



Date: _____

Workplace: _____

Completed by: _____

Bloodborne Pathogens Regulatory Compliance

[29 CFR 1910.1030]

EXPOSURE CONTROL PLAN AND EXPOSURE DETERMINATION: 29 CFR 1910.1030

- Do you have a written exposure control plan if you have employees with occupational exposure to bloodborne pathogens? [(c)(1)(i)]
- Is a copy of your plan accessible to employees? [(c)(1)(iii)]
- Do you review and update your plan at least once a year or whenever necessary to reflect new or modified tasks and procedures that affect exposure? [(c)(1)(iv)]
- Does your review and update reflect changes in technology that eliminate or reduce exposure? [(c)(1)(iv)(A)]
- Do you solicit input from nonmanagerial employees with potential exposure concerning the identification, evaluation, and selection of effective engineering and work practice controls? [(c)(1)(v)]
- Do you document this solicitation of input? [(c)(1)(v)]
- Do you prepare an exposure determination that lists all job classifications in which employees can encounter exposure and all tasks and procedures in which exposures might occur without regard to PPE? [(c)(2)(i),(ii)]

METHODS OF COMPLIANCE:

- Are universal precautions observed to prevent contact with blood or other potentially infectious materials? [(d)(1)]
- Are engineering and work practice controls used to eliminate or minimize employee exposure? [(d)(2)(i)]
- Are engineering controls evaluated on a regular schedule and replaced as necessary to ensure effectiveness? [(d)(2)(ii)]
- Do you provide handwashing facilities that are readily accessible to employees, and do you ensure that employees wash hands after removal of gloves or other PPE or after an exposure? [(d)(2)(iii),(v),(vi)]
- Do you instruct employees not to bend, recap, break, shear, or remove contaminated sharps? [(d)(2)(vii)]
- Are employees required to place used sharps in appropriate containers that are puncture resistant, leakproof, and appropriately labeled? [(d)(2)(viii)]
- Do you prohibit eating, drinking, smoking, applying cosmetics, and handling contact lenses in work areas where exposure is likely? [(d)(2)(ix)]
- Are food and drink prohibited in refrigerators, cabinets, countertops, etc. where potentially infectious materials are present? [(d)(2)(x)]



- Are all procedures involving blood or other potentially infectious materials performed in such a way as to minimize splashing, spraying, spattering, etc.? [(d)(2)(xi)]
- Do you train employees never to suction blood or other potentially infectious materials by mouth? [(d)(2)(xii)]
- Are your procedures for collecting specimens and the storage, transport, or shipping of potentially infectious materials carried out in such a way as to prevent exposure? [(d)(2)(xiii)]
- Do you decontaminate equipment before servicing or shipping? [(d)(2)(xiv)]

PERSONAL PROTECTIVE EQUIPMENT (PPE):

- Do you provide appropriate PPE to employees at no cost and require them to use assigned PPE? [(d)(3)]
- Are effective procedures for cleaning, laundering, and disposing of PPE in place? [(d)(3)(iv)]
- Do you repair or replace PPE as needed at no cost to employees? [(d)(3)(v)]

HOUSEKEEPING AND REGULATED WASTE:

- Do you make sure all equipment, bins, pails, and environmental surfaces are cleaned and decontaminated after contact with blood or other potentially infectious materials? [(d)(4)(ii)]
- Do you train employees to pick up broken glassware by mechanical means, not their hands? [(d)(4)(ii)(D)]
- Do you store or process reusable sharps so that employees are not required to reach by hand into these containers? [(d)(4)(ii)(E)]
- Are contaminated sharps discarded in appropriately constructed and labeled containers that are easily accessible? [(d)(4)(iii)(A)(1)]
- Is all regulated waste disposed of in appropriately constructed and labeled containers? [(d)(4)(iii)(B)(1)]
- Is contaminated laundry handled as little as possible and bagged and transported in appropriate containers in accordance with the requirements of universal precautions? [(d)(4)(iv)(A)]

- Are employees who handle potentially contaminated laundry equipped with appropriate PPE and required to use it? [(d)(4)(iv)(B)]

HEPATITIS B VACCINATION AND POST-EXPOSURE EVALUATION AND FOLLOW-UP:

- Do you provide, at no cost, hepatitis B vaccinations to all employees who are exposed to the virus and post-exposure evaluation and follow-up to all employees who have had an exposure incident? [(f)(1)]
- Do you make vaccinations available after employees have received required training and within 10 working days of initial assignment to a job in which the employee may be exposed to hepatitis B? [(f)(2)]
- Following an exposure incident, do you immediately provide the employee with a confidential medical evaluation and follow-up? [(f)(3)]
- Do you provide the healthcare professionals responsible for employees' hepatitis B vaccinations with all relevant information, including a copy of the OSHA standard and a description of the exposed employee's job duties? [(f)(4)]
- Do you obtain and provide employees with a copy of the healthcare professional's written opinion within 15 days of a medical evaluation? [(f)(5)]

COMMUNICATION OF HAZARDS:

- Are warning labels of fluorescent orange or orange-red bearing the biohazard symbol and lettering affixed to containers of regulated waste, refrigerators and freezers containing blood or other potentially infectious materials, and other containers used to store, transport, or ship these materials? [(g)(1)]

EMPLOYEE TRAINING:

- Do you ensure that all employees with occupational exposure participate in a training program during working hours? [(g)(2)(i)]



- Are employees trained at the time of initial assignment to a job involving exposure and at least annually thereafter? [(g)(2)(ii)]
- Do you provide additional training when changes such as modifications of tasks or procedures affect exposure? [(g)(2)(v)]

Does your training program contain, at a minimum, the following elements:

- An explanation of the standard? [(g)(2)(vii)(A)]
- An explanation of the epidemiology and symptoms of bloodborne diseases? [(g)(2)(vii)(B)]
- An explanation of how bloodborne pathogens are transmitted? [(g)(2)(vii)(C)]
- An explanation of your exposure control plan? [(g)(2)(vii)(D)]
- Hazard identification? [(g)(2)(vii)(E)]
- An explanation of the use and limitations of PPE and engineering and work practice controls? [(g)(2)(vii)(F)]
- Information about the selection, use, removal, decontamination, and disposal of PPE? [(g)(2)(vii)(G),(H)]
- Information about hepatitis B vaccinations? [(g)(2)(vii)(I)]
- Information about how to handle emergencies involving exposures? [(g)(2)(vii)(J)]

- Procedures to follow after an exposure incident occurs? [(g)(2)(vii)(K)]
 - Information about post-exposure medical evaluations and follow-ups? [(g)(2)(vii)(L)]
- Recognition of signs, labels, and color coding? [(g)(2)(vii)(M)]
- Opportunity for interactive questions and answers? [(g)(2)(vii)(N)]

RECORDKEEPING:

- Do you maintain medical records for each employee with an occupational exposure? [(h)(1)(i)]
- Do you ensure confidentiality of medical records? [(h)(1)(iii)]
- Do you maintain training records for at least three years for each employee with an exposure, including dates of training sessions, name and qualifications of the trainer, and a summary of training contents? [(h)(2)(i)]
- Do you maintain a sharps injury log for recording injuries from contaminated sharps? [(h)(5)(i)]
- Does your sharps injury log list the type and brand of the device involved in each incident as well as the location of the incident, and a brief description of how the incident occurred? [(h)(5)(i)(A),(B),(C)]

Corrective Action Completed (date): _____

Supervisor: _____

Routed to: _____
