

BLOODBORNE PATHOGEN EXPOSURE POLICY

Garmong, realizes the risks to which its employees could be exposed in the realm of Bloodborne Pathogens. To eliminate, or at least reduce this risk, Garmong has instituted the following policy.

All Superintendents and Foremen will attend the Red Cross Bloodborne Pathogen Control training seminars. As a condition of employment, each supervisor must pass the final comprehensive test. The Superintendent will be responsible for executing this training while performing any first aid treatment.

Every job site will be equipped with a Bloodborne Pathogen kit. This will be an industrial approved kit that will at least contain personal protective equipment, clean-up materials and disposal containers.

In very rare occasions, Garmong employees could be exposed to blood or other potentially exposed materials on the job site. In such areas, all employees will be required to take the Red Cross Bloodborne Pathogen Control seminars and execute all of its rules.

These rare occasions will surface in the Pre-Job Safety Review and will be tenaciously reviewed. Constant monitoring and follow-up will be executed by the Safety Director and Job Superintendent.

BLOODBORNE PATHOGENS EXPOSURE CONTROL PLAN

Facility Name: Garmong

Date of Preparation: March 9, 1993

In accordance with the OSHA Bloodborne Pathogens Standard, 29 CFR 1910.1030, 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, _____ is designated the employee expected to incur any occupational exposure.

2. Implementation Schedule and Methodology

OSHA also requires that this plan include a schedule and method of implementation for the various requirements of the standard. The following complies with this requirement:

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Compliance Methods

Universal precautions will be observed at this facility in order to prevent contact with blood or other potentially infectious materials. All blood or other potentially infectious material will be considered infectious regardless of the perceived status of the source individual.

Engineering and work practice controls will be utilized to eliminate or minimize exposure to employees at this facility. Where occupational exposure remains after institution of these controls, personal protective equipment shall also be utilized.

Controls will be examined and maintained on a regular schedule. The schedule for reviewing the effectiveness of the controls is once per week.

Handwashing facilities are also available to the employees who incur exposure to blood or other potentially infectious materials. OSHA requires that these facilities be readily accessible after incurring exposure.

After removal of personal protective gloves, employees shall wash hands and other potentially contaminated skin area immediately or as soon as feasible with soap and water.

If employees incur exposure to their skin or mucous membranes, then those areas shall be washed or flushed with water as appropriate as soon as feasible following contact.

Work Area Restrictions

In work areas where there is a reasonable likelihood of exposure to blood or other potentially infectious materials, employees are not to eat, drink, smoke, or handle contact lenses. Food and beverages are not to be kept on shelves, counter tops, bench tops or in cabinets where blood or other potentially infectious materials are present.

Specimens

Specimens of blood or other potentially infectious materials will be placed in a container which prevents leakage during the collection, handling and transport of the specimens.

The container used for this purpose will be labeled or color coded in accordance with the requirements of the OSHA standard.

Any specimens which could puncture a primary container will be placed within a secondary container which is puncture resistant.

If outside contamination of the primary container occurs, the *primary* container shall be placed within a secondary container which prevents leakage during the handling, processing, storage, transport, or shipping of the specimen.

Contaminated Equipment

Equipment which has become contaminated with blood or other potentially infectious materials shall be decontaminated as necessary.

Personal Protective Equipment

All personal protective equipment used at this facility will be provided without cost to employees. Personal protective equipment will be chosen based on the anticipated exposure to blood or other potentially infectious materials. The protective equipment will be considered appropriate only if it does not permit blood or other potentially infectious materials to pass through or reach the employees' clothing, 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.

All personal protective equipment will be cleaned, laundered, and disposed of by the employer at no cost to employees. All repairs and replacements will be made by the employer at no cost to employees.

All garments which are penetrated by blood shall be removed immediately or as soon as feasible. All personal protective equipment will be removed prior to leaving the work area.

Gloves shall be worn where it is reasonably anticipated that employees will have hand contact with blood, other potentially infectious materials, non-intact skin, and mucous membranes.

Disposable gloves used at this facility are not to be washed or decontaminated for reuse and are to be replaced as soon as practical when they become contaminated or as soon as feasible if they are torn, punctured, or when their ability to function as a barrier is compromised.

Masks in combination with eye protection devices, such as goggles or glasses with solid side shield, or chin length face shield, are required to be worn whenever splashes, spray, splatter, or droplets of blood or other potentially infectious materials may be generated and eye, nose, or mouth contamination can reasonably be anticipated.

Decontamination will be accomplished by utilizing bleach solutions.

All contaminated work surfaces will be decontaminated after completion of procedures and immediately or as soon as feasible after any spill of blood or other potentially infectious materials.

Hepatitis B Vaccine

All employees who have been identified as having exposure to blood or other potentially infectious materials will be offered the Hepatitis B vaccine, at no cost to the employee. The vaccine will be offered within ten (10) working days of their initial assignment to work involving the potential for occupational exposure to blood or other potentially infectious materials unless the employee has previously had the vaccine or who wishes to submit to antibody testing which shows the employee to have sufficient immunity.

Employees who decline the Hepatitis B vaccine will sign a waiver which uses the wording in Appendix A of the OSHA standard.

Employees who initially decline the vaccine, but who later wish to have may then have the vaccine provided at no cost.

Post-Exposure Evaluation and Follow-Up

When the employee incurs an exposure incident, it should be reported to _____.

All employees who incur an exposure incident will be offered post-exposure evaluation and follow-up in accordance with the OSHA standard.

This follow-up will include the following:

- Documentation of the route of exposure and the circumstances related to the incident.

- If possible, the identification of the source individual and, if possible, the status of the source individual. The *blood of the source* individual will be tested (after consent is obtained) for the HIV/HBV infectivity.

- Results of testing of the source individual will be made available to the exposed employee with the exposed employee informed about the applicable laws and regulations concerning disclosure of the identity and infectivity of the source individual.

- The employee will be offered the option of having their blood collected for testing of the employees HIV/HVS serological status. The blood sample will be preserved at least ninety (90) days to allow the employee to decide if the blood should be tested for HIV serological status. However, if the employee decides prior to that time that testing will be conducted, then the appropriate action can be taken and the blood sample discarded.

- The employee will be offered post exposure prophylaxis in accordance with the current recommendations of the United States Public Health Service.

- The employee will be given appropriate counseling concerning precautions to take during the period after the exposure incident. The employee will also be given information on what potential illnesses to be alert for and to report any related experiences to appropriate personnel.

Interaction with Health Care Professionals

A written opinion shall be obtained from the health care professional who evaluates employees of this facility. Written opinions will be obtained in the following instances:

1. when the employee is sent to obtain the Hepatitis B vaccine;
2. whenever the employee is sent to a health care professional following an exposure incident;

Health care professionals shall be instructed to limit their opinions to:

1. whether the Hepatitis B vaccine is indicated and if the employee has received the vaccine, or for evaluation following an incident.
2. that the employee has been informed of the results of the evaluation, and
3. that the employee has been told about any medical conditions resulting from exposure to blood or other potentially infectious materials.

Dates

All provisions required by the standard will be implemented by:

APPENDIX "A" TO SECTION 1910.1030

HEPATITIS B VACCINE DECLINATION {Mandatory}

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.

Signed: _____

Date: _____