



BRIGHAM YOUNG UNIVERSITY – IDAHO

ENVIRONMENTAL, HEALTH & SAFETY

SAFETY DEPARTMENT

BLOODBORNE PATHOGEN POLICY

EH-012-R02

Table of Contents

Section		Page
1.0	Overview.....	1
2.0	Policy.....	1
3.0	Requirements.....	1
4.0	Purpose.....	1
5.0	Scope.....	1
6.0	Procedures.....	1
7.0	Responsibilities.....	11
8.0	Training.....	12
9.0	Records.....	13
10.0	Appendices.....	14

Appendices		Page
Appendix A	Definitions.....	15
Appendix B	Waiver of Medical Treatment Form.....	17
Appendix C	Labels (examples).....	18
Appendix D	(Reserved).....	X

1.0 Overview

The purpose of this Exposure Control Plan is to reduce the probability of employees, and the public, from contracting a serious illness due to pathogenic microorganisms while working at BYU-Idaho or participating in academic or volunteer programs associated with the university.

2.0 Policy

This policy applies to all BYU-Idaho employees, and students that may come into contact with blood or other potentially infectious materials in the performance of their duties or studies.

3.0 Requirements

29 CFR 1910.1030 Bloodborne Pathogens
29 CFR 1910.1020 Access to employee exposure and medical records
29 CFR 1904.33 Retention and maintenance of accurate records

4.0 Purpose

It is the intent of this policy to train, educate, and establish guidelines and procedures for employees to reduce the risk associated with exposure to blood and other bodily fluids.

5.0 Scope

It is very possible that at some point an employee will come into contact with a person who has an infectious disease. University personnel, when dealing with blood, items stained with blood or other bodily fluids, and persons in high-risk groups, should exercise extreme caution. The procedures outlined in this policy shall be used to reduce the risk of exposure.

6.0 Procedures

6.1 Exposure determination.

Each department with employee's who have a potential for occupational exposure shall prepare an exposure determination. This exposure determination shall be made without regard to the use of personal protective equipment and shall contain the following:

- 6.1.1 Job List – A list of all job classifications in which all employees in those job classifications have occupational exposure;
- 6.1.2 Some Exposure Job List – A list of job classifications in which some employees have occupational exposure;
- 6.1.3 Task List – A list of all tasks and procedures or groups of closely related task and procedures in which occupational exposure occurs

and that are performed by employees in job classifications listed in accordance with the provisions of items 6.1.1 and 6.1.2 of this standard.

6.2 General Work Practices and Procedures.

- 6.2.1 Universal Precautions. Universal precautions shall be observed to prevent contact with blood or other potentially infectious materials. Under circumstances in which differentiation between body fluid types is difficult or impossible, all body fluids shall be considered potentially infectious materials.
- 6.2.2 Engineering and work practice controls.
 - 6.2.2.1 Use. Engineering and work practice controls shall be used to eliminate or minimize employee exposure. Where occupational exposure remains after institution of these controls, personal protective equipment shall also be used.
 - 6.2.2.2 Maintenance. Engineering controls shall be examined and maintained or replaced on a regular schedule to ensure their effectiveness.
- 6.2.3 Hand-washing. BYU-Idaho shall provide hand-washing facilities which are readily accessible to employees.
 - 6.2.3.1 Exception. When provision of hand-washing facilities is not feasible, BYU-Idaho shall provide either an appropriate antiseptic hand cleanser in conjunction with clean cloth/paper towels or antiseptic towelettes. When antiseptic hand cleansers or towelettes are used, hands shall be washed with soap and running water as soon as feasible after an exposure.
 - 6.2.3.2 Removal of Gloves. Supervisors shall ensure that employees wash their hands immediately or as soon as feasible after removal of gloves and other personal protective equipment.
 - 6.2.3.3 Contact with Infectious Materials. Supervisors shall ensure that employees wash hands and any other exposed skin with soap and water, or flush with water immediately or as soon as feasible following contact with blood or other potentially infectious materials.
- 6.2.4 Eating in Contaminated Areas. Eating, drinking, applying cosmetics or lip balm, and handling contact lenses are prohibited in work areas where there is a reasonable likelihood of occupational exposure.
- 6.2.5 Food and Drink. Food and drink shall not be kept in refrigerators, freezers, shelves, cabinets or on countertops or benchtops where blood or other potentially infectious materials are present.
- 6.2.6 Aerosols. All procedures involving blood or other potentially infectious materials shall be performed in such a manner as to

