



# East Carolina University Student Health Service

Policy No. ECC19

Effective Date \_04/28/1993\_

Revised Date \_09/04/2012\_

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Approved by \_\_\_\_\_

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Date Approved: September 11, 2012

Approved By: \_\_\_\_\_

\_\_\_\_\_  
Chairman, Infection Control Committee

\_\_\_\_\_  
Infection Control Nurse



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I **Purpose:** The Infection Control Policy is established to help safeguard patients and personnel from the transmission of infection between patient and personnel during patient care. All ECU personnel, students and other healthcare workers are to comply with all Infection Control Policies.

II **Personnel:**

A. All new and current employees will comply with employment screening as outlined in the Prospective Health Policy. The student health center has a designated employee health nurse for the above activities.

B. Employees who have potential for blood or other potentially infectious material exposure will be offered hepatitis B vaccine at no charge to the employee.

Medical students and employees who have potential for exposure to *Mycobacterium tuberculosis* (MTB) will be given PPD skin testing with follow-up per Prospective Health Protocol.

Other healthcare students with clinical rotations will have documentation of Infection Control training, required vaccines administered, and PPD skin testing results maintained by their clinical coordinators.

C. Any staff or student who has an exposure to a communicable disease through a needle stick or other means will report that exposure to an appropriate supervisor or instructor and follow-up will be done per Bloodborne Pathogen Exposure Control Plan, Tuberculosis Control Plan or Prospective Health policy depending on exposure.

Accidental exposures to chemicals and radiation will be reported on an injury report form. The person exposed to these hazards will be evaluated according to ECU EH&S.

D. Employees will receive education on infection control, standard precautions and OSHA standards upon employment and yearly thereafter.

E. Per NC Administrative Code 41A.0206, SHS shall designate a staff member to direct infection control activities and the designated staff member shall have successfully completed a course in infection control approved by the State Health Department.

F. This policy will be evaluated every three (3) years and as needed due to change in practice or standards.

III **Physical Layout:**

A. **Offices:** Contain no biohazardous materials; they may, on occasion be used for patient counseling.

B. **Pharmacy:** Consult room may be used for vaccine administration and is appropriately stocked with gloves, sharps container and a trash receptacle. Hand washing facilities are also available.



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- C. Treatment Rooms: There are 25 treatment rooms located in the clinical area on the first floor.
  - D. Observation Room: There is one (1) semi-private room with three (3) observation beds located on the first floor.
  - E. Bathrooms: All bathrooms contain sanitary napkin waste receptacles and a hand washing station with wall mount or pump style soap dispensers. All bathrooms in the clinic area are handicap accessible. Bathrooms located in non-clinical areas have one handicap accessible stall.
  - F. Conference Room: Is supplied with table, chairs, and trash receptacle.
  - G. Multi-Purpose Room: This area is used for meetings, educational classes and social gatherings. No biohazardous materials are located in this area. This room will be supplied with tables, chairs and trash receptacles.
  - H. Staff Lounge: No biohazardous materials will be contained in this area. This room contains one stove, two microwaves, one food refrigerator, hand washing facilities, television, tables, chairs, and trash receptacle.
  - I. Health and Nutrition Education Resource Room: This room is supplied with tables, chairs, audiovisual equipment and trash receptacles.
  - J. Radiology: This area is located on the first floor and is composed of one x-ray procedure room with x-ray equipment, one viewing room with computer equipment, one dressing room and one film storage area.
  - K. Special Procedures Rooms:
    - 1. One treatment room is designated for colposcopy and equipped with medical supplies.
    - 2. Triage Care Area:
      - a. Work Up Rooms (4): Rooms are used for interviewing, minor procedures, (i.e., dressing changes and suture removal) and medication preparation/administration. This area is equipped with sharps receptacles, biohazard receptacles, hand washing facilities and trash receptacles. One room will be designated for medication storage. Medications and sharps are stored in locked cabinets.
      - b. Triage Care rooms (2): This area is equipped with a stretcher with rails, BLS (basic life support) emergency equipment, suction machine, nebulizer and supplies, eye wash station and other medical supplies, hydrocollator, and covered biohazardous container for dirty instruments.
    - 3. Rapid care - This area is used for administration of immunizations,



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immunotherapy, and other non-invasive procedures. This area is equipped with sharps receptacles, biohazard receptacles, hand washing facilities and trash receptacles.

