



Health Packet 2021-2022

School and PSR



ARCHDIOCESE OF ST. LOUIS

A graphic banner with a yellow-to-orange gradient background and a white border. The word "HEALTH" is written in bold, orange, sans-serif capital letters in the center.

HEALTH

Preparing for a Healthy School Year

Dear Pastors, Presidents, Principals, and Directors of Religious Education,

Enclosed, you will find information on a variety of issues which you must consider in providing a healthy environment for all persons within your communities.

This information is provided at this time to ensure that these issues are fully addressed over the summer months prior to the start of the 2021-2022 school year.

HEALTH ISSUES

- *Health Trainings and Publications*
- *Missouri Immunization Requirements*
- *Exposure Control Plan Information*

The logo consists of two overlapping horizontal bars. The top bar is orange and the bottom bar is yellow. The word "HEALTH" is written in orange capital letters on the yellow bar.

HEALTH

Health Trainings and Publications

Enclosed is information on health trainings and other health communication services available throughout the 2021-2022 school year to schools/PSRs through the Health (Wellness) Advisory Committee of the Archdiocese, the Office of Catholic Education and Formation, and SSM Health Cardinal Glennon Children's Hospital. All of these services are made available to our schools/PSRs at no cost through School District Administrative Claiming program (SDAC) (MO HealthNet Division of the Missouri Department of Social Services).

Note that these programs are available for a variety of members of the educational community who play key roles in maintaining a healthy schools/PSRs environment. Principals/administrators are encouraged to carefully review these offerings in planning for the coming year. Make sure that appropriate staff members are aware of these programs and that they have placed them on their calendars. For more information about these programs, please contact the School Partnership Program Nurses listed below.

School Partnership Program Nurses

Anne Fahland
Pam Colson
Lori Stumpf

SSM Health Cardinal Glennon Children's Hospital
314.268.2752
Anne.Fahland@ssmhealth.com

TRAININGS OFFERED AT SCHOOL SITES

The following training programs can be offered at the school. To arrange for any of these programs, please contact the School Partnership nurses at 314.268.2752 or Anne.Fahland@ssmhealth.com.

For Teachers, Catechists, and Staff

Training for Medication Administration

This is a class for personnel who have the responsibility of administering medications to students in the school. The class covers drug information, safe administration, policies of the State of Missouri and the Archdiocese of St. Louis, and documentation procedures. Class presenters are School Partnership Program nurses.

Dates	Locations	Time
August 5, 2021	Cardinal Rigali Center Sr. Antona Ebo Room 20 Archbishop May Drive Shrewsbury, MO 63119	10:00 am - 12:30 pm
September 30, 2021	Cardinal Rigali Center Sr. Antona Ebo Room 20 Archbishop May Drive Shrewsbury, MO 63119	10:00 am - 12:30 pm
November 10, 2021	Cardinal Rigali Center Sr. Antona Ebo Room 20 Archbishop May Drive Shrewsbury, MO 63119	10:00 am - 12:30 pm
February 3, 2022	Cardinal Rigali Center Sr. Antona Ebo Room 20 Archbishop May Drive Shrewsbury, MO 63119	10:00 am - 12:30 pm

Registration: Contact the School Partnership Program nurses to register for any of the sessions listed above at 314.268.2752 or Anne.Fahland@ssmhealth.com.

(continued)

Training for Emergency Response Team Members

This one-hour session provides information to members of the Emergency Response Team on universal precautions, modes of transmission of bloodborne pathogens, appropriate methods of recognizing potential exposures in order to prevent them, information on Hepatitis B vaccine, and procedures to follow if an exposure occurs. Class presenters are School Partnership Program nurses. Note: Individuals who were previously trained need not attend.

Dates	Locations	Time
August 5, 2021	Cardinal Rigali Center Sr. Antona Ebo Room 20 Archbishop May Drive Shrewsbury, MO 63119	1:00 - 2:00 pm
September 30, 2021	Cardinal Rigali Center Sr. Antona Ebo Room 20 Archbishop May Drive Shrewsbury, MO 63119	1:00 - 2:00 pm
November 10, 2021	Cardinal Rigali Center Sr. Antona Ebo Room 20 Archbishop May Drive Shrewsbury, MO 63119	1:00 - 2:00 pm
February 3, 2022	Cardinal Rigali Center Sr. Antona Ebo Room 20 Archbishop May Drive Shrewsbury, MO 63119	1:00 - 2:00 pm

Registration: Contact the School Partnership Program nurses to register for any of the sessions listed above at 314.268.2752 or Anne.Fahland@ssmhealth.com.

