
Purpose The purpose of this policy is to provide an overview of the bloodborne pathogen/infection control requirements that each Fresenius Kidney Care (FKC) facility shall meet.

Introduction FKC is committed to abide by laws and regulations of the Occupational Safety and Health Administration (OSHA) and the Centers of Medicare and Medicaid Services (CMS) pertaining to infection control practices.

The nature of dialysis, with frequency exposure to blood and body fluids, close proximity of patients and staff, and the immunocompromised status of dialysis patients, makes a dialysis clinic a high risk for spreading infectious disease. The Centers for Disease Control (CDC) has recommended specific infection control practices for dialysis centers that have been shown to reduce and prevent the spread of infectious disease. CDC guidelines and incorporated into FKC policies, processes and procedures.

Policy: General All dialysis programs will incorporate the FKC infection control program, which is comprehensive in nature and outlined in this document.

All infection control policies for patient care are consistent with recommendation of the Centers for Disease Control (CDC).

All infection control policies will adhere to CMS and OSHA rules and regulations.

Infection control policies and procedures must be reviewed and approved by the facility Medical Director and Governing Body upon implementation and at least annually thereafter, or more frequently as necessary, to reflect significant changes in tasks and procedure.

The facility will monitor the effectiveness of the infection control program through the Quality Assessment and Performance Improvement Program.

Policy-State Specific In addition to following the company-wide infection control program, each facility is responsible for being aware of and meeting state-specific standards and regulations.

Additional policies to meet state specific requirements must be approved

through:

- FKC Corporate Clinical Service
- Facility Governing Body

The following states and territories have OSHA approved state plans:

Alaska	Michigan	South Carolina
Arizona	Minnesota	Tennessee
California	Nevada	Utah
Connecticut*	New Jersey*	Vermont
Hawaii	New Mexico	Virgin Islands*
Indiana	New York*	Virginia
Iowa	North Carolina	Washington
Kentucky	Oregon	Wyoming
Maryland	Puerto Rico	

* Plans only cover public-sector employees.

Mandatory Components of Program

- Adherence to standard and dialysis precautions
- Infection control policies and procedures
- Infection control training and education, including maintenance of training records
- Surveillance program of specific measures for prevention, early detection, control and investigation of infectious and communicable diseases
- Processes for maintaining employee health records, including result of all medical examinations, vaccinations and incidents of exposure
- Mechanism to evaluate the effectiveness of the program and take corrective action_____

Infection Control Policies

Infection control policies includes, but are not limited to:

- Patient care guidelines for preventing and controlling:
 - Hepatitis B
 - Hepatitis C
 - Human Immunodeficiency Virus (HIV)
 - Mycobacterium Tuberculosis (TB)
 - Methicillin Resistant Staphylococcus Aureus
 - Vancomycin Resistant Enterococci
 - Scabies
 - Herpes Zoster
- Hand Hygiene

Printed copies are for reference only. Please refer to the electronic copy for the latest version.

- Dialysis unit precautions, (including the use of personal protective equipment)
- Surveillance and reporting of infections
- Housekeeping to ensure environment is clean and sanitary
- Safe and efficient handling and disposal of waste and contaminants
- Effective cleaning of blood contaminated linens and clothing
- Sterilization, disinfection, and decontamination procedure for medical equipment, devices, and non-disposable supplies used in the facility
- Rinsing, cleaning, disinfection, preparation, and storage of reused items conforming to CMS requirement for reuse
- Control of microbial contamination in water, dialysate, dialyzers and other devices that are reused
- Procedure for maintaining a record of adverse patient reactions

Definitions

Terms used in the BBP Infection Control Policies are defined in this policy:

Bloodborne Pathogen (BBP): Pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, Hepatitis B virus (HBV) and human immunodeficiency virus (HIV).

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 are no longer capable of transmitting infectious particles and the surface or item is rendered safe for handling, use or disposal.

Engineering Controls: controls (e.g. sharps disposal containers, self-sheathing needles, safer medical devices, such as sharps with engineered sharps injury protections and needleless systems) that isolate or remove the bloodborne pathogens hazard from the workplace.

Exposure Incident: A specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials that results from the performance of an employee's duties.

Occupational Exposure: Reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials that may result from the performance of an employee's duties.

Other Potentially Infectious Materials:

Human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in

Printed copies are for reference only. Please refer to the electronic copy for the latest version.

dental procedures, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids.

Any unfixed tissue or organ (other than intact skin) from a human.

Personal Protective Equipment: Specialized clothing or equipment worn by an employee for protection against a hazard. General work clothes (e.g. uniforms, scrubs, pants, shirts, or blouses) are not intended to function as protection against a hazard are not considered to be personal protective equipment.

Work Practice Controls: Controls that reduce the likelihood of exposure by altering the manner in which a task is performed (e.g. prohibiting recapping of needles by a two-handed technique).

References

- A. U.S. Department of Health and Human Services, Center for Medicare and Medicaid Services, Subpart U, Conditions for Coverage Suppliers of End-Stage Renal Disease (ESRD) Services, 42 CFR CH.IV (10-1-98 Edition) and Interpretive Guidelines.
- B. U.S. Department of Health and Human Services, Centers for Disease Control and Prevention (CDC). Recommendations for preventing transmission of infections among chronic hemodialysis patients. *Morbidity and Mortality Weekly Report*, April 27, 2001/Vol. 50/No. RR-5., www.cdc.gov/mmwr/
- C. U.S. Department of Health and Human Services, Centers for Disease Control and Prevention (CDC), Guidelines for Environmental Infection Control in Health Care Facilities. *Morbidity and Mortality Weekly Report*, June 6, 2003/Vol. 52/No. RR-10., www.cdc.gov/mmwr
- D. Centers for Disease Control, Tokars JI, Miller ER, Alter MJ, Arduino MJ. National Surveillance of dialysis-associated diseases. Atlanta, GA. Appendix II, 1997.
- E. U.S. Department of Labor, Occupational Safety and Health Administration, Enforcement Procedures for the Occupational Exposure to Bloodborne Pathogens. CPL 2-2.69, Standard 1910.1030, 11/27/2001.
- F. U.S. Department of Labor, Occupational Safety and Health Administration, Bloodborne Pathogens Standard 29 CFR 1910.1030, 11/27/01.

END OF DOCUMENT