



## BLOODBORNE PATHOGENS EXPOSURE CONTROL PLAN

29 CFR 1910.1030

Ursinus College, Collegeville, PA

The Occupational Safety and Health Administration (OSHA) has determined that some workers may face a significant health risk because of occupational exposure to pathogens (disease-causing agents) in blood and other potentially infectious materials (OPIM). These pathogens include the Hepatitis B Virus (HBV), which causes Hepatitis B and the Human Immunodeficiency Virus (HIV), which causes the Acquired Immune Deficiency Syndrome (AIDS), as well as others. In accordance with the OSHA Bloodborne Pathogens Standard, [29 CFR 1910.1030](#), Ursinus College has adopted the following Exposure Control Plan. The definitions of various terms used in this Plan are contained in the Standard, a copy of which is contained in *Appendix A*.

The Plan does not cover "Good Samaritan acts" performed by employees, such as voluntarily assisting a fellow employee or student who is injured. If an employee who is not covered by this Plan performs a Good Samaritan Act, the employee does so voluntarily.

This Plan will be reviewed annually, and as new/modified procedures and/or positions affect occupational exposure.

### EXPOSURE CONTROL PLAN:

#### Exposure Determination

OSHA requires the College to perform an exposure determination in which the employees who may incur occupational exposure to blood or other potentially infectious materials shall be identified. The exposure determination shall be 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 Ursinus College the following job classifications are in this category:

<u>Job Classification</u>	<u>Task/Procedures</u>
Athletic Trainers	Treatment of student athletes
Physician's Assistant	Treatment of students
Campus Safety	First responders to incidents on campus

In addition, if Ursinus College has job classifications in which *some* employees may have occupational exposure, a listing of those classifications is required. Since not all the employees in these categories would be expected to incur exposure to blood or other potentially infectious materials, tasks or procedures that would cause these employees to have occupational exposure are also required to be listed to clearly understand which employees in these categories are considered to have occupational exposure. The job classifications and associated task/procedures for those categories are as follows:

<u>Job Classification</u>	<u>Task/Procedures</u>
Coaches	First responders to athlete injuries
Athletics Operations Mgr, Equipment Mgr, Sports Mgr	Laundering of uniforms Clean-up of blood and other potentially infectious materials on floors, walls and mats. Cleaning of rest room/locker room
Lifeguards	First responders to swimming pool accidents
Biology and Chemistry Faculty & Staff	First responders to laboratory incidents
Facilities Craftsman & Facilities Grounds Crew	Repair of plumbing and glass, cleaning up blood and blood-tainted glass



Resident Advisors (RAs)	First responders to residence hall incidents
Assistant Directors of Residence Life	First responders to campus incidents
Contracted Cleaning Services	Cleaning of residence hall and rest room
Wellness Center Coordinator	Contact with students

## **METHODS OF COMPLIANCE:**

### **1. Universal Precautions**

Universal Precautions shall be observed at Ursinus College to prevent contact with blood or other potentially infectious materials. According to the concept of Universal Precautions all human blood or certain human body fluids are treated as if known to be infectious for HIV, HBV, and other bloodborne pathogens.

Other potentially infectious materials (OPIM) include 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. They also include any unfixed tissue or organ other than intact skin from a human (living or dead) and human immunodeficiency virus (HIV)-containing cell or tissue cultures, organ cultures and HIV or hepatitis B (HBV)-containing culture medium and or other solutions as well as blood, organs, or other tissues from experimental animals infected with HIV or HBV.

Universal precautions do not apply to feces, nasal secretions, sputum, saliva, sweat, tears, urine and vomitus, unless they contain visible blood.

### **2. Engineering and Work Practice Controls**

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

At Ursinus College the following **engineering controls** shall be utilized:

- A. *Biological safety cabinets* provide containment of infectious aerosols: isolate the operator from the agent: and protect other personnel in the room
- B. *Sharps containers* must be used for disposal of all needles and syringes and other contaminated sharps. Sharps containers must be replaced periodically when they are 2/3-3/4 full.
- C. *Mechanical pipeting devices* must be used. Mouth pipeting/suctioning of blood and OPIM is prohibited.
- D. *Self-sheathing* needles must be used wherever recapping is required when feasible. Any needle recapping must be accomplished with the assistance of a mechanical device or a one-handed scoop method.