HeartSavers CPR/AED Training

This is a class for personnel covering adult, infant and child cardio-pulmonary resuscitation and choking. Maximum number of staff trained per session: six (6).

First Aid Training

This class is for school personnel and covers the care of wounds, fractures, sprains, burns, head injuries, etc. that may occur at school, home or in the community.

Training for Asthma and Diabetes

These sessions provide school personnel with specific information on these diseases and how schools can accommodate students with these illnesses in a school setting.

(continued)

For Parents

Speakers can be provided for parent organization meetings on the following topics: **Asthma, ADHD (behaviors and medication), Nutrition and Physical Activity.**

For Students

Gerbusters

A hand washing program for elementary students using glow lotion and a black light to demonstrate how germs stick to hands.

Hygiene

A class for 6th – 8th grade students regarding grooming, bathing, use of deodorant, nutrition and exercise.

HEALTH PUBLICATIONS

The following services are available to all Catholic schools in the Archdiocese of St. Louis through SSM Health Cardinal Glennon Children's Hospital and the Office of Catholic Education and Formation.

School Health Hotline

Questions relating to health issues can be addressed by contacting the School Partnership nurses at 314.268.2752 or Anne.Fahland@ssmhealth.com.

Quarterly Newsletters

Principals will receive newsletters every other month through the Office of Catholic Education and Formation Newsletter via e-mail with important information about school health issues for principals, staff, and parents. Principals are asked to share this newsletter with school nurses and others within the school community who may benefit from the information contained in this publication.

School Health Manual

Principals are asked to consult this manual for policies and procedures on all health issues. This manual is now available electronically, and can be accessed through the CatholicFaithSTL.com website.

- Go to <https://www.catholicfaithstl.com/> and login with your user name and password.
- Click on the Elementary, Secondary, or DRE/CRE button.
- Click on "Health and Safety".
- Click on "Health Packet".
- After the document opens, select the download icon to save and/or print this document.

Missouri Immunization Requirements

Below are the immunization requirements for the 2021-2022 school year. It is imperative that you share this information with those who assist in checking records and preparing the immunization report for the state.

According to Missouri law,

- **all students attending schools are required to be appropriately immunized or have either a medical or religious exemption card on file at the school.**
The acceptance of a medical or religious exemption is a local level decision made by the pastor/school. A medical exemption card must be signed by a medical doctor and need only be completed once and kept in the student's file. A religious exemption card must be completed and requires a parent signature. Both exemption cards must be obtained through the local health department.
- **local health departments have the right to review immunization records without notice.** Schools must take steps to insure that all students are immunized by the start of the school year or have the appropriate exemption on file. Schools should try to insure that students are in compliance on the first day of school. If not, these students should be excluded from school until they are.

Finally, keep in mind that students are at risk if a vaccine-preventable disease should break out at school and they are not properly immunized. Schools are encouraged to maintain a list of students who are not immunized for easy reference if a vaccine-preventable disease is diagnosed at the school.

For more information on immunization requirements, contact the School Partnership nurses at SSM Health Cardinal Glennon Children's Hospital (314.268.2752.)

2021-2022 Missouri School Immunization Requirements

- All students must present documentation of up-to-date immunization status, including month, day, and year of each immunization before attending school.
- The Advisory Committee on Immunization Practices (ACIP) allows a 4-day grace period. Students in all grade levels may receive immunizations up to four days before the due date.
- Required immunizations should be administered according to the current Advisory Committee on Immunization Practices Schedule, including all spacing, (<http://www.cdc.gov/vaccines/schedules/index.html>).
- To remain in school, students "in progress" must have an Immunization In Progress form (Imm.P.14) on file. In progress means that a child has begun the vaccine series and has an appointment for the next dose. This appointment must be kept and an updated record provided to the school. If the appointment is not kept, the child is no longer in progress and is noncompliant. (i.e., Hep B vaccine series was started but the child is not yet eligible to receive the next dose in the series.)
- Religious (Imm.P.11A) and Medical (Imm.P.12) exemptions are allowed. The appropriate exemption card must be on file. Unimmunized children are subject to exclusion from school when outbreaks of vaccine-preventable diseases occur.

