Appendix A – Bloodborne Pathogens - Students

Bloodborne Exposure – Students

In the event of an exposure to blood, it is imperative that you follow the following protocol. This may occur with altercations, biting, scratching, or when blood splatters into eyes or mucous membranes.

A bloodborne exposure is when “a specific eye, mouth, other mucous membrane, non-intact skin or parenteral comes in contact with blood or other potentially infections materials.

1. School staff will immediately administer first aid following universal precautions.
   - Biting:
     For the person bitten:
     - If the wound is bleeding, let it bleed freely for 1-2 minutes. (If it is spurting, apply pressure immediately and activate the MERT team.)
     - Scrub with antibacterial soap and rinse thoroughly to assure removal of saliva. Clean the area of the bite well, even if there is no obvious break in the skin.
     - Apply a sterile dressing.
   For biter:
     - When blood is drawn during biting incident, assist student to rinse mouth with water to remove possible residual blood.
   - Mucous Membranes:
     - Rinse eyes or mouth with copious amounts of water.
   - Skin:
     - Immediately wash exposed skin area with germicidal soap.

2. The building Principal must notify the parents/guardians by the end of the school day if their child has had an exposure incident. Parents/Guardians will be advised to contact their personal health care provider for evaluation and

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treatment of possible exposure to bloodborne pathogens. The risk of disease transmission and need for treatment should be evaluated by a health care provider.

3. The school staff will notify the school nurse and complete an Incident/Accident Report.

4. Employees must follow established procedures for work related injuries.

5. Parents/Guardians may request information in writing. Information, which may include the children’s names, health history, immunization information, will be shared only when permission has been granted, in writing. This is to comply with requirements as defined by the Family Education Rights and Privacy Act (FERPA) 20 USC S1232-g). A Release of Confidential Information and Records form may be used to secure releases. The school nurse may be asked to coordinate the release of this information.

6. If this request is denied by the parents/guardians, the other parent/guardian may chose to seek legal counsel on their own, to determine their due process rights.

7. The Principal will work with the classroom teacher to develop a management program for the child that continues to demonstrate biting behavior. The Principal is responsible to monitor the effectiveness of this management plan until the problem is resolved.

Note: Students will be expected to be in compliance with the required immunization schedule.

Appendix Dated: June 29, 2009