

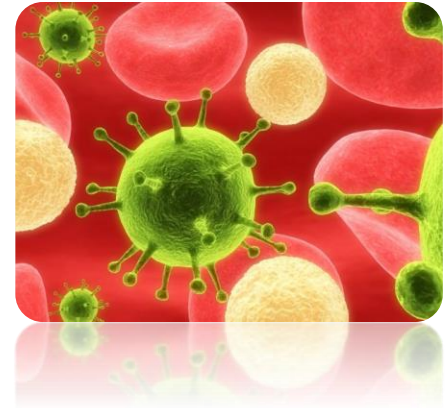
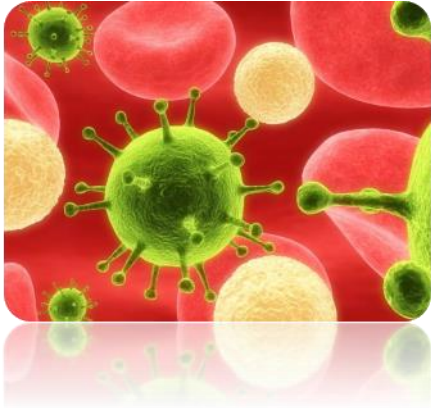
OSHA TRAINING – MARCH

Bloodborne Pathogens



Annual training on blood borne pathogens and diseases, methods used to control occupational exposure, hepatitis B vaccine, and medical evaluation and post-exposure follow-up procedures.

OSHA



Bloodborne Pathogens

- Bloodborne pathogens: infectious microorganisms present in blood that can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV), hepatitis C virus (HCV), and human immunodeficiency virus (HIV), the virus that causes AIDS.
- Workers exposed to bloodborne pathogens are at risk for serious or life-threatening illnesses.

Establish an Exposure Control Plan



- This is a written plan to eliminate or minimize occupational exposures. The ECP;
- Contains a list of job classifications in which all workers have occupational exposure, and
- A list of job classifications in which some workers have occupational exposure, and
- A list of the tasks and procedures performed by those workers that result in their exposure.

Update The Plan Annually



- **Reflect changes in tasks, procedures, and positions that affect occupational exposure,** and also technological changes that eliminate or reduce occupational exposure.
- **Annually document in the plan that they have considered and begun using appropriate, commercially-available, effective, safer medical devices designed to eliminate or minimize occupational exposure.**

Implement The Use of Universal Precautions

Assume all human blood and other potentially infectious materials (OPIM) as if known to be infectious for bloodborne pathogens

BLOODBORNE PATHOGENS

UNIVERSAL PRECAUTIONS FOR THOSE EXPOSED TO BLOOD OR OTHER POTENTIALLY INFECTIOUS MATERIALS IN THEIR OCCUPATION

PROTECT YOURSELF

ALL BLOOD AND BODILY FLUID MUST BE TREATED AS IF THEY WERE INFECTED WITH:

- HUMAN IMMUNODEFICIENCY VIRUS (HIV) WHICH FREQUENTLY LEADS TO AIDS.
- HEPATITIS B VIRUS (HBV).
- OTHER BLOODBORNE PATHOGENS (MICROORGANISMS FOUND IN HUMAN BLOOD WHICH CAN CAUSE DISEASE).

KNOW THE RULES

BE FAMILIAR WITH YOUR ORGANIZATION'S EXPOSURE CONTROL PLAN.



MAKE SURE YOU KNOW:

- VACCINATION REQUIREMENTS
- PROCEDURES
- PRACTICES
- PROPER REPORTING REQUIREMENTS FOR INCIDENTS OF EXPOSURE.

KNOW YOUR COLORS

- RED BAGS OR CONTAINERS DON'T NEED TO BE LABELED - THEIR COLOR INDICATES THEY MAY CONTAIN BIOHAZARDS.
- FLUORESCENT ORANGE-RED LABELS AND SIGNS WITH CONTRASTING LETTERING OR SYMBOLS ARE APPROPRIATE

READ ALL LABELS AND SIGNS

WEAR THE RIGHT EQUIPMENT



PROPER PROCEDURE CAN REDUCE YOUR RISK OF INFECTION TO ZERO

WASH HANDS



AND FOLLOW SAFE HYGIENE AND WORK PRACTICES.

DISPOSE OF NEEDLES IN APPROPRIATE CONTAINERS.



