# Eastern Kentucky University Bloodborne Pathogens Exposure Control Plan

## 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, safer medical devices, such as sharps with engineered sharps injury protections and needleless systems) 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.

**Hand washing Facilities** means a facility providing an adequate supply of running potable water, soap, and single-use towels or 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 paragraph (f) Hepatitis B Vaccination and Post-exposure Evaluation and Follow-up.

**HBV** means hepatitis B virus.

**HIV** means human immunodeficiency virus.

**Needleless systems** means a device that does not use needles for:

(1) The collection of bodily fluids or withdrawal of body fluids after initial venous or arterial access is established; (2) The administration of medication or fluids; or (3) Any other procedure involving the potential for occupational exposure to bloodborne pathogens due to percutaneous injuries from contaminated sharps.

**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 body 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 needlesticks, 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.

**Production Facility** means a facility engaged in industrial-scale, large-volume or high concentration production of HIV or HBV.

**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.

**Sharps** with engineered sharps injury protections means a non-needle sharp or a needle device used for withdrawing body fluids, accessing a vein or artery, or administering medications or other fluids, with a built-in safety feature or mechanism that effectively reduces the risk of an exposure incident.

**Source Individual** means any individual, living or dead, whose blood or other potentially infectious materials may be a source of occupational exposure to affected employees. 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).

## Exposure Control Plan

Each employer having an employee(s) with occupational exposure as defined by paragraph (b) of this section will establish a written Exposure Control Plan designed to eliminate or minimize employee exposure.

The Exposure Control Plan will contain at least the following elements:

- The exposure determination
- The schedule and method of implementation for paragraphs:
    - Methods of Compliance,
    - Hepatitis B Vaccination and Post-Exposure Evaluation and Follow-up,
    - Communication of Hazards to Employees, and
    - Recordkeeping, of this standard, and
    - The procedure for the evaluation of circumstances surrounding exposure incidents

The Exposure Control Plan is accessible to all EKU employees and will 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. The review and update of such plans will also:

- Reflect changes in technology that eliminate or reduce exposure to bloodborne pathogens; and
- Document annually consideration and implementation of appropriate commercially available and effective safer medical devices designed to eliminate or minimize occupational exposure.

EKU, who is required to establish an Exposure Control Plan, will solicit input from non-managerial employees responsible for direct patient care who are potentially exposed to injuries from contaminated sharps in the identification, evaluation, and selection of effective engineering and work practice controls and will document the solicitation in the Exposure Control Plan. This input will be at the departmental level at the following locations:

- Student Health Services
- Blue Grass Community Healthcare Centers

## Exposure Determination

When an EKU employee has an occupational exposure, an exposure determination will be prepared with the following considerations in mind:

- A list of all job classifications in which all employees in those job classifications have occupational exposure;

- A list of job classifications in which some employees have occupational exposure, and
- 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 paragraph (c)(2)(i)(B) of this standard.

This exposure determination will be made without regard to the use of personal protective equipment.

## Methods of Compliance

Universal precautions will 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 will be considered potentially infectious materials.

### *Engineering and Work Practice Controls*

Engineering and work practice controls will be used to eliminate or minimize employee exposure. Where occupational exposure remains after institution of these controls, personal protective equipment will also be used.

Engineering controls will be examined and maintained or replaced on a regular schedule to ensure their effectiveness.

Handwashing facilities will be provided and will be readily accessible to employees. When provision of handwashing facilities is not feasible, the area manager/supervisor will 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 will be washed with soap and running water as soon as feasible.

Employees will wash their hands immediately or as soon as feasible after removal of gloves or other personal protective equipment.

Employees will wash hands and any other skin with soap and water, or flush mucous membranes with water immediately or as soon as feasible following contact of such body areas with blood or other potentially infectious materials.

Contaminated needles and other contaminated sharps will not be bent, recapped, or removed. Shearing or breaking of contaminated needles is prohibited.

Immediately or as soon as possible after use, contaminated reusable sharps will be placed in appropriate containers until properly reprocessed. These containers will be:

- Puncture resistant;
- Labeled or color-coded in accordance with this standard;
- Leak-proof on the sides and bottom.

Eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses are prohibited in work areas where there is a reasonable likelihood of occupational exposure.

