

**Palm Beach State College**

*Florida's First Public Community College*



**EXPOSURE CONTROL PLAN  
FOR BLOODBORNE PATHOGENS**

**2011**

# **Palm Beach State College**

## **Exposure Control Plan for Bloodborne Pathogens**

### **POLICY**

Palm Beach State College is committed to providing a safe and healthful work environment for its entire workforce. In pursuit of this goal, the following exposure control plan (ECP) is provided to eliminate or minimize occupational exposure to bloodborne pathogens in accordance with the OSHA regulation at Title 29, Code of Federal Regulations, Part 1910, Paragraph 1030, "Bloodborne Pathogens," abbreviated 29 CFR 1910.1030. The ECP is a key document to assist our organization in implementing and ensuring compliance with the standard, thereby protecting our employees. This ECP includes:

- Determination of employee exposure
- Implementation of various methods of exposure control, including:
  - Universal Precautions
  - Engineering and work practice controls
  - Personal protective equipment
  - Housekeeping
  - Laundering
  - Labeling
  - Hepatitis B vaccination
  - Post-exposure evaluation and follow-up
  - Procedures for evaluating circumstances surrounding exposure incidents
  - Communication of hazards to employees and training
  - Recordkeeping

Implementation methods for these elements of the standard are discussed in the subsequent pages of this ECP.

### **RESPONSIBILITIES**

The Safety & Risk Management Department (Lake Worth campus at 561-868-4015) is responsible for overall implementation of the ECP. The department will maintain, review, and update the ECP at least annually, and whenever necessary to include new or modified tasks and procedures that affect occupational exposure, to include progress with engineering controls, new or revised job position(s) that involve occupational exposure, reviews and evaluations of exposure incidents that have occurred since the previous update and reviews indicating any deficiencies in the ECP. All employees are encouraged to provide suggestions on improving the procedures they perform in their job responsibilities.

Those employees who are determined to have a potential for occupational exposure to human blood or other potentially infectious materials (i.e., various human body fluids, as specified in the OSHA regulation, abbreviated OPIM) must comply with the procedures and work practices outlined in this ECP.

The department in which the employee having a potential for exposure to blood or OPIM works will provide and maintain all necessary personal protective equipment (PPE), engineering controls (e.g., sharps containers), labels and “red bag” containers as required by the standard. The department having such employees will ensure that adequate supplies of the aforementioned equipment are available in the appropriate sizes. In addition, the department is responsible for labeling of biohazardous waste, complying with proper pick-up procedures for regulated waste and maintaining documentation of regulated waste removal by an authorized agent.

The Safety & Risk Management Department is responsible for ensuring that all medical actions required by the standard involving employees from non-academic departments are performed and that appropriate employee health and OSHA records are maintained. The academic departments having employees affected by the standard are responsible for ensuring that required medical actions and recordkeeping for those employees are performed.

The Safety & Risk Management Department is responsible for training of employees from non-academic departments, documentation of training, and making the written ECP available to employees, OSHA, and NIOSH representatives. The academic departments are responsible for conducting training of their employees and maintaining documentation of such training.

## **EMPLOYEE OCCUPATIONAL EXPOSURE DETERMINATION**

“Occupational exposure” means reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood and other potentially infectious material (OIPM) that may result from the performance of an employee’s duties. Parenteral contact means piercing mucous membranes or the skin barrier through such events as needlesticks, human bites, cuts and abrasions. OIPM includes various contaminated human body fluids, unfixed human tissues or organs (other than skin) and other materials known or reasonably likely to be infected with human immunodeficiency virus (HIV) hepatitis B virus (HBV) or hepatitis C virus (HCV) through cells, tissues, blood, organs, culture mediums or solutions.

The following is a list of all job classifications at Palm Beach State College in which **ALL** employees may have occupational exposure:

**Table 1: Job Classifications with Occupational Exposure**

Position Title	Department	Task or Procedure
Adjunct/Full-Time Faculty, Clinical Coordinator, Dental Clinician	Health Sciences (Academic Department)	Instruction of students in dental procedures in the dental hygiene and dental assisting programs
Adjunct/Full-Time Faculty (Surgical Technology, Practical Nursing, Patient Care Assisting, Nursing, Medical Assisting)	Health Sciences (Academic Department)	Needlesticks during instruction of students in administration of IV's or capillary finger punctures

The following is a list of job classifications and their associated tasks and procedures in which **SOME** employees at Palm Beach State College may have occupational exposure.

