**COMMON BLOODBORNE PATHOGENS**

Bloodborne pathogens are disease-causing microorganisms present in human blood or other potentially infectious material (OPIM). These pathogens include, but are not limited to, Hepatitis B virus (HBV), Hepatitis C virus (HCV), and human immunodeficiency virus (HIV). According to the Centers for Disease Control and Prevention (CDC), hepatitis C is the most common chronic bloodborne infection in the United States. Some symptoms are similar for these diseases, but not all.

*Symptoms of Hepatitis B and C Symptoms of HIV*

Flu-like symptoms Fever Rash Weight Loss Abdominal discomfort
Lack of energy Night Sweats Swollen lymph nodes Dark urine Yellow skin & sclera

Note: Hepatitis B: 30% of cases have no signs and symptoms. Hepatitis C: 80% of cases have no signs and symptoms.

**1. Hepatitis-B**

Hepatitis B virus (HBV) is a potentially life-threatening bloodborne pathogen. The CDC estimates there are approximately 280,000 HBV infections each year in the U.S. Approximately 8,700 health care workers each year contract hepatitis B, and about 200 will die as a result. In addition, some who contract HBV will become carriers, passing the disease on to others. Carriers also face a significantly higher risk for other possibly fatal liver ailments, including cirrhosis of the liver and primary liver cancer. HBV infection is transmitted through exposure to blood and other infectious body fluids and tissues. Anyone with occupational exposure to blood is at risk of contracting the infection.

Employers must provide engineering controls; workers must use work practices and protective clothing and equipment to prevent exposure to potentially infectious materials. However, the best defense against Hepatitis B is vaccination.

*Vaccination*

The new OSHA standard covering bloodborne pathogens requires employers to offer the three-injection vaccination series free to all employees who are exposed to blood or other potentially infectious materials as part of their job duties. This includes health care workers, emergency responders, first-aid personnel, law enforcement officers, and others.

*Infection Control*

The vaccination must be offered within 10 days of initial assignment to a job where exposure to blood or other potentially infectious materials can be "reasonably anticipated." The Hepatitis B vaccination is a noninfectious, yeast-based vaccine given in three injections in the arm. There is no risk of contamination from other bloodborne pathogens nor is there any chance of developing HBV from the vaccine. The second injection should be given one month after the first, and the third injection six months after the initial dose. More than 90 percent of those vaccinated will develop immunity to the Hepatitis B virus. To ensure immunity, it is important for individuals to receive all three injections. At this point it is unclear how long the immunity lasts, so booster shots may be required at some point in the future. The vaccine causes no harm to those who are already immune or to those who may be HBV carriers.

**2. Hepatitis-C**

Hepatitis C is a liver disease, caused by the hepatitis C virus (HCV), found in the blood of persons infected with this disease. Hepatitis C can be serious for some persons, but not for others. Most people who get Hepatitis C will carry the virus the rest of their lives. Many do not feel sick from the disease, but most of these persons will have some liver damage. Eventually, some patients may develop cirrhosis of the liver and liver failure.

There is no vaccination for Hepatitis C. However, many persons with Hepatitis C are at risk for Hepatitis A and Hepatitis B and should be vaccinated for these diseases.

*Preventing the spread of Hepatitis C*

Hepatitis C is spread through contact with the blood of an infected person. Sharing of needles, syringes and other equipment used in intravenous drug use can spread the disease. Do not share razors, toothbrushes or other personal care articles that may have blood on them. Rarely, it may be spread by unprotected sex.

**Hepatitis C is NOT spread by breast feeding, hugging, kissing, food or water, sharing eating utensils or drinking glasses, casual contact, sneezing, coughing.**

**3. Human Immunodeficiency Virus- (HIV)**

If you are going to be caring for someone with HIV infection, you need to understand the basic facts about HIV and AIDS. Acquired immunodeficiency syndrome (AIDS) is caused by the human immunodeficiency virus (HIV). People who are infected with HIV can look and feel healthy and may not know for years that they are infected. HIV slowly wipes out parts of the body's immune system. The HIV-infected person gets sick because the body can't fight off diseases. Signs of HIV infection are like those of many other common illnesses, such as swollen glands, tiring easily, losing weight, fever, or diarrhea. Different people have different symptoms. HIV is in people's blood, semen, vaginal fluid, and breast milk. The only way to tell if someone is infected with HIV is with a blood test. There is no vaccine to prevent HIV infection and no cure for AIDS. There are treatments that can keep infected people healthy longer and prevent diseases that people with AIDS often get. Research is ongoing. HIV slowly makes an infected person sicker and sicker. Someone with AIDS can feel fine in the morning and be very sick in the afternoon. It can seem like riding a roller coaster, slowly climbing up to feeling good, then plunging down into another illness.

