Bloodborne Pathogens Exposure Control Plan

Document History

<table>
<thead>
<tr>
<th>Version</th>
<th>Date</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>0.2</td>
<td>January, 2018</td>
<td>Program Review</td>
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</table>

Foreword
This written program is site specific to UVa Facilities Management and is in compliance with the OSHA 1910.1030 Bloodborne Pathogens Standard. Our program consists of the written Exposure Control Plan (ECP), Annual Bloodborne Pathogens Training with the appropriate FM staff, Hepatitis B Vaccination and Tracking, Health and Safety (EHS) Biosafety Department, Spill Kit Review, Hands-on Suit up and Blood Clean-up by a trained FM staff member, Comprehensive Quiz, and Recordkeeping.

Table of Contents
- Foreword ................................................................................................................................................... 1
- Introduction ............................................................................................................................................... 2
- Exposure Determination ............................................................................................................................ 2
- Methods of Compliance ............................................................................................................................ 2
- Communication of Hazards to Employees ................................................................................................. 6
- Hepatitis B Vaccination Policy ................................................................................................................... 6
- Employee Training ..................................................................................................................................... 8
- Recordkeeping Procedures .......................................................................................................................... 8
- Appendix-A Clean-up Procedure ............................................................................................................... 9
- Appendix-B Universal Precautions Procedure ............................................................................................. 10
- Appendix-C Spill Kit Inventory .................................................................................................................. 11
- Appendix-D Hepatitis B Vaccination Series .............................................................................................. 12
Introduction
This Plan was established by the University of Virginia in compliance with federal and state law to reduce employee exposure to bloodborne pathogens. This plan must be reviewed by each department and submitted to the Office of Environmental Health and Safety (OEHS) annually and in the event of interim changes. A copy of this plan is available for review by any employee during any work shift in the following location(s):

- UVA Facilities Management Safety Webpage
- UVA Facilities Management Safety Department

Departments must provide a copy of this plan within 15 days to any employee who requests it.

Exposure Determination
All employees who may reasonably be anticipated at risk for exposure to human blood, body fluids, or other potentially infectious materials (OPIM) are included in this plan, must be offered the hepatitis B vaccine and must be retrained annually in infection control. Departments must determine whether an employee is at risk for exposure without considering the use of personal protective equipment (PPE).

Other Potentially Infectious Materials (OPIM) include:

- semen and vaginal secretions
- human tissue or organs (fixed or unfixed)
- cerebrospinal fluid
- cell/tissue cultures
- pleural and pericardial fluid
- blood, organs, or tissue from animals infected with human pathogens
- peritoneal fluid
- amniotic fluid
- saliva in dental procedures
- body fluids visibly contaminated with blood

Job categories with regular potential for exposure to human blood/OPIM:

- Housekeepers/FM Housing Zone Housekeeping Departments
- Maintenance Technicians/FM Housing Zone Maintenance Departments
- HVAC Technicians/FM HVAC Evening Shift
- Housekeeping Worker 1, 2, 3, Supervisor, Manager

Job categories that do not normally have the potential for exposure to human blood/OPIM as part of their regular duties but may perform certain tasks that may cause them to be exposed:

- Supply delivery personnel, equipment repair personnel, Quality Control Inspector.

Methods of Compliance
Departments and all staff will comply with the OSHA Bloodborne Pathogens Standard using the following methods:

Standard Precautions
All human blood, body fluids, and tissues are considered contaminated with bloodborne and other pathogens. Employees must avoid direct contact with human blood, body fluids, and tissues to avoid exposure to bloodborne and other human pathogens.
Engineering and Work Practice Controls
Engineering and work practice controls will be used to minimize exposure to human blood, body fluids, and tissues. These controls are regularly evaluated by UVA-WorkMed and Environmental Health and Safety and include:

1. **Handwashing.** Hands must be washed with soap and water after each contact with blood or body fluids, as soon as possible after removing PPE and whenever they become contaminated with human blood, body fluids and tissues. Antiseptic (wipes or alcohol based gel) hand cleaner may be used if soap and water are not immediately available, however, staff must wash hands with soap and water as soon as a sink is accessible.

2. **Personal hygiene.** Eating, drinking, smoking, applying cosmetics or lip balm, or handling contact lenses in contaminated areas is not permitted.

3. **Food.** Food and drink must not be kept in refrigerators, freezers, cabinets or on countertops or shelves where human blood, body fluids and tissues are present.

