

## Blood Contaminated Material Clean-up Standard Operating Procedure

### I. PURPOSE

The purpose of this document is to provide guidance regarding the procedures required to safely clean up a human body fluid spill.

### II. SCOPE

Blood and blood contaminated material may contain viruses, bacteria, and parasites that can cause harm to exposed individuals. In order to reduce exposure to these bloodborne pathogens all custodial staff must use the following procedures when cleaning up blood.

### III. DEFINITIONS

**Blood** – human blood, human blood components and products made from human blood.

**Bloodborne Pathogens** – pathogenic microorganisms that can cause disease in humans. These pathogens include but not limited to hepatitis B (HBV) and human immunodeficiency virus (HIV). These pathogens have been detected in blood, blood components, urogenital secretions, urine, saliva, and cerebrospinal fluid. Of these materials, human blood presents the greatest potential for transmitting infections.

**Contaminated** – the presence of blood or the reasonably anticipated presence of blood or other potentially infectious materials (on a surface or item).

**Contaminated Laundry** – which has been soiled with blood or other potentially infected material or which may contain sharps.

**Contaminated Sharps** – any contaminated objects that can penetrate the skin including, but not limited to, needles, scalpels, broken glass, broken capillary tubes, and exposed ends of dental wire.

**Decontamination** – the use of physical or chemical means to remove, inactivate, or destroy bloodborne pathogens (on a surface or item) to the point where they no longer capable of transmitting infectious particles; and the surface or item is rendered safe for handling, use, or disposal.

**Gloves** – The most widely used form of personal protective equipment. They act as a primary barrier between hands and bloodborne pathogens. Latex or vinyl gloves are used for medical, dental or laboratory procedures. Heavy duty utility gloves may be used for housekeeping duties.

**Medical waste** - sharps contaminated with blood, infectious or biologically contaminated material that can cause accidental injury.

**Occupational Exposure** - reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or any other potentially infectious material that may result from the performance of an employee's duties.

**Other Potentially Infectious Materials** - includes the following: (1) human body fluids: cerebrospinal, synovial, pleural, pericardial, peritoneal, amniotic, semen, vaginal secretions saliva in dental procedures; all body fluids, secretions, and excretion except sweat; all body fluids in situations when it is difficult to differentiate between body fluids; (2) Any unfixed tissue or organ (other than intact skin) from a human living or dead; (3) HIV-containing cell or tissue culture, organ culture, and HIV, HCV, or HBV-containing culture

medium or other solutions; and (4) blood, organs or other tissues from experimental animals infected with HIV, HCV, or HBV

**Personal Protective Equipment** - is specialized clothing or equipment worn by an employee for protection against a hazard. It includes: gloves, gowns, face shields, masks, protective eyewear, mouthpieces and resuscitation bag or other ventilation devices. General work clothes (e.g. uniforms, pants, shirts or blouses) not intended to function as protection against a hazard is not considered to be personal protective equipment.

**Regulated Waste** - liquid or semi-liquid blood or other potentially infectious materials; contaminated items that would release blood or other potentially infectious materials if compressed; items that are caked with dried blood or other potentially infectious materials and are capable of releasing these materials during handling; contaminated sharps; and pathological and microbiological wastes containing blood or other potentially infectious materials, also called Biohazardous Waste.

**Sharps** - an item that is designed to cut or puncture skin. Sharps include unused, disinfected or contaminated: needles, syringes with needles, scalpel blades, lancets, and razor blades, broken vials and laboratory slides contaminated with infectious agents or human blood.

**Standard Precautions** - this concept synthesizes the major features of Universal Precautions and Body Substance Isolation and applies them to all patients receiving care in hospitals and clinics, regardless of their diagnosis or presumed infection status. Standard Precautions apply to: blood, all body fluids, secretions, and excretions regardless of whether or not they contain visible blood (the only exception is sweat), non-intact skin, and mucus membranes. Standard precautions are designed to reduce the risk of transmission of microorganisms from both recognized and unrecognized sources of infection in the hospital and clinic setting.

**Universal Precautions** - is an approach to infection control. According to the concept of Universal Precautions, all human blood and certain other human body fluids are treated as if known to be infected with HIV, HBV, or other bloodborne pathogens.

#### IV. ROLES AND RESPONSIBILITIES

(a) **Routine Cleaning:** During the course of routine cleaning Custodians may encounter small drops of blood, other potentially infectious materials, and feminine hygiene receptacles with used products. If normal bathroom cleaning procedures are followed when dealing with these situations, there is minimal risk of exposure to bloodborne pathogens. If a situation arises in which you observe more than a few drops of blood or other potentially infectious materials, do not attempt to clean the area. Only authorized and trained personnel should deal with these situations: these include Custodial Supervisors and Lead Workers.

