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INTRODUCTION

Acquired Immunodeficiency Syndrome (AIDS), Hepatitis B (HBV), and Hepatitis C (HCV) warrant serious concerns for workers occupationally exposed to blood and certain other body fluids that contain Bloodborne pathogens. It is estimated that more than 5.6 million workers in health care and public safety occupations could be potentially exposed. In recognition of these potential hazards, the Occupational Safety and Health Administration (OSHA) has implemented a regulation [Bloodborne Pathogens 29 Code of Federal Regulations (CFR) 1910.1030] to help protect workers from these health hazards.

The major intent of this regulation is to prevent the transmission of Bloodborne diseases within potentially exposed workplace occupations. The standard is expected to reduce and prevent employee exposure to the Human Immunodeficiency Virus (HIV), Hepatitis B Virus (HBV), Hepatitis C Virus (HCV), and other Bloodborne diseases. The Occupational Safety and Health Administration (OSHA) estimates the standard could prevent more than 200 deaths and about 9,000 infections per year from HBV alone. The standard requires that employers follow universal precautions, which means that all blood or other potentially infectious material must be treated as being infectious for HIV, HBV and HCV. Each employer must determine the application of universal precautions by performing an employee exposure evaluation. If employee exposure is recognized, as defined by the standard, then the standard mandates a number of requirements. One of the major requirements is the development of an Exposure Control Plan, which mandates engineering controls, work practices, personal protective equipment, HBV vaccinations and training. The standard also mandates practices and procedures for housekeeping, medical evaluations, hazard communication, and recordkeeping.



INTRODUCTION

For Public Sector Employers, you may contact the following State Labor Department Public Employee Safety and Health District Office:

Albany	(518)	457-5508
Binghamton	(607)	721-8211
Buffalo	(716)	847-7133
Garden City	(516)	228-3970
New York City	(212)	621-0773
Rochester	(716)	258-4570
Syracuse	(315)	479-3212
Utica	(315)	793-2316
White Plains	(914)	997-9528



POLICY

The State University of New York at Potsdam is committed to provide a safe and healthy work environment for our students, faculty and staff. In pursuit of this endeavor, the following Exposure Control Plan (ECP) is provided to eliminate or minimize occupational exposure to Bloodborne pathogens in accordance with OSHA Bloodborne Pathogens Standard, Title 29 Code of Federal Regulations 1910.1030.

The ECP is a key document to assist SUNY Potsdam in implementing and ensuring compliance with the standard, thereby protecting our staff. This ECP includes:

- Employee exposure determination
- > The procedures for evaluating the circumstances surrounding an exposure incident, and
- > The schedule and method for implementing the specific sections of the standard, including:
 - Methods of compliance
 - o Hepatitis B vaccination and post-exposure follow-up
 - o Training and communication of hazards to employees
 - Recordkeeping

Exposure Control Plan developed by:

Patrick M. O'Brien, Director Environmental Health & Safety Suite 204 Raymond Hall SUNY Potsdam Potsdam, NY 13676 (315) 267-2596 Email: obrienpm@potsdam.edu

Signature or Initials _____ Date _____



Reviewed/Revised Dates:

Signature or Initials	Date
Signature or Initials	Date



PROGRAM ADMINISTRATION

- The Director of Environmental Health & Safety is responsible for the implementation of the ECP. They will maintain and update the written ECP at least annually and whenever necessary to include new or modified tasks and procedures.
- Those employees who are reasonably anticipated to have contact with or exposure to blood or other potentially infected materials are required to comply with the procedures and work practices outlined in this ECP.
- > The Head Janitor and Supervising Cleaner will have the responsibility for written housekeeping protocols and will ensure that effective disinfectants are purchased.
- The Director of Student Health Services will be responsible for ensuring that all medical actions required are performed and that appropriate medical records are maintained.
- The Director of Environmental Health & Safety will be responsible for training, documentation of training, and making the written ECP available to employees, PESH and NIOSH representatives.
- Environmental Health & Safety will maintain and provide all necessary personal protective equipment (PPE), engineering controls (i.e., sharp containers, etc.), labels, and red bags as required by the standard and will ensure that adequate supplies of the aforementioned equipment are available.
- The Director(s) of Environmental Health & Safety and Student Health Services will be responsible for the consideration and implementation of appropriate commercially available and effective safer medical devices to eliminate or control occupational exposure (To be performed at least annually)



ADMINISTRATIVE CONTACT LIST

- Director of Environmental Health & Safety (EHS)
 - Patrick O'Brien
 - Suite 204 Raymond Hall
 - o (315) 267-2596
 - Email: <u>obrienpm@potsdam.edu</u>

Director of Student Health Services

- Tracy Harcourt
- Van Housen Hall
- o (315) 267-2377
- Email: <u>harcoutj@potsdam.edu</u>

University Police *ALL EMERGENCIES*

- Timothy Ashley
- o Van Housen Hall
- o (315) 267-2222
- Email: <u>ashleytm@potsdam.edu</u>
- Director of Human Resources
 - Melissa Proulx
 - Raymond Hall
 - o (315) 267-2084
 - Email: proulxme@potsdam.edu



I. EMPLOYEE EXPOSURE DETERMINATION

A. As part of the exposure determination section of our ECP, the following is a list of <u>ALL</u> job classifications at our establishment in which all employees have occupational exposure:

Job Title	Department	Location
University Police Officer	University Police	Van Housen/Various
Lieutenant University Police	University Police	Van Housen/Various
Chief of University Police	University Police	Van Housen/Various
Registered Nurse	Student Health Services	Van Housen
Director of Student Health	Student Health Services	Van Housen
License Practical Nurse	Student Health Services	Van Housen
Athletic Trainer	Athletics	Maxcy Hall
Lifeguards	Athletics	Maxcy Hall
Pumbers	Physical Plant	Various

B. The following is a list of job classifications in which <u>SOME</u> of the employees on our campus have a risk of occupation exposure. Included is a job title, location and task listing where the potential exposure could occur:

Job Title	Department	Location	Tasks
Cleaners	Physical Plant	Various	General cleaning across the campus



- **C.** The following is a list of special instances where protective actions and follow through will be provided or will cause to be provided:
- Contract employees
 - In the event that a contractor is brought in to provide services involving materials or tasks which may subject them to possible occupational exposure Environmental Health & Safety will provide related exposure information to the contract firm before any work is to take place.
- "Good Samaritan" acts
 - Post-exposure evaluation and follow-up will be offered in all cases where a "Good Samaritan" act results in exposure to blood or other potentially infectious materials from assisting a fellow employee (i.e., assisting a co-worker with a nosebleed, giving CPR or first aid).

All exposure determinations for A & B were made without regard for the use of Personal Protective Equipment (PPE).

II. EFFECTIVE DATES-CODE OF FEDERAL REGULATIONS

Bloodborne Pathogens Standard (Including Universal Precautions)	March 6, 1992
Exposure Control Plan	May 5, 1992
Recordkeeping	June 4, 1992
Information and Training	June 4, 1992
Methods of Compliance (Except Universal Precautions)	July 6, 1992
Hepatitis B Vaccination and Post-Exposure Evaluation and Follow-Up	July 6, 1992
Labels and Signs	July 6, 1992
Bloodborne Pathogens Standard Revised	
Occupational Exposure to Bloodborne Pathogens; Needle stick and	
other Sharps Injuries;	
Final Rule - January 18, 2001	
Effective date of revisions - April 18, 2001	

The methods of implementation of these elements of the Code are discussed in the subsequent pages of this Exposure Control Plan.