4. **Minimize spray.** Splash, spray, spatter, or generation of droplets must be minimized during any procedure that involves human blood, body fluids and tissues.

   Note any special practices not specified above that are used to minimize splash, spray and generation of human specimen droplets):
   - Use large absorbent pads or napkins to cover blood during the application of chemicals in the clean-up process.

5. **Sharps handling.** Sharps include any needles or lancets used to collect blood or inject medication and other drugs. Sharps must not be bent, broken, recapped or removed from handles after use.

   Note any known situations in which workers will handle sharps:
   - Possible occasion that Housekeeping and Maintenance will discover syringes or razor blades left by a resident during cleaning and maintenance work.

6. **Safe Medical Devices.** *Not applicable to this department.*

7. **Sharps disposal.** Contaminated disposable sharps including razor blades, broken glass, and any other blood contaminated sharp object must be disposed of in a plastic sharps container immediately after use. Plastic sharps containers must be closable, puncture resistant, labeled with the “biohazard” symbol, leak-proof on sides and bottom, and maintained upright during use. Plastic sharps containers must be easily accessible, with the opening visible and as close as possible to the area where sharps are used or found (e.g., drawer, laundry room). Plastic sharps containers must be promptly closed, removed, and replaced when they are ¾ full and placed in a regulated medical waste container.

   If available for workers or visitors, list location(s) of plastic sharps containers. Approved & trained staff in FM Building Services, FM Housing Zone Housekeeping and Maintenance, FM Safety Department, FM HVAC Evening Team, and FM Lab personnel are responsible for maintaining plastic sharps boxes.

8. **Servicing (repairing) contaminated equipment.**
Approved and bloodborne pathogen trained staff are responsible for assessing and decontaminating equipment located in their respective departments.

9. Central reprocessing of contaminated reusable equipment.

Spill Kit contents are not reusable. Contents are kept in sealed plastic bags, and are designed for single-use only. Once used, contents should be discarded accordingly (contaminated contents discarded in red biohazard bags). Follow the Spill Kit Inventory (Appendix-C) procedure for having spill kits replenished.

10. Personal protective equipment. If the potential for exposure remains in spite of work practice and engineering controls, personal protective equipment (“PPE”) must be used. PPE can be found in designated bloodborne pathogen spill kits. PPE must be worn during procedures in which human blood, body fluids and tissue exposure to skin, eyes, nose or mouth is reasonably anticipated. PPE must be selected based on the type of exposure anticipated. PPE must cover all body parts and personal clothes/uniform that may be exposed and must prevent soak through.

Non-latex gloves are available for employees with latex sensitivity or allergy.

PPE is in the large spill kits located throughout areas maintained by Facilities Management. BBP trained staff are responsible for notifying the Facilities Management Safety Department for restocking kit supplies and PPE when used. The large spill kits are inspected and cleaned once a year by the FM Safety Department to insure they are up-to-date.

PPE and personal clothing/uniform must be removed if they become contaminated with human blood, body fluids or tissues. Disposable PPE that is contaminated with any human blood or body fluids must be disposed of in a CMC. **ALL PPE MUST BE REMOVED BEFORE LEAVING THE CLEAN-UP AREA.**

a) **Disposable gloves.** Gloves must be worn:
   - when hands may come in contact with human blood, body fluids and tissues, mucous membranes, or broken skin;
   - when handling contaminated items or surfaces
   - and must be replaced as soon as possible if they are torn or contaminated. Disposable gloves must never be washed or re-used.

b) **Protection for eyes, nose and mouth.** Masks and eye protection (combo mask, goggles or face shields) must be worn whenever splash or spray of human blood, body fluids and tissues to the face is anticipated.

c) **Body protection.** Fluid-resistant aprons and coveralls must be worn when human blood, body fluids and tissues exposure to body or personal clothes/uniform is anticipated. Head/hair covers and shoe covers or boots must be worn if gross contamination is anticipated.

Note tasks not already identified that are performed by staff and the type of PPE required to perform them.*
Tasks and Personal Protective Equipment Required To Perform Them

<table>
<thead>
<tr>
<th>Activity</th>
<th>Gloves</th>
<th>Gown</th>
<th>Mask</th>
<th>Protective Eyewear*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cleaning Bodily Fluid Spills</td>
<td>Yes</td>
<td>Yes, only if gross contamination or if staff wants extra protection</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Disposing of Biohazardous Waste</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Handling Laundry</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Handling or cleaning contaminated tools or other equipment</td>
<td>Yes</td>
<td>No</td>
<td>Yes, only if gross contamination</td>
<td>Yes, only if gross contamination.</td>
</tr>
</tbody>
</table>

*Mask must always be worn if protective eyewear is worn. PPE and personal clothing/uniform must be removed if they become contaminated with human blood, body fluids or tissues. Disposable PPE that is contaminated with any human blood or body fluids must be disposed of in a CMC.