minimize splashing, spraying, spattering, and generation of droplets of these substances.

- 6.2.7 Pipetting. Mouth pipetting/suctioning of blood or other potentially infectious materials is prohibited.
- 6.2.8 Containers. Specimens of blood or other potentially infectious materials shall be placed in a container which prevents leakage during collection, handling, processing, storage, transport, or shipping.
 - 6.2.8.1 Labeling. The container for storage, transport, or shipping shall be labeled and color-coded according to section 6.8.1 and closed prior to being stored, transported, or shipped.
 - 6.2.8.2 Contaminated Primary Containers. If outside contamination of the primary container occurs, the primary container shall be placed within a second container which prevents leakage during handling, processing, storage, transport, or shipping.
- 6.2.9 Servicing and Shipping Equipment.
 - 6.2.9.1 Decontamination. Equipment which may become contaminated with blood or other potentially infectious materials shall be examined prior to servicing or shipping and shall be decontaminated as necessary, unless it can be demonstrated that decontamination of such equipment or portions of such equipment is not feasible.
 - 6.2.9.2 Labeling. A readily observable label in accordance with section 6.8.1.5 shall be attached to the equipment stating which portions remain contaminated.
 - 6.2.9.3 Informing. The area supervisor shall ensure that information concerning contaminated equipment is conveyed to all affected employees, the servicing representative, and/or the manufacturer, as appropriate, and prior to handling, servicing, or shipping so that appropriate precautions will be taken.

6.3 Personal Protective Equipment.

- 6.3.1 Availability. When there is a possibility of occupational exposure, BYU-Idaho shall provide, at no cost to the employee, appropriate personal protective equipment such as, but not limited to, gloves, gowns, laboratory coats, face shields or masks and eye protection. Personal protective equipment will be considered appropriate if it does not permit blood or other potentially infectious materials to pass through to or reach the employee's work clothes, street clothes, undergarments, skin, eyes, mouth, or other mucous membranes under normal conditions of use and for the duration of time which the protective equipment will be used.

- 6.3.2 Use. Department supervisors shall ensure that personnel use appropriate personal protective equipment unless the supervisor shows that the employee temporarily and briefly declined to use personal protective equipment when, in the employee's professional judgment, that its use would have prevented the delivery of health care services or would have posed an increased hazard to the safety of the worker or co-worker. When the employee makes this judgement, the circumstances shall be investigated and documented in order to determine whether changes need to be instituted to prevent such occurrences in the future.
- 6.3.3 Accessibility. BYU-Idaho shall ensure that appropriate personal protective equipment in the appropriate sizes is readily accessible at the worksite or is issued to employees. Hypoallergenic gloves, powderless gloves, shall be readily accessible to those employees who are allergic to the gloves normally provided.
- 6.3.4 Cleaning, Laundering, and Disposal. BYU-Idaho shall dispose of personal protective equipment required by this plan at no cost to the employee.
- 6.3.5 Repair and Replacement. BYU-Idaho shall replace personal protective equipment as needed to maintain its effectiveness, at no cost to the employee.
- 6.3.6 Inner Contamination. If a garment(s) is penetrated by blood or other potentially infectious materials, the garment(s) shall be removed immediately or as soon as feasible.
- 6.3.7 Removal All personal protective equipment shall be removed prior to leaving the work area.
 - 6.3.7.1 Storage. When personal protective equipment is removed it shall be placed in an appropriately designated area or container for storage, decontamination, or disposal.
- 6.3.8 Gloves. Gloves shall be worn when it can be reasonably anticipated that the employee may have hand contact with blood, other potentially infectious materials, mucous membranes, and non-intact skin; when performing vascular access procedures and when handling or touching contaminated items or surfaces.
 - 6.3.8.1 Disposable Glove Replacement. Disposable (single use) gloves such as surgical or examination gloves, shall be replaced as soon as practical when contaminated, torn, punctured, or when their ability to function as a barrier is compromised.
 - 6.3.8.2 Disposable Glove Re-use. Disposable (single use) gloves shall not be washed or decontaminated for re-use.

