BLOODBORNE PATHOGENS
EXPOSURE CONTROL PLAN

April 2020

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# Summary of Changes

**Date:** 4/8/2019

<table>
<thead>
<tr>
<th>Section</th>
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<tr>
<td>2</td>
<td>Added “Summary of Changes” page</td>
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<tr>
<td>D (1) g</td>
<td>Added to make available, a listing of companies that provide cleanup</td>
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<td>D (2) m</td>
<td>Added criteria when cleaning and decontamination may be necessary</td>
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<td>D (2) l</td>
<td>Added departments are responsible for the cleanup of OPIM from vehicles, carts or equipment they own or use</td>
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<td>E (2)</td>
<td>Added “potential” before occupational exposure</td>
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<td>E (2) n</td>
<td>Added Student Building Manager</td>
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<td>J (3)</td>
<td>Added how to access the link to view the Exposure Control Plan</td>
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<tr>
<td>Appendix B</td>
<td>Added “and sharps” to Landscape &amp; Grounds potential exposure</td>
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<tr>
<td>Appendix B</td>
<td>Re-phrased Risk Management &amp; Safety potential exposure to BBP</td>
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<td>Appendix B</td>
<td>Added Student Building Manager work tasks</td>
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<tr>
<td>Throughout</td>
<td>Minor word and punctuation changes to aid understanding</td>
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**Date:** 4/17/2020
A. SCOPE AND APPLICATION

The Bloodborne Pathogens (BBP) Exposure Control Plan is established in accordance with 29 CFR 1910.1030, “Bloodborne Pathogens,” and describes the procedures to minimize occupational exposure to bloodborne pathogens at all University of Nevada, Las Vegas (UNLV) properties.

B. COMPLIANCE WITH PROGRAM

This procedure applies to all UNLV employees and designated volunteers who have a risk of occupational exposure to blood or other potentially infectious material while completing job duties and assignments.

C. DUTIES AND RESPONSIBILITIES

(1) Risk Management and Safety (RMS)

a. Establish the BBP Exposure Control Plan for UNLV.

b. Conduct an annual review of the plan.

c. Collect and process for disposal, sharp containers and implements used in research labs.

d. Develop and offer training at no cost to those covered by this plan.

e. Maintain training records, hepatitis B series completion records, declination statements, sharps injury logs, and occupational exposure incident reports.

f. Offer UNLV employees and designated volunteers experiencing exposure incidents an opportunity to receive post exposure evaluations, treatment, and follow-up care.

g. Identify and make available, a listing of vendors that offer services in the cleanup and removal of OPIM.
h. Provide procedures on the cleanup and removal of OPIM if done with in-house resources. (Appendix A).

(2) Department Managers and Supervisors

a. Provide personal protective equipment specified for the job tasks being completed (in appropriate numbers and sizes at no cost) to those covered by this plan and ensure it is being used when required.

b. Repair or replace personal protective equipment, as needed, to protect employees and designated volunteers from the hazards encountered.

c. Ensure UNLV employees and designated volunteers who have potential exposure to blood or OPIM complete BBP Training.

d. Provide sharps containers that meet the requirements of OSHA standard 29 CFR 1910.1030 and ensure they are processed for disposal as required.

e. Maintain engineering controls to ensure they work properly and are providing effective protection for those working in areas where they are used.

f. Place regulated waste in properly labeled, appropriate containers that are processed for shipment/pickup.

h. Report exposure incidents to RMS.

g. Refer individuals experiencing exposure incidents to RMS to receive information about post-exposure evaluations, treatments, and follow-up care.

h. Provide containers for the storage, washing, decontamination or disposal of contaminated PPE.

i. Establish and communicate procedures to identify and separate clean and sanitized re-usable items from those that are contaminated.

j. Provide for the cleanup and decontamination of vehicles, carts or equipment that is own or used by the department.

k. Implement a schedule for cleaning and decontamination when the following has occurred:
i. After completion of procedures.

ii. As soon as possible when surfaces are overly contaminated.

iii. Any spill of blood or potential infectious material.

iv. At end of work shift, if contaminated since the last cleaning.

l. Clean and decontaminate surfaces, bins, pails, cans, and similar receptacles to include those:

i. Intended for reuse, which have a reasonable likelihood of becoming contaminated with blood or OPIM.

ii. That have visible signs of contamination on them.

iii. Being serviced or shipped unless demonstrated that decontamination is not feasible.

