

**Bloodborne Pathogen Compliance Program
Lindenwood University
College of Science, Technology, and Health
Revised: June 2021**

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I. INTRODUCTION

The Lindenwood University College of Science, Technology, and Health trains students in a variety of health sciences programs. These programs require employees, faculty and students to be in contact with individuals and potentially exposed to bloodborne pathogens. In order to safeguard SHS faculty, staff, and students from the hazards associated with bloodborne pathogens and to be in compliance with OSHA standard 29 CFR 1910.1030 "Occupational Exposure to Bloodborne Pathogens" the following compliance program for bloodborne pathogens has been established.

II. POLICY

The SHS has established the following exposure control plan (ECP) to eliminate or minimize occupational exposure to bloodborne pathogens in accordance with OSHA standard 29 CFR 1910.1030, "Occupational Exposure to Bloodborne Pathogens."

The ECP consists of the following components:

- Determination of the potential for employee or student exposure
- Implementation of various methods of exposure control, including:
 - Universal precautions
 - Engineering and work practice controls
 - Personal protective equipment
 - Housekeeping guidelines
- Hepatitis B vaccination
- Post-exposure evaluation and follow-up
- Communication of hazards to employees and regular training
- Recordkeeping
- Procedures for evaluating circumstances surrounding exposure incidents

Implementation methods for these elements of the standard are discussed in the subsequent pages of this ECP.

III. ADMINISTRATION

- The Compliance Coordinator (CC) will maintain, review, and update the ECP at least annually, and whenever necessary to include new or modified tasks and procedures. The office of the CC is located in the Field House, Room 109, and can be reached at 636-627-2949.
- Employees, faculty and students who are determined to have occupational exposure to blood or other potentially infectious materials (OPIM) must comply with the procedures and work practices outlined in this ECP. Faculty and staff who fail to comply with the ECP will be subject to disciplinary action as outlined in the Lindenwood University Employee Handbook.

- Each department within the SHS will provide and maintain all necessary personal protective equipment (PPE), engineering controls (e.g., sharps containers), labels, and appropriately labeled disposal containers (red bags) as required by the SHS administration. The CC will ensure that adequate supplies of all required PPE are available in the appropriate sizes. Faculty/Staff requiring necessary PPE or other relevant safety equipment should contact their respective Program Director.
- Students who are off-campus and participating in clinical rotations will be required to utilize the PPE, engineering controls, labels and disposal containers of the respective clinical site. Appropriate governmental regulatory agencies who wish to obtain a copy of the clinical agreement should provide a written request to the SHS Dean. Any such requests will be immediately forwarded by the SHS Dean to the Lindenwood University legal counsel and other appropriate personnel for consideration and approval.
- The CC will be responsible for ensuring that all medical actions required by the standard are performed and that appropriate employee health and OSHA records are maintained. The office of the CC is located in the Field House, Room 109, and can be reached at 636-627-2949.
- The CC will be responsible for training, documentation of training, and making the written ECP available to all Faculty and Staff, OSHA, and NIOSH representatives. The office of the CC is located in the Field House, Room 109, and can be reached at 636-627-2949.
- The Program Directors (PD) will be responsible for training, documenting and creating the written ECP and making this plan available to students within their respective departments. The ECP will be available to all students as part of the respective program handbook. The PDs will maintain written documentation that each student has successfully completed all ECP training requirements and that each student has received a copy of the ECP. Refer to Appendix B for Program Director and program-specific ECP information.

IV. EXPOSURE DETERMINATION

Each educational program in the SHS is responsible for determining locations, personnel, students and routes where there is risk for exposure. Refer to Appendix B for program-specific information.

V. EXPOSURE CONTROL PLAN

All SHS Faculty and Staff shall receive a copy of the ECP (or shall have access to an electronic copy) and training on the ECP during their initial employee orientation. All faculty and staff will receive refresher training annually. Any SHS Faculty/Staff member can review the ECP at any time during their work shifts by contacting the CC or their department's respective program director. If requested, the CC or PD will provide the Faculty/Staff member with a copy of the ECP within 10 business days of the request.

All SHS Students will be provided access to the ECP through each department's website.

Evaluation and Review

The CC is responsible for reviewing and updating the ECP annually, or more frequently if necessary, to update tasks and procedures that may involve occupational exposure. In addition, the CC will also review and update the list of employee positions with occupational exposure.