## BLOODBORNE PATHOGENS EXPOSURE CONTROL PLAN

29 CFR 1910.1030

*Ursinus College, Collegeville, PA*

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- E. *Splash guards and plastic backed absorbent pads* must be used to contain the spread of blood and potentially infectious material in the laboratory.

The above controls will be examined and maintained on a regular schedule by the department chairperson or area supervisor. Contaminated equipment must be decontaminated at the end of the workday or after a spill.

**Work practice controls** are modifications of work procedures to reduce the likelihood of occupational exposure to blood or OPIM. The following work practice controls will be utilized at Ursinus:

- A. *Washing of hands and other body areas.* Ursinus College provides, where feasible, readily accessible handwashing facilities. If handwashing is not feasible, the College is required to provide either an appropriate antiseptic hand cleanser in conjunction with clean cloths/paper towels or antiseptic towelettes. When these alternatives are employed, the employee shall wash with soap and running water as soon as possible.

After the removal of protective gloves, employees shall wash hands and other potentially contaminated skin areas with soap and water.

If employees incur exposure to their skin or mucous membranes, this area shall be washed or flushed with water as appropriate as soon as possible following contact.

Eye wash fountains shall be utilized for immediate eye irrigation, in case of an exposure incident.

- B. *Contaminated needles; other sharps (scalpels, scissors, broken glass and broken capillary tubes) and sharps containers.* Contaminated needles shall not be bent, recapped, or removed unless required to do so by specific medical procedures, or the employer can demonstrate that no alternative is feasible. In these instances, mechanical means such as forceps or one-handed techniques shall be used to recap or remove contaminated needles.

Contaminated needles shall not be bent, broken or sheared.

Contaminated needles and sharp instruments shall be discarded in closable, puncture-resistant, leak-proof on sides and bottom, red or biohazard labeled containers that are accessible, maintained upright, and not allowed to overflow.

Puncture-resistant, leak-proof containers, color coded red or labeled "BIOHAZARD" shall be used to discard contaminated items like needles, broken glass, scalpels, or other items that could cause a cut or puncture and to store contaminated reusable sharps until they are properly reprocessed.

Contaminated sharps that are reusable shall be placed immediately, or as soon as possible, after use into appropriate containers. Sharps containers are in the Sports Medicine Clinic in the Floy Lewis Bakes Center, Wellness & Counseling Center, the Organic Chemistry laboratory in Pfahler Hall (315), HPLC Lab in Pfahler Hall (306), and the Biology Laboratories in Thomas Hall and IDC in which sharps are used. The head trainer and lifeguard supervisor in Floy Lewis Bakes Center, biology and chemistry laboratory instructors, and Physician's Assistant in Wellness & Counseling Center are responsible for removing sharps. The containers shall be checked daily to remove the sharps.

Reusable contaminated sharps shall be stored and processed in such a way to ensure safe handling. Mechanical devices shall be used to remove instruments from decontaminating solutions.

- C. *Cosmetics and Consumables.* In work areas where there is a reasonable likelihood of occupational exposure (training room and laboratories), safe work practices prohibit eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses.



Food and/or drink shall not be stored in refrigerators, freezers, shelves, cabinets or on countertops where blood or potentially infectious materials are present.

- D. *Other controls.* Equipment, other than personal protective equipment, which during the course of operations could become contaminated with blood or other infectious materials, shall be checked routinely and, prior to servicing or shipping, shall be decontaminated as necessary, unless the decontamination of the equipment is not feasible. If decontamination of all or part of such equipment is not feasible, the College shall convey this information to all affected employees, service representatives and/or the manufacturer. Attachment of a "Biohazard" label constitutes an effective means of hazard communication.

