

**LUZERNE  
INTERMEDIATE  
UNIT #18**

**SECTION: PUPILS  
TITLE: EXPOSURE TO BLOODBORNE  
PATHOGENS  
ADOPTED: NOVEMBER 20, 2002  
REVISED: MARCH 25, 2015**

203.2. EXPOSURE TO BLOODBORNE PATHOGENS	
1. Purpose	The Board strives to provide a safe, positive environment for employees and students. The Board recognizes that in the course of providing educational services there may be instances in which students, staff, parents/guardians, independent contractors or volunteers may be exposed to bloodborne pathogens that could lead to life-threatening illnesses.
2. Definitions	<p><b>Bloodborne pathogens-</b> pathogenic microorganisms that are present in human blood and that can cause disease in humans, including without limitation, hepatitis B virus and HIV infection.</p> <p><b>Confidential HIV-related information</b> – any information that pertains to whether an individual has been the subject of an HIV-related test or has HIV infection/HIV related illness; or any information that identifies or reasonably could identify an individual as having one or more of these conditions</p>
Pol. 203.1	<p><b>HIV</b> – Human Immunodeficiency Virus.</p> <p><b>HIV infection</b> -refers to the disease caused by the HIV virus.</p> <p><b>Significant exposure</b> – direct contact with blood or body fluids in a manner that, according to the most current guidelines of the Centers for Disease Control and Prevention, is capable of transmitting HIV infection or life-threatening illness, including without limitation, a percutaneous injury (e.g., a needle stick or cut with a sharp object), contact of mucous membranes or skin, or if the contact is prolonged or involves an extensive area.</p> <p><b>Source person-</b> any person whose body fluids have been the source of a significant exposure.</p> <p><b>Universal precautions</b> - an approach to infection control that includes treating all human blood and certain body fluids as if known to be infectious of HIV and other bloodborne pathogens.</p>

<p>3. Authority</p> <p>35 P.S. 7601 et seq 20 U.S.C. Sec. 651 et seq 29 CFR 1919.1030</p>	<p>It shall be the policy of the Intermediate Unit, in accordance with applicable law, that upon report of an alleged exposure to bloodborne pathogens, Intermediate Unit staff shall investigate the incident and determine whether a significant exposure has occurred. Upon determination that a significant exposure has occurred (medical certification of exposure may be required), the Intermediate Unit shall obtain from the source person or his/her parents/guardian written authorization for the release of confidential HIV-related records or consent to testing for HIV or other bloodborne pathogens.</p>
<p>4. Delegation Of Responsibility</p>	<p>The Intermediate Unit shall annually inform staff, independent contractors and volunteers about the use of universal precautions to prevent contact with blood or other potentially infectious materials. Such information shall be communicated by appropriate means determined by the Executive Director or designee.</p> <p>The Program Director shall be designated to receive reports of alleged exposure and to investigate and administer assistance relating to such exposure, as permitted under this policy and applicable law. If the Program Director is unavailable, reports of alleged exposure shall be reported directly to the Executive Director or designee.</p>
<p>5. Guidelines</p>	<p>When a student, parent/guardian, employee, independent contractor or volunteer believes s/he has been exposed to blood or other body fluids that constitute a significant exposure, s/he shall report, either orally or in writing, such incident to the Program Director or designated administrator.</p> <p>The Program Director shall promptly investigate the report and provide to the person making the report information to assist in determining whether the exposure was a significant exposure. For the purpose of determining whether the alleged exposure constitutes a significant exposure, individuals may be advised to consult a physician.</p> <p>Upon determination that a significant exposure has occurred, the Program Director or designee shall make reasonable efforts to obtain the informed, written consent of the source person for the release of confidential HIV-related information and/or for testing for HIV infection or other bloodborne pathogens. In the absence of written consent by the source person for the release of information and/or testing, the Program Director shall provide information about the procedures required for obtaining a court order compelling the disclosure of confidential HIV-related information and/or testing.</p>