Clinical Professional Exposure Information

Occupational Exposure

Healthcare personnel are at risk for occupational exposure to bloodborne pathogens, including hepatitis B vims (HBV), hepatitis C vims (HCV), and human immunodeficiency vims (HIV). Exposures occur through needlesticks or cuts from other sharp instruments contaminated with an infected patient's blood or through contact of the eye, nose, mouth, or skin with a patient's blood. Important factors that influence the overall risk for occupational exposures to bloodborne pathogens include the number of infected individuals in the patient population and the type and number of blood contacts. Most exposures do not result in infection. Following a specific exposure, the risk of infection may vary with factors such as the pathogen involved, type of exposure, amount of blood involved in the exposure and the amount of infection in the patient’s blood at the time of exposure.

Preventative Measures

Many needlesticks and other cuts can be prevented by using safer techniques (for example, not recapping needles by hand), disposing of used needles in appropriate sharps disposal containers, and using medical devices with safety features designed to prevent injuries. Using appropriate barriers such as gloves, eye and face protection, or gowns when contact with blood is expected can prevent many exposures to the eyes, nose, mouth, or skin.

OSHA Requirements

Any workers who have reasonably anticipated contact with blood or OPIM during performance of their jobs are considered to have occupational exposure and to be at risk of being infected. Exposure control plans and implemented use of universal precautions and control measures such as engineering controls, work practice controls, and personal protective equipment will protect all workers with occupational exposure.