### **3. Personal Protective Equipment**

In addition to engineering and work practice controls, the Standard requires that appropriate personal protective equipment (PPE) be used to reduce the risk of worker exposure. Ursinus College is responsible for providing, maintaining, laundering, disposing, replacing, and assuring the proper use of personal equipment. The College shall provide, replace and maintain all personal protective equipment without cost to the employee. The protective equipment shall be considered "appropriate" only if it does not allow blood or other potential infectious materials to pass through or reach the employee's clothing, skin or mucous membranes.

Protective equipment will be provided to employees and be available in appropriate areas of the campus. Protective equipment consists of, but is not limited to, gloves, face shields, masks, eye protection, gowns, and laboratory coats. Personal protective equipment should not leave the College premises.

Ursinus College employees must observe the following precautions for safe handling and using personal protective equipment:

- All protective garments shall be removed immediately following contamination and upon leaving the work area and placed in an appropriately designated area for storing, washing, decontaminating or discarding.
- Gloves shall be worn when hand contact with blood, mucous membranes, non-intact skin or potentially infectious materials is anticipated; and when handling or touching contaminated items or surfaces.
- Hypoallergenic gloves, liners, powderless gloves or other alternatives shall be provided to employees who need them.
- When disposable gloves are used, they shall not be washed or decontaminated for reuse and must be replaced as soon as practical when contaminated, or if torn, punctured, or when their ability to function as a barrier is compromised. They are never to be reused!
- Utility gloves (reusable) may be decontaminated for re-use after each use, if the integrity of the glove is not compromised. Utility gloves must be discarded if they are cracked, peeling, torn, punctured, or fail to provide a protective barrier.
- Masks in combination with eye protection devices, such as goggles or glasses with solid side shields, or chin length face shields, shall be worn when splashes of blood or other bodily fluids may occur and when contamination of the eyes, nose, or mouth can be anticipated.

### **4. Housekeeping**



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Ursinus College will ensure that the worksite is maintained in a clean and sanitary condition. A written schedule for cleaning and method of decontamination will be developed and maintained for each facility.

Contaminated work surfaces shall be decontaminated with an appropriate disinfectant (1:10 solution of bleach/water or glutaraldehyde) after completion of procedures; immediately or as soon as feasible when surfaces are overtly contaminated by splashes, spills, or contact with blood or other potentially infected materials; and at the end of the work shift if the surface may have become contaminated since the last cleaning. **Bleach solutions shall not be used to decontaminate skin.**

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 workshift if they may have been 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 shall be inspected and decontaminated on a regularly scheduled basis.

Any broken glassware shall be cleaned up using mechanical means such as a brush, tongs, or forceps, never with the hands, even when wearing gloves. Equipment used to clean up contaminated broken glass must be decontaminated or disposed of after use.

Employees should not place hands in containers where the contents cannot be seen.

See *Appendix B* for specific procedures to follow for cleaning up bodily fluids.

## **5. Regulated Waste (Infectious Waste)**

Biohazard waste generated on campus is regulated by the Commonwealth of Pennsylvania and Montgomery County.

**Sharps containers** used to collect contaminated needles, scalpels, scissors, broken glass, and capillary tubes must be dated upon the first addition of a contaminated object and removed for proper disposal when 2/3-3/4 full or after 1 year. Containers must be closable, puncture-resistant, leak-proof on sides and bottom, red or biohazard labeled containers that are accessible, maintained upright, and not allowed to overflow.

**Other biohazard waste containers** used to collect contaminated dressings, cotton swabs, paper towels, and disposable PPE must be placed in closable, leak-proof, labeled containers. The bag in the container must be kept close unless adding waste. The pre-printed label must be affixed to the side of the box and the date added with the first addition of the waste to the box. When the bag is full, it must be secured by gathering and twisting the neck and securing it with a hand tie or hand knot. Then the lid to the box must be taped closed. Do not overlap the box flaps. Full boxes may be kept for up to 30 days at room temperature, or up to 90 days if frozen. Contact the employee in your department responsible for biohazard waste collection when the box is ready for disposal.