(b) **Response to Blood Spill/Incident:**

1. Only authorized personnel may perform spill cleanup procedures for spills containing Human blood or OPIMs: these include Custodial Supervisors and Lead Workers.
2. Authorized personnel should utilize a spill cleanup kit if available. Kits contain PPE, disinfectant, absorbent material, and disposal bags.

#### V. PROCEDURES

##### Items to be included in a Body Fluid Spill Kit

Please note that this list can be modified and should not be considered the only option. There are also many pre-packaged kits available for purchase online and through suppliers.

- Germicidal Disinfectant**

- A solution of 5.25 percent sodium hypochlorite (household bleach) diluted at 1:10 (10% bleach solution – this cannot be premixed, must be mixed at time of disinfection, can use small bleach packets appropriately sized to mix with water)
- Over the counter EPA-registered "hospital disinfectant" chemical germicides that have a label claim for tuberculocidal activity. These are chemical germicides that are approved for use as hospital disinfectants and are tuberculocidal when used at recommended dilutions.
- Over the counter products registered by the Environmental Protection Agency as being effective against human immunodeficiency virus (HIV).
- Tweezers or forceps (for removing contaminated sharps)
- Biohazard waste bags (red bags)
- Disposable waste bag
- Disposable gloves (latex, vinyl, or nitrile)
- Absorbent material
  - High-absorbent paper towels
  - Absorbent pads
  - Micro-encapsulation Absorbent (i.e. Absorbex granules, Chloro Sorb, X-O Oder Away)
- Splash-resistant goggles
- Safety mask/ face shield (if possibility of splashing or aerosolization exists)
- Antimicrobial hand wipe (if water source not readily available to wash hands with soap and running water)
- Lab coat/smock/Disposable gown w/ sleeves
- Disposable shoe covers
- Sharps Container (available for use)

## VI. RESPONDING TO A BLOOD SPILL

1. The first step in responding to a Blood Spill is to select and don the appropriate personnel protective equipment. Always check PPE for tears or damage before wearing. Select the following PPE based on the situation.
  - Gloves:** Mandatory for all blood clean-up.
  - Eye protection:** Use when splashing may occur.
  - Face Mask:** Use when splashing may occur.
  - Face Shield:** Use when splashing may occur.
  - Disposable Coveralls:** Use when splashing may occur.
  - Booties:** Use if walking on blood contaminated area is unavoidable.
2. If any sharp objects or broken glass is contaminated with blood, remove objects with tongs or forceps and place in a sharps container. Never remove sharps/broken glass by hand.
3. Contain spill by covering with absorbent material (paper towels, powder, or absorbent pad).
4. Carefully apply disinfectant solution (1/10 bleach solution, hospicial cleaner) on and around blood spill. Take care to not splash disinfectant during application.
5. Allow disinfectant to work: Let sit for 10 minutes. If this is not possible, allow to sit for as long as possible.
6. Remove absorbent material (paper towels, absorbent powder). Place all contaminated absorbent material in a red bag, autoclave bag or appropriate disposal bag. Repeat process until all visual soilage has been removed.
7. Re-apply disinfectant to area. Allow to air dry or stand for 10 minutes before wiping dry. Note: Inspect the blood spill area closely; making sure that there is nothing missed and that the clean-up process is complete.

8. Decontaminate any reusable equipment by placing in bucket of disinfectant solution and allowing it to soak. Dump waste water down sanitary drain. Place all contaminated disposable equipment in a red bag, autoclave bag or appropriate disposal bag.
9. Remove PPE with caution. Dispose of PPE into appropriate waste bag.
10. Wash hands immediately with soap and running water for 20 seconds.
11. Notify your Purchasing that Blood Spill materials were used for a clean-up for inventory purposes. Supervisors should replace any disposable equipment after each clean-up.

## **VII. PERSONAL CONTAMINATION**

1. Remove any contaminated clothing or protective equipment.
2. If skin has been contaminated, wash with soap and warm water.
3. If eyes have been splashed, rinse under running water (eyewash or faucet) for atleast 15 minutes.
4. Administer normal First Aid.
5. Tell your supervisor about exposure incident, and
6. Visit Designated Healthcare Provider or Licensed Health Care Provider for evaluation and follow-up care.

## **VIII. NEEDLE IN REGULAR TRASH**

If you find a needle in a trash can:

1. Locate a sharps container.
2. Put on gloves and safety glasses.
3. Find a mechanical way to pick up the needle (tweezers, tongs, pliers, broom/dustpan).
4. Using the tweezers, lift the needle out of the trash can.
5. Carefully place the needle into the sharps container.
6. Wash the tweezers with disinfectant.
7. Take off gloves and wash hands with soap and water.

