OSHA Inservice

UEMS Occupational and Travel Health
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What does OSHA stand for?

- Occupational Safety and Health Administration
- OSHA requires all potentially occupationally exposed employees to be given, at no cost, information and inservice education annually.
Specific Requirements

- Annual inservices
  - What is an occupational exposure
  - How to use PPE
    - Gloves, Goggles, Respirators
  - What to do if an exposure occurs
  - Exposure evaluation and follow up
  - Record keeping
  - Hepatitis B vaccine
    - Availability
OSHA Guidelines

- OSHA 29 CFR 1910.1030
  - Blood Borne Pathogens Standard
- DOHM A1-00-02 (October 2000)
  - Management of occupational exposure to HIV
- MMWR Vol.5f9/No.RR-11 June 29, 2001
  - Use of respirators (12/31/2003)
Exposure Control Plan

- A written plan tailored to your worksite
  - Plan of implementation
  - Use of Standard Precautions
  - Provision of hand washing facilities
  - Disposal of hazardous waste
  - Hep B vaccine program
  - Infection control officer and record keeping procedures
  - Procedure to evaluate exposure incidents
Exposure Control Plan cont’d

- Must be reviewed annually
- Plan must be accessible to the employee (29 CFR 1910-1020 (e))
New Employee Inservices

- Must occur within 10 days of assignment
- Includes all information in annual training
- Hep B vaccine shall be made available after orientation and within 10 days of initial assignment in the field
Equipment

- All PPE must be supplied at no cost to the employee (including latex allergy type of PPE)
- Must have hand washing facilities
- Must have procedure to dispose of contaminated waste (define)
- Have proper labeling
Exposure Definition

- Any time an employee has been exposed to blood, saliva or body fluids containing **visible** blood from another person.
- Two types of exposures
  - High risk
  - Low Risk
High Risk Exposure

- Contact between the blood, bloody saliva or body fluid with visible blood of the source and an open cut, burn, abrasion or dermatitis

- A bite from the source which breaks the skin of the recipient. The depth of the bite and length of exposure are considered during the evaluation
Low Risk Exposure

- Blood splashes of another person onto the intact skin of the employee
- A bite of the skin which does not penetrate
- A needle stick from a clean needle
- Contact between the blood or body fluid of a person determined to be at low risk or no risk for communicable disease
Treatment of High Risk Exposure

- Determine the risk probability
- Initiate ARV’s within 1-2 hours post exposure
- No Hep B vaccine or incomplete series
  - HBIG and start vaccine series immediately or within 7 days
  - Failed converters?
- Complete series and determine titer
- Obtain baseline HIV, Hep B/C labs
Treatment of High Risk Exposure

- DO NOT DELAY treatment for paperwork or to obtain source patient status.
- HIV ARV’s are most effective if started within 1-2 hours of exposure.
Low Risk Exposure

- Baseline Labs and follow up
- HIV, Hep B/C labs
- Follow up 1 week, 1 month, 3 months and 6 months
- Conversion time frames?
Follow Up Care

- Determine source patient status (methods and utility)
- Counseling of exposed employee
- Repeat testing schedule review
Infectious Disease Exposures

- TB
- MDRTB
- Chicken Pox
- Meningitis
- Community Acquired Pneumonia
- Protection N-95
Record Keeping

- Inservice records shall include
  - Date of inservice
  - Content Summary
  - Name and qualifications of educator
  - Names and titles of attendees
  - Inservice record maintenance for 3 years
Medical records shall include:

- Name and SSN of employee
- Hep B vaccine status and dates
- Copy of all results of examination, testing and follow up procedures
- Confidentiality
- Written consent for release of information must be provided by employee
Medical records shall include:

- Copy of all exposure reports and outcomes
- Maintained by employer for duration of employment plus 30 years
Hepatitis C

- Method of transmission
- No current cure
- Liver Cancer risk
- High risk behaviours
Bioterrorism

- Anthrax
  - Cipro x 3 months
- Smallpox
  - Vaccine available
- Q Fever
  - Doxycycline x 3 weeks
- Ricin
  - Supportive treatment (ventilator etc)
- Protection via the N-95
Respirator Use

- Requires annual medical evaluation
- Requires annual fit testing
- Facial hair obstruction mustaches only
Summary

- Use Standard Precautions all the time/every time
- Report all exposures immediately
- Get treatment immediately
- Get tested via the guidelines
- Dispose of medical waste properly
Thank you!!!
Questions???????