**Table 2: Job Classifications with Potential Occupational Exposure**

Position Title	Department	Task or Procedure
Custodian	Facilities	Handling of regulated waste, cleanup of spills or contaminated equipment
Plumber	Facilities	Performing maintenance or repairs on sanitary facilities or equipment contaminated with blood or OPIM
Security Officer	Security	Providing first aid or responding to incidents or emergencies involving blood or OPIM as a "First Responder"
Adjunct/Full-Time Faculty, Clinical Coordinator (EMT, EMS/ Paramedic)	Public Safety (Academic Department)	Needlesticks during instruction of students in administration of IV's or capillary finger punctures
Adjunct/Full-Time Faculty (Crime Scene Technology)	Public Safety (Academic Department)	Contact with blood or OPIM during crime scene investigation activities

Contract custodians under the supervision of the Facilities Department also fall under this category of exposure. The contractor is responsible for ensuring that the bloodborne pathogen standard is satisfied for their employees before they begin work at Palm Beach State College. The Safety & Risk Management Department will ensure that the contractor has established a bloodborne pathogen exposure control plan for its employees.

Students interacting with patients/subjects in an instructional or field setting (e.g., those in crime scene investigating, dental hygiene, dental assisting, surgical technology, practical nursing, patient care assisting, nursing and medical assisting) may also experience exposure to blood and OPIM, e.g., needlesticks during administration of IV's or capillary finger punctures, contact with blood or OPIM during crime scene investigation activities or contact with blood during dental procedures. These incidents will be handled in accordance with procedures established by the academic department or hospital in which the incident occurs. The academic department should ensure that these procedures conform to the essential elements of this Exposure Control Plan (i.e., adherence to Universal Precautions, following correct work practices, wearing appropriate PPE, administration of hepatitis B vaccinations, post-exposure evaluation and follow-up, training and recordkeeping), and that they are followed for the affected students.

## **IMPLEMENTATION AND CONTROL**

### **Universal Precautions**

All employees and students will utilize Universal Precautions, which is an approach to infection control that presumes that all blood and bodily fluids are contaminated. Contact with these materials is avoided at all times by the use of protective barriers, such as latex or nitrile gloves, aprons, goggles, face shields, etc. In addition to engineering controls, this presumption, together with following appropriate work practices and the use of the types of personal protective equipment noted above, will ensure that employee exposure to contaminated blood and other potentially infected materials is eliminated or minimized.

### **Exposure Control Plan**

Employees covered by the bloodborne pathogens standard receive an explanation of this ECP during their initial training session. It will also be reviewed in an annual refresher training session. All employees can review this plan at any time during their work shifts either by contacting the Safety & Risk Management Department or accessing the ECP online at the Safety and Risk Management web site. Upon request, the Safety & Risk Management Department will provide an employee with a copy of the ECP free of charge and within 15 days of the request. The Safety & Risk Management Department is responsible for reviewing and updating the ECP annually or more frequently as described in the Responsibilities section above.

### **Engineering and Work Practice Controls**

Engineering controls are provided by Palm Beach State College as a means of isolating or removing bloodborne pathogens from the workplace. Departments with employees having a risk of exposure to bloodborne pathogens are responsible for ensuring that

such controls are implemented and maintained, where applicable. These controls include, but are not limited to:

- Hand washing facilities (or antiseptic hand cleanser and towels or antiseptic towelettes), which are readily accessible to all employees who have potential for exposure.
- Needle devices that effectively reduce the risk of an exposure incident, e.g., self-sheathing needles.
- Containers for contaminated sharps that are leak-proof, color-coded or labeled with a biohazard warning label and leak-proof on the side and bottom. Sharps disposal containers are inspected and maintained or replaced by the department maintaining the container whenever necessary to prevent overfilling.

