Emperor's College of Traditional Oriental Medicine

Exposure Control Plan

August, 2005

BIOHAZARD

1807 B WILSHIRE BLVD.
SANTA MONICA, CA 90403
(310) 453 – 8363
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PURPOSES

The following ECTOM Exposure Control Plan (ECP) has been developed and implemented to meet the letter and intent of Cal-OSHA's Blood-borne Infectious Diseases Standard. Compliance with the Blood-borne Infectious Disease Standard will reduce occupational exposure to blood and other potentially infectious materials, including human immunodeficiency virus (HIV), hepatitis B virus (HBV), hepatitis C virus (HCV), and other blood-borne pathogens.

The primary purposes for this Exposure Control Plan are:

- To eliminate or minimize interns, clinic supervisors and clinic employees occupational exposure to blood or other potentially infectious materials (OPIM).
- To identify interns, clinic supervisors and clinic employees at risk from occupational exposure to blood or OPIM while performing their regular job duties
- To provide training and information to interns, clinic supervisors and clinic employees who are at risk from occupational exposure to blood or OPIM.
- To comply with OSHA Blood-borne Pathogen Standard 29 CFR 1910.1030

All interns, clinic supervisors and clinic employees are expected to follow these guidelines at all times for the protection of themselves, their fellow workers, their families, and their patients. It is the responsibility of Emperor’s College to provide a safe work environment. It is the responsibility of those in the clinic to follow these guidelines.

EXPOSURE AND RISK

1. Definitions

*Blood-borne pathogens* are pathogenic microorganisms that are present in human blood and can cause diseases in humans. These blood-borne pathogens include, but are not limited to, hepatitis B virus (HBV) and human immunodeficiency virus (HIV).

*OPIM* (Other Potentially Infectious Materials) are materials that include the following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial...
2. Non-intact Skin. Transfer of infectious blood, plasma, serum, or body fluids in the absence of overt puncture of the skin, through the contamination of pre-existing minute cuts, scratches, abrasions, burns, weeping or exudative skin lesions, etc. There may be a risk of exposure from prolonged or extensive contamination of intact skin with infectious fluids.

3. Mucous Membrane. Contamination of mucosal surfaces with infectious blood, plasma, serum, or body fluids as may occur with splashes or spattering of the oral or nasal mucosa or conjunctiva.

*Indirect Contact*

HBV can be transmitted indirectly from such common environmental surfaces as telephones, biohazard boxes, pens, and other surfaces contaminated with infectious blood or body fluids which can then be transferred to the skin or mucous membranes by hand contact. No environmentally mediated transmission of HIV or HCV has been documented.

Nail-biting, smoking, eating, contact lens manipulation, and other hand-to-nose, hand-to-mouth or hand-to-eye actions may contribute to indirect transmission and must not be done in the clinic.

Fecal oral transmission or air-borne transmission of HBV or HIV has not been documented. Fecal oral transmission of HAV is possible. Tuberculosis and other pathogens can be transmitted by air-borne droplets.

3. Identify the Risk in the Acupuncture Clinic

Acupuncture clinic workers are a high-risk group for exposure to hepatitis B virus (HBV), hepatitis C virus and HIV.

Transmission in the acupuncture clinic occurs through percutaneous (through the skin) contact with blood or other body fluids, either through needle-stick (parenteral) or contact with open wounds or severely chapped hands. Other routes of infection can occur when mucosal surfaces are exposed to contaminated liquids. Therefore, all the employees and interns at Emperor’s College clinic must consider their at exposure blood-borne pathogens environment. REDO THIS.

*Acupuncture tasks that are reasonably likely to result in exposure*

Needle Removal: When the needle is withdrawn from the point there is the chance that a few drops of blood may appear at the needling site. Auricular points are the most likely acupoints to produce several drops of blood.
EXPOSURE CONTROL PLAN

Category I: Employees/students whose routine work includes tasks that involve exposure to blood, body fluids or tissues. All procedures or other job-related tasks that involve an inherent potential for mucous membrane or skin contact with blood, body fluids, or tissues, or a potential for spills or splashes of them, are Category I tasks.

The category I individuals include:
- Clinic supervisor
- Assistant clinic supervisor
- Interns
- Observation students
- Faculty for Acupuncture Techniques I – III
- Students who are enrolled in Acupuncture Techniques I–III

Category II: Employees whose normal work routine does not include tasks that involve exposure to blood, body fluids, or tissues, but whose employment may require performing unplanned Category I tasks.

