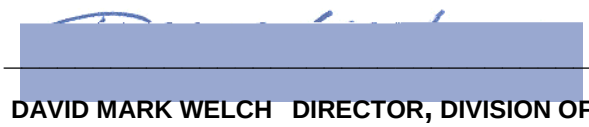
BLOODBORNE PATHOGENS EXPOSURE CONTROL PLAN

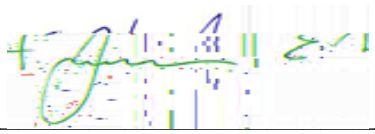
SEPTEMBER 2018

APPROVAL:



OCT 4, 2018

DAVID MARK WELCH DIRECTOR, DIVISION OF RESEARCH **DATE**



OCT 4, 2018

ERIC H. JENSEN ENVIRONMENTAL HEALTH & SAFETY MANAGER **DATE**

Managing disposal of biohazardous waste, including sharps.

3.2 Principal Investigators/Supervisors

Principal Investigators (PIs)/Supervisors are responsible for ensuring all employees with potential occupational exposure to bloodborne pathogens comply with the requirements of this ECP.

Ensuring a copy of this ECP is readily accessible to employees.
Developing site-specific standard operating procedures (SOPs).
Selecting and implementing appropriate engineering controls to eliminate or minimize exposure to bloodborne pathogens.
Ensuring employees have participated in Bloodborne Pathogens training.
Providing laboratory specific safety training to employees upon initial work assignment.
Participating in incident investigation for all occupational exposures to blood or OPIM in their department.

3.3 Employees

Complying with the procedures outlined in this ECP.
Completing required annual bloodborne pathogens Training.
Identifying job tasks that have potential occupational exposure to bloodborne pathogens.
Wearing PPE and using engineering controls and safe work practices while performing their duties.
Reporting all occupational exposure incidents to blood or OPIM to the PI/Supervisor.
Seeking immediate medical treatment following exposure incident.

3.4 Departments, Centers or Divisions

Department Managers and Center/Division Directors are responsible for ensuring that proper exposure controls are implemented and followed in the work areas.

Providing all occupationally exposed employees with access to this ECP.
Ensuring that all occupationally exposed employees complete the required Bloodborne Pathogen training.
Providing appropriate PPE to ensure compliance with this ECP.

5.4.4 Specimen Handling and Transport

Specimens of blood or OPIM shall be placed in a primary container that prevents leakage (capped test tube, centrifuge tube, etc.) during collection, handling, and

For any infectious biohazardous waste that cannot be decontaminated on-site by autoclaving or disinfection, please contact the MBL Safety Department (x7424; safety@mbl.edu) for specific handling/disposal.

5.7 Sharps disposal

Needles, scalpels, lancets, slides, coverslips, glass pipettes, capillary tubes, or broken glass contaminated with blood or OPIM must be collected in red sharps containers provided by the MBL Safety Department. Specific procedures for sharps disposal are outlined in the MBL Biosafety Manual.

6 PERSONAL PROTECTIVE EQUIPMENT

The PI/Supervisor must ensure required PPE is provided at no cost to all employees who are at risk of

cracked, torn, punctured, are peeling, or are otherwise no longer providing a protective barrier to contamination.

6.2 Eye Protection

Protective eye wear such as safety glasses must be worn in any location where it is reasonably anticipated that blood or OPIM may make contact lr50000091ey ntt conbconb[ )]T

7.3 Spill Response to Blood or OPIM

For any spill involving human blood, body fluids contaminated with blood, or OPIM, follow the steps below:

Wear proper PPE (laboratory coat, nitrile gloves, eye protection).
Keep unauthorized personnel away from the spill area.
Allow for aerosols to settle.
Absorb blood with paper towels or absorbent pads and place in a biohazard bag.
Collect any sharps with forceps and place in a sharps container.
Spray the spill area with a 10% bleach solution (add 1 part of concentrated bleach solution to 9 parts of water).
After **30 minutes of contact time**, wipe the spill area down with disinfectant-soaked paper towels or absorbent pads.
Discard all disposable materials used to clean the spill area and any contaminated PPE into a biohazard bag. Contact MBL Safety Department (x7424 or

responsible for ensuring that all affected employees participate in the Bloodborne Pathogens Training.