The SHS identifies the need for changes in engineering controls and work practices through the annual review of applicable regulations and standards, employee input, and committee activities. New safety procedures and products are reviewed by the CC based on input from the Program Directors and feedback from Faculty teaching laboratory-based courses. Additional review of the ECP may be necessary following exposure incidents and safety concerns received from Faculty, Staff, and/or Students.

SHS Faculty, Staff and Administration are involved in the evaluation process as follows:

Personnel	Role
SHS Dean	<ul style="list-style-type: none"> • Gives final approval for any changes in the ECP • Presents the updated ECP for approval by Lindenwood University
Compliance Coordinator	<ul style="list-style-type: none"> • Has primary responsibility for the review process • Periodically reviews applicable rules, regulations and standards • Coordinates the annual BBP audit • Leads any committees that review or edits the ECP • Responsible for all edits of the ECP • Ensures that planned revisions are implemented
Program Director	<ul style="list-style-type: none"> • Provides input and feedback as to the effectiveness of the ECP • Assists the CC with updating the ECP
Legal Counsel	<ul style="list-style-type: none"> • Reviews the ECP for legislative and legal compliance • Ensures the ECP and the SHS is in legal compliance
Vice President of Human Resources	<ul style="list-style-type: none"> • Reviews the ECP for legislative and legal compliance • Reviews the ECP for consistency with other Lindenwood University safety policies
Faculty/Staff	<ul style="list-style-type: none"> • Provides input and feedback regarding all aspects of the ECP
Medical Director	<ul style="list-style-type: none"> • Provides medical oversight for the ECP
Health & Safety Committee	<ul style="list-style-type: none"> • Provides support for compliance with current policy and regulation. • Provides assistance in reviewing and responding to allegations of noncompliance with health and safety policy.

Universal Precautions

All Faculty, Staff and Students will utilize universal precautions.

Engineering Controls / Work Practices

Engineering controls and work practice controls will be used to prevent or minimize exposure to bloodborne pathogens. The specific engineering controls and work practice controls used are listed below:

Engineering Control/Work Practice
Personal protective equipment
Biohazard containers/Sharps containers
Needleless systems
Needles with post use protective sheaths
Aseptic technique
Sanitization/disinfection of equipment
Hand sanitization stations
Eyewash stations

Each department may also have additional engineering controls and work practices. All engineering controls for each specific department can be found in the Appendix B.

All engineering controls used during the instruction of SHS courses, such as sharps containers, biohazard containers, and hand sanitization stations will be inspected, maintained and replaced as needed by the SHS Faculty. Hazards will be appropriately identified to communicate those to Faculty and Staff.

Personal Protective Equipment (PPE)

PPE is provided on campus free of charge to Faculty/Staff in the SHS. PPE utilized at clinical or internship sites is provided free of charge by the facility. Each PD is responsible for the training of Faculty/Staff in the use of the appropriate PPE for specific tasks or procedures or ensuring that the faculty have received training previously (certification, medical licensure etc.). The Faculty provide student training in the use of appropriate PPE. Faculty may request refresher training on any PPE item at any time. The PD will provide such training as needed.

Each department will provide PPE to all Faculty, Staff and Students. A description of the available PPE, and the location of each item, is available in the department-specific information in the Appendix B.

All Faculty/Staff and Students must observe the following precautions when PPE is utilized:

- Wash or sanitize hands as soon as feasible after removing gloves or other PPE.
- Remove PPE after it becomes contaminated and before leaving the immediate area.
- Soiled PPE must be placed in appropriate labeled containers or labeled biohazard bags. Unsoiled PPE may be disposed of in trash receptacles.
- Wear appropriate disposable gloves when it is reasonably anticipated that there may be hand contact with blood or OPIM, or when handling or touching contaminated items or surfaces.

- Replace gloves if torn, punctured, contaminated, or compromised.
- Never wash or attempt to decontaminate disposable gloves for reuse.
- Wear appropriate protective clothing such as, but not limited to, gowns, aprons, lab coats, clinic jackets, or similar outer garments in occupational exposure situations in accordance with the type and degree of exposure anticipated.
- Wear appropriate face and eye protection when splashes, sprays, splatters, or droplets of blood or OPIM pose a hazard to the eye, nose, or mouth.
- Remove any garment contaminated by blood or OPIM, as soon as practical, carefully avoiding contact with the outer surface.