III. METHODS OF IMPLEMENTATION AND CONTROL

1.0 Universal Precautions

1.1 As of March 6, 1992, all employees will utilize Universal Precautions. Universal Precautions is an infection control method which requires employees to assume that all human blood and specified human body fluids are infectious for HIV, HBV HCV and other Bloodborne pathogens (see Appendix A) and must be treated accordingly.

2.0 Exposure Control Plan (ECP)

- 2.1 Employees covered by the Bloodborne Pathogens Standard will receive an explanation of this ECP during their initial training sessions. It will also be reviewed in their annual refresher training. All employees will have an opportunity to review this Plan at any time during their work shifts by contacting Environmental Health and Safety (Ext. 2519). Employees seeking copies of the Plan may contact Laurie Dustin (Ext. 2519). A copy of the plan will be made available free of charge and within 15 days of the request. Copies of the plan will also be available for download by visiting the Environmental Health & Safety page of the SUNY Potsdam Faculty & Staff website at https://www.potsdam.edu/about/safety/ehs.
- 2.2 The Director of Environmental Health & Safety will also be responsible for reviewing and updating the ECP annually or sooner if necessary to reflect any new or modified tasks and procedures which affect occupational exposure and to reflect new or revised employee positions with occupational exposure. SUNY Potsdam Human Resources will provide to Environmental Health and Safety a roster of new hires as well as exiting employees and their job title to assist in this effort.
- **2.3** The annual exposure control plan update will also include the following elements:
 - 1. Any new technologies (e.g. engineering controls or work procedures) that reduce or eliminate exposure.
 - 2. Documentation of how the employer considered and implemented the use of available safe medical devices, including:



- 1. A list of devices or procedures that were considered;
- 2. A description of the method(s) used to evaluate each device or procedure;
- 3. A summary of the results of each evaluation.
- 4. A statement of the reasons why each particular device or procedure was selected or rejected.
- 3. Documentation on how employer solicited employee involvement in the identification, evaluation, and collection of effective engineering and work practice controls. Such input will be solicited from non-managerial employees who are responsible for direct patient care and are potentially exposed to injuries from contaminated sharps.

3.0 Engineering Controls and Work Practices

In the control of occupational exposure to Bloodborne pathogens, the use of effective engineering controls, to include safer medical devices, work practices, administrative controls and personal protective equipment, is emphasized.

- **3.1** Engineering controls and work practice controls will be used to prevent or minimize exposure to Bloodborne pathogens.
 - **3.1.1** The specific engineering controls and workplace practices we will use and where they will be used (if applicable) are listed below:
 - Sharps containers will be placed throughout areas with a high probability of use such as health services, university police and/or any area where they are requested for employee use.
 - Proper PPE will be made available to all employees working in job functions in which there is inherent risk of an occupational exposure to human blood or other bodily fluids which may carry pathogens. (See I: Employee Exposure Determination). PPE may include, but is not limited to:
 - o Goggles/Safety Glass
 - Nitrile Gloves
 - Face Masks & Shields
 - N-95 Respirators
 - o Surgical Gowns or Aprons



- Prior to being issued the above listed equipment employees will be required to attend an initial training program (As outlined later in this document) or, if applicable, will have complete their most recent annual refresher training on proper PPE use and work place best practices to avoid occupational exposures and minimize the risk.
- Environmental Health & Safety in conjunction with Facilities will survey each campus building annually and subsequently, as needed, to ensure proper placement and availability of hand sanitizing and washing stations.
 - Subsequent reevaluation will take place as triggered by the following:
 - Discontinuance of use of building
 - Reopening of buildings for any reason
 - Change in occupancy class or use
 - These stations may include, but are not limited to:
 - Wash sinks
 - Wall-mount hand sanitizer dispensers
 - Wall-mount foaming cleaner dispensers
 - Free-standing hand sanitizer dispensers
- Promoting proper hygiene and hand washing through education and signage in areas where occupational exposure to bloodborne pathogens is possible.
- Emphasizing the need to wash hand immediately upon removing gloves through education and signage where applicable.
- Where there is even the remote possibility of an occupational exposure to blood or other bodily fluids eating, drinking, smoking, applying cosmetics (To include chapstick, lip balm, etc.) or inserting or removing contact lenses will be prohibited. This will be address in both initial and recurrent training.
- The storage of food and/or beverages will be strictly forbidden in any refrigerator, cabinet, shelf, closet or other similar storage area where blood or other bodily fluids are kept. Signage will be posted in each area listed to ensure compliance.
- Student Health Services will utilize self-sheathing needles as well as needleless IV systems in order to minimize risk.
- Student Health Services will initially train and annually refresh each employees in regards to policies prohibiting recapping or bending needles, shearing or breaking needles, and other applicable prevention practices as may be deemed necessary by the Director of Student Health Services.
- Student Health Services has instituted medical best practices to ensure any work done with, in or around blood or other potentially infectious materials is done in a manner designed to minimize or eliminate splatter, splashing and spills of said material.



Further, all storage of said materials will be in an approved container designed to eliminate breakage and spills.

New technology for needles and sharps will be evaluated and implemented whenever possible to further prevent accidental needle sticks and cuts. Our sharps containers will be inspected and maintained or replaced by an Environmental Health & Safety Technician on a monthly basis. Disposal of sharps will be coordinated with the Director of Student Health Services.

Examples of engineering controls include, but are not limited to:

- Self-sheathing needles
- Puncture-resistant disposal containers for contaminated sharps, orthodontia wire, or broken glass
- Mechanical needle recapping devices
- Bio-safety cabinets
- Ventilated laboratory hoods
- Needleless injection system
- Needleless IV access systems
- Retractable scalpels

Examples of work practice controls include, but are not limited to:

- Providing readily accessible hand washing facilities
- > Washing hands immediately or as soon as feasible after removal of gloves
- At non-fixed sites (i.e., emergency scenes, mobile blood collection sites) which lack hand washing facilities, providing interim hand washing measures, such as antiseptic towelettes and paper towels. Employees can later wash their hands with soap and water as soon as feasible
- Washing body parts as soon as possible after skin contact with blood or other potentially infectious materials occurs
- Prohibiting the recapping or bending of needles
- > Shearing or breaking contaminated needles in prohibited
- Labeling of containers and/or storage vessels
- Equipment decontamination
- Prohibiting eating, drinking, smoking, applying cosmetics or lip balm and handling contact lenses in work areas where there is a likelihood of occupational exposure



- Prohibiting food and drink from being kept in refrigerators, freezers, shelves, cabinets or on counter tops or bench tops where blood or other potentially infectious materials are present
- Requiring that all procedures involving blood or other potentially infectious materials shall be performed in such a manner so as to minimize splashing, splattering, and generation of droplets of these substances.
- Placing specimens of blood or other potentially infectious materials in a container which prevents leakage during collection, handling, processing, storage, transport or shipping
- Examining equipment which may become contaminated with blood or other potentially infectious materials prior to servicing or shipping and decontaminating such equipment as necessary. Items will be labeled per the standard if not completely decontaminated



4.0 **Personal Protective Equipment (PPE)**

4.1 Personal protective equipment must be used if occupational exposure remains after instituting engineering and work practice controls, or if controls are not feasible. Training will be provided/arranged by Environmental Health & Safety in the use of the appropriate personal protective equipment for employees' specific job classifications and tasks/procedures they will perform.