Vaccines Required for School Attendance	Dose Required by Grade												
	K	1	2	3	4	5	6	7	8	9	10	11	12
DTaP/DTP/DT ¹	4+	4+	4+	4+	4+	4+	4+	4+	4+	4+	4+	4+	4+
Tdap ²									1	1	1	1	1
MCV ³ (Meningococcal Conjugate)									1	1	1	1	2
IPV (Polio) ⁴	3+	3+	3+	3+	3+	3+	3+	3+	3+	3+	3+	3+	3+
MMR ⁵	2	2	2	2	2	2	2	2	2	2	2	2	2
Hepatitis B ⁶	3+	3+	3+	3+	3+	3+	3+	3+	3+	3+	3+	3+	3+
Varicella ⁷	2	2	2	2	2	2	2	2	2	2	2	2	1

1. Last dose on or after the fourth birthday and the last dose of pediatric pertussis before the seventh birthday.
Maximum needed: six doses.
2. 8-12 Grades: Tdap, which contains pertussis vaccine, is required.
3. Grade 8-11: One dose of MCV is required. Dose must be given after 10 years of age.

Grade 12: Two doses of MCV are required unless the first dose was administered to a student who was 16 years of age or older, in which case only one dose is required. At least one dose must be given after 16 years of age.
4. Kindergarten-11 Grade: Last dose must be administered on or after the fourth birthday. The interval between the next-to-last and last dose should be at least six months.

Grade 12: Last dose on or after the fourth birthday. Any combination of four doses of IPV and OPV constitutes a complete series. **Maximum needed:** four doses.
5. First dose must be given on or after twelve months of age.
6. There must be at least four weeks between dose one and two; at least 8 weeks between dose two and three; at least 16 weeks between doses one and three and final dose must be given no earlier than 24 weeks of age.
7. First dose must be given on or after twelve months of age.

Kindergarten-11 Grade: As satisfactory evidence of disease, a licensed health care provider may sign and place on file with the school a written statement documenting the month and year of previous varicella (chickenpox) disease.

Grades 12: As satisfactory evidence of disease, a parent/guardian or MD or DO may sign and place on file with the school a written statement documenting the month and year of previous varicella (chickenpox) disease.

Exposure Control Plan

Below are four steps that an administrator must take to ensure the school's compliance with all OSHA guidelines pertaining to exposure to bloodborne pathogens.

1. Complete the enclosed *Emergency Response Plan*.

Each school/PSR must complete the enclosed ***Emergency Response Plan 2021-2022***. It will replace last year's form, which should be on file at each school/PSR. The following information must be incorporated into this document by the principal:

- A list of individuals who will serve on the Emergency Response Team. These individuals will be solely responsible for responding to all emergency and first aid incidents within the school day. School health nurses and volunteers should be members. Administrators and school secretaries are logical choices to complete the Emergency Response Team. However, the principal may instead select teachers or other school employees to be on the Team.
- A list of individuals who would provide cleaning services in the case of contamination by blood or body fluids. School maintenance staff would likely be included on this list.

In order for the Emergency Response Plan to accomplish its purpose, the administration must provide a copy of this plan to all school/PSR employees and staff and inform them that the Emergency Response Team members are the *only* employees authorized to provide first aid or clean-up services in situations involving blood and body fluids.

The Emergency Response Plan document should be placed in the school's health file.

2. Provide in-service education for all individuals listed on the Emergency Response Plan.

Individuals who are **new** to the Emergency Response Team should attend a one-hour in-service session. This in-service should be at a time and a location convenient for these individuals, but should occur before the person begins performing the duties associated with membership on the Emergency Response Team.

An in-service program that meets the above requirements is being provided at no cost. This in-service has been scheduled at various times throughout the coming school year in a variety of locations throughout the Archdiocese for the convenience of staff members who have been identified to be at risk. See the section entitled ***Health Trainings and Communications*** for a list of dates, times and locations. More information on these sessions can be obtained by contacting the School Partnership Program at SSM HealthCardinal Glennon Children's Hospital at 314.268.2752.

A record indicating that all at-risk employees attended such a session will need to be maintained in the school health file for a period of three (3) years. The individual conducting the session will provide this record at the conclusion of each of these sessions.

