

FOR BCCNM REGISTERED MIDWIVES

Preventing Transmission of Blood-borne Viruses

Introduction

This practice standard applies to registered midwives.

This standard sets the expectations for midwives to safeguard the health of their clients by minimizing the risk of transmitting **blood-borne viruses (BBVs)**. In addition, midwives are expected to follow relevant legislation and regulations, BCCNM's standards and bylaws, and organizational policies and processes.

Standards

- 1. Midwives take action to prevent the transmission of BBVs from themselves to their clients.
- 2. Midwives maintain their own wellness by:
 - a. Knowing their serological and infectious status.
 - b. Being appropriately immunized.
 - c. Following up-to-date guidance on BBV self-testing frequencies according to level of risk.
 - d. Testing for BBV whenever an exposure occurs.
- 3. Midwives comply with current organizational, provincial, and national authorities' guidance regarding:
 - a. Preventing BBV transmission.
 - b. Mitigating the risks of BBV transmission.
 - c. BBV exposure management.
 - d. Reporting obligations, including to the client, should an accidental BBV exposure occur.
- 4. Midwives who test positive for a BBV must:
 - a. Consult with an expert in infectious diseases when appropriate.

- b. Seek advice on how to reduce the risk of transmission in their midwifery practice.
- c. Take appropriate measures to prevent transmission to clients.
- d. Only perform or assist to perform **exposure-prone procedures** when their health and viral loads make it safe.

Glossary

Blood-borne virus (BBV): A virus carried in the blood that can be spread from one person to another, such as hepatitis B virus (HBV), hepatitis C virus (HCV), and/or human immunodeficiency virus (HIV). The pathogen can be transmitted through contact with blood or, in some situations, other body fluids.

Exposure-prone procedures (EPPs): Invasive procedures that have a higher-than-average risk of injury to the midwife that may expose the client to the midwife's blood or vice versa. EPPs include when a midwife's fingers and a needle or other sharp instrument are in a difficult-to-visualize or highly confined anatomic site, such as vaginal laceration repair with hand-quided sharps.

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