The college's vendor provides the biohazard labeled cardboard boxes and pre-printed labels. The EH&S/Risk Manager schedules the waste pickups. Only employees that have completed the Department of Transportation Hazardous Materials Transportation and Shipping training may sign the waste manifest. The signed manifest copy must be sent to the Director of EHS & Risk Management.

## **6. Laundry**



## BLOODBORNE PATHOGENS EXPOSURE CONTROL PLAN

29 CFR 1910.1030

*Ursinus College, Collegeville, PA*

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Ursinus College is responsible for laundering contaminated materials, including employee lab coats and uniforms meant to function as personal protective equipment. Contaminated laundry will be handled as little as possible with minimum agitation. Such laundry will not be sorted or rinsed in the area of use.

Contaminated laundry will be placed in appropriately marked or color-coded bags as soon as it is removed and stored in a designated area in the Floy Lewis Bakes Center.

All employees who handle contaminated laundry will utilize personal protective equipment to prevent contact with blood or other potentially infectious materials.

### **HEPATITIS B VACCINATION:**

All employees who have been identified as having a potential exposure to blood or other potential infectious materials shall be offered the Hepatitis B vaccine, at no cost to the employee. The vaccine shall be offered after the employee has received the required training and within 10 working days of initial assignment to the work 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.

If an employee initially declines hepatitis B vaccination but later while still covered under the Standard decides to accept the vaccination, Ursinus College shall make available hepatitis B vaccination at that time.

Ursinus College shall assure that employees who decline to accept the hepatitis B vaccine when offered sign the following statement.

I understand that due to my occupation 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 me. However, I decline Hepatitis B vaccination currently. 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.

See *Appendix C* for the appropriate forms.

### **POST EXPOSURE EVALUATION AND FOLLOW-UP:**

An exposure incident is the specific eye, mouth or other mucous membrane, non-intact skin, parenteral contact with blood or other potentially infectious materials, which result from the performance of an employee's duties.

Employees should immediately report exposure incidents to their immediate supervisor and follow existing procedures for [reporting work related incidents](#), including reporting the incident to the [Environmental Health and Safety/Risk Manager](#) or [Human Resources](#). The exposed employee will be directed one of the College's insurance [panel physicians](#) for medical advice.

Ursinus will provide the health care professional with a copy of the OSHA Bloodborne Pathogens Standard, a description of the employee's job duties as they relate to the incident, a report of the specific exposure (accident report) including route of exposure, and relevant employee medical records, including hepatitis B vaccination status.

The medical evaluation and follow-up must at the very least:

- Document the routes of exposure and how the exposure occurred.



## BLOODBORNE PATHOGENS EXPOSURE CONTROL PLAN

29 CFR 1910.1030

*Ursinus College, Collegeville, PA*

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- Identify and document the source individual if feasible and not prohibited by law. The health care professional will determine the significance of the exposure and that the source is tested for HBV and/or HIV, depending on the significance of exposure.
  - Obtain consent and test source individual's blood as soon as possible to determine infectivity and document the source's blood test results. If the source does not give consent for HIV, blood obtained for HBV should be retained. If the source is known to be infectious for HBV or HIV, testing need not be repeated to determine the known infectivity.
  - Provide the exposed employee with test results and information about applicable disclosure laws and regulations concerning the source identity and infection status only if the employee submits to required baseline testing.
  - Obtain consent, collect and test exposed employee's blood as soon as possible after the exposure incident. (If the exposed employee does not submit to HIV testing at the time of the incident, the source may not be tested according to PA ACT #148.)

Following the post exposure evaluation, the health care professional shall provide a written opinion to the College. This opinion shall be limited to a statement that the employee has been informed of the results of the evaluation and told of the need, if any, for any further evaluation or treatment. All other findings or diagnoses shall remain confidential and shall not be included in the written report. The employer shall provide the employee with a copy of the written opinion within 15 days of the completion of the evaluation.