Individuals who have been on the Emergency Response Team and who attended a training session in past years need not attend this training session again. Instead, the principal should simply copy the enclosed document, ***OSHA Emergency Response Team Training Review 2020***, and then distribute it to all returning members of the team. This sheet reviews the main points discussed at the training session.

3. Offer Hepatitis B vaccination to all individuals on the Emergency Response Team.

This vaccination should be offered to each member of the Emergency Response Team. The vaccination should begin before the person begins performing the duties associated with membership on the Emergency Response Team. If an employee who has occupational exposure declines the hepatitis-B vaccination, that employee must sign the enclosed hepatitis-B vaccine declination form.

A sheet detailing how and where this vaccination can be obtained through the local health departments also is enclosed.

4. Present an educational video training on bloodborne pathogens to all school/PSR employees.

This brief presentation provides valuable information to all staff members about the universal precautions and how they can protect themselves from bloodborne pathogens. This program, ***Creating a Safe and Healthy School Environment: A Plan to Minimize Exposure to Bloodborne Pathogens***, was distributed to each school/PSR in DVD format. This presentation is also available on the CatholicFaithSTL.com website.

- Go to <https://www.catholicfaithstl.com/> and login with your user name and password.
- Click on the Elementary button.
- Click on “Health and Safety”.
- Click on “Bloodborne Pathogens” to start the video.

This program should be viewed at the start of the school year. Principals of schools may want to consider sharing this video with staff at a faculty meeting in August or September.

If you have any questions about the implementation of any of these steps, please contact Mrs. Anne Fahland of the School Partnership Program at SSM Health Cardinal Glennon Children’s Hospital at 314.268.2752, or contact your Regional Director.

Emergency Response Information Plan

2021-2022

Since the response to first aid and emergency situations can create a danger not only for an injured student but also for the emergency responder, the school has decided to designate an Emergency Response Team to respond to all first aid and emergency situations occurring at the school, on school property, or during school-sponsored events. In any situation in which first aid is required, including situations in which contact with another person's blood or body fluids may result, a member of the Emergency Response Team must be contacted to provide the first aid services. The school's Emergency Response Team shall consist of the following individuals:

_____	_____
_____	_____
_____	_____
_____	_____

Since the danger posed by blood or body fluids extends beyond the provision of first aid to the post-incident clean up, the school has included member(s) of its janitorial staff on its Emergency Response Team. Therefore, in any situation in which an area or equipment has been contaminated by blood or body fluids, the following individual(s) should be contacted to perform the cleaning services:

_____	_____
_____	_____

It is the policy of the school that on any occasion in which a situation could result in an employee coming into contact with another person's blood or body fluids, the school expects that employee to avoid contact with the blood or body fluids and to immediately notify a member of the Emergency Response Team who shall respond to the situation by providing the appropriate first aid or emergency assistance. In addition, the administrator should be notified immediately of any incident that results in any employee being exposed to another individual's blood or body fluids.

If you have any questions regarding this policy, please contact the administrator of the school.

Keep this form on file at school/PSR.

Emergency Response Plan

Vaccinations for Emergency Response Team Members

Individuals listed on the school's Emergency Response Plan are to be offered the option of being vaccinated for Hepatitis B. If a member of this team declines the Hepatitis B vaccination, the employee must sign the Hepatitis B Vaccine Declination form. This form is then placed in the school's health file.

Individuals choosing to receive the vaccination can receive this series of three vaccinations at a location of their choice. This immunization is available through private physicians or local health departments.

The school/parish school of religion should cover the cost of the vaccination. Local health departments provide this immunization at a reasonable price, noted below.

Note the instructions below as to when the vaccination may be given at the local health department. It is advisable to contact the health department to verify these times.

County	Location	Cost	Instructions
Franklin	414 East Main Street Union, MO 63084 636.583.7300	\$80 per shot	Monday - Friday 8:00 am - 3:30 pm By appointment only
Jefferson	1818 Lonedell Arnold, MO 63010 636.282.1010	\$90 per shot	Monday – Friday 8:00 am - 5:00 pm By appointment only
	405 Main St. Hillsboro, MO 63050 636.282.1010	\$90 per shot	Monday – Friday 8:00 am - 5:00 pm By appointment only
	5684 MO PP High Ridge, MO 63049 636.282.1010	\$90 per shot	Monday – Friday 8:00 am - 5:00 pm By appointment only
Lincoln	5 Health Department Dr. Troy, MO 63379 636.528.6117	\$59 per shot	Monday – Friday 8:00 am - 3:30 pm By appointment only
Perry	406 North Spring Perryville, MO 63775 573.547.6564	\$55.55 per shot	Monday – Friday 8:00 am - 4:30 pm No appointment needed (call for staff availability prior to arrival)

