Document: Final Rule, Register Page Number: 29 IR 2537 Source: May 1, 2006, Indiana Register, Volume 29, Number 8 Disclaimer: This document was created from the files used to produce the official CD-ROM Indiana Register.

TITLE 410 INDIANA STATE DEPARTMENT OF HEALTH

LSA Document #05-259(F)

DIGEST

Amends 410 IAC 1-4-1.1 to amend the definition of bloodborne pathogens. Amends 410 IAC 1-4-4.3 to add a definition of HCV. Amends 410 IAC 1-4-8 to update the sterilization requirements for equipment and environmental surfaces. Effective 30 days after filing with the Secretary of State.

410 IAC 1-4-1.1 410 IAC 1-4-4.3 410 IAC 1-4-8

SECTION 1. 410 IAC 1-4-1.1 IS AMENDED TO READ AS FOLLOWS:

410 IAC 1-4-1.1 "Bloodborne pathogens" defined Authority: IC 16-41-11-9 Affected: IC 16-41-11

Sec. 1.1. "Bloodborne pathogens" means pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, HBV, **HCV**, and HIV. (Indiana State Department of Health; 410 IAC 1-4-1.1; filed Nov 22, 1993, 5:00 p.m.: 17 IR 753; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234; filed Mar 28, 2006, 12:45 p.m.: 29 IR 2536)

SECTION 2. 410 IAC 1-4-4.3 IS AMENDED TO READ AS FOLLOWS:

410 IAC 1-4-4.3 "HBV" and "HCV " defined Authority: IC 16-41-11-9 Affected: IC 16-41-11

Sec. 4.3. (a) "HBV" means hepatitis B virus.

(b) "HCV" means hepatitis C virus. (Indiana State Department of Health; 410 IAC 1-4-4.3; filed Nov 22, 1993, 5:00 p.m.: 17 IR 755; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234; filed Mar 28, 2006, 12:45 p.m.: 29 IR 2536)

SECTION 3. 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 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. Heat labile, reusable equipment requiring sterilization must be sterilized by chemical means. Records must be maintained to document Monitoring of heat sterilization procedures shall include documentation of the following:

(A) Duration of sterilization technique. Each sterilization cycle.

(B) Mechanisms for determination of effective sterility. Use of chemical indicators when sterilizing packaged nondisposable equipment.

(C) That biological indicators were used within thirty (30) days prior to the current sterilization procedure.

(C) (D) Routine monthly equipment maintenance inspections. according to manufacturer recommendations.

These Documents required under this item [subdivision] must be made available to the department upon request.

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

(3) (4) Environmental surfaces and equipment not requiring sterilization which have been contaminated by blood or other potentially infectious materials shall be cleaned then decontaminated. with an absorbent material prior to disinfection. Disinfectant solutions shall:

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

(B) be a sodium hypochlorite five-tenths percent (0.5%) concentration, by volume (common household bleach in ten percent (10%) concentration in water); the solution shall be solution dated and shall not be used if it is more than after twenty-four (24) hours old as follows:

(i) A minimum of 1:100 dilution (one-quarter (¼) 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 ten (10) parts water) shall be used when a blood, culture, or OPIM spill occurs in the laboratory setting.

(4) (5) 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)

LSA Document #05-259(*F*)

Notice of Intent Published: October 1, 2005; 29 IR 57 Proposed Rule Published: February 1, 2006; 29 IR 1753

Hearing Held: February 23, 2006

Approved by Attorney General: March 22, 2006

Approved by Governor: March 27, 2006

Filed with Secretary of State: March 28, 2006, 12:45 p.m.

IC 4-22-7-5(c) Notice from Secretary of State Regarding Documents Incorporated by Reference: None Received by Publisher Small Business Regulatory Coordinator: Robert Teclaw, Indiana State Department of Health, 2 North Meridian Street, 5K, Indianapolis, Indiana 46204, (317) 233-7807, rteclaw@isdh.in.gov