Additional training will be provided, whenever necessary, such as if an employee takes a new position or if new duties are added to their current position.

Appropriate personal protective equipment is required for the following tasks; the specific equipment to be used is listed after the task:

- I. Task Listing
 - a. Patient exams and contact
 - i. Equipment
 - 1. Medical gown, bouffant covert, gloves, eye protection and hand sanitizer.
 - ii. Who is responsible?
 - 1. Ordered through Environmental Health & Safety by Director of Student Health Services and distributed as needed on a daily basis. All items to be stored in an area readily accessible to all employees who MIGHT perform these tasks.
 - b. Clean-up of blood or other bodily fluids
 - i. Equipment
 - 1. Medical gown, bouffant covert, gloves, chemical resistant apron, eye protection and hand sanitizer.
 - ii. Who is responsible?
 - 1. Ordered through Environmental Health & Safety by the Supervising Cleaner and distributed as needed on a daily basis. All items to be stored in an area readily accessible to all employees who MIGHT perform these tasks.
 - c. Athletic Trainers Athlete Contact
 - i. Equipment
 - 1. Face shields, gloves, and hand sanitizer.
 - ii. Who is responsible?



- 1. Ordered through Environmental Health & Safety by the head athletic trainer and distributed as needed on a daily basis. All items to be stored in an area readily accessible to all employees who MIGHT perform these tasks.
- d. University Police Individual Contact
 - i. Equipment
 - 1. Eye protection, gloves, face shields and hand sanitizer.
 - ii. Who is responsible?
 - 1. Ordered through Environmental Health & Safety by the Chief of Police and distributed as needed on a daily basis. All items to be stored in an area readily accessible to all employees who MIGHT perform these tasks.
- e. Physical Plant Plumbing Duties
 - i. Equipment
 - 1. Eye protection, gloves, and hand sanitizer.
 - ii. Who is responsible?
 - 1. Ordered through Environmental Health & Safety by the head of the Physical Plant and distributed as needed on a daily basis. All items to be stored in an area readily accessible to all employees who MIGHT perform these tasks.
- 4.2 As a general rule, all employees using PPE must observe the following precautions:
 - Wash hands immediately or as soon as feasible after removal of gloves or other personal protective equipment.
 - Remove protective equipment before leaving the work area and after a garment becomes contaminated.
 - Place used protective equipment in appropriately designated areas or containers when being stored, washed, decontaminated, or discarded. Any piece of clothing or PPE which is soiled with blood or other bodily fluid will be "red bagged" as a biohazard and disposed of with the guidance of Student Health Services.



- Wear appropriate gloves when it can be reasonably anticipated that you may have contact with blood or other potentially infectious materials and when handling or touching contaminated items or surfaces. Replace gloves if torn, punctured, contaminated, or if their ability to function as a barrier is compromised.
- Following any contact of body areas with blood or any other infectious materials, you must wash your hands and any other exposed skin with soap and water as soon as possible. Employees must also flush exposed mucous membranes (eyes, mouth, etc.) with water.
- Utility gloves may be decontaminated for reuse if their integrity is not compromised and provided the gloves have not come into contact with blood or other bodily fluids. The decontamination procedure will conform to the manufacturer's recommendations. Discard utility gloves when they show signs of cracking, peeling, tearing, puncturing, or deterioration.
- Never wash or decontaminate <u>disposable</u> gloves for reuse or before disposal.
- Wear appropriate face and eye protection such as a mask with glasses with solid side shields or a chin-length face shield when splashes, sprays, splatters, or droplets of blood or other potentially infectious materials pose a hazard to the eye, nose, or mouth.
- If a garment is penetrated by blood and other potentially infectious materials, the garment(s) must be removed immediately or as soon as feasible. If a pullover scrub (as opposed to scrubs with snap closures) becomes minimally contaminated, employees should be trained to remove the pull-over scrub in such a way as to avoid contact with the outer surface; e.g., rolling up the garment as it is pulled toward the head for removal. However, if the amount of blood exposure is such that the blood penetrates the scrub and contaminates the inner surface, not only is it impossible to remove the scrub without exposure to blood, but the penetration itself would constitute exposure. It may be prudent to train employees to cut such a contaminated scrub to aid removal and prevent exposure to the face.
- > Repair and/or replacement of PPE will be at no cost to employees.



4.3 **PPE Ordering**

4.1 Environmental Health & Safety shall be the central point on campus for ordering, inventory and distribution of all personal protective equipment. Orders shall be place monthly, no later than the 15th of each month using the appropriate form (Appendix H) and submitted to <u>ppe@potsdam.edu</u>.

In the event of an emergency or emerging need due to any factor the employee's supervisor will notify the Director of EHS immediately of that need so that proper inventory can be distributed before any work covered under this plan can resume.

Refer to Appendix H for additional information on PPE or visit <u>https://www.potsdam.edu/about/safety/ehs</u> to find a form fillable PDF version of the order form.

5.0 Training

5.1 All employees who have or are reasonably anticipated to have occupational exposure to Bloodborne pathogens will receive training conducted by Environmental Health & Safety. Training will be provided at the time of initial assignment to tasks where occupational exposure may occur and an annual refresher shall be provided subsequently.

Environmental Health & Safety will provide training on the epidemiology of Bloodborne pathogen diseases. Fact Sheets, located in the Appendix Section, and a multimedia presentation will be used to inform employees of the epidemiology, symptoms, and transmission of Bloodborne diseases. All training shall be conducted by a trainer who is experienced, knowledgeable and qualified in the subject area. In addition, the training program will cover, at a minimum, the following elements:

- ➤ A copy and explanation of the standard
 - Paper and electronic copies will be available
- > Epidemiology and symptoms of Bloodborne pathogens
- Modes of transmission
- > Our Exposure Control Plan and how to obtain a copy
 - Copies of plan to be made available both in writing and/or may be downloaded at <u>https://www.potsdam.edu/about/safety/ehs</u>.



- Methods to recognize exposure tasks and other activities that may involve exposure to blood
- > Use and limitations of Engineering Controls, Work Practices, and PPE
 - Hands-on component to review the proper donning, doffing and disposal of PPE.
- > PPE types, use, location, removal, handling, decontamination, and disposal
- PPE the basis for selection
- Hepatitis B Vaccine offered free of charge. Training will be given prior to vaccination on its safety, effectiveness, benefits, and method of administration. (See Appendix O)
- > Emergency procedures for blood and other potentially infectious materials
- Exposure incident procedures
- Post-exposure evaluation and follow-up
- Signs and labels and/or color coding
- Question and answer session

A copy of the training presentation can be found in Appendix B1.

Annual training for all employees shall be provided within one year of their previous training. An Employee Education and Training Record (see Appendix B) will be completed for each employee upon completion of training. This document will be kept with the employee's records at Environmental Health & Safety at Raymond Hall Suite 204.