- 6.3.8.3 Utility Gloves. Utility gloves may be decontaminated for re-use if the integrity of the glove is not compromised. However, they must be discarded if they are cracked, peeling, torn, punctured, or exhibit other signs of deterioration or when their ability to function as a barrier is compromised.
- 6.3.8.4 Phlebotomy. Routine gloving for all phlebotomies is required.
- 6.3.9 Masks, Eye Protection, and Face Shields. Masks in combination with eye protection devices, such as goggles or glasses with solid side shields, or chin-length face shields, shall be worn whenever splashes, spray, spatter, or droplets of blood or other potentially infectious materials may be generated and eye, nose, or mouth contamination can be reasonably anticipated.
- 6.3.10 Gowns, Aprons, and Other Protective Body Clothing. Appropriate protective clothing such as, but not limited to, gowns, aprons, lab coats, clinic jackets, or similar outer garments shall be worn in occupational exposure situations. The type and characteristics will depend upon the task and degree of exposure anticipated.

6.4 Housekeeping.

Departments shall ensure that their work areas are maintained in a clean and sanitary condition. The department shall determine and implement an appropriate written schedule for cleaning and method of decontamination based upon the location within the facility, type of surface to be cleaned, type of soil present, and tasks or procedures being performed in the area.

- 6.4.1 Equipment and Working Surfaces. All equipment and environmental and working surfaces shall be cleaned and decontaminated after contact with blood or other potentially infectious materials.

Contaminated work surfaces shall be decontaminated with an appropriate disinfectant after completion of procedures; immediately or as soon as feasible when surfaces are overtly contaminated or after any spill of blood or other potentially infectious materials; and at the end of the work shift if the surface may have become contaminated since the last cleaning.

- 6.4.2 Disposable Protective Coverings. Protective coverings, such as plastic wrap, aluminum foil, or imperviously-backed absorbent paper used to cover equipment and environmental surfaces, shall be removed and replaced as soon as feasible when they become overtly contaminated or at the end of the work shift if they may have become contaminated during the shift.
- 6.4.3 Contaminated Bins, Pails, and Cans. All bins, pails, cans, and similar receptacles intended for reuse which have a reasonable likelihood for becoming contaminated with blood or other potentially infectious materials shall be inspected and decontaminated on a regular basis and

cleaned and decontaminated immediately or as soon as feasible upon visible contamination.

6.5 Regulated Waste.

6.5.1 Sharps.

6.5.1.1 Bending and Recapping. Contaminated needles and other contaminated sharps shall not be bent, recapped, or removed. Shearing or breaking of contaminated needles is prohibited.

6.5.1.2 Contaminated Reusable Sharps. Immediately or as soon as possible after use, contaminated reusable sharps shall be placed in appropriate containers until properly reprocessed. These containers shall be

6.5.1.2.1 Puncture resistant

6.5.1.2.2 Labeled or color-coded

6.5.1.2.3 Leak proof on the sides and bottom

6.5.1.3 Reusable Sharps Storage. Reusable sharps that are contaminated with blood or other potentially infectious materials shall not be stored or processed in a manner that requires employees to reach by hand into the containers where these sharps have been placed.

