

## **HIPAA Training and OSHA Infection Control Document**

### **Blood-borne pathogens**

Blood-borne pathogens are microorganisms in the blood or other body fluids that can cause illness and disease in people. They may be transmitted through contact with infected blood and body fluids, such as semen, vaginal secretions, synovial fluid, amniotic fluid, cerebrospinal fluid pleural fluid, peritoneal fluid, pericardial fluid, feces, nasal secretions, urine, vomitus, sputum, and saliva. Illness may be caused when infection blood or other infection material is introduced into the bloodstream of a person.

### **Universal or Standard Precautions**

Under the concepts of universal precautions, all human blood and certain body fluids from all clients/patients are to be treated as if they are known to be infectious for HIV, HBV, HCV, and other blood-borne pathogens. Essential precautions include:

- Hand washing. Wash hands after contact with blood or body fluids even if gloves were worn and there is no visible tear, puncture, or leak. Wash hands before and after all work with patients.
- The use of barriers to prevent contact with potentially infected material, known as Personal Protective Equipment (PPE):
  - Gowns for use when clothing is likely to be soiled with blood or body fluids.
  - Masks for use when clothing and/or face may be soiled with blood or body fluids (replace when wet).
  - Gloves for use when hands are likely to be in contact with blood or body fluids. Wash hands after glove removal. Dispose of gloves after single patient use. If you have a latex allergy or allergy-type reactions, ask your preceptor latex free gloves.
  - Eye protection (e.g. face shields or goggles) for use when there is potential for splash or spray.

### Exposure

Should you be exposed to blood or other potentially infectious material:

- Flush the site and cleanse with soap and water.
- Flush mucous membrane with water or saline.
- Report the incident immediately to your clinical preceptor.

### Disposal

When disposing of broken glass or other sharp objects, never pick up the pieces by hand. Wear gloves and pick up the pieces using tongs or a brush and pan. Dispose of the materials in a sharps container.

## Needle Safety

- Do not recap a needle after use.
- Discard used needles, glass slides, scalpels, capillary tubes, disposable razors, lancets, etc. in a sharps or biohazard container.
- Do not overfill the used sharps container or push sharps into a filled container.

## Material Safety Data Sheets (MSDSs)

Material Safety Data Sheets (MSDSs) are prepared by the chemical manufacturer or distributor to provide information about the chemical, the manufacturer, toxicity, flammability, physical and health hazards, exposure limits, precautions and controls, emergency and first aid treatment for exposures, and other information. Examples of hazardous materials found in a clinical area include infectious waste, flammable liquids and gases, toxic chemicals, radioactive materials, cancer causing chemicals and drugs, and compressed gas cylinders. MSDSs must be accessible 24 hours a day. Your preceptor should be able to locate the MSDSs as needed.

## HIPAA Privacy and Security Rules

HIPAA privacy and security rules protect the individual patient's privacy related to health and identification information. HIPAA stands for Health Insurance Portability and Accountability Act. That is a somewhat unclear title for most of us that essentially means "Private". The HIPAA Privacy and Security Rules require each of us to stringently protect each patient's privacy in relation to health and identification information. All unique individual identifying numbers, characteristics, codes health and demographic information are covered under HIPAA rules and must be kept private except for permitted uses and disclosures.

All health and demographic information about an individual that is transmitted or maintained in any medium where the information:

- Is created or received by a health care provider, health plan, employer, or health care clearinghouse; and
- Relates to the past, present, or future
  - Physical or mental health condition of an individual, or
  - Provision of health care to an individual, or
  - Payment for the provision of health care to an individual
- Individual identifiers that are protected include:
  - Name,
  - Street address
  - County
  - Precinct
  - Zip code (or equivalent) except for the first three digits
  - Dates, except year
    - Birth date
    - Admission date
    - Discharge date
    - Date of death
  - Telephone numbers
  - Fax numbers
  - Email addresses

- Social security numbers
- Medical record numbers
- Health plan beneficiary numbers
- Account number
- Certificate/license numbers
- Vehicle identifiers and serial numbers
- Device identifiers and serial numbers
- Web universal resource locations (URLs/IP addresses)
- Biometric identifiers, including finger and voice prints
- Full face photographic images and any comparable images
- Any other unique identifying number, characteristic, or code

You are not allowed to share, copy, discuss, write or otherwise disclose any protected health information or identifying information except what is specifically allowed or required for treatment, payment, or health care operations, and or as mandated.

#### Permitted Uses and Disclosures

The only time that health and identification information can be disclosed is for:

- Treatment
- Payment
- Health Care Operations
- Mandated disclosure is required for:
  - Health oversight activities
  - Judicial and administrative proceedings
  - Law enforcement purposes
  - Organ donation

Only the “minimum necessary disclosures” may be made to accomplish the intended purpose. ALL other uses

The health care facility you are in will have the appropriate authorization forms with the required information on them. While it is unlikely that you will need information that requires authorization, consult with the site staff/management if you think there may be a need.

- Do not copy any patient records without the approval of your preceptor. If approved to copy any document, you are still responsible for the privacy and security of records; including, but not limited to only copying the minimum necessary information.
- Do not make a copy (printed hardcopy of electronic copy) of any part of a patient record without checking with facility management to ensure appropriateness, authorization, and security.
- Do not take home or otherwise remove a health facility computer (this includes mobile devices) from the facility without proper encryption and approval from the facility management.

Should I have any questions about releasing, sharing, copying, etc. patient information, I will consult with my preceptor and or management of the facility before any action.

- Do report any potential breach of security or privacy, even if that is because you made a mistake. Better to let the facility management know so that everyone can work together to take steps to protect the private information. Hiding a mistake could result in harm to patients, the facility, and to you.



## **HIPAA, Infection Control, and OSHA Attestation Sheet**

Before completing the verification sheet, you will need to first read the HIPAA Training and OSHA Infection Control Training document.

I have read the HIPAA Training and OSHA Infection Control Training document and am aware I must comply with HIPAA and Infection Control practices and agree to meet those standards and practices, as required by Middle Tennessee State University and the clinical settings for my clinical/practicum experiences.

**By typing your name and email below you are stating agreement.**

Your Name: \_\_\_\_\_

Date: \_\_\_\_\_

Your Email: \_\_\_\_\_

**Once completed, save/print this form as a PDF and upload to Medatrax. Keep a copy for your files.**