Category II includes:
- Front desk personnel
- Clinic manager
- Pharmacy room students

Category III: Employees whose routine work does not include tasks that involve exposure to blood, body fluids, or tissues. These individuals are not called upon as part of their employment to perform or assist in emergency medical care or first aid, or to be potentially exposed in some other way.

Category III includes:
- All Administration staff on second floor
- Faculty
- Students who are not involved in the clinic

All exposure determinations for Categories I and II were made without regard to the use of Personal Protective Equipment (PPE).

GENERAL PROGRAM MANAGEMENT
EXPOSURE CONTROL PLAN

- Overseeing implementation of the Exposure Control Plan;
- Developing, in cooperation with Safety Operations Committee, any additional blood-borne pathogens related policies and practices needed to support the effective implementation of this plan;
- Revising, updating and improving the Exposure Control Plan when necessary, with a minimum of one year between revisions;
- Collecting and maintaining a suitable reference library related to blood-borne pathogens;
- Understanding current legal requirements concerning blood-borne pathogens;
- Conducting periodic organizational audits to maintain an up-to-date Exposure Control Plan.

Supervisory Personnel

Supervisory Personnel include clinic manager and associate academic. Supervisory personnel are responsible for compliance in their areas. Activities delegated to the supervisory personnel include:

- Assuring that employees/students in their area who are at risk of exposure to blood-borne pathogens receive initial training and annual retraining (including site-specific training) in blood-borne pathogens as outlined in the "Training" section of this document;
- Assuring that all employees/students receive on-site training regarding engineering controls, work practice controls, personal protective equipment, compliance with safer sharps devices, and proper procedures to follow after an exposure incident;
- Assuring that proper exposure control procedures are followed as outlined in the "Methods of Compliance" section of this document;
- Assuring that appropriate personal protective equipment is available and in good working condition for all employees/students at risk of exposure to blood-borne pathogens;
- Assuring that any employee/student who experiences an occupational exposure incident to blood or other potentially infectious materials is provided with post-exposure medical services as outlined in the "Post-Exposure Evaluation and Follow-Up" section of this document.
- Maintain appropriate training records;

Education/Training Instructors

The Education/Training Instructors will provide information and training to all students and employees who have an anticipated risk of exposure to blood-borne pathogens. The ECTOM pre-clinical course faculty is served as the Education/Training instructor. The Instructor will:

- Maintain an up-to-date list of ECTOM students that have taken the required initial training;
- Develop suitable education/training programs for students;
EXPOSURE CONTROL PLAN

Universal precautions are an approach to infection control that requires employers and students (employees) to assume that all human blood and specified body fluids are infectious for HIV, HBV and other blood-borne pathogens. Where differentiation of body fluids is difficult, all body fluids are considered to be potentially infectious.

2. Engineering Controls

Engineering Controls are physical or mechanical devices that isolate or remove health hazards from the workplace.

Emperor's College Clinic uses engineering controls to eliminate or minimize the risk of occupational exposure. In each treatment room, we have biohazard containers and we use disposable acupuncture needles.

(1). Handwashing facilities: There are six handwashing facilities with hot and cold running water in Emperor's College clinic, they are located in room 9, room 18, intern/pharmacy room, the restrooms and the hallway.

(2). Sharps Containers: In each treatment room, we have biohazard containers. It is leak proof, puncture resistant and easily accessible to personnel that use acupuncture needles and other sources of medical waste generated at Emperor’s College clinic. The international biohazard symbol appears on each container. Please follow these rules when you using the Sharps container.
   - Do not overfill Sharps containers. It should not be filled above the fill line.
   - Do not attempt to remove objects from the Sharps container.
   - Do not attempt to remove the lid from a Sharps container. If the container lid has been removed from the container, get a new container.
   - Do not attempt to transfer used needles from one Sharps container to another.
   - Contaminated materials may not be left on top of the container or sticking out of the top of the container.
   - Only needles should be disposed of in the sharps containers. No gloves or cotton-balls.

(3). Disposable Acupuncture Needle: In Emperor’s College Clinic, only use pre-sterilized single-use one-per-packet disposable needles.

3. Work practice controls

Work practice controls means controls that reduce the likelihood of exposure by defining the manner in which a task is performed.
procedure. Since spraying or spattering of blood might occur when the vacuum seal is broken, if
blood is visible a mask or goggles is required when cups are removed.

- **Disposal of Sharps**

Each treatment room at ECTOM has a portable sharps container that can be easily accessed by the
intern/practitioner. A contaminated acupuncture needle, after withdrawal, must immediately be
placed in the sharps container before the next needle is withdrawn. The portable may be placed on
or near the treatment table on a stable surface to facilitate immediate and safe disposal.

