POLICY:

Standard precautions will be used by all employees to reduce the risk of transmission of communicable diseases.

DEFINITIONS

A. Standard precautions is an approach that reduces the risk of transmission of bloodborne or other diseases by treating any excretion or body fluid except sweat as potentially contaminated with a communicable disease. Standard precautions have replaced universal precautions, and synthesize the major features of universal precautions and body substance isolation. Standard precautions should be followed for all patients.

B. Standard precautions apply to blood, all body fluids, secretions and excretions except sweat, regardless of whether they contain visible blood, non-intact skin and mucous membranes.

PROCEDURES

I. Wash hands after touching blood, body fluids, secretions, excretions and contaminated items, regardless of whether gloves were worn. Wash hands immediately after gloves are removed, between patients and when otherwise indicated to avoid transfer of organisms to other patients, the environment or to prevent cross-contamination of different areas of the same patient.

II. Wear gloves when touching blood, body fluids, secretions, excretions and contaminated items. Don gloves before touching mucous membranes or non-intact skin. Change gloves after contact with materials likely to contain high concentrations of microorganisms, even on the same patient, and also immediately after use, before touching noncontaminated objects or surfaces, and between patients.

III. Wear a mask and eye protection or face shield during procedures and patient care activities that are likely to generate splashes or sprays of blood, body fluids, secretions, or excretions.

IV. Wear a gown to protect skin and prevent soiling of clothes during procedures and patient care activities that are likely to generate splashes or sprays of blood, body fluids, secretions, or excretions.

V. Handle used patient care equipment in a manner that prevents skin and mucous membrane exposures, contamination of clothing or transfer of microorganisms to other patients or environments.
VI. **Ensure** that policies and procedures for routine care, cleaning and disinfection of environmental surfaces, beds, bedrails and bedside equipment are adequate and are being followed.

VII. **Contaminated linen** should be handled, transported and processed in a manner that prevents skin and mucous membrane exposures, contamination of clothing or transfer of microorganisms to other patients or environments.

VIII. **Handle and dispose of sharps properly.**

IX. Use mouthpieces, resuscitation bags or ventilation devices as an **alternative to mouth-to-mouth resuscitation** methods in areas where the need for resuscitation is predictable.

X. Place patients who cannot or will not participate in maintaining appropriate hygiene or environmental control in a private room or cohorted with a similar patient who is infected with or carrying the same organism (with the same drug susceptibility pattern, if a drug-resistant organism) and who has no other communicable disease.

XI. Mucous membranes that become contaminated with potentially infectious fluids must be copiously flushed with water as soon as feasible.

XII. All workers with non-intact skin should cover these areas if possible. Their supervisor should be notified. The supervisor will determine whether patient care activities should be curtailed pending healing of the skin.

References:  Guide to Infection Prevention for Outpatient Setting: Minimum Expectations for Safe Care, CDC Publication, May 1, 2016