

# Occupational Exposures to Bloodborne Pathogen (BBP) Training

OSHA 29 CFR 1910.1030

Protects workers exposed to blood or  
other potentially infectious diseases

# Who are at Risk?

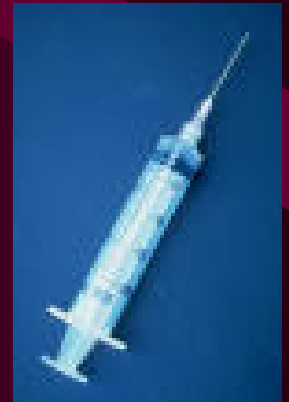
- Workers in many different occupations are at risk of exposure to bloodborne pathogens
- First aid team members, housekeeping personnel in some settings, athletic coaches and trainers, and nurses are examples of workers who may be at risk of exposure



# Needlestick Safety and Prevention Act

(enacted in 2001)

- It revised OSHA's Bloodborne Pathogen Standard
- Clarifies the need for employers to select safer needle devices
- Requires employers to maintain log of injuries from contaminated sharps



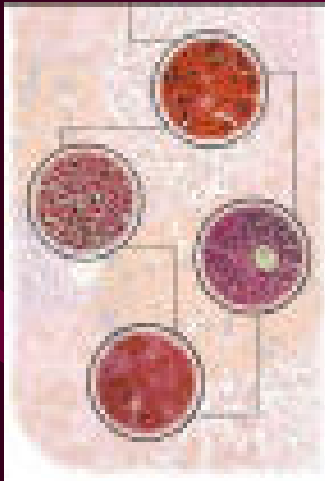
# Potentially Infectious Materials

## Blood

Human Blood

Blood Products

Blood Components



## Other Potentially Infectious Materials

Human Body Fluids

Semen & Vaginal  
secretions

HIV or HBV containing  
cells, tissue cultures or  
experimental animals

# Other Potential Dangers!

Body Fluids not expected to be Infectious unless containing Blood

- Urine
- Feces
- Vomit
- Sputum
- Nasal Secretions
- Tears
- Sweat



# Hepatitis B Virus (HBV)

- Hepatitis B is a virus that attacks the liver
- HBV is spread when blood or body fluids from an infected person enters the body of a person who is not infected
- HBV can survive dried and at room temp. for at least one week
- HBV is preventable with a vaccine

# Hepatitis B Vaccination

- The Hepatitis B vaccine protects against chronic HBV for at least 15 years
- A 3-shot vaccination is available
- Employees who are not vaccinated, and work with bloodborne pathogens as part of their duties, are entitled to the vaccination at no cost to the employee. Please contact EHS/RM at x94503 if you are in need of the vaccination.

# Human Immunodeficiency Virus (HIV)

- Virus that attacks the immune system
- Can lead to AIDS and can be fatal
- Body fluids proven to spread HIV: blood semen, vaginal fluid, breast milk and other bodily fluids containing blood



# Transmission of BBP

- Contact with Broken Skin:
  - Open cuts, nicks, abrasions, acne, dermatitis
- Contact with Mucous Membranes:
  - Eyes, nose and mouth
- Accidental injury by contaminated sharps
- Indirect transmission:
  - Touching a contaminated surface, then touching your mouth, eyes, nose, or open skin

# Written Exposure Plan

- Required for employers to have an Exposure Control Plan to identify those tasks and procedures in which occupational exposure may occur and to identify the positions whose duties include those task and procedures.
- UD's Plan may be found in EHS/RM. Please call us at x94503 for a copy of the plan.

# Universal Precautions

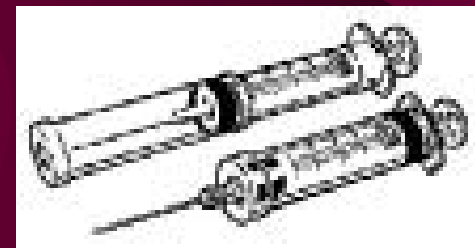
- Universal precautions shall be observed to prevent contact with blood or other potentially infectious materials.
- Under circumstances in which differentiation between body fluid types is difficult or impossible, all body fluids shall be considered potentially infectious materials.