*How HIV is spread?*

HIV is commonly spread by:

Having unprotected anal, vaginal, or oral sex with one who is infected with HIV.

Sharing needles or syringes ("works") with someone who is infected with HIV.

Mothers to their babies before the baby is born, during birth, or through breast- feeding.

Early in the AIDS epidemic some people became infected through blood transfusions, blood products (such as clotting factors given to people with hemophilia), or organ or tissue transplants. This has been very rare in the United States since 1985, when a test for HIV was licensed. Since then, all donated blood and donors of organs or tissue are tested for HIV.

*How HIV is NOT spread*

You don't get HIV from the air, food, water, insects, animals, dishes, knives, forks, spoons, toilet seats, or anything else that doesn't involve blood, semen, vaginal fluids, or breast milk. You don't get HIV from feces, nasal fluid, saliva, sweat, tears, and urine.



**Basic Medical Care and Communicable Diseases**

**Communicable Diseases**

* Everyone needs to learn universal health precautions.
* Infants and young children that spend time in group childcare have a higher number of illnesses than children at home.
* Those caring for young children experience increased illnesses.
* Caregivers and providers need to be aware of how diseases are spread.
* *A communicable disease is any bacteria, viral, or parasitic infection in the body that can be spread from one person to another.*

**Immunizations**

Diphtheria, Tetanus, & Pertussis

Why is getting vaccinated important to your health?

These are serious diseases caused by bacteria.

**Diphtheria** causes a thick covering in the back of the throat. It can lead to breathing problems, paralysis, and heart failure.

**Tetanus** (lockjaw) causes painful tightening of the muscles usually all over the body.

**Pertussis** (whooping cough) causes coughing so bad that it is hard for infants to eat, drink, or breathe.

**Rotavirus**

Measles, Mumps, and Rubella

All three diseases are highly contagious.

**Measles** starts as a fever, cough, runny nose, conjunctivitis (pinkeye), and a red, pinpoint rash that starts on the face and spreads to the rest of the body. If the virus infects the lungs, it can cause pneumonia. Measles in older children can lead to inflammation of the brain called encephalitis, which can cause seizures and brain damage.

**Mumps** usually causes swelling in glands just below the ears, giving the appearance of a chipmunk cheeks. Before the vaccine, mumps was the most common cause of both meningitis (inflammation of the lining of the brain and spinal cord), and acquired deafness in the U.S. In men, mumps can infect the testicles which can lead to infertility.

**Rubella** is also known as German Measles. It can cause a mild rash on the face, swelling of the glands behind the ears, and in some cases, swelling of the small joints and low-grade fever. Most children recover quickly with no long-lasting effects. But if a pregnant woman gets rubella, it can be devastating. If she’s infected during the first trimester of pregnancy, there’s at least a 20% chance her child will have a birth defect such as blindness, deafness, a heart defect, or mental retardation.

**Chicken Pox**

**Chickenpox (varicella)** is a contagious illness that causes an itchy rash and red spots or blisters (pox) all over the body. Chickenpox can cause problems of pregnant women, newborns, teens and adults, and people who have immune system problems that make it hard for the body to fight infection.

Chickenpox is **caused by the varicella-zoster virus and can spread easily.** You can get it from an infected person who sneezes, coughs, or shares food or drinks. You can also get it if you touch fluid from a chickenpox blister.

After you have had chickenpox, you aren’t likely to get it again. But the virus stays in your body long after you get over the illness. If the virus becomes active again, it can cause a painful viral infection called shingles.

**Rest and Sleep Needs**

Preschoolers need about 10-12 hours 1-3-year-old toddlers need about 10-13 hours of sleep

10-12 years need about 9 hours per night Teens need about 8-9½ hours per night.

