

Touching is Infectious

It is still ‘Not’ a common practice in many laboratories today, to wear gloves while performing tasks such as:

- 1) phlebotomy
- 2) accessioning specimens
- 3) handling specimens during analytical procedures

Designating clean work areas for handling reports and requisitions is of equal importance. Often these requisitions are handled while popping corks, splitting off serum, and making slides.

All of these processes require a conscientious effort, to manage the work flow in a safe manner. Safety is important, not only for you, but also for your co-workers, your family, and the public.

We like to touch and we like to be touched. Touching is a major element in caring and healing – emotionally and physically. But touching is really infectious. Sometimes we forget how infectious. In everything we do, we are touching. And in caring for others, physical contact is inevitable.

Statistics indicate that 5% of all hospital patients develop an infection after being admitted. One hundred thousand persons will die annually from hospital oriented infections. Hands transmit infection. It is of utmost importance today that all caregivers take every precaution to protect their patients, themselves, and families.

Infection Control has never been more important than it is today. Employee cooperation is critical in establishing an effective control-program. Frequent hand washing by healthcare personnel is essential to reducing the risk of nosocomial infection. It is the single most important procedure in preventing the spread of cross infection. Despite a variety of interventions designed to increase compliance, including training, education, and patient awareness programs, handwashing among health care workers has remained poor – typically less than 50%. Numerous obstacles to handwashing compliance have been documented, including high workloads, inconvenient sink locations, skin irritations and dryness, and inadequate knowledge of hand hygiene guidelines.

The Canada Labour Code requires that each **employer provide safe working** conditions and that employees be informed about all hazards they will face in the course of their duties. Employers are also required to provide all training necessary

to work with the hazardous substance and to keep a written record of their employee education record.

In 1987, the principle of UNIVERSAL PRECAUTIONS was developed to standardize the handling of all blood and body fluids. This standard assumed that all blood or visibly blood-contaminated body fluids were potentially infectious. These precautions were to be applied to all patients at all times, in an effort to reduce the incidence and the quantity of blood exposure for health care workers in occupational settings. Prior to this time “blood precautions were only applied to patients suspect or confirmed with blood borne pathogen infections.

In 1996, The American Center for Disease Control published an infectious disease isolation guideline entitled, STANDARD PRECAUTIONS. Standard precautions are an expansion of the previous universal precautions, where care or caution is applied when handling all laboratory specimens. This standard was altered primarily because specimens may be contaminated with blood without being physically visible to the laboratory worker. Standard precautions apply to the blood and body fluids of all patients, plus measures to prevent airborne, droplet, and contact transmission of blood borne pathogens.

The guideline produced by the Laboratory Center for Disease Control in Winnipeg states, “that the accepted standard SHOULD BE that medical gloves be worn for all blood collection procedures. However, if phlebotomists choose not to wear gloves routinely, they must be gloved for performing phlebotomy if they have cuts, scratches, or other breaks in their skin, or when hand contamination with blood is anticipated. (example, phlebotomy on an uncooperative patient, fingers, or heel sticks) All new students MUST wear medical gloves during their training period and in subsequent practice of blood collection. Concern has been expressed over wearing gloves during these procedures, because gloved hands are less sensitive. However, the skill needed to perform safe vascular puncture is readily achieved, and the risk of performing these procedures with uncovered hands may be too great to assume. Therefore wearing gloves is recommended.

The Center for Disease Control in Atlanta quoted in the NCCLS standards, provides a stronger point of view by insisting that ‘gloves MUST BE worn’ during vascular procedures. Gloves MUST also be worn, when it can be reasonably anticipated that the health care worker will have contact with blood, or other potentially infectious substances.

The Occupational Health & Safety Department of Saskatchewan Labour states in the guideline for employers, “that the health and safety of every employee be protected at work.

1. Where it is not reasonably practical to eliminate or control a health hazard, the employer must provide personal protective equipment necessary for all duties.
2. Personal protective equipment **MUST BE** used to reduce the risk of exposure to blood and other body fluids.
3. All health care and public service workers **SHOULD WEAR** gloves as an additional barrier whenever the potential exists to contact blood or fluid capable of transmitting blood borne pathogens.
4. Whenever possible, alternate processes should be instituted that will eliminate the risk of exposure.
5. If it is impossible to eliminate risk, engineering controls **SHOULD BE** used to modify work practices and procedures in order to reduce the risk, such as a biohazardous safety cabinet.
6. Educational programs are essential to support the successful implementation of safer practices.
7. Include participation of all laboratory staff when filling out a laboratory safety checklist, thus highlighting dangerous work practices and possible events for exposure to blood borne pathogens.

As laboratorians, we are faced with serious occupational risks due to the presence of blood borne pathogens. Prevention through the effective use of personal protective equipment, specifically wearing gloves, will decrease exposure to blood and body fluids. In an effort to maintain awareness of increasing risk, the CDC, NCCLS, LCDC and Saskatchewan Health monitor exposure and update standards. Employers must maintain a safe working environment and encourage safe laboratory practices. Institutions that do not advocate routine glove use, should reevaluate their policy.

Make caution the rule and **NOT** the exception!

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