6.5.1.4 Broken glassware. Broken glassware which may be contaminated shall not be picked up directly with the hands. It shall be cleaned up using mechanical means, such as a brush and dust pan, tongs, or forceps.

6.5.1.5 Contaminated Sharps Discarding and Containment.

6.5.1.5.1 Contaminated sharps shall be discarded immediately or as soon as feasible in containers that are:

6.5.1.5.1.1 Closable;

6.5.1.5.1.2 Puncture resistant;

6.5.1.5.1.3 Leak proof on sides and bottom; and

6.5.1.5.1.4 Labeled or color-coded in accordance section 6.8.1 of this plan.

6.5.1.5.2 During use, containers for contaminated sharps shall be:

6.5.1.5.2.1 Easily accessible to personnel and located as close as is feasible to the immediate area where sharps are used or can be reasonably anticipated to be found;

6.5.1.5.2.2 Maintained upright throughout use; and

6.5.1.5.2.3 Replaced routinely and not be allowed to overfill.

6.5.1.5.2.4 When moving containers of contaminated sharps from the area of use, the containers shall be:

6.5.1.5.2.5 Closed immediately prior to removal or replacement to prevent spillage or protrusion of contents during handling, storage, transport, or shipping;

6.5.1.5.2.6 Placed in a secondary container if leakage is possible. The second container shall be:

6.5.1.5.2.6.1 Closeable;

6.5.1.5.2.6.2 Constructed to contain all contents and prevent leakage during handling, storage, transport, or shipping; and

6.5.1.5.2.6.3 Labeled or color-coded according to section 6.8 of this plan.

6.5.1.5.3 Reusable containers shall not be opened, emptied, or cleaned manually or in any other manner which would expose employees to the risk of percutaneous injury.

6.5.2 Other Regulated Waste Containment. Regulated waste shall be placed in containers which are:

6.5.2.1 Closable;

6.5.2.2 Leakage. Constructed to contain all contents and prevent leakage of fluids during handling, storage, transport or shipping;

6.5.2.3 Labeling. Labeled or color-coded in accordance with section 6.8.1 of this plan; and

6.5.2.4 Closing. Closed prior to removal to prevent spillage or protrusion of contents during handling, storage, transport, or shipping.

6.5.3 Outside Contamination of Waste Container. If outside contamination of the regulated waste container occurs, it shall be placed in a second container. The second container shall be:

6.5.3.1 Closable;

6.5.3.2 Leakage. Constructed to contain all contents and prevent leakage of fluids during handling, storage, transport or shipping;

6.5.3.3 Labeling. Labeled or color-coded in accordance with section 6.8.1 of this plan; and

6.5.3.4 Closing. Closed prior to removal to prevent spillage or protrusion of contents during handling, storage, transport, or shipping.

6.5.4 Disposal. Disposal of all regulated waste shall be in accordance with applicable regulations of the United States, States and Territories, and political subdivisions of States and Territories.

6.6 Laundry.

- 6.6.1 Handling. Contaminated laundry shall be handled as little as possible with a minimum of agitation. (1) Contaminated laundry shall be bagged or containerized at the location where it was used and shall not be sorted or rinsed in the location of use.
- 6.6.2 Containers. Contaminated laundry shall be placed and transported in bags or containers labeled or color-coded in accordance with section 6.8.1 of this plan. When a facility utilizes Universal Precautions in the handling of all soiled laundry, alternative labeling or color-coding is sufficient if it permits all employees to recognize the containers as requiring compliance with Universal Precautions.
- 6.6.3 Wet Contaminated Laundry. Whenever contaminated laundry is wet and presents a reasonable likelihood of soak-through or leakage from the bag or container, the laundry shall be placed and transported in bags or containers which prevent soak-through and/or leakage of fluids to the exterior.
- 6.6.4 Personal Protective Equipment. The supervisor shall ensure that employees who have contact with contaminated laundry wear protective gloves and other appropriate personal protective equipment.
- 6.6.5 Labels and Marking. When contaminated laundry is sent to a second facility which does not utilize Universal Precautions in the handling of all laundry, the department generating the contaminated laundry must place such laundry in bags or containers which are labeled or color-coded in accordance section 6.8 of this plan.