**Results of Inadequate Sleep**

Irritable or hyper behavior Makes ADHD worse Decreased attentiveness

Decreased short term memory Inconsistent performance Delayed response

**Establishing a Bedtime Routine**

* Includes a winding down period with stories, snacks, etc.
* Stop the use of all electronic devices at least an hour or more ahead of bedtime. This will allow the brain the stat of down time prior to sleeping.
* Stick to a bedtime, alerting children 30 minutes and 10 minutes before
* Allow children to choose their pajamas or stuffed animals
* Consider soft, soothing music.
* Tuck into bed snugly for a feeling of security.

**Why Exercise**

Weight Control Healthy Heart Increase Muscle Tone

Increase Energy Decrease Stress Helps to Relax

**Exercise Checklist**

Daily exercises incorporated with good eating habits should be fun, doable, daily, vary, and for everyone.

**Healthy Eating**

Eating a variety of foods so that children get the nutrients (protein, carbohydrates, fats, vitamins and minerals) are needed for normal growth.

**How Much Food is Good for Kids?**

Children are born with an internal hunger gauge.

Offer nutritious food choices at meals and snack. You decide what, where, and when of eating.

Children can decide the How Much or even whether to eat.

**Healthy Snack Choices**

String Cheese Whole Wheat Crackers & Peanut Butter Low fat popcorn

Frozen Juice Bars Fruit and dried fruit Baby carrots Low-fat Yogurt

**Results of Eating Poorly**

Overweight and Underweight Lack of energy Lack of ability to concentrate

Anxious about food and eating Weaker immune system increases chances of illness

**Childhood Obesity**

Overworks heart and circulatory system

Shortness of breath – reduced capacity for physical exertion (sometime mental work)

Tendency toward high blood pressure

Tendency toward diabetes

Poor temperature Control

Increased strain on joints and ligaments

Increased susceptibility to infectious diseases

Decreases self-esteem – emotional health due to appearance

**Medical Treatment**

Children in care are required to have a check-up within 3 days of placement, a full complete physical within 30 days, dental scheduled within the first 30 days, and completed with 60 days of placement.

If the physical/dental/eye exams are one day past the due date, they are considered overdue.

The physical must be repeated every year unless otherwise instructed by a doctor.

The dental exam must be repeated every 6 months unless otherwise instructed by a doctor.

The eye exam must be repeated every year for children needing prescription eyewear. If a child does not require glasses, they can have their eye exam same time as they have their physical.

When taking a child to their appointments, remember to take their Medicaid card and a medical/dental report form for the doctor to sign.

When the appointment is over, give the medical/dental report to your case manager and it will then be filed in the child’s binder. You must also provide a copy to the CPS Caseworker.

**Medications**

***At no time should a child be given medication that was not prescribed for another child***.

Some older children may be allowed to participate in a physician approved self-medication program, however caregivers should instruct and assist these children to closely supervise these medicines and keep them out of reach of other children.

The adult who accompanied the child to the medical appointment is responsible for obtaining any prescribed or non-prescribed medication suggested by a physician.

Caregivers are responsible for identifying prescriptions needing to be refilled before they are completely empty. This should be done in a timely manner ensuring that the new medication will be filled before the old one is out.

**Medications**

All medications, prescription or non-prescription, must be immediately recorded on the appropriate medication log form.

If you administer the medication, you must sign the form. Do not sign for another person. Sign your name legibly in ink.

When the medication is completed, the foster parent is to note on the med log form “medication has been completed.”

If there are no refills on the label, caregivers should destroy the label of the empty bottle or container.

If a medication is discontinued by Physician’s orders, the medicine should be documented as discontinued and noted on the med log form. The medication should then be properly disposed.

**Medication Errors**

All medication errors must be documented. Examples are:

 Wrong medication given

 Incorrect amount given

Medication given too early or too late (earlier or later than a 60-minute period)

 Medication missed or forgotten completely.

What to do if you miss a med?

Call the child’s Psychiatrist and inform them that the child missed the medication and what if any adverse effects there will be.

Call a Pharmacist and inform them of the medications the child is taking and what if any adverse effects there will be.

Fill out an IR (Incident Report) about the medication error.

**Care of Teeth and Gums**

Keep teeth clean. Brush twice a day, floss, and brush tongue.

Regular dental exams. Tooth decay is the most common disease in the country.

Gum Disease – Pyorrhea – is progressive. Reddening and inflammation of gums, can result in loss of teeth and eventual erode the bone itself.

**Pinkeye (Conjunctivitis)**

Symptoms

Eye redness, swollen, red eyelids, more tearing than usual, feeling as if there is something in the eye, itching or burning feeling, mild sensitivity to light, drainage from the eye.