## **IX. USING A MOP FOR MAJOR SPILLS ON HARD FLOORS**

1. Place WET FLOOR SIGNS around spill area.
2. Assure all necessary equipment is in the immediate vicinity of the spill.
3. Mix disinfectant in appropriate bucket.
4. Put on gloves, mask, and eye protection.
5. Put on shoe covers and protective gown.
6. Dip mop head in disinfectant. do not wring out.
7. Do not touch mop to spill. Drip disinfectant over spill.
8. Completely cover spill.
9. Avoid splashing.
10. Wait the required time (10 minutes). increase time if heavily soiled.  
NOTE: Keep spill area wet.
11. Return mop head to disinfectant. Wring out
12. Thoroughly, mop up spill.
  - a. Rewet and wring mop head as needed.
  - b. Large absorbent pads may be used to soak up solution.
13. Leave mop head in the disinfectant solution for the recommended contact time (10 minutes).
  - a. Wring out mop head and allow to air dry.
14. Discard solution in custodial sink
  - a. If used, discard large absorbent pads in biohazard containers.
15. Remove PPE
  - a. Discard disposable gloves and mask in appropriate BAG.

- b. If heavy reusable gloves are used, spray all outer surfaces with disinfectant and allow to dry.
- c. Disinfect eye protection with spray disinfectant. Allow to air dry. Replace in biohazard clean-up kit.

16. Close biohazard bag.
17. Wash hands
18. Dispose of biohazard bag in centralized biohazard pick-up area.
19. Assure surface is dry.
20. Remove wet floor signs.
21. Replace all used PPE on cart.

## **X. SPILLS ON CARPET**

1. Place WET FLOOR SIGNS around spill area.
2. Assure all necessary equipment is in the immediate vicinity of the spill.
3. Put on gloves, mask, and eye protection.
4. Mix disinfectant in appropriate bucket. **Consider disinfectant type (bleach may cause discoloration)**
5. Put on shoe covers and protective gown.
6. Dip mop head in disinfectant. Do not wring out.
7. Do not touch mop to spill. Drip disinfectant over spill.
8. Completely cover spill, but avoid splashing.
9. Wait the required time (10 minutes). Increase time if heavily soiled.
  - a. Keep spill area wet.
10. Blot up excess liquid with disposable towels; or
11. Line the collection tank of the wet/dry vacuum with two layers of plastic bags. This can be disposed of easily and require minimal cleaning of the tank.
12. Pick-up all visible signs of the decontaminated spill with WET/DRY vacuum.
13. REPEAT - DRIP disinfectant over spill and pick-up with WET/DRY vacuum
14. Wring out mop head and allow to air dry.
15. Discard solution in custodial sink. Dispose of plastic bags and/or disposable towels in biohazard bag.
16. Remove PPE
  - a. Discard disposable gloves and mask in appropriate bag.
  - b. If heavy reusable gloves are used, spray all outer surfaces with disinfectant and allow to dry.
  - c. Disinfect eye protection with spray disinfectant. Allow to air dry. Replace in biohazard clean-up kit on cart
17. Close biohazard bag.
18. Wash hands.
19. Dispose of biohazard bag in centralized biohazard pick-up area.
20. Assure surface is dry
21. Remove wet floor signs

## **XI. SMALL SPILLS ON CARPET (smaller than a quarter)**

1. Isolate the area.
2. Wear gloves and other appropriate PPE.
3. Soak the spill with enough disinfectant to cover the spot.
4. Let dry at least 30 minutes up to overnight to ensure that the spot is disinfected.
5. Blot up excess liquid with disposable towels; or
6. Shampoo carpet, if needed, or use 3% hydrogen peroxide to remove discoloration.
7. Place contaminated towels in a plastic waste disposal bag.

**NOTE:** You can also arrange for the carpet to be shampooed with an industrial carpet cleaner. You may be able to add a disinfectant to the device. The heat from a steam cleaner would also work to disinfect spills on carpeting.

**XII. CARPET SAFE DISINFECTANTS**

Amphyl® Disinfectant Cleaner Reckitt Benckiser 1-800-677-9218 Product # 675-43

Amphyl® Disinfectant Deodorant Spray Reckitt Benckiser 1-800-677-9218 Product # 777-72-675

Medaphene Plus Disinfectant Deodorant Dymon, Inc. 1-800-443-9536 Product # 11694-98

Medaphene Disinfectant Deodorizing Spray Dymon, Inc. 1-800-443-9536 11 Product # 694-98

Phono Cen Spray Disinfectant Deodorant Central Solutions 211-32

Lysol® I.C. Disinfectant Spray Reckitt Benckiser 1-800-677-9218 Product # 777-72-675

Citrace Hospital Germicidal Deodorizer Caltech Industries, Inc. 1-800-234-7700 Product # 56392-2