(3) Safety Medical Devices

Student Health Center (SHC), School of Dental Medicine (SDM), School of Medicine (SOM)

a. Provide a method and point of contact for department employees (including non-managerial employees) and designated volunteers to submit recommendations for safer medical devices/procedures and evaluate recommendations.

b. Determine new procedures and devices that are approved for use in their particular facility. Appendix B – “Annual Review Safer Medical Task/Procedure Device/Technology” should be used to document this review.

c. Order approved devices and instruct staff on their implementation and use.

(4) Student Health Center (SHC) – Medical Services

a. Maintain an inventory of Hepatitis B vaccine.
b. Provide Hepatitis B vaccinations to those who have completed training and have opted to receive the vaccination series.

c. Provide documentation of Hepatitis B vaccine series completion to RMS.

(5) UNLV Employees and Designated Volunteers

a. Complete required training.

b. Eat, drink, smoke, apply lip balm/cosmetics and handle contacts in areas where there is not a reasonable likelihood of occupational exposure.

c. Store personal consumable items (food and drinks) in areas where they will not be contaminated with blood or OPIM.

d. Inspect all PPE prior to use and bring defective PPE to supervisor for repair or replacement.

e. Wear all specified PPE properly.

f. Follow Universal Precautions and all other safe work practices.

g. Remove PPE prior to leaving the work area and place in appropriate container for storage, washing, decontamination or disposal.

h. Wash hands immediately (or as soon as feasible) after the removal of gloves or other personal protective equipment, in contact with blood or OPIM.

Note: Centers for Disease Control and Prevention (CDC) guidelines for washing hands and using hand sanitizers are provided at: www.cdc.gov/handwashing/when-how-handwashing.html.

i. Report all exposure incidents to your immediate supervisor at the time of occurrence.

D. EXPOSURE DETERMINATION

(1) The listing below shows job classifications in which all employees at UNLV may have an occupational exposure.

a. Athletic Trainer
b. Childcare Worker
c. Custodial Worker/Housekeeping
d. Dental Care Professional/Support
e. Health Care Professional/Support
f. Lifeguard
g. Plumber
h. Police/Security Officer

(2) The listing below shows a list of departments at UNLV in which some employees may have a potential occupational exposure. A summary of tasks they perform can be found at Appendix B.

a. Student Affairs Maintenance
b. Campus Recreational Services
c. Facility Maintenance Services – Shadow Lane Campus
d. Kinesiology
e. Landscape/Grounds
f. Dental, Medical and Nursing Student
g. Physical Therapy
h. Risk Management and Safety
i. Student Health Center/Faculty and Staff Treatment (FAST) Center
j. Thomas & Mack/Sam Boyd Stadium
k. Graduate Assistants/Laboratory Workers
l. Lynn Bennett Early Childhood Education Center Staff Member
m. Student Union
n. Student Building Manager

E. METHODS OF COMPLIANCE

(1) Engineering Controls, Work Practice Controls, and Personal Protective Equipment (PPE).

a. Engineering Controls
   i. Tools for picking up contaminated sharps and broken glassware.
   ii. Containers to properly discard needles and contaminated sharps.
   iii. Facilities for hand washing and the flushing of mucous membranes; eyes, face and body after any contact with blood or OPIM.

b. Work Practice Controls
   i. Use of Universal Precautions whenever handling blood or OPIM.
   ii. Proper handling and disposal of sharps and sharps containers.
   iii. Washing hands and exposed skin with soap and hot water as soon as possible after working in an area where there is blood or OPIM.
   iv. Using antiseptic hand cleaners when soap and hot water are not available.
v. Implementing and following procedures to minimize splashing, spraying, spattering and generation of droplets.

vi. Cleaning and sanitizing facilities, work surfaces and equipment as soon as possible after contamination and prior to reuse.

c. Personal Protective Equipment

i. Suitable (PPE) to protect against potential exposure that is changed out when defective.

ii. Made of material that prevents blood and OPIM from passing through.

F. TRAINING

(1) BBP Training will be provided to employees and designated volunteers:

a. During working hours and at no cost.

b. At the time of initial job assignment where occupational exposure may take place and annually thereafter.

c. When tasks or procedures are modified, or the implementation of new procedures which affect employees’ occupational exposure.

(2) Specific training for HIV/HBV research staff will be provided by the department wherein the research is conducted and cover the requirements specified in 29 CFR 1910.1030.

(3) Training records will be maintained for three years from the date from which the training occurred.

G. HEPATITIS B VACCINATION

(1) Information on Hepatitis B vaccinations at UNLV will be presented during Bloodborne Pathogens Training.

