

BLOOD BORNE CONTAGIOUS OR INFECTIOUS DISEASES

Communicable Diseases/Conditions

The School Board recognizes its responsibility to provide a healthful environment for all students and employees.

As part of its endeavor to fulfill that responsibility the School Board is committed to protecting the health of all students and employees from infectious conditions and believes that the student or employee with an infectious condition be admitted to school or work based upon an evaluation of the individual circumstances in accordance with Section 22.1-272 of the Code of Virginia and the following administrative guidelines:

1. When a school administrator is aware of or suspects the existence of a communicable health condition in a student or employee he should seek medical advice from both the individual's physician and the local health department.
2. If the health situation should be further evaluated, the administrator will notify the Superintendent of the school division.
3. The Superintendent, at his discretion, may refer the case to a school health review panel composed of school division administrative and teacher representatives, the physician of the student or employee, a medical representative from the Health Department, the school principal and the employee or, the student's parent(s) or guardian(s).
4. The school health review panel will meet and evaluate the case and make its recommendation to the School Board as soon as practical.
5. Periodic review by the physician and subsequent review by the school health panel is required.
6. The school division superintendent will insure that each school for which the School Board has jurisdiction will have available in the classroom disposable latex gloves and that all waste baskets have plastic bag liners that are changed daily if indicated. A copy of the attached "Procedures for cleaning spills of blood or body fluids" will be available in each classroom.
7. Confidentiality of all records and information will be maintained.
8. The School Board will review this policy and the guidelines as circumstances dictate.

Procedure for Cleaning Spills of Blood or Body Fluids

Purpose: These procedures are developed to provide effective precautions against transmission of diseases through exposure to blood and body fluids within the school setting. These procedures will protect the general school population by providing a clean environment. Staff persons who perform first aide and physical care and persons with low resistance to infection will be specifically protected.

Background: The term “body fluids” includes drainage from cuts and scrapes, vomit, urine, feces, respiratory secretions (nasal discharge), saliva, semen, and blood. Any contact with body fluids from any person presents a potential risk of infection. This risk is increased if the fluid come in contact with a break in the skin of the care giver. In general, however, the risk is very low. Simple, consistent cleanliness procedures minimize communicability.

While all body fluids (except blood) usually contain many organisms, only a few may cause disease. The following table supplies some examples.

Body Fluids as Sources of Infectious Agents

Body Fluid/Source	Organism of Concern	Transmission Concern
Blood Cuts/abrasions Nosebleeds Menses Contaminated needles	Hepatitis B virus AIDS virus Cytomegalovirus	Bloodstream inoculation through cuts and abrasion on hands Direct bloodstream inoculation
Feces Incontinence	Salmonella bacteria Shigella bacteria Rotavirus Hepatitis A virus	Oral inoculation from contaminated hands
Urine Incontinence	Cytomegalovirus	Bloodstream and oral inoculation from contaminated hands
Respiratory secretions Saliva Nasal discharge	Mononucleosis virus Common cold virus Influenza virus AIDS virus Hepatitis B virus	Oral inoculation Contaminated hands Bloodstream inoculation through cuts and abrasions on hands; bites
Vomit	Gastrointestinal Viruses (Norwalk agent, rotavirus)	Oral inoculation Contaminated hands
Semen	Hepatitis B AIDS virus Gonorrhea	Sexual contact (intercourse)

As of 1987, the AIDS virus has been isolated from blood, semen, vaginal secretions, saliva, tears, breast milk, cerebrospinal fluid, amniotic fluid and urine, but is likely to eventually be isolated from other body fluids, secretions and excretions. Epidemiological evidence, however, has implicated only blood, semen, vaginal secretions and possibly breast milk in transmission.

It is clear that avoiding direct skin contact with body fluids and careful, effective hand washing are key disease prevention practices.

SPECIFIC CLASSROOM RECOMMENDATIONS:

1. Caregivers are to use disposable plastic gloves when in direct hand contact with body fluids. This includes treating bloody noses, washing injuries, handling clothes soiled in incontinence, diaper changing, and cleaning up vomit. After each use, these gloves should be discarded in a plastic bag-lined wastebasket.
2. Complete and effective hand washing technique of at least 10 seconds duration is to follow any of the above activities and following care of each student. Soap suspends easily removable soil and microorganisms, allowing them to be washed off.
3. Should exposure to body fluids occur through coughing, an unanticipated event, or through an open sore or lesion, thorough washing is indicated.
4. There should be ready access to hot and cold running water, a liquid soap dispenser for hand washing, paper towels, and a disinfectant solution.
5. Counters, mats, changing tables, etc., that are contaminated with body fluids need to be cleaned after each use and again at the end of the day with soap and water and then rinsed with disinfectant.
6. Special precautions need to be observed in cleaning up and disposing of broken glass that may be contaminated with blood.
7. Health room wastebaskets are to have plastic bag liners that are changed daily.
8. Contaminated laundry is to be sealed in a plastic bag, placed in the regular laundry bag or box, and sent home. Standard laundry procedures are adequate to kill any live virus. Laundry personnel need to avoid risk of exposure through careful handling procedures. The contaminated laundry should not come in contact with bare hands.
9. Any clothing that has been contaminated can be rinsed with soap and water and a disinfectant solution. When possible, clothing should be changed. However, a child may return to class after the gross contamination has been cleaned. Use gloves when soaking or cleaning the clothing.
10. Vomit and other body fluids also warrant glove use in clean up. Standard custodial procedures are to be followed in cleaning such fluids from the floor. This includes disinfecting the floor area and mop.

Disinfectants:

Use gloves for all cleanup procedures.

For cleaning floors, countertops, desks, etc., make a one to ten solution of hot, soapy water and household bleach (one cup of household bleach and nine cup of hot soapy water makes about ½ gallon of solution). Bleach is a powerful germ-killing agent and the hot soapy water will suspend dried blood, dirt, etc., allowing for thorough clean up.

Mops should be soaked in the above disinfectant solution after use and rinsed in hot water.

Disinfectant solution may be disposed of down sink drains.

Other disinfectants include:

1. Ethyl or isopropyl alcohol (70%)
2. Phenolic germicidal detergent in a 1% aqueous solution (E.g., Lysol*)
3. Quaternary ammonium germicidal detergent in 2% aqueous solution (e.g., Triquat*, Mytar* or Sage*)
4. Iodophor germicidal detergent with 500 ppm available iodine (e.g., Wescodyne).

LAUNDERING CLOTHING SOILED WITH BODY FLUIDS

The most important factor in laundering clothing contaminated in the school setting is elimination of potentially infectious agents by soap and water. Addition of bleach will further reduce the number of potentially infectious agents. Clothing soaked with body fluids should be washed separately from other items. Presoaking may be required for heavily soiled clothing. Otherwise, wash and dry as usual. If the material is bleachable, add ½ cup household bleach to the wash cycle. If material is not colorfast add ½ cup nonchlorax bleach (e.g. Clorox II, Borateem) to the wash cycle.

Gloves should be worn when laundering soiled articles.

Adopted: 2/2/88