11. **Housekeeping.** The workplace must be maintained in a clean and sanitary condition. Human blood, body fluid or tissue spills must be cleaned up according to the procedure in Appendix A. Facilities Management BBP Trained staff can be called for assistance with large spills.

a) **Equipment and working surfaces.** Contaminated work surfaces must be disinfected with a Facilities Management Safety Department approved disinfectant (H2Orange2, H2Orange2 ONE, and Cavicide) as soon as possible when contaminated with human blood, body fluids, and tissues.

   Temporary coverings (e.g., plastic wrap, foil, chux, paper) over equipment and surfaces must be removed and replaced as soon as possible when contaminated. All reusable bins, pails, cans, and similar receptacles which may become contaminated with human blood, body fluids or tissues must be regularly inspected and decontaminated as soon as possible if they become contaminated.

b) **Special sharps precautions.** Broken glass must never be picked up with hands always use broom and dust pan. Staff must never reach into plastic sharps containers or regulated medical waste containers.

12. **Regulated medical waste.** Regulated medical waste must be disposed of in a CMC (see definition below). Human blood and body fluids may be poured down toilets or floor sinks using appropriate PPE to prevent exposure. Material containing any human blood or body fluid must be disposed of in a CMC. Regulated medical waste includes but is not limited to:

   • human blood and blood contaminated body fluids
   • any residue, contaminated soil, water or other debris resulting from the cleanup of a spill of regulated medical waste; and,
   • any waste contaminated by or mixed with regulated medical waste.
   • sharps found in any area maintained by Facilities Management (e.g. blood glucose testing or for medication injection) MUST go into a sharps container.
Waste containers. UVA Contaminated Material Containers (“CMCs”) are
- closed immediately prior to removal
- puncture resistant
- leak-proof on sides and bottom
- constructed to prevent leaks during handling, shipping, storage and transport
- labeled with the biohazard symbol
- easily accessible to personnel
- maintained upright during use
- replaced routinely and not allowed to overfill
- it is the responsibility of the lab, BBP trained FM staff or FM Safety Department to secure the CMC and contact the Office of Environmental Health & Safety to pick-up for proper disposal.

CMC bags must be disposed of when they are ¾ full. Plastic sharps containers must be locked closed and placed in an CMC for disposal. If the outside of an RMW bag becomes contaminated, place it in a second RMW bag. Red bag waste is disposed of by UVA in accordance with the Virginia Department of Waste Management Regulations.

13. Laundry. Contaminated linen and clothing. Gloves must be worn and Standard Precautions used when handling linens and clothing. Contaminated linen and clothing must be bagged by Housekeeping staff and picked up and cleaned by an approved commercial laundry facility or must be cleaned so it will be effectively decontaminated.

To launder contaminated clothing:
Fill a sink or bucket with cold water and soak contaminated clothing. Wear gloves to dump the water down the drain and squeeze water out of the garment. Then cover the garment with: H2Orange2, H2Orange2 ONE, or Cavicide.

Let soak for at least 10 minutes, remove, rinse with water, and wash in a departmental washing machine.

Note any private laundry contractors used and how contaminated linen is transferred to them:
FM- Housing Zone Areas: Handcraft Linen Services. Linens are clear bagged by Housekeeping staff, bags are collected in large roll carts and picked up by Handcraft and transported by their company vehicle to their facility for cleaning. Other FM Areas: Staunton Steam, bagged, and tagged as contaminated clothing.

Communication of Hazards to Employees
Biohazard warning labels must be affixed to:
- Plastic sharps containers if provided for workers or public.
- Contaminated medical containers (provided by EHS) for regulated medical waste are already labeled.

Hepatitis B Vaccination Policy
Employees identified by departments/units as having potential for exposure to human blood/OPIM (see II. Exposure Determination), must be offered hepatitis B vaccine free of charge. The vaccination is a series of three injections given at approximately 0, 1, and 6 months and one final blood draw to test for vaccine effectiveness. A routine booster dose is not recommended, but will be given at no charge if the U. S. Public Health Service recommends it in the future. The vaccine must be offered after bloodborne pathogens
training and within 10 working days of initial assignment to a job category where exposure may occur unless previously vaccinated or medically contraindicated.