4. Fast Track - This area is used for administration of immunizations, immunotherapy, and other non-invasive procedures. This area is equipped with sharps receptacles, biohazard receptacles, hand washing facilities and trash receptacles.
5. Utility Room: This area has designated and labeled contaminated and non-contaminated areas on opposite walls. This area contains one large autoclave, one small autoclave, Valsure, medical supplies in closed cabinets, and limited housekeeping supplies. Hand washing facilities and trash receptacles are available. Instrument cleaning and repackaging is performed on the contaminated side. Autoclaved instruments are unloaded onto the non-contaminated counter and returned to the clinic area.

L. Lab is located on the first floor. Refer to Appendix B for procedures specifically relating to the lab.

## IV Procedures:

- A. Hand hygiene practices shall follow the Centers for Disease Control recommendations as published in the Guideline for Hand Hygiene in Health-Care Settings, MMWR, Volume 51, October 25, 2002 (<http://www.cdc.gov/mmwr/PDF/rr/rr5116.pdf>) Hand washing should be done with an antimicrobial soap and water immediately before and after each patient contact. Sinks are available in all treatment rooms, procedure rooms, observation rooms and bathrooms. If hand washing facilities are not immediately available, antiseptic hand cleaners in conjunction with clean cloth/paper towels or antiseptic towelettes will be provided.
- B. Clean technique should be strictly observed with inoculations, phlebotomy, lesion excisions, wound care, dressing changes, colposcopy, and biopsies. Sterile technique should be strictly observed with suturing, incision and drainage, toenail removal and suprapubic catheter changes.
- C. Universal precautions will be observed on all patients. Gloves are worn, if hands may be exposed to blood and other potentially infectious materials. Protective mask and eyewear or face shield are worn, if splashing is likely. Gowns are worn, if splashing is likely.

Needles should be handled with extreme caution. Needles should not be bent or broken. Needles should not be re-sheathed unless absolutely necessary. If needles must be re-sheathed, it must be done with a mechanical device or use a one-handed technique. Safety devices will be evaluated annually or as they become available. Records will be maintained of evaluation, and safety sharps will be implemented per OSHA guidelines.

Health care workers who have exudative lesions or weeping dermatitis shall refrain from



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handling patient care equipment and devices used in performing invasive procedures and from all direct patient contact until the condition resolves. Open wounds or sores should be covered with a protective dressing.

Patients who are seen in the ECU Health Service clinics are evaluated for signs and symptoms of *Mycobacterium tuberculosis* (MTB). If a patient exhibits symptoms consistent with a potential transmissible respiratory pathogen, then respiratory isolation procedures should be initiated. These procedures include masking the patient and making sure the patient is evaluated quickly and leaves the clinic as soon as possible. The staff will have appropriated respiratory protection provided when evaluating the patient.

- D. Patient procedures performed in the East Carolina University Student Health Service include: patient exams, inoculations, blood drawing, lesion excisions, wound care, dressing changes, colposcopy, diaphragm fitting, and medication injections.
- E. Between visits, contaminated areas of exam tables and counter tops will be cleaned with an approved disinfectant. Soiled table paper will be changed, soiled linen removed, and contaminated or used supplies disposed of or removed from room between patients. At the end of the clinic day, the surface of the table shall be sprayed with Bacdown cleanser and allowed to air dry.
- F. All specimen containers will have leak proof lids or be placed in leak-proof plastic bags marked with a biohazard label and those transported to outside laboratories will be placed in a secondary container marked with a biohazard label.
- G. Personal protective equipment, which includes gloves, gowns, masks and eyewear or face shield, will be available in all treatment rooms, procedure rooms, and observation rooms and other strategic areas.
- H. Refer to Appendix A for a list of common procedures that require minimum personal protective equipment.

## V. Equipment and Supplies:

- A. Clean equipment and supplies are ordered weekly or as needed and stored in closed cabinets and drawers at the nurses' stations and in the treatment rooms, as well as in the locked supply cabinet. No outside shipping cartons should be placed in storage areas. No items should be placed directly on the floor of the storage room.
- B. Reusable dirty equipment is transported to the utility room in a covered container for cleaning. No instruments or equipment are cleaned in treatment rooms.

Equipment is inspected yearly and as recommended by the manufacturer and repaired or replaced as necessary. Reusable contaminated equipment is cleaned with an approved disinfectant or sterilized. Contaminated disposable equipment will be discarded in appropriate containers.