Causes

Infections by viruses or bacteria, dry eyes from lack of tears or exposure to wind or sun, chemicals, fumes, or smoke, allergies, foreign bodies such as dirt or bugs. Spread by poor handwashing and sharing an object with an infected person.

Treatment

Most pinkeye is caused by viruses for which there is usually no medical treatment. Preventing the spread is important. Bacterial pinkeye can be treated with an antibiotic and the person can return to school/work 24 hours after treatment is begun.

**Eyes and Ears**

A routine eye screening is provided as part of the child’s annual physical. If a more thorough eye exam is required, make an appointment with any Medicaid approved optician.

Routine vision and hearing screenings are provided in some schools.

Pay attention to a child who seems to have difficulty hearing and vision, and have it checked.

**Ear Infections**

The middle ear gets infected when germs from a col are trapped there.

Symptoms: Earache, sometimes a fever, thick yellow fluid coming from the ears.

Treatment: Most earaches go away on their own. Pain relievers, a warm washcloth or heating pad on the ear helps relieve the pain.

Prevention: For adults, do not smoke. For children/toddlers/babies, do not let the child go to bed sucking on a bottle.

**Parasites: Lice or Scabies**

There are *three types of lice, head, pubic, and body*. All are transmitted by close body contact with an infected person or contact with shared items. *Nits (lice eggs)* are white and tear drop shaped. Treating head lice can be time consuming. There are over the counter medicated treatments, carious home remedies, and in worst cases, prescribed medications. Getting rid of head lice can be difficult. It involves washing everything, treat and nik pick daily, wash and dry hair before bedtimes, heat and sanitize bedding, sofas, and linens. You can also use chemical sprays on carpets and larger items.

*Scabies* are much tinier than lice – they burrow into your skin. Tell-tale tracks are small lines in the skin that look like little scratches. Scabies cause intense itching from the eggs and droppings they leave under your skin. Scratching leads to infection. Prevention is a matter of avoidance and must be treated to cure.

**Fever**

Fever occurs when the body’s “thermostat” in response to an infection, illness, or some other cause. Children whose temperatures are lower than 102 degrees usually don’t require medication unless they’re uncomfortable. If your infant, 3 months old or younger has a rectal temperature of 100.4 degrees or higher, call the doctor or go to the emergency room.

**Taking a Child’s Temperature**

Digital thermometers are the quickest and most accurate. (oral, rectal, axillary).

Electronic ear thermometers – measure tympanic temperatures (not as accurate for very young children)

Plastic strip, forehead, pacifier thermometers will tell you if they have a fever but are not as accurate. Glass mercury thermometers are no longer recommended.

**How can you help the child with a fever feel better?**

Give acetaminophen or ibuprofen based on the package recommendations for age or weight.

**Never give aspirin to a child under 12!**

Give the child a sponge bath with lukewarm water. **Never use rubbing alcohol, ice packs or cold baths!**

Dress the child in lightweight clothing and cover with a light sheet.

Make sure the room is at a comfortable temperature.

Offer the child plenty of fluids to avoid dehydration. Avoid drinks with caffeine and limit the intake fruits and apple juice.

Give electrolytes for vomiting and diarrhea. Do not give sports drinks to younger children (the added sugar makes the diarrhea worse)

Let the child eat what he wants, in reasonable amounts, but don’t force eating.

Make sure the child has plenty of rest. Keep the child home from school until temperature is normal for 24 hours.

**When to Call the Doctor**

Infants 3 month and younger with 100.4 degrees or more and an older child with 104 degrees or more.

Also call if the child has a fever of less than 104 degrees, if the child:

Refuses fluids or seems too ill to drink adequately

Has signs of dehydration

Has fever for 72 hours (child over 2 years) or 24 hours for a child under 2 years

Has recurrent fever

 Has persistent diarrhea or repeated vomiting

 Has a specific complaint (sore throat, etc.)?

**Seek Emergency Care if the Child**

Stiff neck Severe headache Limpness and refusal to move

Difficulty breathing Leaning forward/drooling Seizure

Breathing emergencies Significant injuries Loss of blood

Broken bones Injured joints Burns

Sudden illness Unexplained loss of consciousness

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Make sure the child has plenty of rest.

Keep him home from school until temperature is normal for 24 hours.

**Care for Vomiting**

If a child vomits once or twice without other signs of illness, it can probably be treated at home.

