Frequently Asked Questions on Infection Control Practices in Health Care Settings When Caring for Patients with Zika Virus Infection

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Q: What is known about how Zika virus is transmitted to people?

A: Based on the latest scientific evidence, we know that the Zika virus is primarily transmitted through the bite of an infected Aedes species mosquito; in addition, Zika virus can be transmitted from a pregnant woman to her fetus, and through sex. It is very likely that Zika can be transmitted through blood transfusion. The Zika virus remains in a person's blood an average of seven days after being infected. Zika virus is not transmitted through the air or directly from one person to another through casual contact.

Q: Can Zika virus be transmitted from an infected patient to a healthcare worker?

A: Although Zika virus has been detected in a number of body fluids, including blood, urine, saliva, and amniotic fluid, Zika virus transmission from infected patients to healthcare workers or other patients has not been documented. Zika virus transmission via needle stick has been documented in a research laboratory setting. Because it is possible that Zika virus transmission could occur with healthcare worker exposure to blood or body fluids of a Zika-infected patient, the California Department of Public Health has endorsed recommendations by the Centers for Disease Control and Prevention for healthcare facilities to use standard precautions when caring for patients infected with Zika virus. (Click here to see guidance)

Q: Are standard precautions sufficient to protect healthcare workers from occupational exposure to Zika virus?

A: Yes. Standard Precautions (also called "universal precautions" in the blood-borne pathogens standard enforced by Cal/OSHA) include measures to prevent contact between a patient's blood or body fluids and healthcare personnel's mucous membranes (including eyes) as well as their skin and clothing, and to avoid exposure to contaminated sharp implements. The employer needs to assess the healthcare personnel's risk for exposure to blood and body fluids based on the type and the nature of their patient care activity, and select the appropriate engineering controls and personal protective equipment (PPE) to prevent exposures.

Q. Does California have additional worker protections against infectious diseases?

A: Yes, in California, healthcare facilities must have in place a blood-borne pathogens exposure control plan that adheres to CalOSHA standards to ensure that workers are protected from exposure to infections such as Zika, HIV, Hepatitis, and others. (Click here to see the blood-borne pathogens standard enforced by Cal/OSHA)

Q: What kinds of PPE should healthcare workers use to prevent exposure to Zika virus?

A: Depending on the nature of patient care activity and the potential for splashes of body fluids, PPE to be used as part of Standard Precautions may include gloves, impermeable gowns, masks,

and eye protection (either goggles or face shields). Double gloving may reduce percutaneous injuries when handling sharps. Hand hygiene should be performed before and after any contact with a patient, after any contact with potentially infectious material, and before putting on and upon removing PPE, including gloves.

Q: What else should healthcare providers do to prevent healthcare worker exposure to Zika virus?

A: Infection control supplies should be available and accessible in all patient care areas where they may be needed. Healthcare personnel should be provided ongoing education, training and adherence monitoring about Standard Precautions and use of appropriate PPE, including donning and doffing procedures. Any occupational exposures sustained by health care personnel, including mucous membrane exposure following a splash of body fluids, should be reported as soon as possible to the facility's occupational health clinic to ensure appropriate assessment that includes blood-borne pathogens.

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