Food and drink will not be kept in refrigerators, freezers, shelves, cabinets or on countertops or bench tops where blood or other potentially infectious materials are present.

All procedures involving blood or other potentially infectious materials will be performed in such a manner as to minimize splashing, spraying, spattering, and generation of droplets of these substances.

Mouth pipetting/suctioning of blood or other potentially infectious materials is prohibited.

Specimens of blood or other potentially infectious materials will be placed in a container which prevents leakage during collection, handling, processing, storage, transport, or shipping.

The container for storage, transport, or shipping will be labeled or color-coded and closed prior to being stored, transported, or shipped. When a department utilizes Universal Precautions in the handling of all specimens, the labeling/color-coding of specimens is not necessary provided containers are recognizable as containing specimens. This exemption only applies while such specimens/containers remain within the facility. Labeling or color-coding is required when such specimens/containers leave an EKU building.

If outside contamination of the primary container occurs, the primary container will be placed within a second container which prevents leakage during handling, processing, storage, transport, or shipping and is labeled or color-coded according to the requirements of this standard.

If the specimen could puncture the primary container, the primary container will be placed within a secondary container which is puncture-resistant in addition to the above characteristics.

Equipment which may become contaminated with blood or other potentially infectious materials will be examined prior to servicing or shipping and will be decontaminated as necessary, unless EKU can demonstrate that decontamination of such equipment or portions of such equipment is not feasible.

A readily observable label will be attached to the equipment stating which portions remain contaminated.

This information will be 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.

## Personal Protective Equipment

Provision. When there is occupational exposure, EKU will provide, at no cost to affected employees, appropriate personal protective equipment such as, but not limited to, gloves, gowns, laboratory coats, face shields or masks and eye protection, and mouthpieces, resuscitation bags, pocket masks, or other ventilation devices. Personal protective equipment will be considered "appropriate" only if it does not permit blood or other potentially infectious materials to pass through to or reach affected employees' 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.

- Use. EKU will ensure that affected employees use appropriate personal protective equipment unless EKU shows that affected employees temporarily and briefly declined to use personal protective equipment when, under rare and extraordinary circumstances, it was affected employees' professional judgment that in the specific instance its use would have prevented the delivery of health care or public safety services or would have posed an increased hazard to the safety of the worker or co-worker. When affected employees makes this judgment, the circumstances will be investigated and documented in order to determine whether changes can be instituted to prevent such occurrences in the future.
- Accessibility. EKU will ensure that appropriate personal protective equipment in the appropriate sizes is readily accessible at the worksite or is issued to employees. Hypoallergenic gloves, glove liners, powderless gloves, or other similar alternatives will be readily accessible to those employees who are allergic to the gloves normally provided.
- Cleaning, Laundering, and Disposal. EKU will clean, launder, and dispose of personal protective equipment required by paragraphs (d) and (e) of this standard, at no cost to affected employees.

Repair and Replacement. EKU will repair or replace personal protective equipment as needed to maintain its effectiveness, at no cost to affected employees.

If a garment(s) is penetrated by blood or other potentially infectious materials, the garment(s) will be removed immediately or as soon as feasible.

All personal protective equipment will be removed prior to leaving the work area.

When personal protective equipment is removed it will be placed in an appropriately designated area or container for storage, washing, decontamination or disposal.

- Gloves. Gloves will be worn when it can be reasonably anticipated that affected employees may have hand contact with blood, other potentially infectious materials, mucous membranes, and non-intact skin; when performing vascular access procedures except as specified in paragraph (d)(3)(ix)(D); and when handling or touching contaminated items or surfaces.

  Disposable (single use) gloves such as surgical or examination gloves, will be replaced as soon as practical when contaminated or as soon as feasible if they are torn, punctured, or when their ability to function as a barrier is compromised.

  Disposable (single use) gloves will not be washed or decontaminated for re-use.

  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.

- 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, will 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.
- 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 will be worn in occupational exposure situations. The type and characteristics will depend upon the task and degree of exposure anticipated.
- Surgical caps or hoods and/or shoe covers or boots will be worn in instances when gross contamination can reasonably be anticipated (e.g., autopsies, orthopedic surgery).

## Housekeeping

EKU will ensure that the worksite is maintained in a clean and sanitary condition. EKU will 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.