TRAINING PROGRAM ELEMENTS

Highlights of Training Program Elements

- Contents of standard
- Epidemiology of Bloodborne diseases
- Exposure Control Plan
- Job duties with exposure
- Types of control
- Protective equipment
- Hepatitis B vaccination program
- Emergency procedures
- Post-exposure procedures
- Signs/labels/(color coding)
- Question and answer session





6.0 Hepatitis B Vaccination

- 6.1 SUNY Potsdam will provide information on Hepatitis B vaccinations addressing its safety, benefits, efficacy, methods of administration and availability. A general overview of these considerations is given in Appendix L for review. The Hepatitis B vaccination series will be made available at no cost within 10 days of initial assignment to employees who have occupational exposure to blood or other potentially infectious materials unless:
 - The employee has previously received the series
 - Antibody testing reveals that the employee is immune
 - Medical reasons prevent taking the vaccination
 - > The employee chooses not to participate

All employees are strongly encouraged to receive the Hepatitis B vaccination series. However, if an employee chooses to decline HB vaccination, then the employee must sign a statement to this effect.

Employees who decline may request and obtain the vaccination at a later date at no cost. Documentation of refusal of the HB vaccination (see Appendix C1) will be kept in the employee's file in Human Resources with the employee's other medical records.

Employees who decline to receive the vaccination based on previously having the vaccination shall be required to sign the declination as described above.

Appendix C is an optional form that may be used to record the employee vaccination series information.

Note: To ensure employees are aware of the importance of the Hepatitis B vaccination, it is necessary to thoroughly discuss the efficacy, safety, methods of administration, benefits of the vaccination, the fact that it is given at no cost, and during work hours.





HEPATITIS B VACCINATION

Highlights of Hepatitis B Vaccination Other Requirements

- o Participation in Pre-screening is not a prerequisite for receiving Hepatitis B vaccination
- Hepatitis B vaccination provided even if employee declines but later accepts treatment
- Employee must sign statement when declining HB vaccination
 - Vaccination administered in accordance with the latest United States Public Health Service (USPHS) recommended protocol
 - HB vaccination booster doses must be available to employees if recommended by USPHS
 - Current USPHS recommendations concerning antibody tests



7.0 Post Exposure Evaluation and Follow-up and Procedures for Reporting, Documenting and Evaluating the Exposure

7.1 Should an exposure incident occur contact University Police immediately at X-2222 (315-267-2222) after thoroughly washing the affected area. Each exposure must be documented by the employee on an "Exposure Report Form" (see Appendix D). Environmental Health & Safety will add any additional information as needed.

An immediately available confidential medical evaluation and follow-up will be conducted by Canton-Potsdam Hospital, 50 Leroy Street, Potsdam, NY 13617. The following elements will be performed:

- Document the routes of exposure and how exposure occurred.
- □ Identify and document the source individual (see Appendix E), unless the employer can establish that identification is infeasible or prohibited by State or local law (See Note #1).
- □ Obtain consent (See Note #2) and test source individual's blood as soon as possible to determine HIV, HBV, and HCV infectivity and document the source's blood test results.
- □ If the source individual is known to be infected with either HIV, HBV or HCV testing need not be repeated to determine the known infectivity.
- □ Provide the exposed employee with the source individual's test results and information about applicable disclosure laws and regulations concerning the source identity and infectious status.
- □ After obtaining consent, collect exposed employee's blood as soon as feasible after the exposure incident and test blood for HBV, HIV, and HCV serological status.
- □ If the employee does not give consent for HIV serological testing during the collection of blood for baseline testing, preserve the baseline blood sample for at least 90 days (See Note #3).
- Post exposure prophylaxis, when medically indicated, as recommended by the U.S.
 Public Health Service.
- \Box Counseling.
- □ Evaluation of reported illnesses.

Appendix D "Exposure Incident Report" and Appendix E "Request for Source Individual Evaluation" and Appendix F "Employee Exposure Follow-Up Record" (see Note #4) will be



provided to the employee so they may bring them along with any additional relevant medical information to the medical evaluation. Original copies of these appendixes will be maintained with the employee's medical records.

The Director of Environmental Health & Safety will review the circumstances of the exposure incident to determine if procedures, protocols, and/or training need to be revised. This review shall include:

- > Engineering controls in use at the time
- Whether safe work practices were followed
- Description of the device being use (Type and Brand)
- Description of the PPE and/or clothing that was being worn at the time of the exposure
- Location of the incident
- > Task being performed at the time of the exposure
- Employee's training record

NOTE: This review is NOT done for the purpose of disciplinary action but rather to ensure that training, practices and engineering controls are sufficient to prevent a recurrence of the incident in the future.

Notes:	
Note #1	Public Health Law (Article 27-F) requires information about AIDS and HIV to be kept confidential. This law requires that anyone receiving an HIV test MUST sign a consent form first. The law strictly limits disclosure of HIV-related information. When disclosure of HIV-related information is authorized by a signed release, the person who has been given the information MUST keep it confidential. Re-disclosure may occur with another authorized signed release. The law only applies to people and facilities providing health or social services.
Note #2	If consent is not obtained, the employer must show that legally required consent could not be obtained. Where consent is not required by law, the source individual's blood, if available, should be tested and the results documented.
Note #3	If, during this time, the exposed employee elects to have the baseline sample



Notes:	
	tested, testing shall be done as soon as feasible.
Note #4	Appendixes D, E, and F are optional forms which have been provided to assist employers with gathering information that is required by the standard. If an employer chooses not to use these forms, this information must still be provided and recorded in accordance with the Standard. Also note that Appendix E letter predominately will apply to Public Sector employers.
Note #5	Following an exposure incident, prompt medical evaluation and prophylaxis is imperative. Timeliness is, therefore, an important factor in effective medical treatment.





POST EXPOSURE EVALUATION

Highlights of Post Exposure Evaluation and Follow-Up Requirements

- Documentation of exposure routes and how exposure incident occurred
- Identification and documentation of source individual's infectivity, if possible
- Collection and testing of employee's blood for HBV, HCV, and HIV serological status (employee's consent required)
- Post-exposure prophylaxis when medically indicated
- Counseling
- Evaluation of reported illness



8.0 Health Care Professionals

- **8.1** SUNY Potsdam EHS will ensure that health care professionals responsible for employee's HB vaccination and post-exposure evaluation and follow-up be given a copy of the OSHA Bloodborne Standard. SUNY Potsdam EHS will also ensure that the health care professional evaluating an employee after an exposure incident receives the following:
 - > Description of the employee's job duties relevant to the exposure incident
 - Route(s) of exposure
 - Circumstances of exposure
 - ➤ If possible, results of the source individual's blood test; and
 - Relevant employee medical records, including vaccination status

8.2 Healthcare Professional's Written Opinion

Human Resources will provide the employee with a copy of the evaluating healthcare professional's written opinion within 15 days after completion of the evaluation.

For HB vaccinations, the healthcare professional's written opinion will be limited to whether the employee requires or has received the HB vaccination.

The written opinion for post-exposure evaluation and follow-up will be limited to whether or not the employee has been informed of the results of the medical evaluation and any medical conditions which may require further evaluation and treatment.

All other diagnoses must remain confidential and not be included in the written report to our firm.

All employee post-exposure evaluations MUST remain confidential.



9.0 Housekeeping

9.1 The Supervising Cleaner and Head Janitor have developed and implemented a written schedule for cleaning and decontaminating work surfaces as indicated by the standard.