6.7 Hepatitis B vaccination and post-exposure evaluation and follow-up.

- 6.7.1 Availability. BYU-Idaho shall make available the hepatitis B vaccine and vaccination series to all employees who have a potential of occupational exposure, and post-exposure evaluation and follow-up to all employees who have had an exposure incident.
- 6.7.2 Procedure. BYU-Idaho shall ensure that all medical evaluations and procedures including the hepatitis B vaccine and vaccination series and post-exposure evaluation and follow-up, including prophylaxis, are:
 - 6.7.2.1 Cost. Made available at no cost to the employee;
 - 6.7.2.2 Convenience. Made available to the employee at a reasonable time;
 - 6.7.2.3 Performed By. Performed by or under the supervision of a licensed physician or by or under the supervision of another licensed healthcare professional; and

6.7.2.4 Protocol. Provided according to recommendations of the U.S. Public Health Service current at the time these evaluations and procedures take place, except as specified by section 6.7.4.

6.7.3 Laboratory Tests. BYU-Idaho shall ensure that all laboratory tests are conducted by an accredited laboratory at no cost to the employee.

6.7.4 Hepatitis B Vaccination. Hepatitis B vaccination shall be made available after the employee has received the training required in section 6.8.3 of this plan and within 10 working days of initial assignment to all employees who have occupational exposure unless the employee has previously received the complete hepatitis B vaccination series, antibody testing has revealed that the employee is immune, or the vaccine is contraindicated for medical reasons.

The participation in a prescreening program shall not be a prerequisite for receiving hepatitis B vaccination.

6.7.4.1 Employee Refusal. If the employee initially declines hepatitis B vaccination but at a later date while still covered under the standard decides to accept the vaccination, BYU-Idaho shall make available hepatitis B vaccination at that time.

The employees who decline to accept hepatitis B vaccination shall sign the statement in appendix B.

6.7.4.2 Boosters. If a routine booster dose(s) of hepatitis B vaccine is recommended by the U.S. Public Health Service at a future date, such booster dose(s) shall be made available in accordance with section 11.2.

6.7.5 Post-exposure Evaluation and Follow-up. Following a report of an exposure incident, BYU-Idaho shall make immediately available to the exposed employee a confidential medical evaluation and follow-up, including at least the following elements:

6.7.5.1 Documentation. Documentation of the route(s) of exposure, and the circumstances under which the exposure incident occurred;

6.7.5.2 Identification of Source. Identification and documentation of the source individual, unless it can be established that identification is infeasible or prohibited by state or local law;

6.7.5.2.1 The source individual's blood shall be tested as soon as feasible and after consent is obtained in order to determine HBV and HIV infectivity. If consent is not obtained, BYU-Idaho shall establish that legally required consent cannot be obtained. When the source individual's consent is not required by law, the source

individual's blood, if available, shall be tested and the results documented.

6.7.5.2.2 When the source individual is already known to be infected with HBV or HIV, testing for the source individual's known HBV or HIV status need not be repeated.

6.7.5.2.3 Results of the source individual's testing shall be made available to the exposed employee, and the employee shall be informed of applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual.

6.7.5.3 Employee Serology.

6.7.5.3.1 The exposed employee's blood shall be collected as soon as feasible and tested after consent is obtained.

6.7.5.3.2 If the employee consents to baseline blood collection, but does not give consent at that time for HIV serologic testing, the sample shall be preserved for at least 90 days. If, within 90 days of the exposure incident, the employee elects to have the baseline sample tested, such testing shall be done as soon as feasible.

