# Human Resources

## Exposure to Infectious Materials Procedure

### PURPOSE

This procedure establishes the proper steps to take when a City of Hamilton worker encounters or is endangered by an exposure to infectious materials.

### SCOPE

This procedure applies to all City of Hamilton departments where personnel, while carrying out their duties, may come in contact with used and discarded materials or objects which may be contaminated with an infectious disease.

Departments such as EMS, Fire, Long Term Care and Public Health may have specific department procedures that supersede this procedure, due to a high potential for such exposures.

For individuals with the legitimate use of medical instruments, materials and objects, there is an acceptable procedure for the safe and proper disposal of same (M.O.E.E. regulation 309).

Notwithstanding the above, such materials may be discarded improperly and encountered by city workers while carrying out their daily duties. Under such circumstances, the collection and disposal of such materials must take place using the following procedure.

### DEFINITIONS

The following terms referenced in this Procedure are defined as:

**Cleaning**

The physical removal of foreign material (e.g., dust, soil) and organic material (e.g., blood, secretions, excretions, microorganisms). Cleaning physically removes rather than kills microorganisms. It is accomplished with water, detergents and mechanical action.

**Contaminated**

The presence of an infectious agent on hands or on a surface, such as clothing, gowns, gloves, bedding, toys, surgical instruments, patient care equipment, dressings or other inanimate objects.

**Hand Hygiene**

A general term referring to any action of hand cleaning. Hand hygiene relates to the removal of visible soil and removal or killing of transient microorganisms from the hands. Hand hygiene may be accomplished using soap and running water or an alcohol-based hand rub.

**Infectious**

Caused by infection and capable of being transmitted. Synonymous with “communicable” and “contagious”.

**Mucous membranes**

Membrane lining of areas of the body that lead to the outside and allow for transmission and absorption (e.g. nasal linings, mouth, lips)

**Personal Protective Equipment (PPE)**

Clothing or equipment worn by staff for personal protection against hazards.

**Sharps**

Objects capable of causing punctures or cuts (e.g., needles, syringes, blades, clinical glass). Sharps are defined as any material that has the potential to cut or penetrate skin.
HEALTH CARE ACCESS FOR SHARPS INJURY

The following process steps apply to this procedure depending on the nature of the exposure.

**Touching of potentially contaminated item** (e.g. tissue, toiletries)
1. Before picking up item ensure there is no risk for any items to puncture the skin or splash.
2. Use a barrier such as gloves or tongs to grab item and dispose of the item in the appropriate receptacle.
3. Perform hand hygiene if contact was made with or without a barrier.

**Potentially contaminated items contact intact skin but not mucous membrane or eyes**
1. If there a potential when performing a task to be splashed by fluid that may contain infectious material (e.g. cleaning up vomit) appropriate personal protective equipment should be used. This may include goggles and gowns.
2. If a splash occurs and touches skin, wash thoroughly with soap and water for a minimum of thirty seconds.
3. If skin is intact, there is no risk of infection as the skin acts as a barrier.
4. If clothing is affected, remove clothing and wash in regular wash cycle.
5. Report incident to supervisor.

**Potentially contaminated items contact non intact skin, mucous membrane or eyes**
1. If there a potential when performing a task to be splashed by fluid that may contain infectious material (e.g. cleaning up vomit) appropriate personal protective equipment should be used. This may include goggles and gowns.
2. If a splash occurs and there is no visible blood in the material flush eyes, nose or mouth with water. If non-intact skin wash area with soap and water.
3. If there is visible blood in the material, treat the exposure as a sharps related injury (see below).
4. Report incident to supervisor.

**Sharps injury occurs**
1. Seek first aid:
   a. If injury is from needle used on client (including infant or child), promote active bleeding immediately and wash the wound with soap and running water.
   b. If unable to access water, cleanse wound with an alcohol based rub.
   c. Do not scrub wound.
   d. Remove any contaminated clothing.
   e. Cleanse other exposed parts of the body with soap and running water.
   f. If the eyes, nose or mouth are involved, flush with copious amounts of water.
2. Report the injury immediately to supervisor.
3. Seek medical assessment including baseline testing for Hepatitis B, C and HIV within 1-2 hours. If the injury occurs during business hours (Monday to Friday 9 AM to 5 PM), the preferred location is Wellington at Work located at 414 Victoria Street North. If the injury occurs outside of these hours, go to the Emergency Room. Please call Wellington at Work contact Kelly Liddell (905) 541-8229 or alternate Jen Joyce (905) 870-4599 to advise you are coming to the clinic with a sharps related injury.
4. If it is known who the sharps was used on, request that they attend
the clinic or emergency room with you.
5. Inform either centre of sharp/needlestick injury and urgency of
assessment for HIV and Hepatitis B prophylaxis.
6. Follow-up with the recommended medical treatment and blood tests.

If the exposure is linked to a controlled product, ensure the Material
Safety Data Sheets is consulted.

<table>
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<tr>
<th>RELATED DOCUMENTS</th>
<th>The following are related documents:</th>
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<tbody>
<tr>
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<td>1. Human Resources Infection Control Guidelines</td>
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| CONTENT UPDATED            | 2013-04-17                        |

| SUPERSEDES PROCEDURE       | HIV Universal Precautions Policy 1999-06-23 |
| (if applicable)            | HIV Universal Precautions Policy 1999-06-23 |
|                            | Exposure to Infectious Materials Procedure 2002-10-01 |

| HISTORY                    | This procedure replaces the former procedure named Exposure to Infectious Materials #COH-RQ-WI-022 2002-10-01 |