AREA	SCHEDULE	CLEANERS &	NOTES
	CLEANING	DISINFECTANTS	
	(DAY/TIME)	USED*	
Physical Plant	M-F 0800-1600	Fulsan II/ES15	Supplies stocked in
			janitorial supply in
			each area. Dial X2675
			for resupply
Heating Plant	M-F 0800-1600	Fulsan II/ES15	Supplies stocked in
			janitorial supply in
			each area. Dial X2675
			for resupply
Academic Quad	7 Days 0800-2400	Fulsan II/ES15	Supplies stocked in
			janitorial supply in
			each area. Dial X2675
			for resupply
Residence Halls	7 Days 0800-2400	Fulsan II/ES15	Supplies stocked in
			janitorial supply in
			each area. Dial X2675
			for resupply
Sports Complex	7 Days 0800-1600	Fulsan II/ES15	Supplies stocked in
			janitorial supply in
			each area. Dial X2675
			for resupply
Crane Complex	M-F 0800-2400	Fulsan II/ES15	Supplies stocked in
			janitorial supply in
			each area. Dial X2675
			for resupply
Performing Arts Ctr	M-F 0800-2400	Fulsan II/ES15	Supplies stocked in
			janitorial supply in

CLEANING SCHEDULE



			each area. Dial X2675 for resupply
President's Residence	T-TH 0800-1200	Fulsan II/ES15	Supplies stocked in janitorial supply in each area. Dial X2675 for resupply

*Disinfectants and cleaning supplies are stored in marked janitorial closets throughout each area.

- Decontaminate work surfaces with an appropriate disinfectant after completion of procedures, immediately when overtly contaminated, after any spill of blood or other potentially infectious materials, and at the end of the work shift when surfaces have become contaminated since the last cleaning.
- Remove and replace protective coverings such as plastic wrap and aluminum foil when contaminated.
- Inspect and decontaminate, on a regular basis, reusable receptacles such as bins, pails, and cans that have a likelihood for becoming contaminated. When contamination is visible, clean and decontaminate receptacles immediately, or as soon as feasible.
- Always use mechanical means such as tongs, forceps, or a brush and a dust pan to pick up contaminated broken glassware, never pick up with hands even if gloves are worn.
- Store or process reusable sharps in a way that ensures safe handling.
- Place regulated waste in closeable and labeled or color-coded containers. When storing, handling, transporting or shipping, place other regulated waste in containers that are constructed to prevent leakage.
- When discarding contaminated sharps, place them in containers that are closeable, puncture-resistant, appropriately labeled or color-coded, and leak- proof on the sides and bottom.
- Ensure that sharps containers are easily accessible to personnel and located as close as feasible to the immediate area where sharps are used or can be reasonably anticipated to be found. Sharps containers also must be kept upright throughout use, replaced routinely,



closed when moved, and not allowed to overfill.

- Never manually open, empty, or clean reusable contaminated sharps disposal containers. (See Appendix P - New York State Environmental Conservation Regulations)
- Discard all regulated waste according to federal, state, and local regulations, i.e., liquid or semi-liquid blood or other potentially infectious material; items contaminated with blood or other potentially infectious materials that would release these substances in a liquid or semi-liquid state if compressed; items caked with dried blood or other potentially infectious materials and capable of releasing these materials during handling; contaminated sharps; and pathological and microbiological wastes containing blood or other potentially infectious materials.

9.2 Laundry

It shall be the policy of SUNY Potsdam to NOT launder or reuse any form of PPE which shall have been used in the handling of blood, bodily fluids, or any material of unknown nature. Proper disposal, as outlined in this program, shall be done and replacement of soiled PPE will be issued immediately for employee use from stock locations located around campus.

Any clothing which, through the course of work activity, becomes soiled with blood, bodily fluids or other know materials shall be red bagged and disposed of through Student Health Services. Athletic uniforms that become soiled with blood or other potentially infectious materials will be bagged and the student athlete will be responsible for wash and care of their own clothing.

10.0 Labeling

- **10.1** The following labeling method(s) will be used at our facility.
 - Contaminated needles and syringes are to be placed directly into red sharps containers sourced from Grainger. To prevent needlestick injuries, needles are not to be recapped, purposely bent, broken, or otherwise manipulated by hand. Sharps containers shall be labeled with a 3"X5" label as regulated medical



waste, marked with a fluorescent orange or orange-red biohazard warning symbol and clearly marked "Do Not Open".

- The biological hazard (BIOHAZARD) symbol must be used to signify the actual or potential presence of a biohazard and to identify equipment, containers, rooms, materials or combinations thereof which contain or are contaminated with viable hazardous agents. For the purpose of this program the term "Biological Hazard" or biohazard shall include only those infectious agents presenting a risk or potential risk to the well-being of man.
- Biohazard "red bags" which are clearly marked with verbiage and symbols indicating the presence or potential presence of a biohazard shall be used for all PEE and other materials that have come in contact with blood, bodily fluids or unknown fluids WITH THE EXCPETION OF SHARPS. These bags will be stored at the Student Health Center in their biohazard storage area until the regularly scheduled pickup.

Area supervisors will ensure warning labels are affixed or red bags are used as required. Employees are to notify Environmental Health & Safety if they discover unlabeled regulated waste containers.

Note: Fluorescent orange or orange-red warning labels be attached to:

(1) containers of regulated waste;

(2) refrigerators and freezers containing blood and other potentially infectious materials;

(3) sharps disposal containers;

(4) laundry bags and containers;

(5) contaminated equipment for repair (portion contaminated); and

(6) other containers used to store, transport, or ship blood or other potentially infectious materials.

These labels are not required when:

(1) red bags or red containers are used;

(2) containers of blood, blood components, or blood products are labeled as to their contents and have been released for transfusion or other clinical use;

(3) individual containers of blood or other potentially infectious materials are placed in a labeled container during storage, transport, shipment or disposal.



The warning label must be fluorescent orange or orange-red, contain the bio-hazard symbol and the work "BIO-HAZARD" (See Appendix H) in a contrasting color, and be attached to each object by string, wire, adhesive, or other method to prevent loss or unintentional removal of the label.



11.0 Recordkeeping

11.1 Medical Records

Medical records are maintained for each employee with occupational exposure in accordance with 29 CFR 1910.1020 (formerly 1910.20).

Human Resources is responsible for maintenance of the required medical records and they are kept at Human Resources, 2nd Floor, Raymond Hall.

NOTE: Refer to the Appendix Section for copies of applicable medical record forms.

In addition to the requirements of 29 CFR 1910.20, the medical record will include:

- > The name and social security number of employee.
- A copy of the employee's Hepatitis B vaccinations and any medical records relative to the employee's ability to receive vaccination; OR a copy of a signed declination form.
- A copy of all results of examinations, medical testing, and follow-up procedures as required by the standard.
- A copy of all healthcare professional's written opinion(s) as required by the standard.
- A copy of the information provided to the health care professional.

All employee medical records will be kept confidential and will not be disclosed or reported without the employee's express written consent to any person within or outside the workplace except as required by the standard or as may be required by law.

Employee medical records shall be maintained for at least the duration of employment plus 30 years in accordance with 29 CFR 1910.20.

Employee medical records shall be provided upon request of the employee or to anyone having written consent of the employee within 15 working days.



11.2 Training Records

Bloodborne pathogen training records will be maintained by Environmental Health & Safety at Raymond Hall Suite 204, SUNY Potsdam, 44 Pierrepont Ave, Potsdam, NY 13676 (see Appendix B).