All equipment and environmental and working surfaces will be cleaned and decontaminated after contact with blood or other potentially infectious materials.

Contaminated work surfaces will 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.

Protective coverings, such as plastic wrap, aluminum foil, or imperviously-backed absorbent paper used to cover equipment and environmental surfaces, will 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.

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 will be inspected and decontaminated on a regularly scheduled basis and cleaned and decontaminated immediately or as soon as feasible upon visible contamination.

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

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

## Regulated Waste

Environmental Health & Safety will select a bio hazardous waste firm to transport and dispose of bloodborne pathogen waste for the main campus and extended campuses. The Blue Grass Community Healthcare Centers will select a reputable vendor for locations under their direction and control.

The current vendor for the main campus and extended campuses is:

- Stericycle

The current vendor selected by the Blue Grass Community Healthcare Centers is:

- Darob

### *Contaminated Sharps Discarding and Containment*

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

- Closable;
- Puncture resistant;
- Leak-proof on sides and bottom; and
- Labeled or color-coded

During use, containers for contaminated sharps will be:

- 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 (e.g., laundries);
- Maintained upright throughout use; and
- Replaced routinely and not be allowed to overfill.

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

- Closed immediately prior to removal or replacement to prevent spillage or protrusion of contents during handling, storage, transport, or shipping;
- Placed in a secondary container if leakage is possible. The second container will be:
- Closable;

- Constructed to contain all contents and prevent leakage during handling, storage, transport, or shipping; and
- Labeled or color-coded.

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

### *Other Regulated Waste Containment*

Regulated waste will be placed in containers which are:

- Closable;
- Constructed to contain all contents and prevent leakage of fluids during handling, storage, transport or shipping;
- Labeled or color-coded; and
- Closed prior to removal to prevent spillage or protrusion of contents during handling, storage, transport, or shipping.

If outside contamination of the regulated waste container occurs, it will be placed in a second container. The second container will be:

- Closable;
- Constructed to contain all contents and prevent leakage of fluids during handling, storage, transport or shipping;
- Labeled or color-coded; and
- Closed prior to removal to prevent spillage or protrusion of contents during handling, storage, transport, or shipping.

Disposal of all regulated waste will be in accordance with applicable regulations of the United States

### *Laundry*

Contaminated laundry will be handled as little as possible with a minimum of agitation.

Contaminated laundry will be bagged or containerized at the location where it was used and will not be sorted or rinsed in the location of use.

Contaminated laundry will be placed and transported in bags or containers labeled or color-coded. 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.

Whenever contaminated laundry is wet and presents a reasonable likelihood of soak-through of or leakage from the bag or container, the laundry will be placed and transported in bags or containers which prevent soak-through and/or leakage of fluids to the exterior.

EKU will ensure that employees who have contact with contaminated laundry wear protective gloves and other appropriate personal protective equipment.

When a facility ships contaminated laundry off-site to a second facility which does not utilize Universal Precautions in the handling of all laundry, the facility generating the contaminated laundry must place such laundry in bags or containers which are labeled or color-coded.

# Hepatitis B Vaccination and Post-exposure Evaluation and Follow-up

EKU will make available the hepatitis B vaccine and vaccination series to all employees who have occupational exposure, and post-exposure evaluation and follow-up to all employees who have had an exposure incident.

EKU's preferred clinic for Hepatitis B vaccination is:

- Occupational Medicine Center
  646 University Shopping Center
  Richmond, KY 40475
  (859) 623-0535

EKU will 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:

- Made available at no cost to affected employees;
- Made available to affected employees at a reasonable time and place;
- Performed by or under the supervision of a licensed physician or by or under the supervision of another licensed healthcare professional; and
- Provided according to recommendations of the U.S. Public Health Service current at the time these evaluations and procedures take place.

EKU will ensure that all laboratory tests are conducted by an accredited laboratory at no cost to affected employees.

### *Hepatitis B Vaccination*

Hepatitis B vaccination will be made available after affected employees has received the training and within 10 working days of initial assignment to all employees who have occupational exposure unless affected employees has previously received the complete hepatitis B vaccination series, antibody testing has revealed that affected employees is immune, or the vaccine is contraindicated for medical reasons.