Note: New Facilities Management Building Services, FM-Housing Zone Housekeeping and Maintenance, FM-HVAC Evening Shift staff members are not authorized to clean up blood or body fluid containing blood prior to Bloodborne Pathogen Training. New staff must sign a declination statement if they do not wish to receive the Hepatitis B vaccine.

Employees who decline Hepatitis B vaccine must sign a declination statement (see Appendix D).

Procedures for evaluation and follow-up of exposure incidents
An exposure is:
• blood/OPIM contact with eyes, nose, mouth, other mucous membranes, or broken skin,
• blood/OPIM contaminated sharps injury, or
• blood contact over a large area of apparently intact skin

In the event of exposure, staff must immediately stop work and flush area with bottle of saline/eye wash solution supplied in the large spill kit and then:
• Wash sharps injuries or exposed skin with soap and water.
• Flush eye, nose or mouth exposures with large amounts of water
• Report exposure immediately to supervisor and the FM Safety Department (434) 297-6379.
• Report immediately to UVa WorkMed (923-0075: 1910 Arlington Blvd.) (weekdays) or the Emergency Dept. (nights, weekends).

Evaluation and treatment of exposure is confidential and will be given by or under the supervision of a licensed physician and will include:
• documentation of the route(s) and circumstances of your exposure; and
• documentation of the source individual, if known.

If the infectivity status of the source individual is unknown and blood is available, it will be tested for HIV, hepatitis B and C in accordance with state law and UVA Medical Center Policy No. 0117®. You will be told what the test results are and what they mean for you.

If the employee consents, his or her blood will be tested as soon as possible after exposure to provide baseline hepatitis B, C, and HIV status. If the employee does not consent to HIV testing, the sample will be stored for 90 days and tested if the employee consents in that time period.

Post-exposure prophylaxis will be offered to exposed employees when medically indicated and as recommended by the US Public Health Service. Counseling and medical evaluation will be offered for any reported illnesses the employee develops as a result of the exposure. The following information will be provided to the healthcare professional evaluating the exposed employee:
• a copy of 1910.1030 Bloodborne Pathogens Standard;
• a description of the employee’s duties as they relate to the exposure incident;
• documentation of the route(s) and circumstances of the exposure;
• results of the source individual’s blood testing, if available;
• all medical records relevant to the employee’s treatment including vaccination status.

Occupational Health will give the employee a copy of the evaluating healthcare professional’s written opinion within 15 days of the evaluation. The opinion will be limited to following:
• the results of the evaluation; and
• any medical conditions resulting from the employee’s exposure

All other findings will remain confidential and will not be included in the written report.

Employee Training

FM Employees designated to clean-up blood spills must attend a Bloodborne Pathogens training session within 10 days of job assignment and annually thereafter. Annual retraining is completed in-person and conducted by the FM Safety Department. Additional training must be provided whenever there are changes in tasks or procedures which affect employees’ potential for exposure.

Training is provided by FM Safety Department. Training records are sent to EHS for tracking and documentation.

Recordkeeping Procedures

Medical Recordkeeping
Occupational Health will establish a medical record for employees who have exposures. The record will be maintained for the duration of employment plus 30 years. The record will include:

• employee name and email address,
• dates of hepatitis B vaccinations and medical records relative to the employee’s ability to receive vaccination;
• examination results, medical testing, and follow up procedures;
• the healthcare professional’s written opinion;
• information provided to the healthcare professional who evaluated the employee for suitability to receive hepatitis B vaccination.

The record is confidential and will not be disclosed to anybody within or outside the workplace without the employee’s written consent, except as required by law or regulation.

Training Records
Departments must keep documentation of their employees’ training attendance for 3 years including dates of training sessions, summary of the session contents, and names and job titles of attendees. OEHS will track all employees who complete Bloodborne Pathogen Training. Employees, employee representatives, and the Commissioner of the Virginia Department of Labor and Industry may request copies of these records.

Training records are on file at FM Safety Department and a copy is sent to the Office of Environmental Health & Safety upon completion.
Appendix-A

Bloodborne Pathogen Clean-Up Procedure

If you have not received Bloodborne Pathogen Clean Up training from FM-OHS or are uncomfortable with the clean up or procedure, please let your supervisor know. Then contact the UVA FM Service Desk at (434) 924-3053 for qualified assistance after completion of Step 1 below.

1. Close off spill area to traffic and create a “work zone”.
   (Use yellow caution tape in kit, if needed, to control foot traffic in clean-up area.)