(2) Hepatitis B vaccinations are available at no cost to UNLV employees and designated volunteers:

a. After completing required training.

b. Within 10 working days of being assigned work that has a potential for occupational exposure.
(3) To obtain Hepatitis B vaccinations:
   a. Acquire a completed “Student Wellness, UNLV Authorization for OSHA Vaccines” (see Appendix D) from their department.
   b. Deliver the “Student Wellness, UNLV Authorization for OSHA Vaccines” to the Student Health Center to arrange for department payment of the vaccine and receive the first vaccination in the series.
   c. At the designated interval, return to the Student Health Center to receive the second and third vaccinations of the series.

(4) To decline Hepatitis B vaccinations, employees should:
   a. Sign a Declination Statement (see Appendix E).
   b. Reasons for declining include:
      i. The employee has received the Hepatitis B series previously.
      ii. Antibody testing indicates that the employee is immune.
      iii. Vaccine is contraindicated for medical reasons.
      iv. Employee preference.

(5) UNLV employees and designated volunteers, who initially decline Hepatitis B vaccinations and are still covered by this program, retain the option of receiving the vaccination at a later date by following steps listed in H (3) above.

H. POST – EXPOSURE EVALUATION AND FOLLOW-UP

(1) UNLV employees and designated volunteers experiencing exposure incidents will be offered post-exposure evaluations and follow-up treatment at designated facilities at no cost.

(2) Post-exposure evaluations and follow-up treatment can be obtained by:
   a. Visiting an approved worker compensation medical provider and filing a worker’s compensation claim during their initial visit.
   b. Receiving a physician’s progress report and scheduling appointments for follow-up treatment.
   c. Reporting to the medical care provider for the follow-up treatment.
(3) Copies of evaluations may be given to employees and designated volunteers at the end of each visit.

(4) The Health Care Professional’s Written Opinion of the completed evaluation must be provided no later than 15 days from when the evaluation was conducted.

(5) UNLV employees and designated volunteers who refuse post exposure evaluations and treatment should sign the “Refusal of Post - Exposure Evaluation” form (See appendix F).

I. COMMUNICATION OF HAZARDS TO EMPLOYEES

(1) RMS will provide general exposure control plan information to employees and designated volunteers.

(2) Departments/Schools will provide specific information about potential BBP hazards and protection from these hazards to which individuals will be potentially exposed.

(3) The Exposure Control Plan is available for review by clicking the “Occupational” and “Bloodborne Pathogens” buttons on the RMS website.

J. RECORD KEEPING

(1) The sharps injury log will contain required information and will be maintained by RMS for five years following the incident.

(2) All other records that pertain to vaccinations, potential exposures and medical determinations/treatment will be kept for the duration of employment plus 30 years.

K. HIV/HBV RESEARCH LABORATORIES

(1) Proposed research involving HIV and HVB are spelled out in laboratory procedures that are submitted by the professor overseeing this research to the Institutional Bio-Safety Committee for review and approval.

(2) Once all safety requirements have been met and approval has been granted, researchers and all others who enter these areas will abide by all safety criteria that have been established.

(3) Variances to these procedures should be presented to the Institutional Bio-Safety Committee.
Those overseeing labs used for this type of research will post biohazard signage at the entrance to work areas to warn others of the potential hazards contained within the lab.

RMS will inspect laboratories and are also available to advise concerning routine laboratory procedures.

L. DEFINITIONS

(1) **Occupational Exposure** – means reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or potentially infectious materials that may result from the performance of an employee’s duties.

(2) **Other Potentially Infectious Material (OPIM)**
   
a. Bodily fluid that is visibly contaminated with blood and all body fluids in situations where it is difficult or impossible to differentiate between body fluids.

b. Unfixed tissue or organ (other than intact skin) from a human (living or dead).

c. HIV-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.

(3) **Universal Precautions** – an approach to infection control. According to the concept of Universal Precautions, all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV and other bloodborne pathogens.

M. APPENDICES

Note: For copies of the following appendices, please contact RMS, OSH.

(1) Appendix A – “Cleanup Procedures – Other Potentially Infectious Materials”

(2) Appendix B – “Annual Review Safer Medical Task/Procedure/Device Technology”

(3) Appendix C – “Potential Exposure – Departments and Work Tasks”

(4) Appendix D – “Student Wellness, UNLV Authorization for OSHA Vaccines”

(5) Appendix E – “Hepatitis B Vaccine Declination”

(5) Appendix F – “Refusal of Post - Exposure Medical Evaluation”