The training record shall include:

- Dates of the training sessions.
- > Copy of the lesson plan or summary used for the training.
- > Names and qualifications of persons conducting the training.
- > Names and job titles of all persons attending the training sessions.

Training records will be maintained for a minimum of three (3) years from the date on which the training occurred.

Employee training records will be provided upon request to the employee or the employee's authorized representative within 15 working days.

11.3 Transfer of Records

The employer shall comply with the requirements involving transfer of records as indicated in 29 CFR1910.1020(h).

If SUNY Potsdam ceases to do business and there is no successive employer to receive and retain the records for the prescribed period, the employer shall notify the Director of the National Institute for Occupational Safety and Health (NIOSH) at least three (3) months prior to scheduled record disposal and prepare to transmit them to the Director.



11.4 Sharps injury log

Environmental Health & Safety will establish and maintain the sharps injury log for recording percutaneous injuries from contaminated sharps.

The sharps injury log will contain at least the following information:

- > The type and brand of device involved in the incident;
- > The department or work area where the exposure incident occurred;
- A description of how the incident occurred.

Note: The sharps injury log must protect the confidentiality of the injured employee. If data from the log are made available to other parties, any information that directly identifies the employee (e.g. name, address, Social Security numbers, payroll number) or that could be used to indirectly identify the employee (exact age, date of initial employment, unique job title) must be withheld.





MEDICAL & TRAINING RECORDS

Highlights of Medical Records

- Employee name and social security number
- Employee Hepatitis B vaccination status
- > Medical testing and post-exposure follow-up results
- Healthcare Professional's Written Opinion
- Information provided to the healthcare professional




Highlights of Training Records

- ➢ Training Dates
- Training session content or summary
- Names and qualifications of trainers
- Names and job titles of all trainees



12.0 First Aid Providers

SUNY Potsdam does not utilize any employees who are designated to render first aid assistance outside of their primary work assignment.

While some employees such as University Police Officers, Student Health Service workers or Lifeguards may, during the course of their regular duties, offer first aid these job classifications are already included in this exposure control program. As such, these employees will have already received their Bloodborne Pathogens training and have been offered a Hepatitis B vaccination and will follow exposure reporting requirements as previously outlined in Section



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APPENDIX

SECTION



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APPENDIX A

OCCUPATIONS AT RISK

Occupations that may involve risk from occupational exposure to blood or other potentially infectious material:

- > Physician
- Nurse Practitioner
- Physicians Assistant
- > Nurse
- Supervisor (performing first-aid)
- Regulated Waste Handlers
- Housekeeping employees
- Campus Medical Center Personnel
- ➢ Life Guards
- Public Safety Workers
- > Plumbers

DEFINITIONS

Before beginning a discussion of the standard there are several definitions that should be explained which specifically apply to this regulation. These definitions are also included in paragraph (b) of the standard.

- **Blood** human blood, human blood components, and products made from human blood.
- Bloodborne Pathogens pathogenic micro-organisms that are present in human blood and can infect and cause disease in humans. These pathogens include, but are not limited to, Hepatitis B virus (HBV), and Human Immunodeficiency virus (HIV), and Hepatitis C virus (HCV).
- Contaminated the presence or the reasonably anticipated presence of blood or other potentially infectious materials on an item or surface.



- Exposure Incident a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials that result from the performance of an employee's duties.
- Occupational Exposure reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials that may result from the performance of an employee's duties.

> Other Potentially Infectious Materials (OPIM)

- The following human body fluids:
 - Semen
 - vaginal secretions
 - cerebrospinal fluid
 - synovial fluid
 - pleural fluid
 - pericardial fluid
 - peritoneal fluid
 - amniotic fluid
 - saliva
 - any bodily fluid visibly contaminated with blood
 - all body fluids in situations where it is difficult or impossible to differentiate
- Any unfixed tissue or organ (other than intact skin) from a human (living or dead)
- HIV-containing cells or tissue cultures, organ cultures, and HIV or HBV-containing cultures medium or other solutions; and
- o Blood, organs, or other tissue from experimental animals infected with HIV or HBV.

➢ G.Regulated Waste

- Liquid or semi-liquid blood or other potentially infectious materials;
- Contaminated items that would release blood or other potentially infectious materials in a liquid or semi-liquid state if compressed;
- Items that are caked with dried blood or other potentially infectious materials and are capable of releasing these materials during handling;
- Contaminated sharps; and
- Pathological and microbiological wastes containing blood or other potentially infectious materials.



APPENDIX A1

JOB CLASSIFICATIONS IN WHICH ALL EMPLOYEES HAVE OCCUPATIONAL EXPOSURE TO Bloodborne PATHOGENS

Below are listed the job classifications in our facility where **all** employees in this job classification will have a reasonably anticipated exposure to human blood and other potentially infectious materials.

JOB TITLE	DEPARTMENT/LOCATION		



APPENDIX B

EMPLOYEE EDUCATION AND TRAINING RECORD

EMPLOYEE

DATE OF HIRE

JOB TITLE

DATE ASSIGNED

INITIAL TRAINING:							
SUBJECT	DATE	LOCATION	TRAINER	EMPLOYEE SIGNATURE			
a. The Standard							
b. Epidemiology & Symptoms of Bloodborne Diseases							
c. Modes of Transmission							
d. Exposure Control Plan							
e. Recognizing Potential Exposure							
f. Use & Limitations of Exposure Control Methods							
g. Personal Protective Equipment (PPE)							
h. Selection of (PPE)							
i. HBV Immunization Program							
j. Emergencies Involving Blood or Potentially Infectious Materials							
k. Exposure Follow-Up Procedures							
l. Post Exposure Evaluation and Follow-Up							
m. Signs & Labels							
n. Opportunity to Ask Questions							
ADDITIONAL EDUCATION:							
SUBJECT(S)	DATE	LOCATION	TRAINER	EMPLOYEE SIGNATURE			



ANNUAL RETRAINING:						
SUBJECT(S)	DATE	LOCATION	TRAINER	EMPLOYEE SIGNATURE		



LEFT BLANK ON PURPOSE B1 - BBP Training Presentation



Bloodborne Pathogens Training

What employees need to know

Environmental Health & Safety Raymond Hall Suite 204



Learning Objectives

- 1. Define bloodborne pathogens
- 2. Identify workers who are at risk of exposure to bloodborne pathogens
- 3. Identify key aspects of our Bloodborne Pathogen Exposure Control Plan
- 4. Describe methods for controlling exposure to bloodborne pathogens
- 5. Describe steps to take when exposed to a bloodborne pathogen



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We would like to thank the following entities for the use of various material and input in the preparation of this presentation:

- Centers for Disease Control (CDC)
- Occupational Safety & Health Administration (OSHA)
- Public Employee Safety & Health Bureau (PESH)
- New York State Department of Health (NYSDOH)
- New York State Office of Fire Prevention & Control (OFPC)
- **Texas Region 6 Education Center**
- **Disque Foundation**



Introduction

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1981



2014





2016

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Zika is linked to birth defects.

Zika infection during pregnancy can cause a ious birth defect ca sendes ourn deter train development. If you ha a partner who lives in or has traveled to an area with Zika, do not have sex, or use condoms eve



Returning travelers infected with Zika can spread the virus through mosquito bites.

If you get infected with Zika and a m you, you can pass the virus to the mosquito. The infected mosquito bites other people, who get infected. Returning travelers should also use condoms or not have sex if they are concerned passing it to their partners through se







Bloodborne Pathogens

What are **bloodborne pathogens**?

