



Advice for osteopaths about blood borne infections

1. The *Osteopathic Practice Standards* require osteopaths to consider how best to safeguard their own health and the health of others. The relevant standards state:

'D10 Ensure that any problems with your own health do not affect your patients.

1. If you know or suspect your physical or mental health to be impaired in such a way that it affects the care you give your patients, consider whether you should:
 - 1.1 Seek and follow appropriate medical advice on whether, and if so how, you should modify your practice;
 - 1.2 If necessary, stop practising altogether until your medical adviser judges you fit to practise again.
 - 1.3 Inform the GOSc so that your registration details can be amended.
 - 1.4 If you are exposed to a serious communicable disease and you have reason to suspect you are a carrier, you should immediately stop practising until you have obtained advice from an appropriate medical adviser. You should follow any advice you are given about suspending or modifying your practice. You should take all necessary precautions to prevent transmission of the condition to patients.

D11 Be aware of your role as a healthcare provider to promote public health.

1. Promoting public health includes being aware of the following:
 - 1.1 Your practice premises should be clean, safe, hygienic, comfortable and appropriately equipped. You should ensure that you have appropriate procedures in place in the event of a medical emergency.
 - 1.2 There are detailed requirements in law for health and safety in the workplace. Further details can be found on the website of the UK Health and Safety Executive.'
2. We have produced this advice note in response to enquiries from osteopaths who are aware that they have a blood-borne infection, but it provides information that may be of relevance to all osteopaths.

3. For the purposes of this document a blood-borne infection is one of the following:
 - a. Hepatitis B virus (HBV)
 - b. Hepatitis C virus (HCV)
 - c. Human immunodeficiency virus (HIV).
4. Guidance from Public Health England in this area refers extensively to Exposure Prone Procedures (EPP). EPPs are defined as 'invasive procedures where there is a risk that injury to the worker may result in exposure of the patient's open tissues to the blood of the worker. These include procedures where the worker's gloved hands may be in contact with sharp instruments, needle tips, or sharp tissues (e.g. spicules of bone or teeth) inside a patient's open body cavity, wound or confined anatomical space where the hands or fingertips may not be completely visible at all times. Such procedures occur mainly in surgery, obstetrics and gynaecology, dentistry and some aspects of midwifery.'
5. The GOsC has sought advice from the *UK Advisory Panel for Healthcare Workers Infected with Bloodborne Viruses (UKAP)* in relation to the use by osteopaths of the following procedures:
 - a. Intraoral examination or technique
 - b. Vaginal or rectal examination or technique
 - c. Acupuncture or dry needling
 - d. Any other procedure requiring the use of needles or other sharps.
6. The advice of UKAP is that:
 - a. Intraoral examination of the mouth is now not an EPP.
 - b. Vaginal or rectal examination or technique is only an EPP when sharp instruments or tissues are involved
 - c. Acupuncture or dry needling are not EPPs as hands are visible
 - d. Any other procedure requiring the use of needles or other sharps should only be considered an EPP if the hands are not visible.

Therefore, UKAP's official advice (as at 28 July 2015) is that osteopaths do not perform EPPs.

7. Regardless of whether or not these procedures are considered to be exposure prone, it is essential that osteopaths undertaking them adhere to routine infection-control procedures at all times.

8. Any osteopath who is undertaking any of the procedures identified at paragraph 5 should ensure that they have received appropriate training in infection control, adhere to routine infection control procedures, and keep their knowledge and skills in this area up to date through appropriate CPD.
9. The risk of infection of a patient is extremely low, as is the risk of infection of an osteopath by a patient.
10. Osteopaths who are concerned about the risks of infection from a patient should consult the relevant occupational guidance from the Health and Safety Executive.

Sources of additional guidance

Public Health England: Management of HIV infected healthcare workers performing exposure prone procedures (2014)

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/333018/Management_of_HIV_infected_Healthcare_Workers_guidance_January_2014.pdf (accessed 28 May 2015)

Department of Health: Health clearance for tuberculosis, hepatitis B, hepatitis C and HIV: New healthcare workers (2007)

http://webarchive.nationalarchives.gov.uk/20130107105354/http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/documents/digitalasset/dh_074981.pdf (accessed 28 May 2015) n.b. this guidance is due to be superseded by new guidance from Public health England in 2015 or 2016

Health and Safety Executive: Blood-borne viruses in the workplace – Guidance for employers and employees (2001)

<http://www.hse.gov.uk/pubns/indg342.pdf> (accessed 28 May 2015)