EKU will not make participation in a prescreening program a prerequisite for receiving hepatitis B vaccination.

If affected employees initially declines hepatitis B vaccination but at a later date while still covered under the standard decides to accept the vaccination, EKU will make available hepatitis B vaccination at that time.

EKU will assure that employees who decline to accept hepatitis B vaccination offered by EKU sign the declination statement in Appendix A.

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) will be made available.

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

- Documentation of the route(s) of exposure, and the circumstances under which the exposure incident occurred;
- Identification and documentation of the source individual, unless EKU can establish that identification is infeasible or prohibited by state or local law;
  - The source individual's blood will be tested as soon as feasible and after consent is obtained in order to determine HBV and HIV infectivity. If consent is not obtained, EKU will 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, will be tested and the results documented.
    - 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.
    - Results of the source individual's testing will be made available to the exposed employee, and affected employees will be informed of applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual.
- Collection and testing of blood for HBV and HIV serological status;
    - The exposed employee's blood will be collected as soon as feasible and tested after consent is obtained.
    - If affected employees consent to baseline blood collection, but do not give consent at that time for HIV serologic testing, the sample will be preserved for at least 90 days. If, within 90 days of the exposure incident, affected employees elects to have the baseline sample tested, such testing will be done as soon as feasible.
- Post-exposure prophylaxis, when medically indicated, as recommended by the U.S. Public Health Service;
- Counseling; and
- Evaluation of reported illnesses.

### *Information Provided to the Healthcare Professional*

EKU will ensure that the healthcare professional responsible for affected employees' Hepatitis B vaccination is provided a copy of this regulation.

EKU will ensure that the healthcare professional evaluating an employee after an exposure incident is provided the following information:

- A copy of this regulation;
- A description of the exposed employee's duties as they relate to the exposure incident;
- Documentation of the route(s) of exposure and circumstances under which exposure occurred;
- Results of the source individual's blood testing, if available; and
- All medical records relevant to the appropriate treatment of affected employees including vaccination status which are EKU's responsibility to maintain.

### *Healthcare Professional's Written Opinion*

EKU will obtain and provide affected employees with a copy of the evaluating healthcare professional's written opinion within 15 days of the completion of the evaluation.

The healthcare professional's written opinion for Hepatitis B vaccination will be limited to whether Hepatitis B vaccination is indicated for an employee, and if affected employees has received such vaccination.

The healthcare professional's written opinion for post-exposure evaluation and follow-up will be limited to the following information:

- That affected employees has been informed of the results of the evaluation; and
- That affected employees 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 will remain confidential and will not be included in the written report.

### *Medical Recordkeeping*

Medical records required by this standard will be maintained in either the Departmental file, Human Resources, or Environmental Health & Safety.

## Communication of Hazards to Employees

### *Labels*

Warning labels will 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.

Labels will include the following legend:


These labels will be fluorescent orange or orange-red or predominantly so, with lettering and symbols in a contrasting color.

Labels will be affixed as close as feasible to the container by string, wire, adhesive, or other method that prevents their loss or unintentional removal.

Red bags or red containers may be substituted for labels.

Containers of blood, blood components, or blood products that are labeled as to their contents and have been released for transfusion or other clinical use are exempted from the labeling requirements of paragraph (g).

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 the labeling requirement.

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

Regulated waste that has been decontaminated need not be labeled or color-coded.

### *Signs*

EKU will post signs at the entrance to work areas specified in paragraph (e), HIV and HBV Research Laboratory and Production Facilities, which will bear the following legend:


(Name of the Infectious Agent)
(Special requirements for entering the area)
(Name, telephone number of the laboratory director or other responsible person.)

These signs will be fluorescent orange-red or predominantly so, with lettering and symbols in a contrasting color.

### *Information and Training*

EKU will train each employee with occupational exposure in accordance with the requirements of this section. Such training must be provided at no cost to affected employees and during working hours. EKU will institute a training program and ensure employee participation in the program.

Training will be provided as follows:

- At the time of initial assignment to tasks where occupational exposure may take place;
- At least annually thereafter.

Annual training for all employees will be provided within one year of their previous training.

EKU will provide additional training when changes such as modification of tasks or procedures or institution of new tasks or procedures affect affected employees' occupational exposure. The additional training may be limited to addressing the new exposures created.