### **HAZARD COMMUNICATION:**

#### **1. Labels**

Warning labels shall be affixed to containers of regulated wastes, refrigerators, and freezers containing blood or potentially infectious materials; and other containers used to store, transport, or ship blood or other potentially infectious materials, except when material is placed in a red bag or container. The labels shall be fluorescent orange or orange-red and bear the legend "BIOHAZARD" or the biohazard symbol.

Red bags or red containers may be substituted for labels.

Regulated waste that has been decontaminated (autoclaved) need not be labeled or red-bagged.

#### **2. Training**

Training for all employees shall be conducted prior to initial assignment to tasks where occupational exposure may occur, within 90 days of the effective date, and at least annually thereafter. This training must be provided at no cost to the employee and during working hours. The Environmental Health and Safety/Risk Manager shall coordinate the training with the affected departments.

The training program shall include the following:

- Material appropriate to the vocabulary, educational level, literacy, and language of the employee;
- Coverage of issues that have arisen since the initial training;
- An accessible copy of the regulatory text of the standard and an explanation of its contents;
- A general discussion of bloodborne diseases, their symptoms, and modes of transmission;



## BLOODBORNE PATHOGENS EXPOSURE CONTROL PLAN

29 CFR 1910.1030

*Ursinus College, Collegeville, PA*

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- An explanation of the Ursinus College exposure control plan, engineering and work-practice controls, personal protective equipment, and signs and labels;
  - An explanation of the procedures, which might cause exposure to blood or other potentially infectious materials at Ursinus College;
  - Information on the procedures to be followed in the event of an exposure incident including post exposure and follow-up;
  - Information on the hepatitis B Vaccine, including information on its efficacy, safety, method of administration, and that the vaccine and vaccination will be offered free of charge;
  - An explanation of signs, labels, and/or colors coding;
  - An opportunity for an interactive question and answer period; and
  - A person conducting the training who is knowledgeable in the subject matter and how it relates to the workplace.

### **RECORDKEEPING:**

#### **1. Medical Records**

Ursinus College shall establish and maintain an accurate record for each employee covered by the standard in accordance with 29 CFR 1910.20. Medical records shall include:

- The name and social security number of the employee;
- A copy of the employee's vaccination record;
- A copy of all examinations, testing, and follow-up procedures;
- An employer's copy of the healthcare professionals' written opinions; and
- Copies of all information provided to healthcare professionals.

Ursinus College shall ensure that the medical records are kept confidential and are not disclosed or reported without the employee's express written consent. The College is responsible for maintaining these records for at least the duration of employment plus 30 years. The Wellness & Counseling Center or the College Environmental Health and Safety/Risk Manager will be repositories for medical records.

Employee medical records required by this Section shall 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 1910.20.

#### **2. Training Records**

Training records are not confidential and shall include the following information:

- The dates of the training sessions;
- The contents or a summary of the training sessions;
- The names and qualifications of all persons conducting the training sessions;





## BLOODBORNE PATHOGENS EXPOSURE CONTROL PLAN

29 CFR 1910.1030

*Ursinus College, Collegeville, PA*

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- The names and job titles of all employees attending the training sessions.

Training records shall be maintained for 3 years from the date on which the training occurred. These records shall be available from the Director of EHS & Risk Management upon request for examination and copying, in accordance with CFR 1910.20, to employees, employees' representatives, the Assistant Secretary of Labor for OSHA, and the Director of NIOSH.

### **3. Waste Manifests**

All waste manifests shall be maintained by the Director of EHS & Risk Management. Approved signers of the manifests will send the signed copy to the Director of EHS & Risk Management. Signed manifests will be maintained for a minimum of 3 years.

### **DATES:**

All provisions required by this standard were implemented at Ursinus College during the 1992-1993 academic year.



## APPENDIX A - DEFINITIONS

### 1910.1030(b)

**Definitions.** For purposes of this section, the following shall apply:

**Assistant Secretary** means the Assistant Secretary of Labor for Occupational Safety and Health, or designated representative.

