you "clean" client areas with a dirty sponge, you might just be spreading germs around. Be sure to change your sponge or rag frequently.

Time For a Laugh!

Why do they lock gas station bathrooms? Are they afraid someone will clean them?

- Follow your workplace policy for cleaning stethoscopes, BP cuffs and thermometers.
- Dishes and silverware used by clients with bloodborne diseases do not have to be washed separately. Regular dishwashing soap and hot water will kill bloodborne germs.
Standard Precautions for Handling Biohazardous Waste

Biohazardous waste is garbage that has been contaminated with germs that can cause disease. It includes things like:

- Discarded wound dressings.
- Used needles.
- The contents of a bedpan, urinal or Foley catheter bag.

Follow your workplace policies and procedures for disposing of biohazardous waste. Some items may need to be bagged or double-bagged (although one bag is usually enough). Bags containing biohazardous waste should be labeled and are often made of red plastic.

Used "sharps" must be disposed of in a puncture-resistant container. If you work in clients' homes and you notice that they don't dispose of their sharps properly, you are at risk for getting stuck by a used needle. Let your supervisor know.

Do You Recognize This Symbol?
It's the symbol for biohazardous waste. Never put your bare hand into a bag or other container marked with this symbol. These containers are used to dispose of used sharps and infectious waste.

It is estimated that each year 385,000 needlesticks happen to healthcare personnel. That's an average of over 1,000 per day!

- If you find a used needle, do not recap it
- Dispose of used needles and scalpels immediately in a puncture-resistant container.
Standard Precautions
Do’s and Don’ts

As you go about your busy work day, keep these infection control tips in mind!

**DO:**
- Wash your hands after you remove your gloves.
- Use the soap recommended for handwashing in your workplace. If you are allergic to it, let your supervisor know.
- Put on clean gloves right before you touch a client’s broken skin or mucous membranes to avoid infecting those areas.
- Keep in mind that gloves are worn to protect the client *and* you (especially if you have any cuts or broken skin on your hands).
- Check your gloves as you work and change them immediately if you see they are torn.
- Remember that bloodborne diseases can be spread in blood and other body fluids (like urine), body secretions (like saliva) and body excretions (like stool).
- Ask your supervisor if you are not sure which additional precautions might be necessary for a specific client.

**DON’T:**
- Forget that a client does not have to look or act sick to be sick. Protect yourself with Standard Precautions every day with every client.
- Use a surgical mask to protect yourself against tuberculosis. It will not work!
- Rub your eyes or nose during client care. You don’t want to expose your mucous membranes to unwanted infections.
- Contaminate your hands by removing your gloves improperly.
- Wear a client-type gown as a barrier. If you think you might be splashed with blood or other body fluids, wear a thick “paper” or plastic gown to prevent soak-through.
- Participate in a resuscitation of a client without using a CPR mask.
- Be shy about reminding your coworkers to use Standard Precautions. If they don’t, they could spread germs to you!
A Few Words On Safety and Compliance

We should all take great care to prevent the spread of illness and infection. With attention to detail and sensible work habits, most infection control-related accidents can be avoided. Here are some important safety reminders:

- Remember to stay focused on what you are doing. Don't let yourself go on "autopilot" because you have done the task so many times before.
- Don't let your emotions from something that happened earlier affect your attention to your current task.
- Get enough sleep. Don't let yourself get careless because you are tired.
- Don't be afraid to ask for help if you need it.
- Don't try to do too many things at once.
- Use proper infection control procedures. Don't take shortcuts in your work.
- Avoid thinking that you have nothing to learn about infection control—even if you have been working in health care for years.

Tell Your Clients Why Standard Precautions Are Important

Some clients may get offended when they see you wearing gloves. They may say something like, "Oh, you don't need gloves. I don't have anything that's contagious." Be sure to explain that protective barriers like gloves, gowns and masks are for their protection as well as yours. Tell them:

- These precautions can prevent the spread of infection from one part of their body to another (cross-contamination).
- That gloves prevent the spread of disease and infection from one client to another.
- That they should insist on the use of clean gloves from each of their healthcare workers—and that they should ask all employees who come in their room if they have washed their hands.

Why Review Bloodborne Pathogens Every Year?

Following Standard Precautions and other infection control procedures not only protects you and your clients from disease and infection, it also ensures that you are giving safe, quality care. If you've been working in health care for a while, you've probably noticed that you have to review information about Standard Precautions and bloodborne pathogens every year. Why? It's the law.

All healthcare employees are required by the Occupational Safety and Health Administration (OSHA) to participate in an annual review of bloodborne pathogens and Standard Precautions. While it may seem pointless to go over the same information every year, please remember that infection control procedures are in place to protect you as well as your clients. So, take the time to read up on Standard Precautions each year.
An Infection Control Module: Standard Precautions

Are you "In the Know" about Standard Precautions? Circle the best choice, or fill in your answer. Then check your answers with your supervisor!

1. True or False
Standard Precautions are the infection control techniques used by nursing assistants and Additional Precautions are techniques used by nurses and doctors.

2. True or False
Standard Precautions protect you and your clients against viruses only.

3. True or False
If your client has the mumps, it's important to separate his silverware from the other clients.

4. True or False
It's okay to wear the same gloves all day if you rinse them off between clients.

5. True or False
If you find a used needle, cap it immediately and put it in your pocket until you can put it in a puncture-resistant container.

6. True or False
Germs spread by droplet transmission cannot travel as far as those spread by airborne transmission.

7. Additional Precautions cover diseases that are spread by:
   A. Droplet transmission.
   B. Contact with blood.
   C. Dirty gloves
   D. Mucous membranes.

8. Germs spread by airborne transmission can travel:
   A. Only one inch
   B. Three feet or less.
   C. Across a room or farther.
   D. No distance at all.

9. If you are exposed to body fluids (like a needle-stick) you should _______ the area immediately and then _________ the incident to your supervisor.

10. The easiest way to avoid the spread of infection is through frequent

File completed test in employee's personnel file.