# Preventions of Exposures

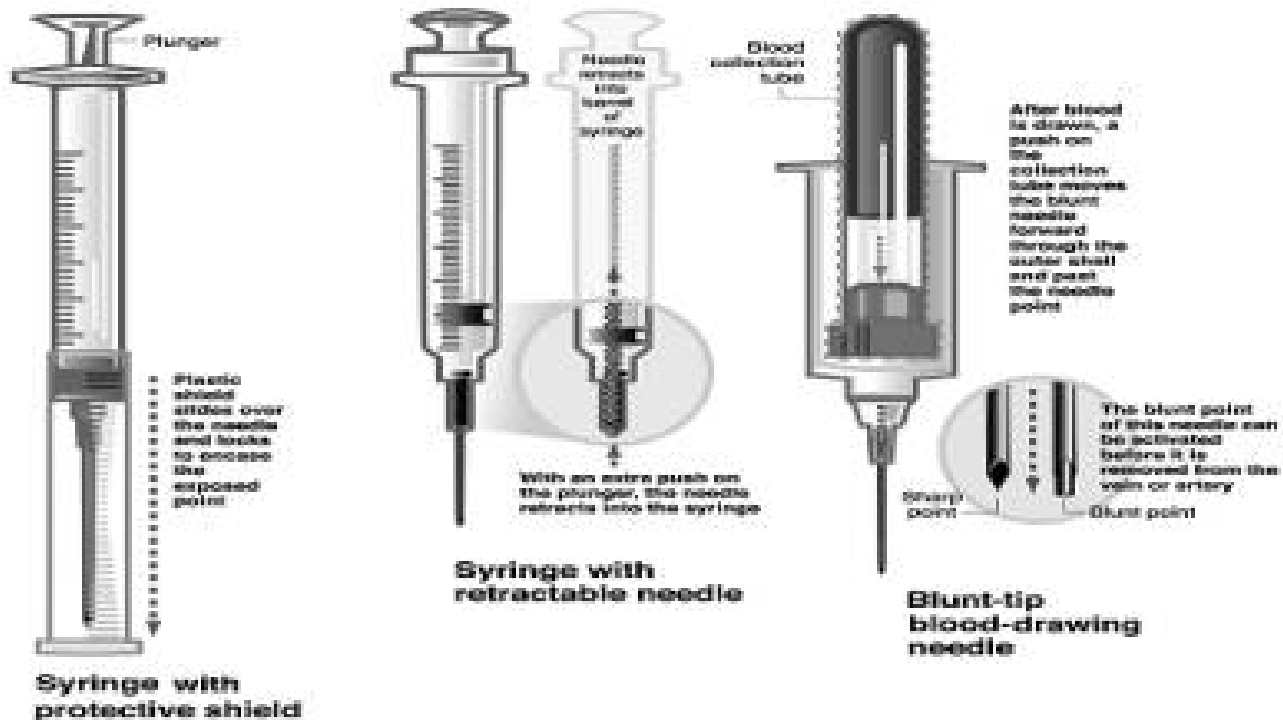
- People can be infected by HIV and HBV for many years without having any symptoms, and may not know they are infected.
- Therefore, you must treat all blood and body fluids visible contaminated with blood as though they are infectious.

# Engineering and Work Practice Controls

- Handwashing and eyewash facilities
- Sharp disposal containers
- Sharps with engineered sharps injury protection
- Safer medical devices
- Needleless systems



# Needle Safe Devices



Source: Health Action Magazine, industry advertising, and clinical research.

STEVE REARLEY / SAN FRANCISCO CHRONICLE

# Personal Protective Equipment

- Eye Protection
- Face Shield
- Masks
- Gloves
- Apron/lab coat/gown



# Housekeeping

- Contaminated work surfaces shall be decontaminated with an appropriate disinfectant after completion of procedures; immediately or as soon as feasible when surfaces are overtly contaminated or after any spill of blood or other potentially infectious materials; and at the end of the work shift if the surface may have become contaminated since the last cleaning.



# What to do in case of an Exposure

- Immediately wash exposed skin with nonabrasive soap and water.
- Flush exposed mucous membranes with water
- Remove contaminated gloves, clothes or shoes as soon as possible and place in red biohazard bag
- Wash the skin underneath contaminated materials
- Report the incident to your supervisor
- Seek medical evaluation

# Exposure Follow-up

- Under go medical evaluation
- Complete appropriate worker injury reporting forms
- Additional medical follow up as necessary



# Spill Clean Up

- Please notify EHS/RM when a spill must be cleaned.
- Some Alpha and Omega staff are trained to clean up spills
- Use PPE- at minimum gloves and eye protection
- Use disinfectants and dispose of waste properly through EHS/RM



# Regulated Waste

- All waste including contaminated gloves and face shields from the clean up must be placed in the provided Red Biohazard Bag and tied closed.
- Sharps shall be disposed of in designated red sharp containers
- Please contact EHS/RM for pick up of the red bag and we will arrange for proper disposal through our biohazard waste contractor.

# Waste Disposal



Sharps Container for  
needles



Biohazard Barrels



Biohazard Red Bags

# Communication of Hazards

- Labels
  - Warning labels shall be affixed to containers of regulated waste, refrigerators and freezers containing blood or other potentially infectious material; and other containers used to store, transport or ship blood or other potentially infectious materials



# Signs

- The employer shall post signs at the entrance to work areas specified in paragraph (e), HIV and HBV Research Laboratory and Production Facilities



# Sharp Injury Log

- Sharps injury log for the recording of percutaneous injuries from contaminated sharps.
- Confidentiality of the injured employee is protected





# OSHA Standard

- For a copy of the OSHA Bloodborne Pathogen Standard, you may call EHS/RM at 229-4503 or visit the [OSHA website](#)