



*Approved September 24, 2003*

## **POLICY ON BLOOD BORNE PATHOGENS**

### Introduction:

This policy is a mechanism to protect the health of midwifery clients and midwives, and to guide midwives in the provision of care with respect to infection with blood borne pathogens limited to Hepatitis B (HBV), Hepatitis C (HCV) and Human Immunodeficiency Virus (HIV). As new information becomes available, this policy may apply to other blood borne pathogens.

A review of legislation in this area has indicated that it is an extremely complicated topic, and the law is still developing with regards to policies on infection in health care workers.

A review of the scientific literature has indicated that the risk of transmission from health care worker to the public is low, particularly if there are no “exposure-prone procedures” being performed and if standard infection control procedures are adhered to. The Laboratory Centre for Disease Control (Health Canada, 1998) definition of “exposure-prone procedures” is as follows:

- a) Digital palpation of a needle tip in a body cavity (a hollow space within the body or one of its organs) or the simultaneous presence of the health care worker’s fingers and a needle or other sharp instruments or object in a blind or highly confined anatomic site, e.g. during major abdominal, cardiothoracic, vaginal and/or orthopedic operations, or
- b) Repair of major traumatic injuries, or
- c) Major cutting or removal of any oral or perioral tissue including tooth structure;

during which there is a potential for the patient’s open tissues to be exposed to the blood of the injured health care worker.

## Principles

- Midwives have a duty not to subject their clients to unacceptable risks.
- Clients have a reasonable expectation that they will not knowingly be exposed to blood borne pathogens during the delivery of midwifery care.
- Midwives who perform procedures in which there is a risk of transmission have a duty to know their serological status.
- Individuals have fundamental human rights such as the right to privacy and individual autonomy that may affect measures to reduce risk of transmission by health professionals.
- Information about the serological status of individuals must be treated in the strictest of confidence.
- Individuals must not be subject to discrimination on the basis of their serologic status.

## Policy

### **Prevention Mechanisms**

1. All practicing midwives should rigorously adhere to routine infection control practices as outlined in the following Health Canada Infection Control Guidelines: *Routine Practices and Additional Precaution for Preventing the Transmission of Infection in Health Care*, July 1999 [http://www.hc-sc.gc.ca/pphb-dgsp/dpg\\_e.html#infection](http://www.hc-sc.gc.ca/pphb-dgsp/dpg_e.html#infection); *Proceedings of the Consensus Conference on Infected Health Care Workers: Risk for Transmission of Bloodborne Pathogens*, July 1998 [http://www.hc-sc.gc.ca/pphb-dgsp/publicat/ccdr-rmtc/98vol24/24s4/24s4b\\_e.html](http://www.hc-sc.gc.ca/pphb-dgsp/publicat/ccdr-rmtc/98vol24/24s4/24s4b_e.html); *Preventing the Transmission of Bloodborne Pathogens in Health Care and Public Service Settings*, May 1997 [http://www.hc-sc.gc.ca/pphb-dgsp/dpg\\_e.html#infection](http://www.hc-sc.gc.ca/pphb-dgsp/dpg_e.html#infection).
2. All practicing midwives are ethically obligated to be immunized against Hepatitis B, unless a contraindication exists, for their own protection and that of their clients.

### **Serologic Status**

3. All practicing midwives are ethically obligated to know their personal serologic status with respect to HBV, HCV and HIV. Periodic testing is recommended for the midwife's health and to prevent exposing their clients to infection.

4. All midwives have an ethical obligation to determine their serologic status following any direct exposure to blood or human tissue in the workplace, e.g. needle stick injury, and to follow any subsequent reporting requirements of Public Health.

### **Testing Positive**

5. All midwives who learn they are positive for HBV, HCV or HIV are ethically obligated to take any appropriate measures to avoid exposure of clients during procedures involving possible transmission of blood borne pathogens.
6. All midwives who test positive for HBV, HCV or HIV are ethically obligated to seek advice on how to reduce the risk of transmission in their clinical practice.

### **Reporting Positive Results**

7. Midwives are ethically and legally obligated to report the result of a positive test for HBV, HCV or HIV to Public Health if it was the direct result of an exposure incident with a specific client. Midwives are then ethically obligated to inform the client that testing following the exposure incident revealed the likelihood of that individual's positive serologic status. This information should be reported to the client in order that they may seek appropriate care and avoid infecting others. Reporting requirements are intended as a method of prevention and treatment.
8. Midwives may choose to report their serologic status to the College in order to seek advice on how to reduce the risk of transmission in their clinical practice.

### **Guideline for Midwives Infected with Blood Borne Pathogens**

9. The College will establish an expert panel on a case by case basis for any member who reports to the College having tested positive for HBV, HCV or HIV in order to determine appropriate measures for them to employ in their practice to reduce the risk of transmission to their clients.