Material appropriate in content and vocabulary to educational level, literacy, and language of employees will be used.

The training program will contain at a minimum the following elements:

- An accessible copy of the regulatory text of this standard and an explanation of its contents;
- A general explanation of the epidemiology and symptoms of bloodborne diseases;
- An explanation of the modes of transmission of bloodborne pathogens;
- An explanation of EKU's exposure control plan and the means by which affected employees can obtain a copy of the written plan;
- An explanation of the appropriate methods for recognizing tasks and other activities that may involve exposure to blood and other potentially infectious materials;
- 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;
- Information on the types, proper use, location, removal, handling, decontamination and disposal of personal protective equipment;
- An explanation of the basis for selection of personal protective equipment;

- Information on the hepatitis B vaccine, including information on its efficacy, safety, method of administration, the benefits of being vaccinated, and that the vaccine and vaccination will be offered free of charge;
- Information on the appropriate actions to take and persons to contact in an emergency involving blood or other potentially infectious materials;
- An 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;
- Information on the post-exposure evaluation and follow-up that EKU is required to provide for affected employees following an exposure incident;
- An explanation of the signs and labels and/or color coding; and
- An opportunity for interactive questions and answers with the person conducting the training session.

The person conducting the training will 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.

## Recordkeeping

### *Medical Records*

EKU will establish and maintain an accurate record for each employee with occupational exposure, in accordance with 29 CFR 1910.1020.

This record will include:

- The name and social security number of affected employees;
- A copy of affected employees' hepatitis B vaccination status including the dates of all the hepatitis B vaccinations and any medical records relative to affected employees' ability to receive vaccination as required;
- A copy of all results of examinations, medical testing, and follow-up procedures as required;
- EKU's copy of the healthcare professional's written opinion; and
- A copy of the information provided to the healthcare professional as required.

### *Confidentiality*

EKU will ensure that employee medical records are:

- Kept confidential; and
- Not disclosed or reported without affected employees' express written consent to any person within or outside the workplace except as required by this section or as may be required by law.

EKU will maintain the records for at least the duration of employment plus 30 years in accordance with 29 CFR 1910.1020.

### *Training Records*

Training records will include the following information:

- The dates of the training sessions;
- The contents or a summary of the training sessions;
- The names and qualifications of persons conducting the training; and
- The names and job titles of all persons attending the training sessions.
- Training records will be maintained for 3 years from the date on which the training occurred.

### *Availability*

EKU will ensure that all records will be made available upon request to the Assistant Secretary and the Director for examination and copying.

Employee training records will be provided upon request for examination and copying to employees, to employee representatives, to the Director, and to the Assistant Secretary.

Employee medical records will be provided upon request for examination and copying to the subject employee, to anyone having written consent of the subject employee, to the Director, and to the Assistant Secretary in accordance with 29 CFR 1910.1020.

### *Transfer of Records*

EKU will comply with the requirements involving transfer of records set forth in 29 CFR 1910.1020(h).

[OSHA recently discovered mistakes made by the Federal Register editors of the CFR in implementing the 2001 OSHA final rule for Bloodborne Pathogens; these mistakes affected 29 CFR 1910.1030(h) and (i). OSHA is in the process of correcting these mistakes in the CFR. In the meantime, OSHA is revising this website to reflect the correct regulations as they will soon appear in eCFR and in the July 1, 2012, edition of the hard copy CFR.]

### *Sharps injury log*

EKU will establish and maintain a sharps injury log for the recording of percutaneous injuries from contaminated sharps. The information in the sharps injury log will be recorded and maintained in such manner as to protect the confidentiality of the injured employee. The sharps injury log will contain, at a minimum:

- The type and brand of device involved in the incident,
- The department or work area where the exposure incident occurred, and
- An explanation of how the incident occurred.

All sharps injuries must be reported to EKU Environmental Health & Safety at (859) 622-5523.

The sharps injury log will be maintained for the period required by 29 CFR 1904.33.

### *Dates*

Created: Unknown

Revised: 8/5/2014

Sample Hepatitis B Declination Form

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:_____

Signature:_____

Date: _____

Supervisor:_____

Signature:_____

Date:_____