



Institutional Policy D4050

Health and Safety – Bloodborne Pathogen

Category: Facilities, Health and Safety
Subject: Health and Safety – Bloodborne Pathogen
Effective Date: January 27, 2025
Updated:

1. Authority

29 CFR 1910.1030

COCA 5.3

2. Purpose

The purpose of this policy is to establish procedures that will ensure compliance with the Occupational Safety and Health Administration's (OSHA) "Bloodborne Pathogens Standard" (29 CFR 1910.1030) as promulgated by the Illinois Public Employees Occupational Safety and Health Act (PEOSHA).

3. Applicability

This Bloodborne Pathogens policy applies to the following Potentially Infectious Materials:

3.1 Human bodily fluids: blood, semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pericardial fluid, pleural fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any bodily fluid that is visibly contaminated with blood, and all bodily fluids in situations where it is difficult or impossible to differentiate between bodily fluids.

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

3.3 HIV or HBV-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.

4 Definitions

4.1 *Bloodborne pathogens* shall refer to pathogenic micro-organisms that are present in human blood and can cause disease in humans. These pathogens shall include, but not limited to, hepatitis B virus (HBV), hepatitis C virus (HCV), and human immunodeficiency virus (HIV).

4.2 *Engineering Controls* shall mean controls, which by design; isolate or remove the bloodborne pathogen hazard from the workplace (e.g. sharps disposal containers, self-sheathing needles).

4.3 *Occupational Exposure* shall be used to refer to reasonably anticipated or inadvertent 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.

5 Policy

The primary focus of this policy is to establish procedures, in accordance with OSHA's "Bloodborne Pathogens Standard" (29 CFR 1910.1030), that will protect NCOM staff, students/learners, volunteers, and employees from the hazards related to occupational exposures to bloodborne pathogens and other potentially infectious materials.

5.1 NCOM and its patient care facilities shall be responsible for developing standard operating procedures which will establish compliance with this policy. For the purposes of this policy, these standard operating procedures shall be known as an "exposure control plan".

5.2 This policy shall be reviewed on an annual basis, or more frequently as new information arises.

6 Exposure Control Plan

6.1 NCOM and its patient care facilities shall ensure that a written "Exposure Control Plan" is developed and implemented.

6.1.1 This plan will function as a standard operating procedure; describing the procedures and/or programs established by that specific college, clinic, or unit to eliminate or minimize employee, student/learner, or volunteer exposure to bloodborne pathogens and other potentially infectious materials. In some cases, departmental "exposure control plans" may have to be developed. This would especially be the case for those departments whose risk of exposure is moderate, high and/or unique.

6.1.2 In those cases where departmental "exposure control plans" are developed, it is recommended that they be modeled after the college/facility plan.

6.2 The Exposure Control Plan shall minimally consist of the following components:

6.2.1 An Exposure Determination for those titles within NCOM/facility:

(a) including a list of all job titles in which all employees have occupational exposure (as defined in this policy).

(b) including a list of all job titles in which some employees in that title have occupational exposure. For these titles, a list of all tasks and procedures (or groups of closely related tasks and procedures) in which occupational exposure occurs shall also be included.

(c) including a list of all student/learner/volunteer titles in which someone in that title have occupational exposure. For these titles, a list of all tasks and procedures (or groups of closely related tasks and procedures) in which occupational exposure occurs shall also be included.

6.2.2 Descriptions or copies of specific programs, policies, or procedures implemented at each college or patient care facility to address the requirements in this policy.

6.2.3 NCOM and its patient care facilities shall ensure that the Exposure Control Plan is accessible to its employees for examination.

6.2.4 The Exposure Control Plan shall be reviewed and updated, by NCOM representatives (e.g., college/unit safety committee) at least annually and, whenever tasks, procedures, or titles are modified such that risk of exposure to bloodborne pathogens change.

6.3 Universal Precautions:

As required by the existing NCOM Policy on HIV, HBV, and HCV patient care facility and all employees, students/learners, volunteers shall comply with the Universal Precautions Guidelines as established by the Centers for Disease Control

6.4 Engineering Controls:

6.4.1 NCOM will be responsible for reviewing and implementing available engineering controls. Engineering Controls refer to controls, which by design, isolate or remove bloodborne pathogen hazard from the workplace (e.g. sharps disposal containers, self-sheathing needles). In those cases where engineering controls have been implemented to the extent feasible and occupational exposure risk remains, other methods of controlling or minimizing occupational exposure, including personal protective equipment shall also be used.

