



BBP Exposure Control

University Facilities (UF)

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This document establishes official procedure reducing exposure to Blood Borne Pathogens.

Summary

The Exposure Control plan meets the requirements for OSHA's Bloodborne Pathogen Standard of 29CFR1910.1030. This Standard calls for the creation of a facility specific exposure control plan which identifies in writing the tasks, procedures, and/or job positions where there is a reasonable potential occupational exposure to bloodborne pathogens (BBP). Implementation of Universal Precautions emphasizes that unless empirical evidence is given to the contrary, all human and non-human primate bodily fluids, tissues and cell lines shall be considered infectious. However, the Exposure Control Plan and BBP is not only applicable in research and teaching laboratories, but also for any employee that has a potential for an occupational exposure to blood or other bodily fluids that are defined as Other Potentially Infectious Materials (OPIMS). A few examples of OPIMS of human bodily fluids include, but are not limited to, semen, vaginal secretions, synovial fluids, pleural fluids, amniotic fluids, and any bodily fluid in which blood is present. Bloodborne pathogens are infectious microorganisms, such as hepatitis B (HBV) hepatitis C (HCV), and human immunodeficiency (HIV).

New employees, or employees newly assigned to job functions involving a reasonable potential exposure to blood or OPIM will be offered the HBV vaccination at no cost to the employee and within ten days of initial assignment. The employee may decline the vaccination by signing the Declination Form. The employee will also receive initial BBP training, followed by an annual refresher thereafter.

The use of engineering controls, work practice controls, and Personal Protective Equipment (PPE) shall be implemented to control potential exposure. Engineering controls are devices that isolate or remove the bloodborne pathogens hazard from the workplace. They include sharps disposal containers, self-



sheathing needles, and safer medical devices, such as sharps with engineered sharps-injury protection and needleless systems. Work practice controls reduce the possibility of exposure by changing the way this is task is performed, such as appropriate practices for handling and disposing of contaminated sharps, handling specimens, handling laundry, and cleaning contaminated surfaces and items. PPE may include, but is not limited to, rubber or disposable gloves, gowns, eye protection, and masks. After work with infectious or potentially infectious materials and after the removal of PPE, employees must wash their hands.

If an exposure incident occurred, such as a specific eye, mouth, mucous membranes, non-intact skin, or parenteral contact, the employee must follow the proper University procedures for medical evaluation. This will occur at no cost to the employee.

For more information:

<https://www.clemson.edu/research/oes/biosafety/resources.html>