



**DEPARTMENT OF CORRECTIONS EXPOSURE
TO
BLOODBORNE PATHOGENES
AND
HIGH RISK BODILY FLUIDS**



REFERENCE LIST

- * AS 11.61.118 Harassment 1st
- AS 12.55.135 Minimum Sentence
- AS 18.15.400 Testing Requirements
- DOC P&P 202.03 Bloodborne Pathogens

DEFINITIONS

Bloodborne Pathogens

Pathogenic microorganisms that may be present in human blood and can cause disease in humans. These pathogens include Hepatitis B virus (HBV) and Human Immunodeficiency Virus (HIV).



DEFINITIONS



High Risk Body Fluids

Body fluids identified by the Centers for Disease Control as "having the greatest potential for transmitting HBV or HIV infection, such as: blood and blood-tinged body fluids; semen and vaginal secretions; cerebrospinal fluid, pleural fluid; pleural fluid; peritoneal fluid; pericardial fluid; synovial fluid; and amniotic fluid."

DEFINITIONS

Exposure Incident

A specific exposure to the eye, mouth, or other mucus membranes, non-intact skin, parenteral exposure to blood or high risk fluids.



BORING BUT IMPORTANT DEFINITIONS

What the heck is Parenteral Exposure you ask?

It's a piercing of the mucus membranes or the skin barrier from events such as needle sticks, human bites, cuts, and abrasions.





DEFINITIONS

Administrative Managers

Division Directors, superintendents, assistant superintendents, district supervisors, **shift supervisors**, Institutional Health Care officers, **functional unit managers**, etc.



FOR ATTENDING PHYSICIANS

Significant Exposure per Alaska Statute
18.15.450

"...contact likely to transmit a bloodborne pathogen, in a manner supported by the most current guidelines and recommendations of the U.S. Public Health Service, that includes:

A. Percutaneous injury, contact of mucus membrane or non-intact skin, or prolonged contact of intact skin; and

B. Contact in a manner that may transmit a bloodborne pathogen, with blood tissue, or potentially infectious body fluids



AT RISK EMPLOYEES

Correctional Officers

Probation/parole officers

Employees having physical contact with
prisoners or visitors

Health care employees

TRAINING REQUIREMENTS

P&P 202.03 tasks the Training Academy and Health Care Operations Officer to establish and maintain an active training program.



New Employees are to receive this training upon initial assignment and all employees shall receive annual training under OSHA regulations



ACTIONS TO BE TAKEN IN EVENT OF AN EXPOSURE



RECOMMENDED IMMEDIATE ACTIONS



Puncture / Cuts / Broken Skin

- **Encourage injury site to bleed**

Wash site thoroughly with soap and water

- **Clean with 10% brovidine-iodine (Betadine solution)**

Eye or Mouth Exposure

- **Flush With Water**

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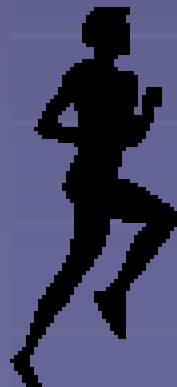
RECOMMENDED IMMEDIATE ACTIONS

- Notify Supervisor and request to be relieved to report to a health care provider outside of the institution
- Take the following with you to health care provider
 - P&P 202.03;
 - Form 202.03A;
 - AS 18.15-400-450



PAPERWORK AND REPORTS

Immediate actions take priority over paperwork, but the paperwork must be done. Shift Supervisors and/or functional unit managers should follow up to ensure the required paperwork is accomplished.



PAPERWORK AND REPORTS

- **Form 202.03A (Needle/Blood and Body Fluid Exposure report). Complete within 24 hours**
- **Incident Report. As soon as practical**
- **Special Incident Report. If required.**
- **Workers Compensation Report of Occupational Illness or Injury. As Soon as practical**



Continued

PAPERWORK AND REPORTS

- Memo to Superintendent requesting inmate blood testing. As soon as practical
- Complete Sharps Injury Log As Required By OSHA *Note this Log must be kept in Medical and made available to OSHA as required.
- Injury Leave Request to Superintendent. Within 21 days of the incident



Recommended Superintendent, Assistant Superintendent, or Designee Actions

- Ensure that Immediate actions were satisfied;
- Ensure that the exposed officer is fully aware of the actions to be taken and paperwork to be completed (Assign someone to assist if necessary);
- Ensure that the exposed officer is aware of available assistance, including counseling through the Employee Assistance Program, if appropriate;

Recommended Superintendent, Assistant Superintendent, or Designee Actions

- Contact the proper authorities to file harassment in the first degree charges if a prisoner caused an offensive physical contact with human or animal blood, mucus, saliva, semen, urine, vomitus, or feces, by knowingly directing such a substances, or substances, at a correctional employee.
- Harassment 1st is a Class A misdemeanor carrying a minimum 60 day sentence

Recommended Superintendent, Assistant Superintendent, or Designee Actions

- Complete the Workers Compensation Supervisor's Accident Investigation Report;



- Ensure the exposed officer was sent to a health care professional outside of the institution. Preferably immediately, but no later than 7 days after the incident;

Recommended Superintendent, Assistant Superintendent, or Designee Actions



- Follow up to ensure that the evaluating health care provider was provided copies of P&P 202.03, Form 202.03A, and AS 18.15.400-450;
- If available, and after obtaining inmate consent, provide health care provider with information on the inmates HIV or Hep status, and relevant information including the officer's vaccination status (Form 202.04A)

Recommended Superintendent, Assistant Superintendent, or Designee Actions

- Ensure that the exposed officer requests testing and assessment of the involved inmate;
- If the inmate refuses to voluntarily consent, take the actions required by P&P 202.03 and AS 18.15.400-450 to obtain testing without consent



Recommended Superintendent, Assistant Superintendent, or Designee Actions

- Coordinate to be certain the exposed officer is given a written copy of the results within 15 days of the exposure



CONCLUSION

A significant exposure incident is a specific exposure to blood or other high risk body fluids to the eye, mouth, or other mucous membranes; or exposure to non-intact skin.

Each and every significant exposure incident has potential life-long consequences.

Each and every such incident can cause untold stress on the officers involved and their family members



BOTTOM LINE

**EVERYONE MUST BE CONCERNED AND ACT
DECISIVELY TO LESSEN THE PHYSICAL
AND PSYCHOLOGICAL IMPACT SUCH
INCIDENTS HAVE ON ALL CONCERNED**