Work practice controls involve altering the manner in which the job is performed to minimize the potential for exposure to bloodborne pathogens. Departments with employees having a risk of exposure to bloodborne pathogens are responsible for establishing appropriate work practice controls and ensuring that their employees follow them. Correct work practices include, but are not limited to:

- Wearing gloves when handling or cleaning up blood or OIPM, decontaminating contaminated equipment and handling regulated waste.
- Washing hands immediately with soap and water, or as soon as feasible, after removal of potentially contaminated gloves or other personal protective equipment or following any contact of body areas or exposed skin with blood or OIPM. Exposed mucous membranes are also flushed with water.
- Proper handling and disposal of clean-up materials, used bandages and gauze, linens and all other emergency items that come in contact with blood and OIPM.
- Prohibiting of recapping, removing, bending, shearing or breaking contaminated needles and other contaminated sharps unless it can be demonstrated that there is no feasible alternative or the action is required by specific procedure. In these instances, the recapping or needle removal is to be accomplished through the use of a mechanical device or a one-handed technique.
- Prohibiting the passing uncapped needles to others. If a needle needs to be passed, it should be set down on a surface for the other person to pick up in order to reduce the potential for sticking the recipient.
- Placement of contaminated reusable sharps into appropriate containers immediately, or as soon as possible, after use.
- Prohibiting eating, drinking, smoking, applying cosmetics or lip balm and handling contact lenses in work areas where there is potential for exposure to bloodborne pathogens.
- Disinfection of Wellness Center exercise equipment between each user.
- Prohibiting storage of food and drink in refrigerators, freezers, on shelves or countertops or in other storage areas where blood or OIPM are present.
- Prohibiting mouth pipetting/suctioning of blood or OIPM.
- Placement of specimens of blood or OIPM in designated leak-proof containers, appropriately labeled, for handling and storage.

- Placement within an appropriately labeled secondary leak-proof container for handling and storage of a primary specimen container if outside contamination of the primary container occurs. If the specimen can puncture the primary container, the secondary container must be puncture-resistant as well.
- Examination of equipment which becomes contaminated prior to servicing or shipping and decontaminated as necessary (unless it can be demonstrated that decontamination is not feasible).
- Affixing of an appropriate biohazard warning label to any contaminated equipment, identifying the contaminated equipment and identifying the contaminated portions.
- Following proper housekeeping and clean-up or decontamination procedures, as described below.

The Safety & Risk Management Department will evaluate new products or procedures and identify the need for changes in engineering controls and work practices or the ECP through the following:

- Review of accident/incident reports
- Inspections or reviews by the Safety & Risk Management Department or outside agencies
- Review of safety and health-related manuals and publications
- Review of employee complaints or suggestions
- Solicitation and review of input from non-managerial employees during conduct of annual training for affected employees
- Response to queries or suggestions from management
- Input from the campus safety committees

The Safety & Risk Management Department is responsible for ensuring that appropriate recommendations developed out of these measures are implemented.

### **Personal Protective Equipment (PPE)**

PPE is provided to our affected employees at no cost to them. Training in the use of the appropriate PPE for specific tasks or procedures is provided to non-academic organizations by the Safety & Risk Management Department. The academic departments are responsible for providing PPE training to their employees, as necessary, with assistance from the Safety & Risk Management Department, as requested.

The types of PPE available to affected employees include:

- Latex or nitrile gloves
- Aprons or gowns
- Goggles
- Face shields
- Eye protection

Each department is responsible for obtaining and providing PPE to its affected employees and for maintaining supplies at locations determined by them. Employees requiring PPE should contact their supervisors to obtain it.

All employees using PPE must observe the following precautions:

- Wash hands with soap and water immediately or as soon as feasible after removing gloves or other PPE.
- Remove PPE after it becomes contaminated and before leaving the work area.
- Dispose of used PPE in “red bag” containers provided by their departments.
- Wear appropriate gloves when it is reasonably anticipated that there may be hand contact with blood or OPIM, and when handling or touching contaminated items or surfaces. Replace gloves if torn, punctured or contaminated, or if their ability to function as a barrier is compromised.
- Decontaminate utility gloves intended for reuse only if their integrity is not compromised. Discard utility gloves if they show signs of cracking, peeling, tearing, puncturing or deterioration.
- Never wash or decontaminate disposable gloves for reuse.
- Wear appropriate face and eye protection when splashes, sprays, spatters or droplets of blood or OPIM pose a hazard to the eye, nose or mouth.
- Remove immediately or as soon as feasible any garment contaminated by blood or OPIM in such a way as to avoid contact with the outer surface.