- **Disposal of blood contaminated cotton balls**

Contaminated cotton balls must be in a waste container marked BIOHAZARD if the amount
absorbed is sufficient to be able to squeeze droplets of blood from the cotton or if, when dry,
blood flakes may shed. Otherwise, cotton balls contaminated with less blood may be disposed of in
a non-biohazard waste receptacle.

- **Disposing of 7-star needle heads**

When disposing of 7-star needle heads, the used needle head must be removed from the handle
with a cotton ball to prevent sticking the intern/practitioner fingers. The head must then be
immediately placed in the sharps container. The cotton ball should be disposed in the regular
trash.

(2). Handling Sharps

Contaminated needles and other sharps must be handled carefully to avoid puncture wounds.
Puncture wounds from contaminated sharps can transmit infection. To prevent injury and
transmission of infection, observe the following rules:

- Immediately discard used disposable needles in nearby impermeable containers.
- Be sure to replace containers before they become overfilled.
- Never try to insert used needles back in the guide tube or manipulate needle in any way.
- Do not give used needles to an observer or another intern.

(3). Hand Washing

Hand washing should include a vigorous rubbing together of well-lathered hands for at least 10
seconds, under warm running water. Rings should be removed. Fingernails should be short and
EXPOSURE CONTROL PLAN

Protective gloves should be worn whenever there is danger of touching or handling blood or other potentially infectious body fluids. But keep in mind that gloves are a barrier to fluids, not a guarantee of protection.

Examination Gloves
Emperor's College Clinic highly recommends using examination gloves for patient care procedures, such as removing needles, cupping. They are disposable and should be discarded after use with each patient. Do not wear gloves during the needle insertion procedure if you feel that gloves make handling the needles more difficult.

The gloves MUST be worn in the clinic when performing the following tasks:
- When handling biohazard material and visibly contaminated items or linen, this includes picking up spilled used needles.
- When you have cuts or lesions or any kind of broken skin on your hands.
- When examining or treating areas on patients with cuts, lesions, rashes or any kind of broken skin.
- When examining or treating around the mucous membranes of your patient (includes mouth, anal and genital region).
- When using a lancet or three edged needle to prick to bleed or when using a 7-star or plum blossom needle if bleeding might occur.
- When performing bloodletting with cupping or Gwa Sha (scraping, coining) to cause bleeding.

Gloves are not required for taking blood pressure, measuring temperature or taking pulse.

Examination Gloves are available in each treatment room. Replacements can be obtained at the front.

Guidelines for using Protective Gloves:
- Wash and dry your hands before and after using protective gloves. And remember to remove all hand jewelry to prevent tearing of the glove.
- Do not apply hand lotion prior to gloving as dampness causes a wrinkling phenomena.
- Select gloves that are the correct size and make sure they are free of holes and tears.
- Remember to change gloves as soon as is practical if they become contaminated or no longer effective due to sweat from your hands or if they have holes or tears. Be sure to wash your hands before putting new gloves on.
- If you accidentally get blood on your hands wash immediately.
- When removing gloves avoid skin contact with the outside of the gloves. First by grasping one glove by the cuff pulling the glove off inside out. Pull of the second glove by the cuff in the same manner.

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3. Occlusive Dressings

All skin defects (e.g.: exudative lesions, dermatitis, cuts or abrasions) located on exposed parts of the body should be covered with a water-impermeable occlusive bandage or otherwise shielded. This includes defects of the arms, face and neck. The fingers and hands are best protected by gloves. An occlusive dressing for other skin areas may be fashioned by cutting a portion of a latex glove large enough to cover the skin defect. The skin defect should be covered with gauze and then the latex covering should be taped to the skin, taking care to seal the edges of the dressing.

4. Lab Coats

Lab coats must be worn at all times while on duty in the clinic. Coats should be buttoned at all times.

Coats used when treating or examining patients must NOT be worn outside the clinic (including the classrooms, dining room, office).

Obtaining lab coats is the responsibility of each intern/practitioner at ECTOM. It is also the intern/practitioner's responsibility to launder the lab coat weekly to ensure cleanliness.

Before leaving the work area (Emperor’s College clinic), remove all PPE, clinic coat, gloves, inask.