**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.

**Director** means the Director of the National Institute for Occupational Safety and Health, U.S. Department of Health and Human Services, or designated representative.

**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.

**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 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.



## APPENDIX A - DEFINITIONS

**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 nonneedle 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 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 - BODILY FLUIDS CLEAN UP PROCEDURE**

Departments that are identified in the college's Bloodborne Pathogen Control Plan are responsible for providing and maintaining appropriate clean-up supplies. These supplies may include single-use clean-up kits, biohazard bags, bleach, paper towels, shoe coverings, gowns, safety glasses, dust pan and brush, and absorbent (i.e. Red Z, kitty litter).

In the event of a bodily fluid spill in a public area or residence hall, contact Campus Safety at 610-409-3333 after hours and [CleaningConcerns@ursinus.edu](mailto:CleaningConcerns@ursinus.edu) during regular business hours for assistance. Single-use and 5-gallon spill kits are available for cleanup. The larger spill kits contain gowns, shoe coverings, safety glasses, dust pan and brush, bleach, paper towels, and Red Z absorbent. Kitty litter is also acceptable to use as an absorbent.

Regardless of the spill size, follow these instructions for clean up:

- Don disposable **gloves**.
- **Sprinkle** RED-Z or other absorbent such as kitty litter cleanup product over the area or use paper towels starting from the outside of the spill into the middle.
- Use a **scoop and scraper** (or dust pan, brush, shovel, and/or broom) to pick up material.
- Place the contents in the labeled **RED BIOHAZARD BAG** provided in the kit. Use an absorbent towel to clean away remaining solids.
- Disinfect the affected areas with a Germicidal Wipe, hospital grade disinfectant, or a 1:10 bleach to water solution. Only use the bleach solution on hard surfaces.
- Place all contaminated materials (gloves, too) in the **RED BAG**.
- **Decontaminate** any buckets, brooms, dustpans or any other tools used to clean up the spill with a 1:10 bleach to water solution.
- Wipe hands with antimicrobial hand wipe. **Wash with non-abrasive soap (if available) and water ASAP.** Using abrasive soap could scratch the skin and thereby create a route of entry for the pathogen, if present.
- Dispose of the red bags in the closest biohazard box. The list below gives the locations for disposal for affected departments.
  - Residence Life – Campus Safety
  - Athletic Trainers – Sports Medicine Clinic
  - Biology/Chemistry – department biohazard container
  - Campus Safety – Wellness & Counseling Center
  - Facilities Services – Director of EHS & Risk Management or Wellness & Counseling Center



APPENDIX C – VACCINE FORMS

**ACKNOWLEDGMENT OF RECEIPT OF  
HEPATITIS B VACCINE AT URSINUS COLLEGE**

PRINT NAME

BIRTH DATE

HOME ADDRESS

CITY

STATE

ZIP CODE

DEPARTMENT

PHONE

JOB TITLE (CHECK APPROPRIATE BOX)

FACULTY/STAFF

RA

ESS TRAINER

ESS LIFEGUARD

COACH

I understand that due to my occupational exposure to blood or other potentially infectious materials, I may be at risk of acquiring Hepatitis B infection. I have been given the opportunity to be vaccinated with Hepatitis vaccine, at no charge to myself. I hereby acknowledge that I have received the vaccine at Ursinus College.

MONTH AND YEAR OF THIRD SHOT

LOCATION: CITY AND STATE

SIGNATURE

DATE



APPENDIX C – VACCINE FORMS

**ACKNOWLEDGMENT OF PRIOR RECEIPT OF  
HEPATITIS B VACCINE**

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*PRINT NAME* \_\_\_\_\_ *BIRTH DATE* \_\_\_\_\_

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*HOME ADDRESS* \_\_\_\_\_ *CITY* \_\_\_\_\_ *STATE* \_\_\_\_\_ *ZIP CODE* \_\_\_\_\_

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*DEPARTMENT* \_\_\_\_\_ *PHONE* \_\_\_\_\_

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*JOB TITLE* (CHECK APPROPRIATE BOX)     FACULTY/STAFF     RA     ESS TRAINER     ESS LIFEGUARD     COACH

I understand that due to my occupational exposure to blood or other potentially infectious materials, I may be at risk of acquiring Hepatitis B infection. I have been given the opportunity to be vaccinated with the Hepatitis B vaccine, at no charge to myself. I hereby acknowledge that I have received the vaccine prior to my employment at Ursinus College.