## **Housekeeping**

Regulated waste is placed in containers which are closable, constructed to contain all contents and prevent leakage, appropriately labeled or color-coded (see the following section “Labels”) and closed prior to removal to prevent spillage or protrusion of contents during handling.

Contaminated sharps are discarded immediately or as soon as possible in containers that are closable, puncture-resistant, leak proof on sides and bottoms and appropriately labeled or color-coded. Sharps disposal containers are available in those areas of each campus where sharps are used.

General housekeeping measures for eliminating or minimizing exposure to blood and OPIM include the following:

- Use of a disinfectant. In the absence of EPA-registered disinfectants, the disinfectant commonly used is a ten percent bleach and water solution consisting of approximately two cups of chlorine bleach in one gallon of water. Paper towels or rags are first placed over the entire contaminated area (which helps to prevent splashing of the bleach solution when it is poured), then the bleach solution is poured, avoiding any splashing, or misted using a spray bottle over the entire contaminated area, and allowed at least ten minutes of contact time.

- Removal and replacement of protective coverings such as plastic wrap or aluminum foil whenever they become visibly contaminated.
- Inspection and cleaning/decontamination before intended re-use of any bins, pails, cans or other similar receptacles as soon as feasible after visible contamination.
- Handling of broken glassware with only mechanical means, e.g., brush and dustpan, tongs or forceps. If visibly contaminated, the mechanical device used is to be decontaminated if possible or discarded as OPIM.

## **Laundering**

No blood- or OPIM-contaminated articles will be laundered by Palm Beach State College. All such contaminated articles will be laundered by outside contractors available through purchase orders for laundering services. The following measures must be followed when handling blood- or OPIM-contaminated articles:

- Handle blood- or OPIM-contaminated laundry as little as possible, with minimal agitation.
- Place wet blood- or OPIM-contaminated laundry in leak-proof, labeled or color-coded containers before transport. Use “red bag” containers for this purpose.
- Wear the appropriate PPE, i.e., gloves and aprons, when handling and/or sorting blood- or OPIM-contaminated laundry.

**Note:** The Wellness Center at each campus may launder towels used to clean or wipe down exercise equipment after use. This activity involves no handling of blood or OPIM-contaminated articles and is not covered by this ECP.

## **Labeling**

The universal biohazard symbol will be used at Palm Beach State College to label contaminated sharps containers, refrigerators or other storage facilities containing blood, OPIM or other biological materials and containers of regulated waste, e.g., “red bags”.



Universal Biohazard Symbol

Labels are fluorescent orange or orange-red, or predominantly so, with the lettering and symbols in a contrasting color.

Appropriate supervisory personnel within the department generating the contaminated sharps or regulated waste are responsible for establishing procedures for labeling and for ensuring that warning labels are affixed as required. Employees are to notify their supervisors if they discover regulated waste containers, refrigerators containing blood or OPIM, contaminated equipment, etc., without proper labels.

## **HEPATITIS B VACCINATION**

The Safety & Risk Management Department will provide training to non-academic department employees on hepatitis B vaccinations, addressing safety, benefits, efficacy, methods of administration and availability. The academic departments having employees covered by the standard are responsible for providing this training to those employees. The hepatitis B vaccination series is available and offered at no cost to all employees identified in the exposure determination section of this plan after initial employee training and within 10 days of initial assignment or following any exposure incident if not previously vaccinated. If a student decides to take the vaccination after an exposure incident, it will be at his/her initial expense through the student's personal health insurance. The carrier for the student's accident/educational training insurance coverage from the College will reimburse the student for any out-of-pocket deductible or co-pay costs after the receipt/bill is received. If the student has no personal health insurance, the student's accident/educational training insurance will reimburse all covered medical costs up to the limit of the policy. Vaccination is encouraged unless:

- Documentation exists that the employee has previously received the complete hepatitis B series.
- Antibody testing reveals that the employee is immune.
- The vaccine is contraindicated for medical reasons.

