

Subject:	Procedures for Reporting & Cleaning up Spills of Blood and Bodily Fluids	No.:	
Issued by:	The Office of Risk Management,	Effective:	January 30, 2003
Approved by:	Biosafety Committee on:	Revised:	August 2015
Targeted Group:	Faculty & Service Staff, Housekeeping Staff, First Aiders	Reviewed:	

PROCEDURES FOR REPORTING & CLEANING UP SPILLS OF BLOOD AND BODILY FLUIDS

1. PURPOSE

This procedure has been developed to ensure the safety of all those who could potentially become exposed to a spill of blood and/or bodily fluids. The University of Ottawa requires these types of spills to be reported and cleaned up immediately using “universal precautions”. This procedure will outline how this is to be done.

All individuals are to consider this type of spill as potentially infectious, and respond in an appropriate fashion. The blood borne pathogens of greatest concern are Hepatitis B (HBV) and Hepatitis C (HCV) and the Human Immunodeficiency Virus (HIV). These pathogens can be safely decontaminated by following these procedures.

2. DEFINITION

Blood borne pathogens Blood borne pathogens are microorganisms that cause diseases in humans and are present in blood. These pathogens are, but not limited to, Hepatitis B Virus (HBV), Hepatitis C Virus (HCV) and Human Immunodeficiency Virus (HIV).

Universal Precautions Universal Precautions are the minimum standards of work performance to prevent exposure to blood borne pathogens. They include education, donning personal protective equipment, hand washing, and employing safe work or cleaning practices. One must assume all blood and bodily fluids are potentially infectious.

3. PROCEDURE

Personal Protective Equipment (PPE)

Since the greatest risk of exposure to an individual is by direct contact with the material, personal

protective equipment must be worn. Personal protective equipment acts as a barrier and includes not only garments but also equipment (Tongs, forceps or others type of equipment). Exposure to BBP could come from others potentially infectious materials as per than bodily fluids such as semen, vaginal secretions, cerebrospinal fluid. Urine and feces that are visibly contaminated with blood may also contain blood borne pathogens. In many cases there are insufficient pathogens in the bodily fluids to cause disease. Therefore the focus will remain with blood.

Mandatory:

- Wear 2 PAIRS OF GLOVES (vinyl, nitrile)

As Required:

- Wear a GOWN OR OVERALLS if the possibility exists of contaminating one's own clothing
- Use a FACE SHIELD if the risk of being splashed exists
- Use TONGS OR OTHER TYPE OF EQUIPMENT (dust bin) to pick-up broken or sharp objects without using your hands even if you wore gloves.

Clean-up Equipment Required

- PPE
- Absorbent material
- Appropriate disinfectant (Virox or daily fresh 10% household bleach solution = 1 part bleach + 9 parts water)
- Leakproof and puncture proof containers - for broken or sharp objects
- 2 plastic autoclavable bags

Reporting & Clean-up Procedures

Immediate Response (Responsibility: Individual First at the Scene)

1. Ensure any injured individual seeks first aid from the local first aid responder or Protection Services (ext. 5411), and/or seeks medical attention at the Ottawa Hospital Emergency Dept. or the University's Health Services
2. Cover spill with absorbent material (i.e. paper towel). Avoid contaminating yourself or your shoes.
3. Cordon off spill to prevent further spreading.
4. Report spill to Physical Resource Services (ext. 2222, request immediate assistance by Housekeeping), and await their arrival. Should someone not arrive within 10 minutes, inform Protection Services (ext. 5411) to secure the area until a trained individual can arrive.

Secondary Response (Responsibility: Housekeeping staff or Trained Individual)

1. Survey the scene to identify if any splattering had occurred and the maximum extent of spill. If necessary, put on overalls or a gown if the possibility of contamination of one's own clothing exists. Put on recommended personal protective equipment.
2. Carefully add approved disinfectant (of appropriate concentration) to the absorbent material covering the spill. Working from the outer edges of the spill inward, pour slowly and carefully to avoid producing any splashes. If no absorbent material has been added, cover the spill with absorbent material saturated with the approved disinfectant. Allow to sit in contact with the spill for the manufacturers recommended length of time (10% bleach requires at least 30 minutes of contact time).

To avoid the possibility of contaminating yourself or other objects while waiting for the disinfectant to work, remove gloves and wash hands with soap and water for at least 20 seconds. Remove any protective equipment worn, and wash hands again. Prior to initiating clean-up procedures outlined in step 3 put on a fresh pair of gloves and personal protective equipment.

3. Pick-up any physical hazards as they are confronted. i.e., broken glass, syringe needles (Do not use hands - use tongs, or other means to pick it up). Place these in a yellow biohazard container; if this is not available place in a leak and puncture proof container. The saturated absorbent material may be placed in a double bag. Take caution to avoid dripping this material or contaminating outside the spill zone.
4. If gloves have become contaminated, change gloves prior to proceeding.
5. Reapply disinfectant to the spill area after initial cleaning. Again, wait the required time to allow the disinfectant to work. Clean in the same fashion as previously stated.

Follow italicized procedures in point 2.

6. Dispose of all contaminated gloves, clothing and equipment in the dedicated container. Wash hands with warm water and soap for 20 seconds.
7. Place waste in a secure location, and arrange for disposal by contacting the Risk Management Specialist – Biosafety of the Office of Risk Management at ext. 3153/8081. Ensure you identify: who you are, how you may be contacted and location of waste.

Occupational Hazards

The potential exposure of blood borne pathogens may occur while cleaning up this type of spill by:

- a) Direct contact of the material to a mucous membranes (i.e., eyes, mouth, nose), open wound, or chapped/abraded skin,
- b) Injuries/cuts from sharp objects. (An injury may be small, but significant enough to transmit pathogen.)

This risk is minimized by:

- a) Wearing the stated protective equipment

- b) Undertaking actions in a careful fashion to avoid splashes and/or self-contamination
- c) Avoiding picking up sharp/broken objects directly with ones hands.

If an injury occurs during clean-up:

- a) Remove contaminated clothing
- b) Wash affected area with soap and warm water, cover the injured area with a clean dressing
- c) Report to Ottawa Hospital Emergency or University's Health Services for risk assessment
- d) Notify your supervisor/designated person for completion of accident/incident report
- e) Advised University of Ottawa's Occupational Health, Disability and Leave Office

Additional information may be obtained by contacting:

Risk Management Specialist – Biosafety 562-5800 ext. 3153 or 8081
Office of Risk Management

Lois Sowden-Plunkett, 562-5800 ext. 3058
Office of Risk Management,
Assistant Director, Radiation and Biosafety

Lise Griffith, 562-5800 ext. 1472
Associate Director, Health and Wellness