
TITLE 410 INDIANA STATE DEPARTMENT OF HEALTH

Proposed Rule
LSA Document #09-810

DIGEST

Amends [410 IAC 1-4-8](#) to update and modify general precautions to incorporate best health care practices in order to provide greater protections to the public. Effective 30 days after filing with the Publisher.

[IC 4-22-2.1-5 Statement Concerning Rules Affecting Small Businesses](#)

[410 IAC 1-4-8](#)

SECTION 1. [410 IAC 1-4-8](#) IS AMENDED TO READ AS FOLLOWS:

[410 IAC 1-4-8](#) Precautions generally

Authority: [IC 16-41-11-9](#)

Affected: [IC 16-19](#); [IC 16-41-11](#)

Sec. 8. (a) All covered individuals and health care workers under this rule shall comply with the requirements imposed under the Indiana occupational safety and health administration's bloodborne pathogens standards (as found in 29 CFR 1910.1030).

(b) The following documents shall be incorporated by reference as guidelines for covered individuals and health care workers under this rule:

(1) Centers for Disease Control and Prevention, Guideline for Hand Hygiene in Health-Care Settings: Recommendations of the Healthcare Infection Control Practices Advisory Committee and the HICPAC/SHEA/APIC/IDSA Hand Hygiene Task Force. MMWR 2002;51(No. RR-16).

(2) World Health Organization. WHO Guidelines on Hand Hygiene in Health Care. WHO Press: Geneva, Switzerland, 2009.

(c) All incorporated material is available for public review at the department.

~~(b)~~ **(d)** The operator and all covered individuals whose professional, employment, training, or volunteer activities or duties are performed at or on behalf of a facility providing services to patients or other members of the public in which there is a reasonably anticipated risk of skin, eye, mucous membrane, or parenteral contact with human blood or other potentially infectious materials shall also comply with the following requirements:

(1) All equipment and environmental and working surfaces shall be cleaned and decontaminated after contact with blood or other potentially infectious materials.

(2) Heating procedures capable of sterilization must be used when heat stable, nondisposable equipment is sterilized. Monitoring of heat sterilization procedures shall include documentation of the following:

(A) Each sterilization cycle.

(B) Use of chemical indicators when sterilizing packaged nondisposable equipment.

(C) That biological indicators were used within seven (7) days prior to the current sterilization procedure.

(D) Routine equipment maintenance according to manufacturer recommendations.

Documents required under this subdivision must be made available to the department upon request.

(3) Reusable equipment requiring sterilization that is destroyed or altered by heat must be sterilized by chemical means.

(4) Environmental surfaces and equipment not requiring sterilization that have been contaminated by blood or other potentially infectious materials shall be cleaned with an absorbent material prior to disinfection.

Disinfectant solutions shall be a:

(A) germicide registered with the Environmental Protection Agency (EPA) for use as a hospital disinfectant and labeled tuberculocidal or registered germicide with specific inactivation claims against HIV and HBV; or

(B) sodium hypochlorite solution dated and not used after twenty-four (24) hours old as follows:

(i) A minimum of 1:100 dilution (one-quarter (1/4) cup of five and twenty-five hundredths percent (5.25%) common household bleach in one (1) gallon of water).

(ii) A 1:10 dilution (one (1) part five and twenty-five hundredths percent (5.25%) common household bleach

in nine (9) parts water) shall be used when a blood, culture, or OPIM spill occurs in the laboratory setting.

(5) Hand hygiene shall be performed when there is a risk of skin, eye, mucous membrane, or parenteral contact with human blood or OPIM.

(6) Hands shall be washed with soap and water when visibly dirty or soiled with blood or OPIM and after using the toilet.

(7) Hand hygiene shall be performed before and after touching a potential source, before a clean or aseptic procedure, after a risk of body fluid exposure, after contact with inanimate surfaces and objects in the immediate vicinity of a potential source, and after removing gloves.

(8) The use of gloves shall not replace the need for hand hygiene.

(9) Gloves shall be worn when contact with blood or OPIM, mucous membranes, or nonintact skin is anticipated.

(10) Gloves shall be changed or removed during care if moving from a contaminated body site to another body site (including nonintact skin, mucous membrane, or medical device) within the same source or the environment.

(11) Gloves shall be changed between contact with other individuals.

~~(5)~~ **(12)** If a patient's diagnosis, laboratory analysis, or medical condition requires additional infection control measures or isolation, those specific measures apply in addition to the requirements of this rule and other requirements found at [IC 16-19](#).

(Indiana State Department of Health; [410 IAC 1-4-8](#); filed Oct 6, 1989, 4:20 p.m.: 13 IR 280; filed Nov 22, 1993, 5:00 p.m.: 17 IR 757; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234; filed Mar 28, 2006, 12:45 p.m.: 29 IR 2537; errata filed Aug 16, 2006, 2:30 p.m.: [20060830-IR-410050259ACA](#); readopted filed May 22, 2007, 1:44 p.m.: [20070613-IR-410070141RFA](#); filed Nov 30, 2007, 1:00 p.m.: [20071226-IR-410060426FRA](#))

[Notice of Public Hearing](#)

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