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- C. Each treatment, observation, and bathroom has an appropriately labeled contaminated trash can (red bag) and a non-contaminated trash can (clear or brown bag). Any contaminated (20cc or greater) non-sharp trash should go in the biohazard bag. These red biohazard bags will be gathered by housekeeping staff and placed in the designated biohazardous trash room and then sent for incineration. Any non-contaminated trash should go in clear or brown bags. A contracted company collects biohazardous materials for incineration.
  - D. Sharps disposal units are located in all patient care areas. These containers are checked routinely and disposed of when they are 3/4 full. They are securely sealed and placed in the designated biohazardous room prior to pick-up for incineration. The biohazardous trash room will remain locked. (See housekeeping, Nurse Manager, or lab supervisor for keys).
  - E. Clean linen is stored on a covered linen cart, 6" from the floor and ceiling. Soiled linen is placed in covered "dirty" linen hampers. This linen is picked up each week by the contract linen service. Gloves will be worn when handling soiled linen.
  - F. Curtains in the observation rooms are laundered at least once each semester, as well as any time they are visibly soiled.
  - G. Infection control kiosks are stocked and maintained in the patient lobby areas. Kiosks contain tissues, gloves, and loop masks.



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## Appendix A: List of common procedures and minimum protective equipment needed.

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Common Procedures	Minimum Equipment Needed
1. Injections	Gloves
2. Blood Drawing	Gloves
3. Transporting Specimens	Gloves
4. Vaginal Exams	Gloves
5. Toenail Removal	Gloves
6. I & D	Gloves, mask, eyewear (gown recommended)
7. Skin Biopsies	Gloves
8. Cervical Biopsies	Gloves
9. Cleaning Instruments	Gloves, gown, mask, eyewear
10. Starting intravenous line	Gloves
11. Wound Care with irrigation	Gloves, mask, eyewear (gown recommended)
12. Wound Care without irrigation	Gloves
13. Suture	Gloves
14. Colposcopy	Gloves
15. Diaphragm Fitting	Gloves
16. Joint Aspiration and/or injection	Gloves



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### Appendix B

#### General Procedures for Infection Control in ECU Student Health Services Laboratory

1. In-service education in infection control is required for all laboratory personnel at the time of initial employment and annually thereafter. Each laboratory shall maintain an infection control procedure as part of its general laboratory procedure manual. This manual will be reviewed and signed annually by the supervisor of the laboratory and a representative of the Infection Control Committee.
2. All laboratory employees working with potentially infectious materials will observe Universal Precautions and PPE will be available.
3. Eating, drinking, smoking, storing food and application of cosmetics is not permitted in the laboratory work area. Food must not be stored in laboratory refrigerators.
4. Employees will not use work surfaces as seats.
5. All technical procedures will be performed in a manner that minimizes the creation of aerosols. All biological specimens should be covered, capped, corked, or plugged at all times except at the time of collection, separation, pouring, or analysis. Specimens to be centrifuged should be capped. If there is any spill or breakage in the centrifuge, the centrifuge should be cleaned immediately and thoroughly using a 2% Clorox solution.
6. Mouth pipetting will not be permitted for any material or reagent. Mechanical pipetting devices will be utilized.
7. Hypodermic needles and syringes should not be used as a substitute for automatic pipetting devices in the manipulation of potentially infectious fluids. Needles used for collection of potentially infectious material will not be recapped after use. Syringes and needles used in collection of potentially infectious material will be placed into appropriate disposable sharps container. These containers are labeled as biohazardous. Safety devices will be evaluated annually as they become available. Records will be maintained of the evaluation.
8. Safety glasses, face shields, or other protective devices should be worn when necessary to protect the eyes and face from splashes and impacting objects.
9. When working with potentially infectious material, non-sterile, disposable, well-fitting non-latex or latex gloves will be worn. Latex gloves should meet FDA 21 CFR Part 880 standards. If the glove is torn/cut or has a leak, the individual must remove the gloves and wash hands with an antimicrobial soap. Employees with open cuts or abraded skin are required to keep these surfaces covered with an appropriate dressing.
10. Employees are required to keep their hair at an appropriate length or covered or tied in such a manner that it does not pose a health risk to the employee in the work area.





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11. Blood in the Hematology machine is decontaminated with Clorox before disposal. Contaminated materials that are to be autoclaved or incinerated at a site away from the laboratory are closed before being removed from the laboratory.
12. Work surfaces, which may have contact with potentially infectious material, should be decontaminated with a disinfectant at the beginning and end of the day and after any spill of potentially infectious material. Soak up the disinfectant and contaminated material with an absorbent such as paper towels and dispose of these materials in designated biohazardous bags or sealed container. PPE are worn for clean-up.
13. Only persons who have been advised of any potential hazards and who meet specific emergency requirements (e.g., immunization) should be allowed to enter the laboratory working area.
14. All spills, accidents, and overt or potential exposure to infectious materials will be reported immediately to the laboratory supervisor. A written record of such incidents must be maintained in the laboratory. Appropriate medical evaluation, surveillance, and treatment for such incidents must be provided.