6.7.5.4 Prophylaxis. Post-exposure prophylaxis, when medically indicated, as recommended by the U.S. Public Health Service;

6.7.6 Counseling and Evaluation of Reported Illnesses.

6.7.6.1 Information Provided to the Healthcare Professional. BYU-Idaho shall ensure that the healthcare professional responsible for the employee's Hepatitis B vaccination is provided a copy of the Bloodborne Pathogen Standard.

In addition the healthcare professional evaluating an employee after an exposure incident shall be provided with the following information:

6.7.6.1.1 A description of the exposed employee's duties as they relate to the exposure incident;

6.7.6.1.2 Documentation of the route(s) of exposure and circumstances under which exposure occurred;

6.7.6.1.3 Results of the source individual's blood testing, if available; and

6.7.6.1.4 All medical records relevant to the appropriate treatment of the employee including vaccination status which are the employer's responsibility to maintain.

6.7.7 Healthcare Professional's Written Opinion. BYU-Idaho shall obtain and provide the employee with a copy of the evaluating healthcare professional's written opinion within 15 days of the completion of the evaluation upon request.

6.7.7.1 Hepatitis B Vaccination. The healthcare professional's written opinion for Hepatitis B vaccination shall be limited to whether Hepatitis B vaccination is indicated for an employee, and if the employee has received such vaccination.

6.7.7.2 Evaluation and Follow-up. The healthcare professional's written opinion for post-exposure evaluation and follow-up shall be limited to the following information:

6.7.7.2.1 That the employee has been informed of the results of the evaluation; and

6.7.7.2.2 That the employee has been told about any medical conditions resulting from exposure to blood or other potentially infectious materials which require further evaluation or treatment. All other findings or diagnoses shall remain confidential and shall not be included in the written report.

6.7.8 Medical recordkeeping. Medical records required by this plan shall be maintained in accordance with section 9.1 of this plan.

6.8.0 Communication of Hazards to Employees.

6.8.1 Labels.

6.8.1.1 Required Labeling. Warning labels shall be affixed to containers of regulated waste, refrigerators and freezers containing blood or other potentially infectious material; and other containers used to store, transport or ship blood or other potentially infectious materials, except as provided in sections 6.8.1.7 through 6.8.1.9.

6.8.1.2 Required Legend. Labels required by this section shall include the legend as demonstrated in figure 1 in appendix C.

6.8.1.3 Color. These labels shall be fluorescent orange or orange-red or predominantly so, with lettering or symbols in a contrasting color.

6.8.1.4 Location and Attachment. Required labels shall be affixed as close as feasible to the container by string, wire, adhesive, or other method that prevents their loss or unintentional removal.

6.8.1.5 Contaminated Equipment. Labels required for contaminated equipment shall be in accordance with this paragraph and shall also state which portions of the equipment remain contaminated.

6.8.1.6 Color Coding In Place of Labels. Red bags or red containers may be substituted for labels.

- 6.8.1.7 Exemption for Blood Products. Containers of blood, blood components, or blood products that are labeled as to their are exempted from the labeling requirements.
- 6.8.1.8 Exemption for Inner Packaging. Individual containers of blood or other potentially infectious materials that are placed in a labeled container during storage, transport, shipment or disposal are exempted from these labeling requirements.
- 6.8.1.9 Exemption for Decontaminated Waste. Regulated waste that has been decontaminated need not be labeled or color-coded.
- 6.8.2.2 Color. These signs shall be fluorescent orange-red or predominantly so, with lettering or symbols in a contrasting color.

7.0 Responsibilities – Department Exposure and Control Plan

Each department or center at BYU-Idaho shall write and review a supplementary safety policy for their area. This document, shall be titled the A (Name of Department or Center) Exposure Control Plan (for example, The College of Nursing Exposure Control Plan). The Exposure Control Plan shall be reviewed and updated at least annually and whenever necessary to reflect new or modified tasks and procedures which affect occupational exposure and to reflect new or revised employee positions with occupational exposure.