All PPE provided by ECTOM is inspected monthly to check that all equipment is in tact and can function properly. Equipment is replaced as needed

<table>
<thead>
<tr>
<th>TASK</th>
<th>Protective Equipment</th>
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<tbody>
<tr>
<td></td>
<td>Clinic coat</td>
</tr>
<tr>
<td>Needle remove</td>
<td></td>
</tr>
<tr>
<td>Bleeding</td>
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Decontamination means the use of physical or chemical means to remove, inactivate, or destroy blood-borne pathogens on a surface or item to the point where they are no longer capable of transmitting infectious particles and the surface or item is rendered safe for handling, use, or disposal.

Antiseptic: Products designed to reduce microbial life on living tissue, particularly on the skin of the patient or practitioner.

Disinfection: The use of chemicals and procedures designed to destroy or reduce the number of pathogens on inanimate objects such as work surfaces. It must be recognized that some bacteria, spores, and viruses may resist the often lethal effects of many chemicals.

Disinfectants: The chemicals employed in disinfection. They should only be used on inanimate objects, and are not to be confused with antiseptics that are applied to the body.

2. Procedure

You should wear Utility gloves when doing the following decontamination procedures.

(1). Patient Care Area:

Turn on the lights when you clean the treatment room.

A disinfectant with a 1:10 dilution of household bleach and paper towels should be used to clean all treatment room countertops and treatment tables. This procedure should be repeated after treating any patient with oozing skin lesions, persistent cough or other problems that might cause contamination of these surfaces. This type of procedure should also be done before any severely immunocompromised patient enters the room. A bleach solution diluted between 1:10 and 1:100 with water is acceptable for disinfection of environmental surfaces, according to the CDC and OSHA.

A spray bottle with a 1:10 dilution of bleach is kept in the cabinet in each treatment room. This solution must be replaced daily.

(2). Equipment or Instruments:

Cups: After use, cups should be taken to the sink. If visually contaminated with Vaseline, they should be washed with soap and water first. If contaminated with blood, they should be handled with gloves, and rinsed in the sink, without touching the contaminated area. Then
EXPOSURE CONTROL PLAN

d. Allow the surface to air dry completely.

(5). Personal Health and Hygiene

1. Do not eat, drink, smoke, apply cosmetics or lip balm, or handle contact lenses in work areas.
2. Take great care to maintain the cleanliness of your hands, keeping the nails short.
3. Hair styles that touch the client or break the clean field should be avoided.
4. Be sure to wash your hands thoroughly with soap and warm water for 10 to 15 seconds after contact with each patient. Do this even though you wore gloves during the patient contact.
5. Immediately wash any body parts that have been exposed to blood or other potentially infectious materials. Remember to report incidents of exposure as soon as possible to your supervisor or the clinic director.
6. Pregnant students are not known to be at greater risk of contracting HIV infection, however, if a person develops HIV infection during pregnancy, the infant is at risk of infection resulting from perinatal transmission. Because of this risk, pregnant students should be especially familiar with and strictly adhere to precautions to minimize the risk of HIV transmission.
7. If you have an oozing wound or sore, or if medications have weakened your immune system, consult the clinic director. Special precautions may be necessary.

HOUSEKEEPING

Intern/observer responsibility
1. Change all dirty sheets, pillow cases and gowns after each treatment. Take all dirty laundry to the laundry room.
2. Wipe down sink and counter area and treatment table with the bleach solution after every patient.

Emperor's College Clinics' responsibility
1. The biohazard waste company will pick up biohazard boxes on a regular basis (monthly)
2. The laundry companies will pick up dirty Laundry three times a week
3. The janitor cleans each treatment room and whole clinic every day.

This facility will be cleaned and decontaminated according to the following schedule

<table>
<thead>
<tr>
<th>AREA</th>
<th>SCHEDULE</th>
<th>PROCEDURE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sinks, countertops, Work surfaces</td>
<td>end of each shift and whenever visibly contaminated</td>
<td>Bleach sol. 1:10 – 1:100 Rubber utility glove PPE</td>
</tr>
</tbody>
</table>

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EXPOSURE INCIDENT PROTOCOL

Student/Employees Response

If students or employees suffer a puncture wound with a used needle or other sharps, or if they have broken skin or mucous membrane contact with potentially infectious body fluids, you should do the following:

- Wash the exposed area immediately with soap and warm water. This may help prevent the pathogens from entering your body. If there was a cut/puncture allow it to bleed freely for a few moments.
- Apply a disinfectant such as 70% alcohol, iodine, Betadine or other povadyne solution to clean exposed area. Do not use an ethanol swab.
- File an exposure incident report with clinic director or clinic manager and/or consult a doctor.
- Go immediately to Santa Monica-UCLA Medical Center for evaluation and possible treatment.

