

Universal Precautions and Volunteers

Universal precautions is an approach to infection control to treat all human blood and certain human body fluids as if they are known to be infectious for HIV, HBV and other bloodborne pathogens (Bloodborne Pathogens Standard [29 CFR 1910.1030\(b\)](#) definitions). Volunteers who find it necessary to help a person during a medical emergency should use universal precautions measures to protect themselves to the best of their ability.

Universal precautions apply to blood, other body fluids containing visible blood (such as saliva contaminated with blood), bodily tissues and specific fluids: such as semen, vaginal secretions, cerebrospinal, synovial, pleural, peritoneal, pericardial, and amniotic fluids. Universal precautions **do not** apply to feces, nasal secretions, sputum, sweat, tears, urine, and vomitus unless they contain visible blood.

Universal precautions involve using **barriers** to protect against contact and performing a disposal/clean-up process to protect others. Universal precautions include:

- Using personal protective barriers when exposed to body fluids, such as vinyl or latex gloves, disposable cloth towels, wads of gauze or paper towels.
- Proper removal of protective gear. When removing protective gear correctly, do not touch the contaminated side of the item. Fold or roll the item so contamination is contained inside the item, not on the outside/exposed portion.
- Disposing of contaminated materials, including gloves, in an approved bio-hazard container or labeled bags (as appropriate). *Gloves should never be re-used.*
- Washing hands with soap and water immediately after exposure.
- Cleaning surfaces and/or solid objects contaminated with blood or saliva by thoroughly washing with soap and water and disinfecting with a 30 second contact of household bleach diluted with water at a strength of 1:10 (Occupational Safety and Health Administration, 2010). Allow to air dry or wipe with a disposable cloth. This solution has a 24-hour shelf life and must be mixed fresh daily.

Additional best practices include:

- Picking up sharp objects such as broken glass using a broom and dustpan, tweezers or other object.
- Disposing of the sharp objects in a solid container such as a detergent bottle or coffee can rather than a plastic bag. Use a biohazard label or label with a caution notice.
- Seeking medical attention for any significant exposure to blood from another person.
- Completing and submitting an incident report to the local UME faculty/staff member. Records should be maintained according to OSHA standards and shared with the University of Maryland

[https://www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.1030#1910.1030\(b\)](https://www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.1030#1910.1030(b))
<https://health.maryland.gov/qahealth/substance-abuse/Pages/Good-Samaritan-Law.aspx>

Updated and revised, 2019. J. Morris.
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