NEVER RECAP, BEND, OR BREAK NEEDLES.

FOLLOW PROPER DISPOSAL PROCEDURES.

CONTAMINATED LAUNDRY AND PERSONAL PROTECTIVE EQUIPMENT SHOULD BE DISPOSED OF IN PROPERLY DESIGNATED AREAS.



KEEP IT CLEAN

CLEAN WORKSITE AND DECONTAMINATE EQUIPMENT. FOLLOW ALL SAFE HANDLING PROCEDURES.

DON'T FORGET

ALL BODY FLUIDS SHOULD BE HANDLED AS IF POTENTIALLY INFECTIOUS.

Identify And Use Engineering Controls



- **Sharps disposal containers**
- **Self-sheathing needles**
- **Safer medical devices, such as sharps with engineered sharps-injury protection and needle less systems.**

Provide Personal Protective Equipment (PPE)



Employer provides gloves, gowns, eye protection and masks at no cost to the worker

Offer Hepatitis B Vaccinations to all workers with occupational exposure



This vaccination must be offered after the worker has received the required bloodborne pathogens training and within 10 days of initial assignment to a job with occupational exposure.

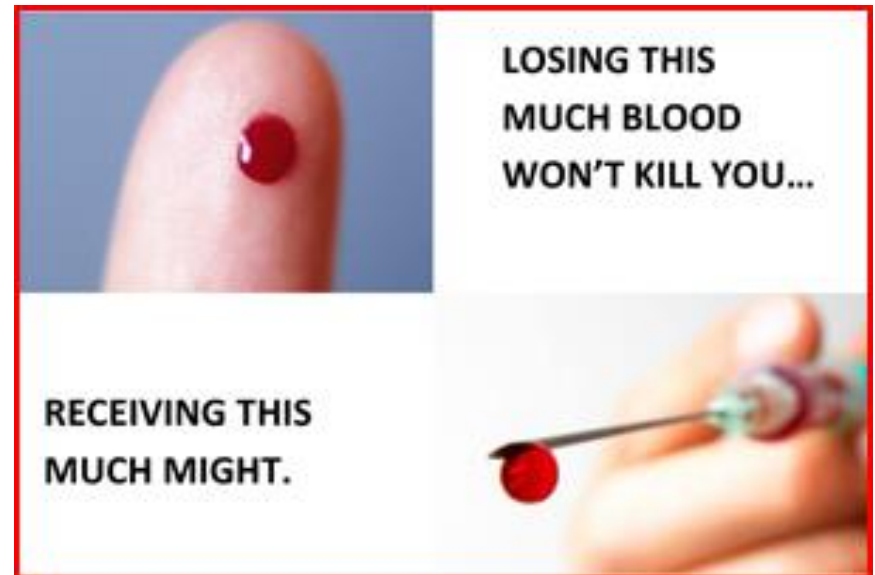
Make available post-exposure evaluation and follow-up at no cost to any occupationally exposed worker who experiences an exposure incident

Hepatitis B Vaccination

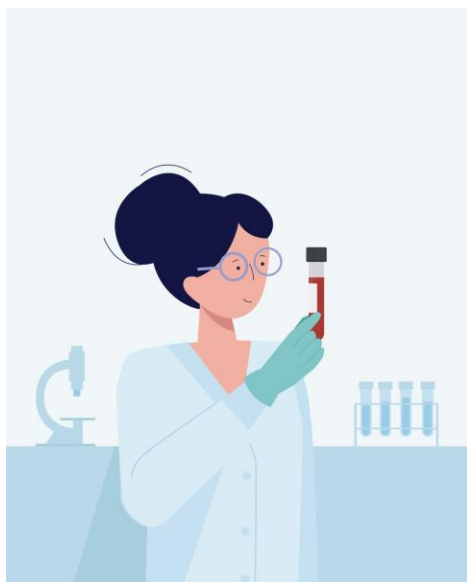
Vaccine Product	Age of Vaccine Recipient (yrs)	Dose (volume)	Timing of Doses
Recombivax HB (Merck)	Infants		0-2, 1-4 and 6-18 months of age
	1-18	5.0 mcg/0.5 mL (pediatric)	0, 1-2, 4-6 mos Alternative schedule for adolescents age 11-15 only 0, 4-6 months (2 doses only)
	>18	10 mcg/1 mL (adult) 40 mcg/1 mL (dialysis)	0, 1-2, 4-6
Engerix-B (GSK)	birth-18	10 mcg/0.5 mL (pediatric)	0-2, 1-4 and 6-18 months of age
	1-18	10 mcg/0.5 mL (pediatric)	
	>18	20 mcg/1 mL (adult)	0, 1-2, 4-6

* The second dose should be given 1 month after the first dose; the third dose should be given at least 2 months after the second dose and at least 4 months after the first dose.