\_\_\_\_\_  
MONTH AND YEAR OF THIRD SHOT

\_\_\_\_\_  
LOCATION: CITY AND STATE

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE



APPENDIX C – VACCINE FORMS

***HEPATITIS B VACCINE DECLINATION***

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*PRINT NAME* \_\_\_\_\_ *BIRTH DATE* \_\_\_\_\_

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*HOME ADDRESS* \_\_\_\_\_ *CITY* \_\_\_\_\_ *STATE* \_\_\_\_\_ *ZIP CODE* \_\_\_\_\_

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*DEPARTMENT* \_\_\_\_\_ *PHONE* \_\_\_\_\_

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*JOB TITLE: (CHECK APPROPRIATE BOX)*       FACULTY/STAFF       RA       ESS TRAINER       ESS LIFEGUARD       COACH

I understand that due to my occupational exposure to blood or other potentially infectious materials, I may be at risk of acquiring Hepatitis B infection. I have been given the opportunity to be vaccinated with the Hepatitis B vaccine, at no charge to myself. However, I decline Hepatitis B vaccination currently. I understand that by declining this vaccine, I continue to be at risk of acquiring Hepatitis B infection, a serious disease.

If 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.

\_\_\_\_\_  
*DATE*

\_\_\_\_\_  
*EMPLOYEE SIGNATURE*



APPENDIX C – VACCINE FORMS

**INFORMED CONSENT  
FOR HEPATITIS B VACCINE**

PRINT NAME \_\_\_\_\_ BIRTH DATE \_\_\_\_\_

HOME ADDRESS STREET \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

DEPARTMENT \_\_\_\_\_ PHONE \_\_\_\_\_

JOB TITLE: (CHECK APPROPRIATE BOX)       FACULTY/STAFF       RA       ESS TRAINER       ESS LIFEGUARD       COACH

I hereby authorize the administration of Hepatitis B vaccine by a designated representative of Pottstown Medical Specialists. At this time, I am not pregnant, nor do I plan pregnancy in the next six (6) months, realizing that data is not available for the developing fetus. I am aware that hypersensitivity to yeast is a contraindication to receiving the vaccine. I understand that the major side effects observed with the Hepatitis B vaccine have been soreness and redness at the site of the injection and are usually confined to the 48-hour period following vaccination. Rare side effects I may experience include a low-grade fever, malaise, fatigue, headache, nausea, dizziness, myalgia, and arthralgia. **I am also aware that I must receive three injections of the vaccine to complete the regimen and to achieve optimum protection.**

I have read the above and understand the nature of the program, the risks and alternatives, and consent to the vaccination.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

DOSE                      DATE                      SIGNATURE INNOCULATOR                      LOT NUMBER

1 \_\_\_\_\_

2 \_\_\_\_\_

3 \_\_\_\_\_





## APPENDIX D – PROCEDURE IF EXPOSED

IF YOU ARE EXPOSED TO POTENTIALLY INFECTIOUS BODY FLUIDS,

1. **Wash** the exposed are thoroughly **with soap and running water**. Use non-abrasive, antibacterial soap if possible.
2. If blood is splashed in the eye or mucous membrane, **flush** the affected area with running water for at least **15 minutes**.
3. **Immediately report the exposure** to your supervisor.
4. Contact the [Director of EHS & Risk Management](#) or [Human Resources](#) to report the incident and to complete the [injury report form](#).
5. Seek medical advice with one of the college's [panel providers](#).
6. If you have been exposed and it is off hours, go to the emergency room for care.