7.1 Exposure Control Plan.

Each department or center should write a formal plan detailing the proper protocols for handling potential occupational exposures or contamination involving biohazardous substances for their individual area as well as provide training for employees or student who are at risk for occupational exposure.

7.1.2 Protocol for handling biohazardous wastes.

7.1.2.1 The BYU-Idaho Student Health Center will oversee the shipping of all biohazardous waste to the proper off-campus waste handling facilities. Each department or center is to contact the Safety Office to have bio-waste picked up and transported to the Student Health Center for disposal.

7.1.2.1.2 Each department or center will be charged a fee by the health center for the purchase of biohazardous containers unless otherwise arranged with the Safety Office.

7.1.3 Provide Biohazard Exposure training for all employees whose line of work may present risk of occupational exposure.

7.1.4 Provide information on benefits and risks for Hepatitis B vaccination shots.

7.1.5 Include a copy of the department list from section 6.1 of this document to the Safety Office.

3.1.6 A copy of this policy shall be submitted to the Safety Office for documentation and review.

8.0 Training

- 8.1 Training shall be provided at initial hire and assigned to tasks where occupational exposure may take place and at least annual for those with the potential of exposure.
 - 8.1.1 Additional training will take place when there are changes or modifications of tasks affect the employee's occupational exposure. The additional training may be limited to addressing any new exposures due to the change.
- 8.2 The training program shall contain at least the following information:
 - 8.2.1 A copy of the regulations in either hard or electronic format
 - 8.2.2 A general explanation of the modes of transmission of bloodborne pathogens.
 - 8.2.3 An explanation of the exposure control plan, as outlined in this policy, and how they may view or obtain a copy.
 - 8.2.4 An explanation of the appropriate methods for recognizing tasks and other activities that may involve exposure to blood and other potentially infectious materials.
 - 8.2.5 An explanation of the use and limitations of methods that will prevent or reduce exposure including appropriate engineering controls, work practices, and personal protective equipment.
 - 8.2.6 Information on the types, proper use, location, removal, handling, decontamination and disposal of personal protective equipment.
 - 8.2.7 An explanation of the basis for selection of personal protective equipment.
 - 8.2.8 Information on the hepatitis B Vaccine, including information on efficacy, safety, method of administration, the benefits of being vaccinated, and the vaccine and vaccination that is offered free of charge.
 - 8.2.9 Explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that will be made available.
 - 8.2.10 Information on the post-exposure evaluation and follow-up that BYU-Idaho is required to provide for the employee following an exposure incident.
 - 8.2.11 An explanation of the signs and labels and/or color coding required.
 - 8.2.12 An opportunity for interactive questions and answers with the person conducting the training session.
 - 8.2.13 The person conducting the training shall be knowledgeable in the subject matter covered by the elements contained in this training program as it relates to the workplace.

- 8.3 Trainer. The person conducting the training shall be knowledgeable in the subject matter covered by the elements contained in the training program as it relates to the workplace that the training will address.

9.0 Records Retention

9.1 Medical Records

- 9.1.1 Records shall be accurate and maintained in accordance with 29 CFR 1910.1020.
- 9.1.2 All medical records will be kept confidential in accordance with HIPA..
- 9.1.3 The records shall be maintained for at least the duration of employment plus 30 years in accordance with 29 CFR 1910.1020.

9.2 Training Records

- 9.2.1 Training records shall be accurate and maintained in accordance with 29 CFR 1910.1020.
- 9.2.2 Training records shall be maintained for not less than 3 years.

9.3 Sharps Injury Log

- 9.3.1 BYU-I shall maintain a sharps injury log in the Student Health Center and/or the Safety Office in accordance with 29 CFR 1910.1020
- 9.3.2 The Sharps Injury Log shall be maintained for not less than 5 years in accordance with 29 CFR 1904.33

10.0 Appendices

APPENDIX A

Definitions

Blood means human blood, human blood components, and products made from human blood.