(continued)

County	Location	Cost	Instructions
St. Charles	1650 Boonslick Road St. Charles, MO 63303 636.949.1857	\$60 per shot	Mon /Tues / Wed / Fri Appointment only
St. Francois	1025 West Main Park Hills, MO 63601 573.431.1947 x3	\$65.75 per shot	Monday - Friday 8:00 am – 3:30 pm Appointment only
Ste. Genevieve	115 Basler Ste. Genevieve, MO 63670 573.883.7411	\$10 per shot	Monday – Friday 8:00 am – 4:00 pm Appointments preferred
St. Louis City	People’s Health Center 5701 Delmar Blvd. St. Louis, MO 63112 314.367.7848	\$60 per shot	Monday - Friday 8:30 am - 11:00 am & 1:00 pm - 3:30 pm Walk-in
St. Louis County	John C. Murphy Health Ctr. 6121 North Hanley Road Berkeley, MO 63134 314.615.0560	\$42 per shot	Monday - Friday 8:30 am - 10:30 am & 1:00 pm - 3:00 pm Walk-in
	North Central Community Health Center 4000 Jennings Station Rd. St. Louis, MO 63121 314.615.9700	\$42 per shot	Monday - Friday 8:30 am - 10:30 am & 1:00 pm - 3:00 pm Walk-in
	South County Health 4580 S. Lindbergh Blvd. St. Louis, MO 63127 314.615.0444	\$42 per shot	Monday - Friday 8:30 am - 10:30 am & 1:00 pm - 3:00 pm Walk-in
Warren	101 Mockingbird, Ste. 100 Warrenton, MO 63383 636.456.7474	\$65 per shot	By appointment only Days and hours vary
Washington	520 Purcell Dr. Potosi, MO 63664 573.438.2164	\$68 per shot	Monday – Friday 8:00 am - 4:00 pm Walk-in

Spring 2021

Hepatitis B Vaccine:

What You Need to Know

Many Vaccine Information Statements are available in Spanish and other languages. See www.immunize.org/vis

Hojas de información sobre vacunas están disponibles en español y en muchos otros idiomas. Visite www.immunize.org/vis

1 Why get vaccinated?

Hepatitis B vaccine can prevent **hepatitis B**.

Hepatitis B is a liver disease that can cause mild illness lasting a few weeks, or it can lead to a serious, lifelong illness.

- **Acute hepatitis B infection** is a short-term illness that can lead to fever, fatigue, loss of appetite, nausea, vomiting, jaundice (yellow skin or eyes, dark urine, clay-colored bowel movements), and pain in the muscles, joints, and stomach.
- **Chronic hepatitis B infection** is a long-term illness that occurs when the hepatitis B virus remains in a person's body. Most people who go on to develop chronic hepatitis B do not have symptoms, but it is still very serious and can lead to liver damage (cirrhosis), liver cancer, and death. Chronically-infected people can spread hepatitis B virus to others, even if they do not feel or look sick themselves.

Hepatitis B is spread when blood, semen, or other body fluid infected with the hepatitis B virus enters the body of a person who is not infected. People can become infected through:

- Birth (if a mother has hepatitis B, her baby can become infected)
- Sharing items such as razors or toothbrushes with an infected person
- Contact with the blood or open sores of an infected person
- Sex with an infected partner
- Sharing needles, syringes, or other drug-injection equipment
- Exposure to blood from needlesticks or other sharp instruments

Most people who are vaccinated with hepatitis B vaccine are immune for life.

2 Hepatitis B vaccine

Hepatitis B vaccine is usually given as 2, 3, or 4 shots.

Infants should get their first dose of hepatitis B vaccine at birth and will usually complete the series at 6 months of age (sometimes it will take longer than 6 months to complete the series).

Children and adolescents younger than 19 years of age who have not yet gotten the vaccine should also be vaccinated.