An exposure incident is a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral (IV) contact with blood or other potentially infectious materials.



- **Testing the exposed worker's blood - if the worker consents**
- **offering post-exposure prophylaxis**
- **offering counseling**
- **evaluating reported illnesses**
- **keeping diagnosis confidential**



Use Labels and Signs to Communicate Hazards



Warning labels must be affixed to containers of regulated waste; containers of contaminated reusable sharps; refrigerators and freezers containing blood or OPIM; other containers used to store, transport, or ship blood or OPIM

Maintain Worker Medical and Training Records

- **The employer also must maintain a sharps injury log.**
- **Cal/OSHA** regulations require that employers must **report** any **Serious Injury/Illness** or **Fatality** to the nearest **Cal /OSHA** District Office.
- **Practically ASAP** but no longer than 8 hours after the employer knows or with diligent inquiry would have known of the serious **injury** or illness.

BLOODBORNE EXPOSURE INCIDENT REPORT FORM		
<small>TO BE COMPLETED WITHIN 24 HOURS OF THE INCIDENT AND SENT TO THE EXPOSURE CONTROL OFFICER</small>		
<small>PLEASE TYPE OR PRINT</small>		
EMPLOYEE IDENTIFICATION		
Name	Home Street Address	
	City, State, Zip	
Home Phone	Work Phone	Dept.
SSN	Birthdate	Job Title
INCIDENT INFORMATION		
Date of Incident	Time	<input type="checkbox"/> AM <input type="checkbox"/> PM
Location of Incident		
What types of potentially infectious materials were involved in the incident?		
What was the source of the material?		
Describe in detail the circumstances under which the incident occurred.		
How was the incident caused (accident, equipment malfunction, power outage, etc)?		
What personal protective equipment was being used at the time of the incident?		
Describe actions taken as a result of the incident.		
Employee Decontamination	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Cleanup	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Notifications Made	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Date and Time of Notification		
SIGNATURE		
Employee's signature	Date	
Print Name		

ProHealth/Argus OSHA 12 Page Policy & Procedure for Bloodborne Pathogens Exposure Prevention



BLOODBORNE PATHOGENS EXPOSURE PREVENTION POLICY AND PROCEDURE

This sample plan is provided only as a guide to assist in complying with the OSHA Blood borne Pathogens standard 29 CFR 1910.1030, as adopted by 803 KAR 2:320. It is not intended to supersede the requirements detailed in the standard. Employers should review the standard for particular requirements which are applicable to their situation. It should be noted that this model program does not include provisions for HIV/HBV laboratories and research facilities which are addressed in section (a) of the standard. Employers will need to add information relevant to their particular facility in order to develop an effective, comprehensive exposure control plan. Employers should note that the exposure control plan is expected to be reviewed at least on an annual basis and updated when necessary.

BLOODBORNE PATHOGENS EXPOSURE CONTROL PLAN

Facility Name: ProHealth Partners A Medical Group, Inc. (Clayton De Jong, MD, Tyler De Jong, MD)

Date of Preparation: March 15, 2018

In accordance with the OSHA Bloodborne Pathogens standard, 29 CFR 1910.1030, as adopted by 803KAR 2:320, the adopted by 803KAR 2:320, the following exposure control plan has been developed:

1. EXPOSURE DETERMINATION

OSHA requires employers to perform an exposure determination concerning which employees may incur occupational exposure to blood or other potentially infectious materials. The exposure determination is made without regard to the use of personal protective equipment (i.e. employees are considered to be exposed even if they wear personal protective equipment). This exposure determination is required to list all job classifications in which all employees may be expected to incur such occupational exposure, regardless of frequency. At this facility the following job classification(s) are in the category:

Back Office medical personnel

In addition, OSHA requires a listing of job classifications in which some employees may have occupational exposure. Since not all the employees in these categories would be expected to incur exposure to blood or to other potentially infectious materials, tasks or procedures that would cause these employees to have occupational exposure are also required to be listed in order to clearly understand