Policy

1. All personnel are protected from exposure to contamination with blood/body fluid on health record document(s).

2. A protective barrier shall be used if a health record document(s) becomes contaminated with blood/body fluids.

Purpose

1. To protect all staff members from coming in contact with blood or body fluids. Identify infection prevention and control measures needed for staff to process contaminated health record documents in a safe manner.

Procedure

1. Any blank document included in a health record that becomes contaminated should be discarded in regular waste and a new form placed on the chart immediately after the problem is identified.

2. If the contaminated document cannot be rewritten, allow it to dry, and then place it in a clear plastic sleeve. The department who identifies the contamination is responsible for placing it in the sleeve and dating it to remain on for one month. Indicate this clearly on the sleeve, e.g. remove on May 30, 2007.