Vaccination will be provided by a contracted licensed health care professional (LHCP) at either the affected employee's work location or the office of the LHCP. However, if an employee or student declines the vaccination, they must sign a declination form (see Attachment A, Hepatitis B Vaccine Acceptance/Declination Form). Individuals who decline the vaccination initially but at a later date while still covered under the standard decide to accept the vaccination may request and obtain the vaccination, with payment as provided above. Documentation of refusal of the vaccination for non-academic department employees is kept in the Safety & Risk Management Department files. Academic departments having employees or students covered by the standard will maintain documentation of refusal of the vaccination for those employees.

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

Should an exposure incident occur, contact Security. Security personnel will ensure that appropriate immediate response actions are taken and will document the incident in

an Accident - Incident Report, which is communicated to the Safety & Risk Management and Human Resources Departments, as well those departments whose employees were involved. For employees in non-academic departments, the Safety & Risk Management Department is responsible for ensuring that an immediately available confidential medical evaluation and follow-up is conducted by a contracted LHCP at no cost to the employee. Any costs for testing, medication, evaluation and formulation of a written opinion for the employee would be covered by the employee's Worker's Compensation insurance.

Following initial first aid (clean the wound, flush eyes or other mucous membrane, etc.), the following activities will be performed:

- Document the routes of exposure and how the exposure occurred.
- Identify and document the source individual (unless the employer can establish that identification is infeasible or prohibited by state or local law).
- Obtain consent, per Florida Statutes 381.004, and make arrangements to have the source individual tested as soon as possible to determine HIV, HCV, and HBV infectivity.
- If the source individual is already known to be HIV, HCV and/or HBV positive, new testing need not be performed.
- Assure that the exposed employee is provided with the source individual's test results and with information about applicable disclosure laws and regulations concerning the identity and infectious status of the source individual (e.g., laws protecting confidentiality).
- After obtaining consent, collect exposed employee's blood as soon as feasible after exposure incident, and test blood for HBV and HIV serological status.
- If the exposed employee does not give consent for HIV serological testing during collection of blood for baseline testing, preserve the baseline blood sample for at least 90 days. If the exposed employee elects to have the baseline sample tested during this waiting period, perform testing as soon as feasible.

Academic departments having personnel covered by the standard are responsible for undertaking these actions for those employees, as well as for their students. Costs for those employees would be covered by Worker's Compensation insurance. For students, these costs would be covered by the individual's personal health insurance, with any out-of-pocket deductible or co-pay reimbursed by the student's accident/educational training insurance. In the absence of any personal insurance, the student's accident/educational training insurance will reimburse all medical costs up to the limits of the policy.

In the event that the affected employee or student declines a post-exposure evaluation, this should be documented by having them complete a Declination of Post-Exposure Evaluation Form (see Attachment B).

## **ADMINISTRATION OF POST-EXPOSURE EVALUATION AND FOLLOW-UP**

For non-academic departments, the Safety & Risk Management Department will ensure that the contracted LHCP (typically the College's Worker's Compensation physician) responsible for the exposed employee's hepatitis B vaccination and post-exposure evaluation and follow-up is given a copy of OSHA's bloodborne pathogens standard and receives the following information:

- Description of the employee's job duties relevant to the exposure incident
- Route(s) of exposure
- Circumstances of exposure
- Results of the source individual's blood test, if possible
- Relevant employee medical records, including vaccination status.

The Safety & Risk Management Department will provide the employee with a copy of the evaluating LHCP's written opinion within 15 days after completion of the evaluation. The written opinion for hepatitis B vaccination shall be limited to whether the hepatitis B vaccination is indicated for the employee and if the employee has received such vaccination.

The LHCP's written opinion for post-exposure evaluation and follow-up shall be limited to the following information:

- That the employee has been informed of the results of the evaluation; and
- That the employee has been told about any medical conditions resulting from exposure to blood or OPIM which require further evaluation or treatment.