6.4.2 Engineering controls shall be maintained and evaluated periodically to ensure their continued effectiveness.

6.5 Work Practices and Hygiene:

NCOM shall establish general work practices that will eliminate or minimize employee exposures. These may include, but not limited to:

6.5.1 Hand washing techniques and requirements;

6.5.2 Procedures for handling and disposal of contaminated needles and sharps;

6.5.3 Lists of prohibited activities. (For example, eating, drinking, and handling contact lenses in those work areas where there is potential for exposure, or storage of food in locations where blood or other potentially infectious material are present.);

6.5.4 Procedures to minimize splashing, spraying, spattering, generation of droplets, etc. during tasks which involve blood or other potentially infectious materials; and

6.5.5 Procedures for decontamination of contaminated equipment before servicing, shipping or disposal.

6.6 Personal Protective Equipment:

6.6.1 NCOM shall identify the specific procedures and/or tasks where personal protective equipment is required to prevent exposure to bloodborne pathogens.

6.6.2 Personal protective equipment may include, but not limited to, gloves, gowns, laboratory coats, face shields and eye protection, mouthpieces, and resuscitation bags.

6.6.3 NCOM shall ensure that personal protective equipment for on campus activities/labs is accessible and available in sufficient quantities and appropriate sizes.

6.6.4 NCOM shall be responsible for replacing and disposing of personal protective equipment as necessary.

6.7 Housekeeping:

6.7.1 NCOM shall ensure that an appropriate written schedule for cleaning and decontaminating different work areas and surfaces, based upon the location within the facility, type of surface to be cleaned, types of contamination present, and tasks or procedures being performed in the area, is established and implemented in each of their departments.

6.7.2 NCOM shall ensure that all equipment and environmental and working surfaces are cleaned and decontaminated appropriately after contact with blood or other potentially infectious materials.

6.7.3 NCOM shall ensure that regulated waste is maintained, labeled, and disposed of in accordance with CDC and OSHA recommendations.

7 Hepatitis B Vaccination and Post-Exposure Evaluation:

7.1 As required by the NCOM Policy on HIV, HBV and HCV, all house staff, students, faculty, and staff who have direct patient contact, or who have contact with potentially infectious body

fluids or laboratory materials must be immunized against hepatitis B (i would like to include Hep A also) or be able to demonstrate immunity

7.2 Confidential medical evaluation and follow-up shall be made immediately available to employees after an exposure incident is reported.

8 Labels and Signs:

8.1 Warning labels in accordance with the OSHA Bloodborne Pathogens standard shall be affixed to containers or regulated waste, refrigerators and freezers containing blood or other potentially infectious materials

8.2 OSHA bloodborne pathogens labels/signs must also be posted at the entrances to work areas conducting HBV, HCV, and HIV research.

9 Training:

9.1 NCOM shall ensure that all employees, students/learners and volunteers with occupational exposure participate in a training program on Bloodborne Pathogens with the following frequency:

9.1.1 At initial assignment;

9.1.2 Annually;

9.1.3 When changes that affect potential occupational exposure occur.

9.2 Training shall include as a minimum:

9.2.1 An explanation of the contents of the OSHA Bloodborne Pathogens Standard and information on how a copy of the standard may be obtained if requested;

9.2.2 A general explanation of the epidemiology and symptoms of bloodborne diseases;

9.2.3 An explanation of the modes of disease transmission;

9.2.4 An explanation of the appropriate methods that can be used to recognize and evaluate tasks and activities with potential exposure;

9.2.5 An explanation of the use and limitations of the different methods of control including, but not limited to, engineering controls, work practices and personal protective equipment;

9.2.6 Information on the types, proper use, location, removal, handling and disposal of personal protective equipment and the basis for selection of the different types of equipment;

9.2.7 Information on the appropriate actions and procedures to follow if an exposure occurs;

9.2.8 Information on the hepatitis B vaccine including efficacy, safety

9.2.9 An explanation of the signs and labels required by the standard;

9.2.10 An opportunity for interactive questions and answers; and

9.2.11 Additional training for employees in HIV, HCV, and HBV research laboratories which is specific to the practices and operations of the laboratory.

10 Recordkeeping:

10.1 NCOM shall ensure that medical records for each employee with occupational exposure are maintained for the duration of employment and 30 years thereafter.

10.2 The medical records shall include:

10.2.1 Hepatitis B vaccination status; including the dates of vaccination.


10.2.2 A copy of all results of post-exposure medical evaluations.

10.2.3 Copies of any information provided to the physician(s) performing medical evaluations related to this policy and the OSHA bloodborne pathogens standard.

10.3 Training records shall be maintained by the office of Clinical Affairs (students/learners) and Office of Human Resources (Faculty/staff/volunteers)

10.3.1 The records shall include training dates, contents of training, names and qualifications of instructors, and names and titles of the employees attending the training.

10.3.2 These training records shall be maintained a minimum of 3 years.

Signed by: 
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Dean/CAO