Santa Monica-UCLA Medical Center
1250 Sixteenth Street, Santa Monica, California 90404
(310) 319-4000

- Do not delay treatment for any reason.

Follow-up

1. Exposure to blood that does or might contain HBV.

- Unvaccinated person: Should receive the vaccine series. A single dose of hepatitis B immune globulin (HBIG) is also recommended, if this can be given within 7 days of exposure.
- Previously Vaccinated person: should be tested to insure that HBsAb is still present.
  - If antibody level is adequate, no treatment.
  - If antibody level is not adequate, follow with hepatitis B vaccine dose as booster.
  - A few individuals do not develop antibodies in response to the vaccine. If these individual are exposed, they should have two doses of HBIGX.

2. Exposure to blood that does or might contain HIV
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When an employer is acting as the health care profession and the employees or students refuses to give consent, the employer must make immediately available a health care professional other than the employee's professional.

Note that the report given to the medical care provider is confidential and will go into a confidential file that is not accessible to others in the workplace. It is only accessible with the employee's or student's written permission, or as required by law.

RECORD KEEPING

The Emperor's College of Traditional Oriental Medicine establish and maintain an accurate record for each employee/student with occupational exposure, to include:

1. The name and social security number of the employee/student.

2. A copy of the employee's/student's Hepatitis B vaccination status, including the dates of all the Hepatitis B vaccinations and any medical records relative to the employee's/student's ability to receive the vaccination.

3. A copy of all results of examinations, medical testing, and follow-up procedures.

4. The College's copy of the healthcare professional's written opinion.

5. A copy of all information provided to the healthcare professional.

The facility will ensure that the employee's/student's medical records are kept confidential and are not disclosed or reported without the employee's/student's express written consent to any person within or outside the workplace except as required by law.

The facility will maintain the records for employees/students with occupational exposure for at least the duration of employment PLUS an additional 30 years.

Employee/student medical records shall be provided upon request for examination and copying to the subject employee, to anyone having written consent of the subject employee/student or others as required by law.

INFORMATION AND TRAINING
HEPATITIS B VACCINATION DECLINATION STATEMENT

I (please print your name) ___________________________________________________ has received, read and understand the exposure control plan. The nature of risk that I am exposed to in performing my job during my internship at Emperor's College Clinic has been explained to me in this plan. I am aware that I am at high risk contacting the Hepatitis B virus, HIV and other infectious diseases. I have been familiar with the nature of Hepatitis B and HIV. I understand how the disease is spread. I have been informed about the safety and the efficacy of the HBV vaccine.

I will follow the exposure control guidelines at all times during my internship at Emperor's College Clinic.

Signature: ___________________________________________ Date: __________________________
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Signature of Witness _______________________________ Date ____________
Signature of clinic director ____________________________ Date ____________

EVALUATION OF EXPOSURE EVENT

Name of Employee/student __________________________________________
Date ______________ Time ____________ Date from completed ____________

HBV Vaccine Status ____________________________________________

What task was being performed at time of exposure __________________________

What was the nature of the injury? ______________________________________

What controls were being used at the time of the event? _____________________

Do you have a witness? ☐ Yes ☐ No, if yes please give the name(s), address, tel. ____________

Examine each control (Universal Precautions, Engineering, Work Practice, etc.) in place or lacking at time
of exposure event _______________________________________________________

What could have prevented the exposure? ________________________________

Will changes be implemented to prevent a future occurrence? ☐ Yes ☐ No
Describe changes ______________________________________________________

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SOURCE INDIVIDUAL MEDICAL RELEASE/REFUSAL FORM

Source Individual Name: ________________________________

Address: ____________________________________________

You have been involved in an incident that has exposed the following employees/interns to your blood or body fluids

Permission For Source Individual’s Medical Release

I hereby grant permission to have my blood drawn and tested to determine if I am a carrier of a blood-borne disease. I also grant permission to have the test results released to the individuals listed above and to the health care providers performing the follow-up evaluations.

Source Individual’s Signature: ______________________ Date: ____________

Refusal For Source Individual’s Medical Release

I have had the exposure evaluation process explained to me and I hereby refuse to consent to blood testing to determine my infectious status with regard to blood-borne pathogens, including but not limited to Hepatitis B Virus (HBV) or Human Immunodeficiency Virus (HIV). I understand that by refusing to do so, those individuals who were exposed to my blood or body fluids will have limited information to determine their potential for contracting these diseases.

Source Individual’s Signature: ______________________ Date: ____________

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Biochem Stores:
http://www.medicine.uiowa.edu/biochemstores/vendors.htm#VendorLinks

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