- Pathogenic microorganisms present in human blood that can lead to diseases
- Examples of primary concern
 - Hepatitis B (HBV)
 - Hepatitis C (HCV)
 - Human Immunodeficiency Virus (HIV)



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Hepatitis C

- Hepatitis C (HCV)
 - Hepatitis C is the most common chronic bloodborne infection in the U.S.
 - Symptoms include: jaundice, fatigue, abdominal pain, loss of appetite, intermittent nausea, vomiting
 - May lead to chronic liver disease and death



Human Immunodeficiency Virus

- Human Immunodeficiency Virus (HIV)
 - HIV is the virus that leads to AIDS
 - HIV affects the body's immune system
 - HIV does not survive well outside the body
 - Estimated >1.1 million people living with HIV
 - Infected for life





Other Bloodborne Pathogens

- Other bloodborne diseases
 - Caused by viruses or bacteria
 - Circulate in blood at some phase; capable of being transmitted
 - Most are rare in the U.S.
- Examples
 - Zika Virus
 - Ebola
 - Hepatitis B



How could I get exposed?

Contamination sources:

- Blood
- Other potentially infectious materials (OPIM)
 - Human body fluids
 - Any unfixed tissue or organ from human
 - Cultures, culture mediums, or other solutions
 - Experimental animal blood, tissues, or organs infected with HIV or HBV





Why you should be concerned

- Where does you risk of exposure come from?
 - Bloodborne pathogens spread through a variety of ways
 - Direct contact
 - Indirect contact
 - Respiratory transmission
 - Vector-born transmission





Risk of Exposure

- How do exposures occur?
 - Needlesticks
 - Cuts from contaminated items
 - Contact of mucous membrane or broken skin with contaminated blood or other potentially infectious material





Who is most at risk?

- Occupational Exposures
 - SUNY Potsdam Job Classifications
 - Cleaning Staff
 - University Police
 - Student Health Services
 - Lifeguards
 - Physical Plant w/Plumbing Duties



Exposure Control Plan

- What is an ECP?
 - Written Plan to mitigate risk from exposure to potentially harmful pathogens







Exposure Control Plan Components

Required elements of Exposure Control plan include:

- Exposure determination
- Schedule and method of implementation
- Procedure for evaluation of exposure incidents
- Accessible to employees
- Review and update
 - Annually
 - When new or modified tasks/procedures are implemented



Exposure Control Plan Review

INSERT LINK TO SUNY POTSDAM EXPOSURE CONTROL PLAN





How do we control the risk of exposure?

Observe standard precautions, such as:

- Treating all blood and bodily fluids as if they are contaminated
 - Universal Precautions
- Proper cleanup and decontamination







Controlling Exposures

Engineering and Work Practices

- Use safer medical devices
- Sharp disposal containers
- Emphasize hygiene

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Controlling Exposures - PPE

Use proper PPE

• Gloves

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- Masks
- Aprons/Smocks/Gowns
- Face shields
- Mouthpieces
- Safety glasses
- CPR pocket masks



Controlling Exposures - PPE

PPE selection

- Safe design and construction
- Fit comfortably
- **Required PPE training**
 - When it is necessary
 - What kind is necessary
 - Proper donning, adjusting, wearing, doffing
 - Limitations
 - Proper care, maintenance, useful life, disposal



Employer Responsibilities

Employer's responsibilities:

- Perform hazard assessment
- Identify and provide appropriate PPE to employee at no cost
- Train employees on use and care
- Maintain/replace PPE
- Review, update, evaluate PPE program





Employee Responsibilities

Employee's responsibilities:

- Properly wear PPE
- Attend training

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- Care for, clean, and maintain
- Notify when repairs/replacement needed



Practice Safe Work Practices & Use PPE!

BLOODBORNE PATHOGENS

Act When You Come Into Contact With Blood

SaveaLife . INITIATIVE

Empowered by the Disque Foundation









Controlling Exposures

Housekeeping

- Written schedule for cleaning and decontamination
- Picking up broken glass
 - Not picked up by hands
 - Mechanical means only





Controlling Exposures

Clean-up and decontamination:

- Wear protective gloves
- Use appropriate disinfectant
- Clean and disinfect contaminated equipment and work surfaces
- Thoroughly wash up immediately after exposure
- Properly dispose of contaminated PPE, towels, rags, etc.




Cleaning Up Potential or Known Spills

BLOODBORNE PATHOGENS

HOW TO SAFELY CLEAN UP A BLOOD SPILL





NOTE: Chemical Hazard

Ensure that any bottles containing chemicals are labeled!

- Name of chemical
- Applicable risk of chemical
- Manufacturer Name and Number
- SDS reference number
- Any dilution information





CHEMICAL IDENTITY: MANUFACTURER: SDS#:_____ DATE:_____



Controlling Exposures

Regulated waste disposal:

- Dispose of regulated waste in closable, leakproof red or biohazard labeled bags or containers
- Dispose of contaminated sharps in closable, puncture-resistant, leakproof, red or red-orange containers





Training

Training:

- Who
 - All employees with occupational exposure to blood or other potentially infectious material (OPIM)
 - Employees who are trained in first aid and CPR
- No cost; during working hours
- When
 - Initial assignment
 - Annually; or with new/modified tasks



Hepatitis B Vaccinations

Hepatitis B vaccination:

- Offered to all potentially exposed employees
- Provided at no cost to employees (within 10 days to employees with occupational exposure)
- Declination form







Vaccinations Con't

No vaccinations for:

- Hepatitis C
- HIV

THIS IS WHY ENGINEERING CONTROLS AND WORKPLACE BEST PRACTICES ARE SO IMPORTANT!



What is an exposure?

Exposure incident:

- Specific eye, mouth, or other mucous membrane, non-intact skin, parenteral contact with blood or OPIM that results from the performance of an employee's duties.
- What does that mean in English?







I've potentially been exposed. Now what?

Immediate actions

- Wash exposed area with soap and water
- Flush splashes to nose, mouth, or skin with water
- Irrigate eyes with water and saline





I've potentially been exposed. Now what?

Immediate actions (Con't):

- Notify Environmental Health & Safety & your supervisor
- EHS will then refer you to a healthcare professional for immediate follow-up



Confidential Medial Follow-up

Confidential medical evaluation and follow-up

- Route(s) of exposure and circumstances
- Source individual
- Collect/test blood for HBV and HIV serological status
- Post exposure prophylaxis (when medically indicated)
- Counseling
- Evaluation



Questions?

In closing:

- Copies of all applicable documents are available in paper and electronic form
- All employees who are declining to receive a Hepatitis B vaccine due to lack of interest or having already received the vaccine must have a signed declination on file
- Questions?





APPENDIX C OPTIONAL USE

CONFIDENTIAL
HEPATITIS B VACCINE IMMUNIZATION RECORD
Vaccine is to be administered on:
Elected dates:
First:
One month from elected date:
Six months from elected date:
Employee Name:
Date of first dose:
Date of second dose:
Date of third dose:
Antibody test results - pre-vaccine (optional):
Antibody test results - post-vaccine (optional):
Time interval since last injection:
Employee Signature:



APPENDIX C1

DECLINATION STATEMENT

I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring Hepatitis B virus (HBV) infection. I have been given the opportunity to be vaccinated with Hepatitis B vaccine, at no charge to myself. However, I decline Hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring Hepatitis B, a serious disease. If in the future I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with Hepatitis B vaccine, I can receive the vaccination series at no charge to me.

