Blood Borne Pathogen Exposure Guidelines

Samford University Athletic Training is a program housed within the College of Health Sciences. Samford AT adopted the BBP guidelines, with modifications, from the Samford University - McWhorter School of Pharmacy.

**Purpose:** To outline the expected behavior to be followed by all Athletic Training (AT) students who have received an accidental exposure incident while in an educational setting in order to decrease risk of infection with hepatitis B virus (HBV), hepatitis C virus (HCV) and human immunodeficiency virus (HIV).

An **exposure incident** is a specific eye, mouth, other mucous membrane, non-intact skin (dermatitis, abrasions, chafing, hangnail, etc.), or parental contact with blood or other potentially infectious materials (OPIM) that results from the performance of an AT student’s duties.

**Annual training** on safety precautions and post-exposure expected behaviors will be conducted. Training will be provided during the first week of the summer semester. All students (new and returning) are required to participate in this training. AT Students are required to receive or show proof of hepatitis B immunization (e.g. titers). AT students are also required to show proof of personal health insurance upon admission to the MAT. This insurance will be needed for coverage of laboratory testing and medications (if necessary) in the event of an exposure incident.

**Safety expected behaviors** and universal precautions recommended by the Centers for Disease Control (CDC) will be employed by Samford AT to minimize exposure incidents, including (but are not limited to):

- Wash hands frequently.
- Wear gloves if there is a possibility of contact with another person’s body fluids.
- After the removal of gloves or after exposure to blood or other potentially infectious materials, wash hands with antibacterial soap.
- Wear gloves once and discard; do not attempt to wash and reuse.
- Clothing or supplies contaminated with body fluids should be placed in doubled plastic bags, tied, and discarded.
- Used needles and sharp/instruments must be discarded in a Biohazard Infectious Waste Sharps Container.
- Equipment and devices that touch intact mucous membranes but do not penetrate a patient's body surface should be sterilized when possible or undergo high-level disinfection if they cannot be sterilized before being used for each patient.
- Instruments and other reusable equipment used in performing invasive procedures must be appropriately disinfected and sterilized.
In addition, Samford AT requires:

- Training on proper expected behaviors for finger testing and required equipment is mandatory.
- Recapping of needles or lancets should not be attempted.
- If a safety lancet is not available, the AT student should ask the source individual to conduct the test on themselves, if possible.
- Sharps or lancets must not be passed to others or accepted from others.

**Post Exposure Actions**

In the event that a AT student experiences an exposure to blood or other body fluids the following steps should be performed:

1. **Immediately** cleanse the wound or mucous membrane with soap and water. If contact is to the nose and/or mouth, flush with clean water for several minutes. If contact is to the eye(s), irrigate with clean water, saline, or sterile irrigates for several minutes.

2. **Exposure incidents must be reported immediately.** The AT student should immediately contact their clinical preceptor and the programs DCE (identified below) to receive direction with respect to post-exposure medical evaluation, lab work, and prophylactic treatment, if and as needed. The DCE will then notify the program director who will then inform the Department Chair. All information will be kept confidential and secure.

3. The AT student may seek medical care and attention from Samford University Health Services or, in the event that Samford University Health Services is closed, from the AT student’s personal physician of choice, the nearest urgent care center or emergency department.

Some experiential sites may have the AT student receive care through the facility’s employee health center. Other experiential sites may require follow-up with the nearest urgent care center/emergency department. The AT student preceptor, faculty advisor, or faculty (instructor) should provide guidance regarding the appropriate post-exposure expected behavior to follow.

An incident report for MAT (Student Body Fluid/Needle Stick Incident/Exposure Report Form) should be completed. Documentation should include the name, contact information of the AT Student exposed, and the source individual from which the contaminated exposure originated. The time, date and location of the exposure and a description of the incident should also be included in this documentation.

In the event of an exposure in the Sports Medicine laboratory, experiential site or at a Campus/Community event, this report should be completed by the student’s supervisor (clinical preceptor / faculty) forwarded to the AT Program Director, Chair of the Department of Kinesiology, and the Dean of the School of Health Professions. The Dean of the School of Health Professions will then forward the report to the Samford University Office of Risk Management and Insurance (301 Samford Hall).

The source individual of any potential blood borne pathogen should be informed of the exposure by the preceptor, not by the AT student. The preceptor, faculty advisor, or faculty (instructor) should attempt to
obtain consent from the source individual for appropriate medical testing. However, the source individual’s consent cannot be forced for testing or disclosure.

If the source individual does not consent to testing or verbally verifies that they have HBV, HCV, or HIV, the AT student who may have been exposed to potentially contaminated bodily fluids should receive post-exposure prophylactic treatment within current CDC recommendations of 72 hours. Even if it is not considered likely that the source individual may have HBV, HCV, or HIV, the AT student should still seek medical evaluation as directed by their preceptor, DCE, and/or Program Director.

**Laboratory Testing**

Laboratory testing of the source individual once consent is obtained should be ordered by a physician and should be based on current guidelines and available source individual medical history. Laboratory testing should be conducted immediately post-exposure and may require additional testing in the future. Testing should be conducted for HIV, Hepatitis B and Hepatitis C based on current CDC guidelines and available source individual data. Results of laboratory testing should be reported directly to the student by the physician and confidentially to the athletic training student.

Confidentiality of the source individual information and laboratory results will be maintained at all times. If the source individual refuses testing, the athletic training student who is the recipient of potentially contaminated bodily fluids should proceed with an appropriate medical evaluation, follow-up testing, and prophylactic measures and medication based upon current guidelines and source individual history, if available.

Clinical sites are under no obligation to provide medical evaluation or treatment if needed. Some clinical sites will treat the AT student as they do employees but sites are under no obligation to do so. AT students should actively seek knowledge and understanding of the appropriate expected behaviors to follow at each experiential training site.

This guideline will be reviewed annually and updated as necessary to ensure current standards and expected behaviors are adhered to and that appropriate documentation is completed.