Hepatitis B vaccine is also recommended for certain **unvaccinated adults**:

- People whose sex partners have hepatitis B
- Sexually active persons who are not in a long-term monogamous relationship
- Persons seeking evaluation or treatment for a sexually transmitted disease
- Men who have sexual contact with other men
- People who share needles, syringes, or other drug-injection equipment
- People who have household contact with someone infected with the hepatitis B virus
- Health care and public safety workers at risk for exposure to blood or body fluids
- Residents and staff of facilities for developmentally disabled persons
- Persons in correctional facilities
- Victims of sexual assault or abuse
- Travelers to regions with increased rates of hepatitis B
- People with chronic liver disease, kidney disease, HIV infection, infection with hepatitis C, or diabetes
- Anyone who wants to be protected from hepatitis B

Hepatitis B vaccine may be given at the same time as other vaccines.



U.S. Department of
Health and Human Services
Centers for Disease
Control and Prevention

3**Talk with your health care provider**

Tell your vaccine provider if the person getting the vaccine:

- Has had an **allergic reaction after a previous dose of hepatitis B vaccine**, or has any **severe, life-threatening allergies**.

In some cases, your health care provider may decide to postpone hepatitis B vaccination to a future visit.

People with minor illnesses, such as a cold, may be vaccinated. People who are moderately or severely ill should usually wait until they recover before getting hepatitis B vaccine.

Your health care provider can give you more information.

4**Risks of a vaccine reaction**

- Soreness where the shot is given or fever can happen after hepatitis B vaccine.

People sometimes faint after medical procedures, including vaccination. Tell your provider if you feel dizzy or have vision changes or ringing in the ears.

As with any medicine, there is a very remote chance of a vaccine causing a severe allergic reaction, other serious injury, or death.

5**What if there is a serious problem?**

An allergic reaction could occur after the vaccinated person leaves the clinic. If you see signs of a severe allergic reaction (hives, swelling of the face and throat, difficulty breathing, a fast heartbeat, dizziness, or weakness), call 9-1-1 and get the person to the nearest hospital.

For other signs that concern you, call your health care provider.

Adverse reactions should be reported to the Vaccine Adverse Event Reporting System (VAERS). Your health care provider will usually file this report, or you can do it yourself. Visit the VAERS website at www.vaers.hhs.gov or call 1-800-822-7967. *VAERS is only for reporting reactions, and VAERS staff do not give medical advice.*

6**The National Vaccine Injury Compensation Program**

The National Vaccine Injury Compensation Program (VICP) is a federal program that was created to compensate people who may have been injured by certain vaccines. Visit the VICP website at www.hrsa.gov/vaccinecompensation or call 1-800-338-2382 to learn about the program and about filing a claim. There is a time limit to file a claim for compensation.

7**How can I learn more?**

- Ask your healthcare provider.
- Call your local or state health department.
- Contact the Centers for Disease Control and Prevention (CDC):
 - Call 1-800-232-4636 (1-800-CDC-INFO) or
 - Visit CDC's www.cdc.gov/vaccines

Vaccine Information Statement (Interim)
Hepatitis B Vaccine



Office use only

HEPATITIS B VACCINE DECLINATION

I understand that due to my occupational exposure to blood or other potentially infectious materials, I may be at risk of acquiring Hepatitis B virus (HBV) infection. I have been given the opportunity to be vaccinated with Hepatitis B vaccine, at no charge to myself. However, I decline Hepatitis B vaccination at this time. I understand that by declining this vaccination, I continue to be at risk of acquiring Hepatitis B, a serious disease. If in the future I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with Hepatitis B vaccine, I can receive the vaccination at no charge to me.

I DESIRE TO FOREGO VACCINATION

Employee Signature

OSHA Emergency Response Team Training Review

What You Should Know About Protecting Yourself from Bloodborne Pathogens, Tuberculosis and Influenza in the Workplace 2021

Purpose of Training

Annual training is mandatory and builds on previous information. The goal of this document is to review specific ways for you to eliminate or minimize the risk of occupational exposure to bloodborne pathogens, tuberculosis and influenza in performing your job.

Facts on Bloodborne Pathogens

The recognized bloodborne pathogens are:

- HIV (the virus that causes AIDS)
- Hepatitis B
- Hepatitis C

Blood and body fluids and other potentially infectious biological fluids and tissues are:

- breast milk
- semen
- vaginal secretions
- amniotic fluid
- pleural (chest cavity)
- pericardial (heart sac)
- peritoneal (abdominal cavity)
- cerebral spinal fluid (brain and spinal cord)
- saliva and vomitus are infectious **only** if there is frank blood present

Transmission occurs through exposure of mucous membranes, non-intact skin, needles and sharps with infected body fluids.