All other findings or diagnoses shall remain confidential and shall not be included in the written report.

Academic departments having personnel covered by the standard are responsible for undertaking these actions for those employees, as well as for their students.

## **PROCEDURES FOR EVALUATING THE CIRCUMSTANCES SURROUNDING AN EXPOSURE INCIDENT**

The Safety & Risk Management Department will review the circumstances of all exposure incidents involving non-academic department employees to determine:

- Engineering controls in use at the time
- Work practices followed
- A description of the device being used (including type and brand)
- Protective equipment or clothing that was used at the time of the exposure incident (e.g., gloves, eye shields, etc.)
- Location of the incident (e.g., biology lab, work site, etc.)
- Procedure being performed when the incident occurred

- Employee's training.

Academic departments having personnel covered by the standard are responsible for undertaking these actions for those employees, as well as for their students, in consultation with the Safety & Risk Management Department as necessary.

As applicable, the supervisor of any employee experiencing a sharps injury is responsible for recording all percutaneous injuries from contaminated sharps in a Sharps Injury Log to be maintained by his/her department (see Sharps Injury Log below).

If revisions to this ECP are necessary as a result of this evaluation, the Safety & Risk Management Department will ensure that appropriate changes are made.

## **EMPLOYEE TRAINING**

All employees who have occupational exposure to bloodborne pathogens receive initial and annual training conducted by personnel from either the Safety & Risk Management Department or their academic department, as applicable, who are qualified to provide such training by virtue of academic training or work experience.

All employees who have a potential for occupational exposure to bloodborne pathogens shall receive training on the epidemiology, symptoms, and transmission of bloodborne pathogen diseases. In addition, the training program will cover, at a minimum, the following elements:

- A review and explanation of the OSHA bloodborne pathogen standard
- An explanation of our ECP and how to obtain a copy
- An explanation of methods to recognize tasks and other activities that may involve exposure to blood and OPIM, including what constitutes an exposure incident
- An explanation of the use and limitations of engineering controls, work practices, and PPE
- An explanation of the types, uses, location, removal, handling, decontamination, and disposal of PPE
- An explanation of the basis for PPE selection
- Information on the hepatitis B vaccine, including information on its efficacy, safety, method of administration, the benefits of being vaccinated, and that the vaccine will be offered free of charge
- Information on the appropriate actions to take and persons to contact in an emergency involving blood or OPIM
- An explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that will be made available
- Information on the post-exposure evaluation and follow-up that the employer is required to provide for the employee following an exposure incident

- An explanation of the signs and labels and/or color coding required by the standard and used at this facility
- An opportunity for interactive questions and answers with the person conducting the training session.

Students in applicable programs receive this information on an ongoing basis as part of their curriculum.

Training materials are available in either the Safety & Risk Management Department or the academic department conducting the training, depending on whether the affected employee works in a non-academic or academic department.

## **RECORDKEEPING**

### **Training Records**

Training records are completed for each employee upon completion of training. These records include:

- Dates of the training sessions
- Contents or a summary of the training sessions
- Names and qualifications of persons conducting the training
- Names and job titles of all persons attending the training sessions.

For non-academic departments at Palm Beach State College, these documents will be maintained in the Safety & Risk Management Department for three years from the date on which the training occurred. The training records for employees of academic departments will be maintained similarly by their departments. Employee training records are provided upon request to the employee or the employee's authorized representative within 15 working days. Such requests should be addressed to either the Safety & Risk Management Department for non-academic employees or the academic department in which the employee works.

### **Medical Records**

Medical records for each employee with an occupational exposure are maintained by the Palm Beach State College Human Resources Department in accordance with 29 CFR 1910.1020, "Access to Employee Exposure and Medical Records." These confidential records are kept in the employee's personnel file for at least the duration of employment plus 30 years. Employee medical records are provided upon request of the employee or to anyone having written consent of the employee within 15 working days. Such requests should be sent to Executive Director Human Resources, Palm Beach State College, 4200 Congress Avenue, Lake Worth, FL 33461.