2. Remove supplies from spill kit for easy access during cleaning process.
   Place them nearby, but out of the way of what you are cleaning.

3. ALWAYS PROTECT YOURSELF! – Put on Personal Protective Equipment (PPE):
   Be sure to protect your eyes, nose, and mouth with the combo mask/safety shield in kit.
   Put on gloves, disposable apron, and shoe covers from kit.
   Double glove method is recommended!
   NOTE: You may have to change your gloves several times during the cleaning process. Check your gloves periodically throughout the cleaning process.

4. First, lay paper towels over the blood and spray CaviCide on the paper towels, soaking them thoroughly. **LEAVE ON FOR 5 MINUTES** – Use the timer included with the kit. Push the paper towels into the spill (toward the center) to absorb the spill and disinfectant. **Always work from the outside edges of the spill towards the center.** Add more paper towels as needed. Place used paper towels in the **red biohazard bag**.
   If not completely clean, spray the surface again and **LEAVE ON FOR 5 MINUTES** (set timer), then wipe surface dry. **DO NOT SPRAY AND IMMEDIATELY WIPE – allow the chemical time to do its job.**

5. Carefully remove your PPE and place it in the red Biohazard bag. If the red Biohazard bag is contaminated, use the extra red Biohazard bag and place the contaminated bag inside the extra bag.
   *It is recommended that you change your gloves.*

6. Wash your hands with soap and water immediately. If soap and water is not available where you are, use the p.a.w.s. Antimicrobial Hand Wipes included in the kit until you can get to soap and water to thoroughly wash your hands.
   *It is mandatory that you wash your hands with soap and water.*

7. Take the red biohazard bag to the office of Environmental Health & Safety, ph: 434-982-4911 for proper disposal.

8. REORDER the contents of the Bloodborne Pathogen Spill Kit:
   Bob Gorde  Phone: 434-239-6587
   First Aid Supplies, LLC
   105 Whispering Pines Court
   Lynchburg, VA 24502
Appendix-B

Facilities Management Universal Precautions Procedure

**Universal Precautions**

What is Universal Precautions?: ALL human blood and certain human body fluids are treated or handled as if known to be infectious with HIV, HBV, HCV, and other Bloodborne Pathogens. You cannot tell just by looking at it; that it is infectious, so all blood is to be treated as if it is.

What is a Bloodborne Pathogen is a germ (Virus or Bacteria) that is present in human blood and can cause disease in humans.

1. Barrier protection should be used at all times to prevent skin and mucous membrane (eyes, nose, and/or mouth) contamination with blood or any body fluids containing visible blood. Examples of barrier protection include disposable gloves, plastic apron, shoe covering, hair covering, face shield and eye and face mask

2. Gloves are to be worn when there is potential for hand or skin contact with blood or body fluid, other potentially infectious material, or items and surfaces contaminated with these materials. The double glove method is recommended.

3. Wear face protection (face shield) during procedures that are likely to generate droplets or sprays of blood or body fluid to prevent exposure to mucous membranes of the mouth, nose, and eyes.

4. Wear protective body clothing (full body Tyvex suite or disposable plastic aprons and shoe covering) when there is a potential for splashing of blood or body fluids.

5. Wash hands or other skin surfaces thoroughly and immediately if contaminated with blood or body fluids.

6. Wash hands immediately with soap and water after gloves are removed even if you have used hand sanitizer.

7. Avoid accidental injuries that can be caused by needles, glass, and other sharp objects by carefully removing trash. Do not press down on trash and do not let the bag hit or brush against your body.

8. Used needles, disposable syringes, glass, razor blades and other contaminated sharp items are to be placed in the red puncture resistant container marked with the biohazard symbol for disposal.

What is an exposure? An exposure happens when:

1. Skin is punctured or cut with a bloody sharp object (example: glass with blood on it).

2. Blood or body fluid contact with broken skin (example: open cut or hang nail, shaving nick, acne) or mucous membranes (example: eyes, nose, and/or mouth).

3. Contact with blood or body fluid over large area of intact skin (example: your entire hand and forearm).

**THINK YOU’VE BEEN EXPOSED?**

IMMEDIATELY WASH YOUR SKIN WITH SOAP AND WATER OR FLUSH EYES, NOSE, AND MOUTH WITH WATER AND CONTACT YOUR SUPERVISOR AND THE FM SAFETY DEPARTMENT 989-0324, 531-7203 or 531-0184.
Appendix-C

Below is an inventory of the preassembled Bloodborne Pathogen Spill Kit that includes all required items. Re-order information is included on the following page.