Disease Transmission

For infection to spread to others, the following three things must happen:

1. A germ must be present (also referred to as the source)
2. There must be a way to spread the germ from the source to others (transmission)
3. The germ must be given to a susceptible host

Germs (micro-organisms) are found in numerous places, including:

- People (students, visitors, personnel)
- Environment (including equipment, supplies, etc.)

GermS are spread by several methods:

- Contact – most frequent method of spreading germs, by direct contact or indirect contact with a source
- Droplet – large spray of moisture sent into the air from a person when they cough, sneeze or from aerosol producing procedures. The germ travels a short distance through the air (typically 3 feet or less) and comes in contact with susceptible host eyes, nasal passages or mouth. The germs do not stay in the air. When the moisture or droplet that surrounds the germ dries, the germs fall onto environmental surfaces. (Flu)
- Airborne – Occurs when small sized germs stay in the air for long periods of time. The germs can move with air current and may be inhaled by a susceptible host. (TB, chickenpox)

Resistant Organisms:

Organisms that do not respond to a specific antibiotic are referred to as resistant organisms. The most common resistant organisms that you may be familiar with are ORSA (Oxacillin resistant Staph Aureus [formerly known as MRSA], VRE (Vancomycin resistant Enterococcus) and C-diff. **Hand hygiene is the most important means of preventing the spread of germs to others.**

Universal Precautions: How You Can Protect Yourself?

1. Hand Hygiene

Hand washing is the single most important means of preventing the spread of germs to others!!

When to wash hands

- Before **AND** after contact with an ill or injured person.
- When hands are visibly dirty or contaminated with blood or body fluids.
- When moving from a contaminated body site to a clean body site.
- Before putting on **AND** after removing gloves.
- After coming in contact with inanimate objects in the immediate vicinity of the ill or injured person.
- Before eating and after using the restroom.

Hand hygiene technique

- ***Antimicrobial Soap and water:*** (This technique is appropriate for visibly and not visibly soiled hands)
 - Wet hands first.
 - Use enough soap to create a lather.
 - Use at least 15 seconds of friction, covering all surfaces of hands and fingers.
 - Rinse hands with water and dry thoroughly.
 - Turn off faucets with paper towels.
- ***Waterless product:*** (This technique is appropriate only when hands are **not** visibly soiled.)
 - Use only a dime sized amount on palm.
 - Rub hands together covering all surfaces until dry.

2. Engineering Controls

Engineering controls are things that we use to prevent exposure. Examples of available engineering controls include:

- Sharps disposal containers
- Resuscitation devices (disposable)
- Personal protective equipment

3. Work Practice Controls

Work practice controls are procedures which minimize or eliminate possible exposures.

These include:

- Proper hand hygiene
- No mouth pipetting of blood or other body fluids
- Appropriate disposal of biohazardous/regulated waste
- No eating, drinking or applying makeup in work areas
- Do not recap, bend, remove or manipulate any needles by hand

4. Personal Protective Equipment

PPE is provided by the school to protect the employee. Examples are:

- fluid resistant gowns
- masks
- gloves
- goggles

5. Environmental Practices

Each work site should be maintained in a clean and sanitary condition. Spills should be contained and cleaned before disinfecting.

- Always wear gloves.
- Contain and clean the spill using paper towels.
- Apply disinfectant.
- Allow to air dry.
- NOTE: Use tongs or broom and dust pan to pick up glass.
- Large blood spills should be cleaned up using a blood spill kit.

6. Laundry Practices

All contaminated linen is handled using Universal Precautions and bagged at the point of use. Contaminated linen should be handled as little as possible and NOT thrown on the floor. Please make sure no foreign items are placed with the linen. This protects the laundry worker who sorts the linen.

7. Biohazardous or Regulated Waste

Biohazardous or regulated waste (or red-bagged waste) must be separated from regular trash.

The following are examples of red-bagged waste:

- Bulk blood or blood saturated items – most containers can be safely emptied into toilet or hopper while wearing protective clothing.
- Blood saturated means that bloody fluid leakage would result if compacted or compressed. Dressings with little blood can be disposed in regular trash.
- Pathological Waste – any human tissue
- All sharps, needles, lancets, scalpels, blades should be placed in sharps container.