Bloodborne Pathogens means pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV) and human immunodeficiency virus (HIV).

Clinical Laboratory means a workplace where diagnostic or other screening procedures are performed on blood or other potentially infectious materials.

Contaminated means the presence or the reasonably anticipated presence of blood or other potentially infectious materials on an item or surface.

Contaminated Laundry means laundry which has been soiled with blood or other potentially infectious materials or may contain sharps.

Contaminated Sharps means any contaminated object that can penetrate the skin including, but not limited to, needles, scalpels, broken glass, broken capillary tubes, and exposed ends of dental wires.

Decontamination means the use of physical or chemical means to remove, inactivate, or destroy bloodborne pathogens on a surface or item to the point where they are no longer capable of transmitting infectious particles and the surface or item is rendered safe for handling, use, or disposal.

Engineering Controls means controls (e.g., sharps disposal containers, self-sheathing needles) that isolate or remove the bloodborne pathogens hazard from the workplace.

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

Handwashing Facilities means a facility providing an adequate supply of running potable water, soap and single use towels or hot air drying machines.

Licensed Healthcare Professional is a person whose legally permitted scope of practice allows him or her to independently perform the activities required by section 11 dealing with Hepatitis B Vaccination and Post-exposure Evaluation and Follow-up.

HBV means hepatitis B virus.

HIV means human immunodeficiency virus.

Occupational Exposure means 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 means:

- 1 The following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva

in dental procedures, any bodily fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids;

2. Any unfixed tissue or organ (other than intact skin) from a human (living or dead); and
- 3 HIV-containing cell or tissue cultures, organ cultures, and HIV- or HBV-containing culture medium or other solutions; and blood, organs, or other tissues from experimental animals infected with HIV or HBV.

Parenteral means piercing mucous membranes or the skin barrier through such events as needle sticks, human bites, cuts, and abrasions.

Personal Protective Equipment is specialized clothing or equipment worn by an employee for protection against a hazard. General work clothes (e.g., uniforms, pants, shirts or blouses) not intended to function as protection against a hazard are not considered to be personal protective equipment.

Regulated Waste means 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.

Research Laboratory means a laboratory producing or using research-laboratory-scale amounts of HIV or HBV. Research laboratories may produce high concentrations of HIV or HBV but not in the volume found in production facilities.

Source Individual means any individual, living or dead, whose blood or other potentially infectious materials may be a source of occupational exposure to the employee. Examples include, but are not limited to, hospital and clinic patients; clients in institutions for the developmentally disabled; trauma victims; clients of drug and alcohol treatment facilities; residents of hospices and nursing homes; human remains; and individuals who donate or sell blood or blood components.

Sterilize means the use of a physical or chemical procedure to destroy all microbial life including highly resistant bacterial endospores.

Universal Precautions is an approach to infection control. According to the concept of Universal Precautions, all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV, and other bloodborne pathogens.

Work Practice Controls means controls that reduce the likelihood of exposure by altering the manner in which a task is performed (e.g., prohibiting recapping of needles by a two-handed technique).

APPENDIX B

Waiver of Medical Treatment Form

BYU
IDAHO

Student Health Center
100 Student Health Center • Rexburg, ID • 83460-2010 • Phone: (208) 496-9330

Refusal of Care

I _____ refuse _____.
(print name) (refusal of care)

I have been informed of the risks and consequences of the refusal. I acknowledge that I have been examined and offered further examination and treatment at this facility. However, I refuse such further medical examination and treatment. I have been informed of this risk and consequences potentially involved in this refusal and the possible benefits of continuing medical treatment and any alternatives to my decision to refuse further examination and treatment. I hereby release the attending physician and other physicians involved in my care, the Student Health Center, its agents and employees from all responsibilities from any ill effects.

Signed _____

Date _____

Witness _____

Date _____

APPENDIX C

Signs & labels (Examples)



BIOHAZARD



