



Protecting Ministries

Person-on-Person Blood Transfer: Preventing Bloodborne Pathogen Exposure

Every day, we are potentially exposed to blood transfers from injuries sustained by others. Hepatitis and HIV continue to be major health issues for all of us. The Church's Bloodborne Pathogen Training Program has highlighted the level of risk that the staff faces from exposure to Hepatitis B, Hepatitis C, HIV and other bloodborne pathogens.

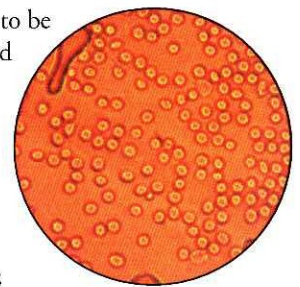
Most of us assume that most injuries will occur during student athletic, extracurricular, or recreational activities. Every teacher knows that students are injured during physical education classes and even recess, but students may also be injured in classroom activities.

Let's review the protocols for safely dealing with exposure to blood and other potentially infectious materials:

- Barriers, such as latex or other protective gloves, should be used by care providers and during cleanup procedures.
- Skin wounds (such as scratches, abrasions, and lacerations) and potentially infectious skin lesions (such as weeping sores) should be securely covered with bandages or simple wraps to prevent leakage of blood or serous fluid.
- The injured student or athlete should perform his or her own wound care whenever possible.
- Students should be instructed not to handle other people's blood. Students should not be asked to assist in controlling a bleeding injury, clean blood contaminated environmental surfaces (such as floors or wrestling mats), or handle contaminated laundry.
- Blood on the skin of the injured student and on that of other students should be washed off thoroughly with soap and water or with premoistened towelettes. The injured student should be permitted to return to the activity only after the wound has been securely covered or wrapped.



- If clothing or a wound bandage appears to be wet with blood or if blood has penetrated both sides of the fabric, the clothing should be changed and blood on the skin should be washed (by the injured student) as soon as possible. Small amounts of dried blood on clothing or equipment do not constitute a risk of transmission of bloodborne pathogens; therefore, a change of clothing may not be necessary.



- Skin contaminated with blood should be washed with soap and water. Although liquid chemical disinfectants effective against specific bloodborne pathogens and other micro-organisms are widely available, such disinfectants are not intended for direct contact with the skin.
- Disposable toweling should be used to clean all environmental surfaces when blood is present. The surface should then be cleaned with tuberculocidal germicide or a 10% household bleach solution.
- Even though bloodborne pathogens have not been shown to be transmitted by contact with saliva, you should not share towels, cups, and water bottles.

Student/Athlete Exposure Follow-Up:

- When there has been a potential exposure to blood between students (that is, another person's blood on the student's open sore or broken skin), follow the church's policy in reporting and notify the parents so that adequate medical follow-up can occur.

Dealing with the exposure to bloodborne pathogens should not be a problem. We have been doing it well for a number of years. We don't want to become complacent and inadvertently expose one of our students to one of these potentially lethal viruses. Please remember that bloodborne pathogen infection, sometimes even when treated, may ultimately be fatal.

 Arthur J. Gallagher Risk Management Services

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The Department for Ministry Protection
Toll-free 800.282.8011