## **Sharps Injury Log**

29 CFR 1910.1030(h)(5)(i) and (ii) require any employer who must maintain an OSHA Log of Work-Related Illnesses and Injuries (OSHA Form 300) in accordance with the recordkeeping provisions of 29 CFR 1904 to also record all percutaneous injuries from contaminated sharps in a Sharps Injury Log (see Attachment C). All incidents must include at least:

- Date of the injury
- Type and brand of the device involved (e.g., syringe, suture needle)
- Department or work area where the incident occurred
- Explanation of how the incident occurred.

This log shall be reviewed as part of the annual program evaluation and maintained for at least five years following the end of the calendar year covered. If a copy is requested by anyone, the report shall have any personal identifiers removed.

Note: Per 29 CFR 1904, Subpart B, Appendix A, Palm Beach State College is not required to maintain the OSHA Log of Work-Related Illnesses and Injuries. Accordingly, until the College is covered by OSHA recordkeeping requirements, it is not required to record sharps injuries. Attachment B is therefore for information purposes only at this time, although its use as an instructional tool is encouraged for academic departments, both to reflect “real world” requirements and to facilitate the annual ECP review.

**ATTACHMENT A**

**Hepatitis B Vaccine Acceptance/Declination Form**

**I accept the Hepatitis B Vaccine at this time.**

Printed Name \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

Signature \_\_\_\_\_

**I decline the Hepatitis B Vaccine at this time.**

**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.**

Printed Name \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

Signature \_\_\_\_\_

## ATTACHMENT B

### Declination of Post-Exposure Evaluation Form

On \_\_\_\_\_, I experienced an incident at Palm Beach State College while working as adjunct/full-time faculty, clinician or clinical coordinator or participating as a student in a Palm Beach State College EMS/Paramedic, Dental Hygiene, Dental Assisting, Surgical Technology, Practical Nursing, Patient Care Assisting, Nursing, Medical Assisting or Crime Scene Investigation Program activity, which may have resulted in my exposure to bloodborne pathogens.

I have been advised that I may be evaluated by a physician pursuant to this incident, which may include serologic testing for HIV and HBV, and that there will be no cost to me for this evaluation. However, I choose to decline having the evaluation performed, with the understanding that I may have blood drawn at this time but not tested until a later time of my choosing (up to 90 days following the date of the incident).

Printed Name \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

Signature \_\_\_\_\_

## ATTACHMENT C

### Sharps Injury Log for Information Purposes Only

The following information, if known or reasonably available, is to be documented within 14 working days of the date on which each exposure incident was reported. Attach additional sheets, if necessary.

1. Date and time of the exposure incident: \_\_\_\_\_
2. Date of exposure incident report: \_\_\_\_\_
3. Report written by: \_\_\_\_\_
3. Type and brand of sharp involved: \_\_\_\_\_
4. Description of exposure incident:
  - Job classification of exposed employee or indicate "Student": \_\_\_\_\_
  - Department or work area where the incident occurred: \_\_\_\_\_
  - Procedure being performed by the exposed employee or Student at the time of the incident: \_\_\_\_\_
- How the incident occurred: \_\_\_\_\_
- Body part(s) involved: \_\_\_\_\_
- Did the device involved have engineered sharps injury protection? Yes \_\_\_\_ No \_\_\_\_
- Was engineered sharps injury protection on the sharp involved? Yes \_\_\_\_ No \_\_\_\_

If Yes	If No
Was the protective mechanism activated at the time of the exposure incident? Yes ____ No ____	Does the injured employee or Student believe that a protective mechanism could have prevented the injury? Yes ____ No ____
Did the injury occur before, during or after the mechanism was activated?	
Comments:	

- Does the exposed employee or Student believe that any controls (e.g., engineering, administrative or work practice) could have prevented the injury? Yes \_\_\_\_ No \_\_\_\_  
Employee's or Student's opinion: \_\_\_\_\_

5. Comments on the exposure incident (e.g., additional relevant factors involved): \_\_\_\_\_
6. Employee or Student interview summary: \_\_\_\_\_
7. Picture(s) of the sharp(s) involved (please attach if available).