Give him clear liquids in small amounts. Slowly increase fluids as he is able to keep them down.

Add soft, bland foods slowly. Gradually work up to his normal diet.

Call the Doctor if:

Call if the vomiting increase or gets worse.

Call if the child is vomiting and also has stomach pain.

Call if the child is dehydrated. Look for symptoms of dehydration.

Call if vomit is green or if there is blood in the vomit.

**Diarrhea**

Minor infections might cause loose stools. Most can be treated at home.

Give the lots of fluids. Call if he/she has many loose stools. Call if there is blood in the stools.

Call if the child is dehydrated. Call if a newborn has more that 6-8 watery stools a day.

**Dehydration**

A young child or infant should urinate at least every 6 hours.

An older child should urinate at least 3 times every 24 hours.

Symptoms: dry mouth, dry lips, dry skin, no tears, dark colored urine, weight loss, decreased energy, or a sunken soft spot on an infant’s headed.

**Shigella Infections**

***Symptoms*:** Loose watery stools (mild case) to dysentery, abdominal cramps, high fever, loss of appetite, nausea , vomiting, and diarrhea which contains mucus and blood. This is very contagious. It is passed through Shigella bacteria in stools. Anything that comes in contact (toilet, toys etc.) can pass the infection for about 4 weeks after the outbreak.

***Prevention:*** Frequent and careful hand washing with soap. Clean and disinfect the toilet after someone with shigella has used it.

Disposed of diapers properly and disinfect the charging area, Proper handling storage and preparation of food-prevent bacterial growth.

***Treatment:***Antibiotic, as prescribed by a doctor.Do not give the child nonprescription medicines for vomiting or diarrhea unless the doctor recommends them because they can prolong the illness and prevent dehydration.

**Rashes**

Call the Doctor if: The child has a fever and a rash, A rash covers a large area of body, A rash hurts, swells, oozes fluids, or appears infected, the rash affects the child’s genital or face, or an extreme case of poison ivy or other allergic reaction.

**Colds**

Colds are usually minor. Most cannot be treated with antibiotics. Treat the symptoms to help the child feel better. Call the doctor if there is an earache or difficulty breathing. Call is symptoms worsen after 3-5 days or last 10-14 days.

**The Flu**

Offer plenty of fluids. Encourage plenty of rest. Give acetaminophen or ibuprofen.

Dress the child in layers. Wash hands thoroughly and often Seen by doctors as soon as possible.

Medication can be prescribed to a shorten the duration, but there is a limited time frame from the onset of symptoms to the time the medication is administered for it to be effective.

**Bloodborne Pathogens and Communicable Diseases Quiz**

1. Name 3 common types of bloodborne pathogens.
	1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 3) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Some diseases can spread through air ............................................ True/False
3. Children and older adults are more at risk for infection .................. True/False
4. You can get hepatitis B from another person’s blood ..................... True/False

1. You can get vaccinated to protect against hepatitis B ..................... True/False
2. You can get HIV/AIDS from another person’s sweat. ...................... True/False
3. *Hepatitis C* is NOT spread by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hugging, kissing, food or water, sharing eating utensils or drinking glasses, casual contact, sneezing, coughing.
4. HIV is in people's blood, semen, vaginal fluid, and \_\_\_\_\_\_\_\_\_\_\_ milk.
5. HIV is commonly spread by \_\_\_\_\_\_\_\_\_\_ to their \_\_\_\_\_\_\_\_\_ before the baby is born, during birth, or through breast- feeding.
6. What is a communicable disease? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.
7. Give a brief description of the following:

Diptheria \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tetanus \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Pertusis \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Measles \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mumps \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Rubella \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chicken Pox \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Lice. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Shingles \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Children in care are required to have a check-up within \_\_\_\_ days of placement, a full complete physical within \_\_\_ days, dental scheduled within the first \_\_\_ days, and completed with \_\_\_ days of placement.
2. Besides calling the doctor when an infant has a fever 100.4 or a child has a fever of 104 or more, list 6 other possible times you would call the doctor for safety precautions.

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. A young child or infant should urinate at least every \_\_\_ hours.
2. An older child should urinate at least \_\_\_ times every 24 hours.
3. The primary function of the medical consenter is: *(Complete the essay answer in 20-30 words.)*

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1. The primary function of the back-up medical consenter is: *(Complete the essay answer in 10-20 words.)*

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