

INTRODUCTION

Using the OSHA Bloodborne Pathogens Standard, 29 CFR 1910.1030, as a guide, UAH has developed an Exposure Control Plan, otherwise known as the UAH Bloodborne Pathogen Control Plan, to eliminate or minimize the occupational exposure to bloodborne pathogens (BBP), which are defined as pathogenic microorganisms that are present in human blood, human body fluids, human tissues or other potentially infectious material.

In addition to blood, other potentially infectious materials (OPIM) are:

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;

Any unfixed tissue or organ other than intact skin from a human (living or dead);

Human cell lines or cultures, human tissue cultures, human organ cultures;

Blood, body fluids or other tissues from non-human primates;

Blood, body fluids or other tissues from experimental animals infected with BBP; and

Liquid or solid culture medium or other materials containing biological agents capable of causing disease in healthy adults (i.e., equivalent to agents handled at Biosafety Level 2 or above).

SCOPE

The BBP Plan applies to all University of Alabama in Huntsville (UAH) faculty, staff and student employees that may reasonably anticipate skin, eye, mucous membrane, or parenteral (under the skin) contact with blood or OPIM during the performance of their job duties at UAH.

RESPONSIBILITY

Department heads and supervisors are responsible for ensuring their employees comply with the provisions of the BBP Plan. Each department is responsible for providing all necessary supplies, such as personal protective equipment, soap, bleach, Hepatitis B vaccinations, etc., to its employees. The Office of Environmental Health and Safety (OEHS) shall be responsible for making training available to UAH employees as to the requirements of the BBP Plan and for disposing of biohazardous waste. Each supervisor is responsible for ensuring their affected employees attend training.

The BBP Plan will be reviewed and updated annually by UAH OEHS and/or 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 of the BBP Plan shall 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. Implementation of the BBP Plan is monitored and coordinated by OEHS. The UAH General Safety and Laboratory Safety Committee manages and oversees

Use of personal protective equipment
Employee training
Vaccination

Engineering Controls

Engineering Controls are controls that isolate or remove the bloodborne pathogen's hazard from the workplace. Examples: sharps disposal containers, self-sheathing needles, safer medical devices such as sharps with engineered sharps injury protections and needleless systems. Where potential for occupational exposure still exists after implementation of these controls, personal protective equipment shall also be utilized. UAH will identify the need for changes in engineering controls and work practices through reviews of the sharps injuries with follow-up exposure investigation and thorough discussion with the appropriate supervisor and/or safety committee.

Sharps Containers: The container is to be open when in use to allow unobstructed access and securely closed for disposal in a waste stream designated for biohazardous waste. Only approved sharps containers are to be utilized. The person disposing of sharps is responsible for monitoring the container and disposing of the container when it is two-thirds full. Contact the **OEHS at 2171** for sharps disposal.

Biosafety Cabinets: The person working in the cabinet will disinfect the work surface of the cabinet after each use. If the cabinet has a front drain, it will be checked monthly, disinfected, and drained if required. The cabinet will have an annual performance certification that the Principal Investigator is responsible for arranging. This certification is also required prior to initial cabinet use or prior to use after any cabinet relocation.

Sharps with Engineered Sharps Injury Protections: These devices are needle-less or otherwise altered with a built-in feature or mechanism that effectively reduces the risk of an exposure incident. It is recommended that these devices be utilized in all applications at UAH when there is potential for occupational exposure to blood or OPIM involving sharps.



Supervisors may contact the Office of Environmental Health and Safety at (256) 824-2171 to develop a lab specific or protocol specific evaluation form. Supervisors should utilize these protocol and forms to solicit input from the non-managerial employees with respect to the selection of safety devices.

If a supervisor does not believe that utilizing an engineered sharps device is possible or warranted for a specific application, they must:

Document which engineered sharps devices have been evaluated, the extent of the evaluation, and identify which employees performed the evaluations.



I. Housekeeping Precautions

To prevent contamination:

Use a dust pan and broom to pick up sharp objects

Place sharp objects in labeled sharps container

Place all contaminated waste in red biohazard bags within a secondary container

Wash hands as soon as possible after contamination and after removing gloves

Do not handle items such as pens, door handles, elevator buttons while wearing gloves

Do not wear gloves out of the laboratory

Hand washing is considered to be the single most important defense against disease transmission. Hand washing facilities are available to the employees with potential exposure to BBP or OPIM. Supervisors must make sure that employees wash hands as soon as possible after an exposure to BBP or OPIM. If Brvis }





Gloves:

Shall be worn when it can be reasonably anticipated that the employee may



Records Release to the OJI Coordinator.



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 illness to be alert for and to report experiences to appropriate personnel.

If the exposure involves a non-human primate or non-human primate tissue, the Standard Operating Procedures for Management of Herpes B Virus exposure or SIV exposure developed by Employee Health Services will be followed.

B. Procedures for Evaluating the Circumstances of a BBP Exposure Incident

Employees should notify their supervisor immediately after the exposure incident. The supervisor records the details of the exposure incident including the route of exposure, the infective agent and an estimate of the dosage.

The employee and his/her supervisor will submit the Employee Occupational Accident Report to the OJI Coordinator within no later than two (2) business days after the date the injury occurred. The report must include the route of exposure, the infective agent, and an estimate of the dosage.

Though the employee may not believe medical treatment is necessary, he/she must comply with a supervisor's direction to seek medical attention.

If the exposure involves a sharp, the supervisor will also collect and provide the following information regarding the exposure on the "SHARPS INJURY REPORT"(Attachment B):

The OEHS compiles these "Sharps Injury Report" forms into an "Occupational Injury Log." The OEHS will annually review the Sharps Injury Reports to determine if changes are necessary to the procedures outlined in the BBP Plan and to ensure that appropriate changes are implemented.

TRAINING PROGRAM

Training for all employees will be conducted for employees prior to initial assignment to tasks where occupational exposure to bloodborne pathogens may occur. The OEHS conducts **BBP** Training annually. Training information is on the OEHS web site.

Training for employees includes the following:

- Overview of bloodborne pathogens
- Epidemiology, symptoms, and routes of transmission of BBP
- Prevention techniques
- Explanation of the use of and limitations of engineering controls, work practices, and PPE
- Spill cleanup procedures
- Accident and Exposure follow-up procedures
- Elements of **29 CFR 1910.1030;**



- BBP Plan, HBV vaccinations, methods of compliance, hazard communication, record keeping.

RECORDKEEPING PROGRAM

Employee Training records must be maintained within their departmental files and medical records should be maintained in accordance with 29 CFR 1910.1030(h).

ATTACHMENT A

The University of Alabama in Huntsville

Hepatitis B Vaccination Declination Form

I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring the hepatitis B virus (HBV) infection. I have been given the opportunity to be vaccinated with the hepatitis B vaccine, at no charge to myself. However, I decline the 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 the hepatitis B vaccine, I can receive the vaccination series at no charge to me.

Signature _____ Date _____

THE UNIVERSITY OF ALABAMA IN HUNTSVILLE
SHARPS INJURY REPORT

- 1 Employee Last Name
- 2 Employee First name
- 3 Charger ID
- 4 Date of Incident
- 5 Occupation
- 6 Department
- 7 Building
- 8 Room number
- 9 Brand of device
- 10 Please provide a brief description
of how the injury occurred,
including the task which was
being performed as well as any
protective equipment worn or
utilized
- 11 Was an animal involved?
- 12 Was immediate treatment administered?