**FM-OHS will no longer be annually inspecting Bloodborne Pathogen Spill Kits.** It is now each zone’s responsibility to inspect and replace the kits as needed. Kit inspection includes disposing of the expired kit and replacing with a new kit. Please follow UVA EHS rules and procedures when disposing of chemicals.

### Bloodborne Pathogen Spill Kit Inventory

<table>
<thead>
<tr>
<th>Qty.</th>
<th>Item #</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>n/a</td>
<td>Clean Up Instruction Sheet</td>
</tr>
<tr>
<td>1</td>
<td>n/a</td>
<td>Inventory Sheet</td>
</tr>
<tr>
<td>1</td>
<td>9-543AV43</td>
<td>Metal Cabinet, 3 adjustable shelf</td>
</tr>
<tr>
<td>1</td>
<td>9-10835</td>
<td>Ziploc Bag, 16”x16”</td>
</tr>
<tr>
<td>1</td>
<td>9-19465</td>
<td>Clear, Round Bottle w/ Large-Mouth Lid, 16 oz. for sharps</td>
</tr>
<tr>
<td>1</td>
<td>9-89590</td>
<td>CaviCide Surface Disinfectant, 8 oz. pump spray</td>
</tr>
<tr>
<td>2</td>
<td>6-PT2</td>
<td>Plastic Tweezers, 1-time use</td>
</tr>
<tr>
<td>3</td>
<td>9-14180</td>
<td>Pair Nitrile Gloves, 8 mil</td>
</tr>
<tr>
<td>1</td>
<td>9-17100</td>
<td>Safetec Universal Compliance Kit:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Vinyl Gloves, 1 pair</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Apron</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Combo Mask/Safety Shield</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Red Z Solidifier, 10 g.</td>
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<tr>
<td></td>
<td></td>
<td>• Scoop/Scraper</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• SaniZide Plus Germicidal Wipe</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Red Biohazard Waste Bag w/ Twist Tie, 24”x24”</td>
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<tr>
<td></td>
<td></td>
<td>• p.a.w.s. Antimicrobial Hand Wipes</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Identification Tag</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Instructions</td>
</tr>
<tr>
<td>2</td>
<td>9-3336</td>
<td>Red Biohazard Labels, 4”x4”</td>
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<td>9-CT30</td>
<td>Yellow Caution Tape, 30’</td>
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<td>10</td>
<td>9-13630</td>
<td>Blue Heavy Duty Shop Towels, 17”x12”</td>
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<tr>
<td>1</td>
<td>9-00900W</td>
<td>Manual Timer, 1 hour dial</td>
</tr>
<tr>
<td>2</td>
<td>9-BHBag</td>
<td>Red Biohazard Bag (extra)</td>
</tr>
<tr>
<td>1</td>
<td>0-81024</td>
<td>Pair Large Shoe Covers</td>
</tr>
</tbody>
</table>
Appendix-D

Hepatitis B Vaccination Series

The Hepatitis B vaccine is offered at no cost* to employees determined to be at risk for occupational exposure to human blood, blood products, tissues, cells or other potentially infectious material. Primary vaccination against hepatitis B involves a series of three immunizations.

**Declining the Hepatitis B Vaccine:**
If any of the following conditions apply, please complete and sign the back of this form, *Hepatitis B Immunization Declination Form*, and submit it to Facilities Management-Occupational Health and Safety.

- Prior completion of a hepatitis B immunization series.
- Immunity has been established by a documented serologic antibody testing (also called a “titer”).
- There are medical reasons prohibiting administration of the vaccine.
- The vaccine is declined.

**Receiving the Hepatitis B Vaccine:**
If you wish to receive the hepatitis B vaccine, please complete the information below and select the communication method you prefer.

Name (please print clearly): ___________________________ Date: ______________

Organization & Shop #: ___________________________ Phone: ____________

➢ **Method of Communication:**

☐ Email  Email address: ________________________________

☐ Phone  Phone: ________________________________

➢ **Health Clinic:**

☐ WorkMed
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 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.

Reason for Declination:
☐ Prior completion of Hepatitis B vaccination series
☐ Immunity has been established by a documented serologic antibody test (titer).
☐ Choose to decline at this time

_______________________________________  ___________________________________
Signature      Date

_______________________________________                 ____________________________________
Name - Print Clearly          Organization and Shop #

_______________________________________  ____________________________________
Telephone Number     Email ID