8. Post Exposure

When a needle stick, cut, splash, bite or other exposure to blood, body fluids or other potentially infectious material occurs, the employee should:

- Immediately clean the wound and/or irrigate eyes at the closest eyewash station. Lacerations requiring sutures and eye splashes requiring irrigation should be treated in an Emergency Department.
- Notify the Principal and/or Risk Manager.
- Refer to **Steps to Take Following an Exposure Incident.**
- It is important to receive the proper treatment!

Hepatitis B Vaccine

This vaccine is strongly recommended for the members of the Emergency Response Team because of the risk of exposure to blood and body fluids.

Tuberculosis

What is TB?

“TB” is short for Tuberculosis. TB is spread by tiny germs that can float in the air. The TB germs may spray into the air if a person with TB disease of the lungs or throat coughs, shouts or sneezes. People nearby can breathe TB germs into their lungs.

TB germs can live in your body without making you sick. This is called TB infection.

Sometimes the TB germs can cause TB disease. TB commonly infects the lungs, causing:

- persistent cough (greater than 3 weeks)
- bloody sputum
- weight loss
- night sweats
- fever

How do I know if I have TB?

The intradermal PPD skin test will determine if you have been exposed to TB. This mandatory skin test given on hire, requires that you return in 48-72 hours for interpretation of the test. To be considered skin test positive, there must be a raised area at the test site which is then measured to determine the size.

Does a positive skin test mean that the person is infectious?

A positive skin test means that additional assessment needs to be done to find out if the person has active TB disease.

A person is considered infectious (active TB disease) when they have a positive skin test, their chest x-ray shows abnormalities and they may have signs and symptoms of TB.

A person is considered non-infectious (dormant TB) when their skin test positive, but their chest x-ray is normal and they have no signs or symptoms of TB. This means the person carries the germ, but does not look or feel sick and cannot infect others. No special measures are needed.

Precautions

1. Report possible cases of TB. Active TB in children is rare. Be suspicious of people with TB symptoms, especially if they are from high risk groups which include persons from Asia, Africa, Latin America, low income, medically under-served, IV drug users, alcoholics, residents of correctional institutions and nursing homes.
2. Control possible sources of infection. Have person cover mouth and nose when coughing or sneezing. Have the person wear a surgical mask.

Influenza *(The following article is adapted from the Centers for Disease Control)*

Influenza is a debilitating and highly contagious respiratory infection caused by a virus and leads to an average of approximately 200,000 hospitalizations and 36,000 deaths in the U.S. each year. At-risk populations, particularly the elderly and young children, should be vaccinated against influenza every year. Because the vaccine is altered nearly every year to match the circulating strain and because immunity from the vaccine wanes over time, the vaccine must be given every year – ideally in October or November. If you have an egg allergy, check to see if there is an egg-free vaccine available.

Vaccine Myths

Despite the established benefits of the influenza vaccine, several misconceptions exist. The most common myth is that the influenza vaccine can actually cause influenza. Just like most vaccines, the influenza vaccine does **not** cause influenza.

Some people argue that because the influenza vaccine is not 100% effective, (it is 70-90% effective in healthy adults), they will get influenza anyway. Even if the vaccine does not prevent all individuals from getting influenza, they are still likely to be far less sick than they would have been without the shot. People at greatest risk for influenza-related complications include: people 65 years and older; residents of nursing homes and other chronic care facilities; people with chronic pulmonary or cardiovascular conditions; people with diabetes mellitus; and children less than two years of age.

Influenza 101

Although influenza is primarily spread by droplet transmission, the virus can also live on objects such as doorknobs, telephone receivers, utensils and food trays, beds and medical equipment for possibly up to one day. Some people infected with influenza may not develop symptoms at all, but may be infectious to others. For infected persons who do develop symptoms, they can be contagious the day before they get symptoms.

Influenza usually starts suddenly and may include the following symptoms:

- Fever (usually high)
- Headache
- Tiredness (can be extreme)
- Cough
- Sore throat
- Runny or stuffy nose
- Body aches
- Diarrhea and vomiting also can occur infrequently, but are more common in children

General treatment for influenza includes bed rest, drinking plenty of fluids and taking over-the-counter medicines such as acetaminophen.