The training will be conducted by MBL Safety Department and will cover the following topics:

OSHA Bloodborne Pathogens Standard.
Epidemiology and symptoms of bloodborne diseases.
Modes of transmission of bloodborne pathogens.
MBL written Exposure Control Plan and explanation of the program.
Procedures which might cause exposure to bloodborne pathogens.
Methods used to control exposure to bloodborne pathogens.
Personal protective equipment (PPE).
Explanation of biohazard signs and labels used.
Hepatitis B vaccination program.
Emergency procedures involving blood or OPIM.
Exposure incident reporting documentation.
Post-exposure evaluation and follow-up.
An opportunity to ask questions.

Annual training will be conducted within one year of the employee's previous training.

9 VACCINATION AND POST-EXPOSURE EVALUATION

9.1 Hepatitis B Vaccine

A safe and effective vaccine is available for protection from Hepatitis B. The MBL strongly encourages employees to be vaccinated, but accepting vaccination is not a condition of employment. Immunization requires three injections of vaccine over a six-month period. This vaccine is available at no cost to all employees who are potentially exposed to blood or OPIM.

The PI/Supervisor will ensure that all employees with potential for occupational exposure to bloodborne pathogens are offered the Hepatitis B Virus (HBV) vaccination in a timely manner. The HBV vaccination will be offered to personnel as a prophylactic treatment or made available post-exposure.

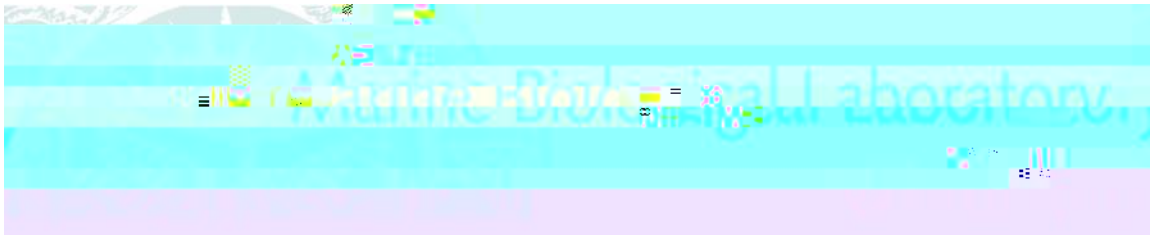
The vaccine will be administered to the employee by a licensed physician or under supervision of another licensed health care professional.

Upon hire or position change which include tasks with potential occupational exposure risk, the employee will be provided the "Hepatitis B Vaccine

Sterilize: The use of physical or chemical procedures to destroy all microbial life, including highly resistant bacterial endospores.

Universal Precautions: An approach to infection control. According to the concept of Universal Precautions, all human blood and certain human bodily fluids are treated as if known to be infectious for HIV, HBV, and other bloodborne pathogens.

Work Practice Controls:



APPENDIX A: EMPLOYEE EXPOSURE DETERMINATION

Center/Division or Department	Job Title	Specific Tasks with Occupational Exposure Risk
Resident Research		
Animal Care Facility Bay Paul Center Central Microscopy Facility Division of Education Ecosystems Center Eugene Bell Center Marine Resource Center NXR Center	Animal Care Coordinator Assistant Scientist Associate Scientist Attending Veterinarian Distinguished Scientist Hibbitt Fellow; MBL Fellow	

HEPATITIS B VACCINE ACCEPTANCE/DECLINATION FORM

Read the following statement below and check one of the options.

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 the Hepatitis B vaccine. I understand that if I decline this vaccine, I continue to be at risk of acquiring Hepatitis B. However, if in the future I want to be vaccinated, I can receive the Hepatitis B vaccine. The vaccination series is at no charge to MBL employees through Blue Cross/Blue Shield with any copay to be reimbursed by MBL.

I DECLINE