



A Union of Professionals

## WORK SHOULDN'T HURT

# Universal Precautions

The Occupational Safety and Health Administration (OSHA) defines **Universal Precautions** as an approach to infection control to treat all human blood and body fluids as if they contain bloodborne pathogens. Bloodborne pathogens are microorganisms found in human blood that can cause disease.

Universal precautions were designed and recommended by the Centers for Disease Control (CDC) in 1987 and were revised in 1988, based on epidemiologic evidence regarding the transmission of HBV and HIV. Under universal precautions, blood and certain body fluids of all patients are considered potentially infectious for HIV, HBV, and other blood borne pathogens.



## Universal Precautions Include:

- Using disposable gloves and other protective barriers while examining all patients and while handling needles, scalpels, and other sharp instruments.
- Washing hands and other skin surfaces that are contaminated with blood or body fluids immediately after a procedure or examination.
- Changing gloves between patients and never reusing gloves.

## Universal Precautions Apply to the following:

**Blood is the single most important source of HIV, HBV, and other bloodborne pathogens in the occupational setting.**

Universal precautions also apply to the following:

- Tissues
- Semen
- Vaginal secretions
- Cerebrospinal fluid
- Pleural fluid
- Synovial fluid
- Pericardial fluid
- Peritoneal fluid
- Amniotic fluid

Universal precautions do not apply to the following list of substances unless they contain visible blood. The risk of transmission of HIV and HBV from these fluids and materials is extremely low or nonexistent:

- Feces
- Nasal secretions
- Sputum
- Sweat
- Tears
- Urine
- Vomit
- Human breast milk
- Saliva

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# How are Bloodborne Pathogens

## Spread?

The bloodborne pathogens of primary concern are hepatitis B, hepatitis C and HIV. These and other bloodborne pathogens are spread primarily through:

- **Direct contact.** Infected blood or body fluid from one person enters another person's body at a correct entry site, such as infected blood splashing in the eye.
- **Indirect contact.** A person's skin touches an object that contains the blood or body fluid of an infected person, such as picking up soiled dressings contaminated with an infected person's blood or body fluid.
- **Respiratory droplet transmission.** A person inhales droplets from an infected person, such as through a cough or sneeze.
- **Vector-borne transmission.** A person's skin is penetrated by an infectious source, such as an insect bite.

Following universal precautions helps to prevent the spread of bloodborne pathogens and other diseases whenever there is a risk of exposure to blood or other body fluids. These precautions require that all blood and other body fluids be treated as if they are infectious.

## Best Practices

- Immediately and thoroughly wash hands and other skin surfaces that are contaminated with blood, body fluids containing blood, or other body fluids to which universal precautions apply. Wash hands immediately after gloves are removed.
- Use protective barriers to prevent skin and mucous membrane exposure to blood, body fluids containing blood, and other fluids to which universal precautions apply. The type of protective barrier(s) should be appropriate for the procedure being performed and the type of exposure anticipated.
- Wear gloves when touching blood or body fluids, mucous membranes, or non-intact skin of all patients.
- Wear gloves when handling items or surfaces soiled with blood or body fluids.
- Wear gloves when performing venipuncture and other vascular access programs.
- Wear gloves for performing phlebotomy if cuts, scratches, or other breaks in the skin are present.

- Wear gloves in situations in which contamination with blood may occur--for example, when performing phlebotomy on an uncooperative patient.
- Wear gloves for performing finger or heel sticks on infants and children.
- Change gloves after contact with each patient.
- Wear masks and protective eyewear or face shields during procedures that are likely to generate splashing or droplets of blood or other body fluids to prevent exposure of mucous membranes of the mouth, nose, and eyes.
- Wear gowns or aprons when you anticipate splashing of blood or other body fluids to which universal precautions apply.
- Take care to prevent injuries when using, handling, or cleaning needles, scalpels, and other sharp instruments or devices.
- Do not recap used needles by hand.
- Do not remove used needles from disposable syringes by hand.
- Do not bend, break, or otherwise manipulate used needles by hand.
- Place used disposable syringes and needles, scalpel blades, and other sharp items in puncture-resistant, leak-proof, labeled, or color-coded containers for disposal. Locate these containers close to the use area and replace routinely.
- To minimize exposure during emergency mouth-to-mouth resuscitation, ensure that protective mouthpieces or manual resuscitator bags are available for use in areas in which the need for resuscitation is predictable.
- Refrain from direct patient care or handling of patient-care equipment if one has exudative lesions or weeping dermatitis.
- For laboratory specimens, consider all blood and other body fluids from all patients to be infective. Put these specimens in a well-constructed container with a secure lid to prevent leakage during transport. Avoid contaminating the outside of the container and place laboratory requisitions outside of the container.

For more information, contact the AFT health and safety team at [4healthandsafety@aft.org](mailto:4healthandsafety@aft.org) [June 2022]