



Standard of Practice Bloodborne Pathogens

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Standards of Practice of Medicine set out the requirements related to specific aspects for the quality of the practice of medicine. Standards of Practice of Medicine provide more detailed information than contained in the *Regulated Health Professions Act*, Regulations, and Bylaws. All members must comply with Standards of Practice of Medicine, per section 86 of the *Regulated Health Professions Act*.

This Standard of Practice of Medicine is made under the authority of section 82 of the *Regulated Health Professions Act* and section 15 of the CPSM Standards of Practice Regulation.

1. Definitions

- 1.1. **Member(s)** – member(s) of CPSM providing medical care to patients.
- 1.2. **Exposure Prone Procedures (EPP)** - Interventions where there is a risk that injury to the member may result in the exposure of the patient's open tissues to blood and body fluids of the member (bleedback). These include procedures where the member's gloved hand may be in contact with sharp instruments, needle tips or sharp tissues (spicules of bone or teeth) inside a patient's open body cavity, wound, or confined anatomical space where the hands or finger tips may not be completely visible at times.
- 1.3. **Routine Practices** – A series of recommendations for the care of all patients incorporating the precautions necessary to prevent the transmission of microorganisms between patients and health care workers across the continuum of care, including previous precautions against bloodborne pathogens (Universal Precautions).

2. All Members:

- 2.1. have an ethical responsibility to be aware of their serological status with respect to blood borne communicable diseases, including HBV, HCV and HIV, if they are at personal or occupational risk and engaging in EPP and that testing positive for a blood borne pathogen is a physical condition which would have the potential to compromise the ability of the Member to deliver safe medical care and would therefore be reportable as such on a member's application for registration and/or renewal with CPSM;

- 2.2. must take all necessary steps to minimize the transmission of blood borne infections to patients, including conscientious and rigorous adherence to routine practices in their practice;
 - 2.3. should be immunized for HBV before possible occupational exposure and should have their antibody status assessed and documented after immunization;
 - 2.4. should seek re-testing of their serological status following a significant exposure to human blood or other body fluids.
3. A member who is known to have active infection with HBV and/or HCV and/or HIV must:
 - 3.1. consult a physician to receive appropriate medical care and follow-up care;
 - 3.2. directly or through a treating physician, report to the Assistant Registrar of CPSM, if they have not already done so through CPSM's application for registration or renewal of a certificate of practice process;
 - 3.3. cooperate with CPSM to facilitate a review by an expert panel to assess whether modifications to the member's practice are warranted based upon the test of public protection;
 - 3.4. cooperate with CPSM in making modifications and/or adhering to restrictions to his/her clinical practice, pending and/or on completion of the expert panel review, including ceasing to practice EPP, if required, in order to protect the public;
 - 3.5. notify the Assistant Registrar of CPSM of any significant change in his/her health status and/or practice circumstances to allow for a further expert panel review, if necessary, to assess whether any further modifications and/or restrictions to his/her clinical practice are required.
 4. A member who comes in contact with the blood or other body fluids of an individual who is known to carry a blood borne pathogen must consult a physician to receive appropriate medical care and follow-up care.
 5. A member who is aware of another member being positive for HBV and/or HCV and/or HIV must report the matter to the Assistant Registrar of CPSM.