Employee Printed Name:	
Signature:	
Date:	



APPENDIX D

Side 1 of 2-sided form

EXPOSURE INCIDENT REPORT (ROUTES AND CIRCUMSTANCES OF EXPOSURE INCIDENT) Please Print

Date Completed					
Employee's Name	S. S.#				
Home Phone	Business Phone				
DOB	Job Title				
Employee Vaccination Status					
Date of Exposure	Time of Exposure	A.M.	P.M.		
Location of Incident (Home, Street, Clinic, Etc.)-Be Spec	ific:				
Nature of Incident (Auto Accident, Trauma, Medical Em	nergency) - Be Specific:				
Describe what task(s) you were performing when the exp	oosure occurred - Be Spe	ecific:			
Were you wearing Personal Protective Equipment (PPE)?		YES	NO		
Did the PPE Fail?		YES	NO		
If YES, Explain how:					
Were you using Engineering Controls?		YES	NO		



Did the Engineering Controls fail?		YES	5	NO	
If YES, Explain how:					
What body fluid(s) were you exposed to (blood or	other potentially infe	ectious material	? Be specific	:	
					·
What part of your body became exposed? Be specific:					side 2 of 2-sided form
Estimate the size of the area of your body that was exposed:					
For how long?					
Did a foreign body (needle, nail, auto part, dental wires, etc.	.) penetrate your body?				
	Yes		No		
If Yes, what was the object?					
Where did it penetrate your body?				_	
Was any fluid injected into your body?	Yes		No		
If Yes, what fluid?	How much?				
Did you receive medical attention?	Yes		No		
If Yes, where?					-



When?			
By Whom?			
Identification of Source Individual(s)			
Name(s)			
Did you treat the patient directly?	Yes	No	
If Yes, what treatment did you provide - Be Specific			
Other pertinent information			

APPENDIX E (LETTER)

Dear (Emergency Room Medical Director, Infection Control Practitioner):

During a recent transport of a patient to your facility, one of our prehospital care providers was involved in an event which may have resulted in exposure to a Bloodborne Pathogen.

I am asking you to perform an evaluation of the source individual who was transported to your facility. Given the circumstances surrounding this event please determine whether our prehospital care worker is at risk for Infection and/or requires medical follow-up.

Attached is a ADocumentation and Identification of source individual @ form which was initiated by the exposed worker. Please complete the source individual section and communicate the findings to the designated medical provider.

The evaluation form has been developed to provide confidentiality assurances for the patient and the exposed worker concerning the nature of the exposure. Any communication regarding the findings is to be handled at the medical provider level.

We understand that information relative to human immunodeficiency virus (HIV) and AIDS has specific protections under the law and cannot be disclosed or released without the written consent of the patient. It is further understood that disclosure obligates persons who receive such information to hold it confidential.

Thank you for your assistance in this very important matter.

Sincerely,

APPENDIX F (FORM)

ONFIDENTIAL	
D	OCUMENTATION AND IDENTIFICATION OF SOURCE INDIVIDUAL
Name of Exposed Employee	
Name and Phone Number of Medical Provider Who Should Be Co	ontacted
Incident Information	
Date	
Name or Medical Record Number of	the Individual Who is the Source of the Exposure
Nature of Incident Contam Blood o	inated Needlestick Injury r Body Fluid Splash Onto Mucous Membrane or Non-Intact Skin
Other	
Report of Source Individual Evaluat	ion
Chart Review By	Date
Source Individual UnknownBResear	ched By Date
Testing of Source Individual=s Blood	Consent Obtained Refused
CHECK ONE	Identification of source Individual infeasible or prohibited by state or Local law. State why if infeasible: Evaluation of the source individual reflected no known exposure to Bloodborne Pathogen. Evaluation of the source individual reflected possible exposure to Bloodborne Pathogen and medical follow-up is recommended.
Person completing report	Date
Note: Report the results of the source report blood test findings to the emp	e individuals blood tests to the medical provider named above who will inform the exposed employee. Do no loyer.
HIV related information cannot be r	eleased without the written consent of the source individual.

APPENDIX G

CONFIDENTIAL					
EMPLOYEE EXPOSURE FOLLOW-UP RECORD					
Employee=s Name:	Job Title	Job Title:			
Occurrence Date:	Reported	d Da	ate:		
Occurrence Time:					
SOURCE INDIVIDUAL FOLLOW-UP:					
Request Made To:					
Date:	Time:				
Sampling completed or refused	Date				
EMPLOYEE FOLLOW-UP:					
Employee=s Health File Reviewed By:		Date			
Information given on source individual=s blood test results.			Yes	Not Obtained	
Referred to healthcare professional with required information	ion:				
Name of healthcare professional:					
By Whom:	Date:				
Blood Sampling/Testing Offered:					
By Whom:	Date:				
Vaccination Offered/Recommended:					
By Whom: Date:					
Counseling Offered:					
By Whom:		Date:			
Employee Advised of need for further evaluation of medical condition:					
By Whom:	Da	te:			

APPENDIX H

INFORMATION ON REGULATED MEDICAL WASTE

The following information is included to assist you in evaluating and contracting for a transport, handling, and disposal company, should you not be equipped to handle your regulated waste.

Checklist for regulated waste contracting:

- Request the company's identification number
- Request to review the manner of record keeping
- Documentation to include
 - o List of items collected
 - o <u>Method of destruction</u>
 - o <u>Site for destruction</u>
 - o <u>Proof of destruction</u>
- Requested Information on Insurance and bonding

For additional information on regulated medical waste, contact:

Waste Transporter Permit Section NYS Department of Environmental Conservation 625 Broadway, 9th Floor Albany New York 12233-7253 (518) 402-8707



PPE Order Form Revised: 07/14/2020

DIRECTIONS: Please fill out the following form and submit to <u>ppe@potsdam.edu</u>. When the order is received and processed you will receive an order confirmation via email as well as an expected delivery date. You will then be notified when your PPE is available for pickup at Raymond Hall 204. For any item not listed below please email <u>ppe@potsdam.edu</u> with item, brand, size and quantity requested as well as a brief justification.

ALL ORDERS ARE DUE TO EHS BY THE 15TH OF EVERY MONTH

Submitted By:_____ Date:_____

Phone Number:_____ Email:____

Department/Building:____

EYE PROTECTION	BRAND	SIZE	QTY	
Face Shields (Reusable)		Universal		
Safety Goggles (Regular)		Universal		
Safety Goggles (For over glasses)		Universal		
Safety Glasses (Clear)		Universal		

RESPIPRATORY PROTECTION	BRAND	SIZE	QTY	
3-Ply Medical Masks (Blue)		Universal		
N-95 Respirator* ‡		Small		
N-95 Respirator* ‡		Medium		
N-95 Respirator* ‡		Large		
N-95 Respirator (Universal)* ‡		Universal		
KN-95 Mask		Universal		
Flame Resistant Face Covering		Universal		
Cloth Face Covering		Universal		
Half-Face Respirator‡				
Full-Face Respirator‡				

*If specialized N-95 masks required (Oil resistant, Mold, etc.) please indicate this in your email.

\$Medical evaluation and fit test must be completed AND on file prior to issuing