Biohazard Containers/Sharps Containers

Regulated waste is placed in containers which are: a) closable, b) constructed to contain all contents, c) prevent leakage, and d) appropriately labeled or color-coded (see the following section "Labels"). All such containers must be closed prior to removal to prevent spillage or protrusion of contents during handling. The following procedures are general for the entire SHS. In addition, each specific department or laboratory may have specific procedures that can be found in the Appendix B.

The procedure for handling sharps disposal containers is to lock the container in the closed position and placing the container in the appropriate container provided by the contracted disposal agency. Locked sharps containers are never to be reopened. Sharps disposal containers shall be replaced routinely and not overfilled (filled to fill-line or 75% of container capacity). The procedure for handling biohazard material is to place the material in red plastic bags labeled "biohazard." These containers when full are to be placed in the appropriate container provided by the contracted disposal agency. The CC will act as the liaison between the Environmental Health and Safety Committee and the SHS to communicate any changes in the management of biohazard material with the contracted disposal agency.

Contaminated sharps are discarded immediately or as soon as possible in containers that are closable, puncture-resistant, leak proof on sides and bottoms, and appropriately labeled or color-coded. Sharps disposal containers are to be available at all emergency stations and in all medical kits. During use, containers for contaminated sharps shall be easily accessible to personnel and located as close as possible to the immediate area where sharps are used or can be reasonably anticipated to be found. The containers must also be maintained upright throughout use.

Needles

Contaminated needles, scalpels and other sharps are not to be recapped for any reason. Needles, scalpels and other sharps that are not contaminated and used for training may be recapped using an approved safety-conscious technique such as using a mechanical tool or one-handed recapping.

Cosmetics and Food Consumption

Eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses are

prohibited in work areas where there is a reasonable likelihood of occupational exposure. Food and drink shall not be kept in refrigerators, freezers, shelves, cabinets or on countertops or bench tops where blood or other potentially infectious materials are present.

Splashing, Spraying, and Spattering

All procedures involving blood or other potentially infectious materials shall be performed in such a manner as to minimize splashing, spraying, spattering, and generation of droplets of these substances.

Mouth Pipetting

Mouth pipetting/suctioning of blood or other potentially infectious materials is strictly prohibited.

Specimen Containers

Specimens of blood or other potentially infectious materials shall be placed in a container that prevents leakage during collection, handling, processing, storage, transport, or shipping. Secondary containers are used when the outside of the primary container may be contaminated and when puncture of the primary container is possible. Storage, transport, or shipping containers should be closed and properly labeled; the label should include the biohazard symbol.

Housekeeping

The Program Director or facility supervisor is responsible for ensuring that the work area shall be maintained in a clean and sanitary condition. A written schedule for cleaning and method of decontamination is required.

All equipment and working surfaces shall be cleaned and decontaminated with an appropriate disinfectant after contact with blood or other potentially infectious material. Contaminated work surfaces shall be decontaminated after completion of procedures, immediately or as soon as feasible after any contamination of surfaces 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.

Broken glassware that may be contaminated is only picked up using mechanical means, such as a brush and dustpan; and all broken glassware will be disposed of in an appropriate sharps container.

Laundry

The SHS will retain the option to replace or launder contaminated clothing. Each individual program will have specific procedures for handling contaminated laundry (Appendix B), however, the following general requirements must be met:

- Contaminated laundry should be handled as little as possible.
- The contaminated laundry is to be placed in a red biohazard bag and then placed in a leak proof container. The container is to be marked as a biohazard with the name of

- the owner of the laundry.
- Appropriate PPE must be worn when handling soiled laundry.
- All laundry identified as being soiled is to be washed separately from non-soiled laundry and washed using a detergent that will eliminate potential bloodborne pathogens.

Labels / Color Codes

The following labeling methods are used in the SHS:

Item	Label(s)	Color /Color Code
Sharps container	Biohazard Sharps hazard	Red
Biohazard bag	Biohazard	Red
Biohazard bin	Biohazard	Red

It is the responsibility of all Faculty/Staff to ensure that warning labels are affixed and appropriate containers are used as required if regulated waste or contaminated equipment is brought into the facility. Employees are to notify the PD or CC if they discover regulated waste containers, refrigerators containing blood or OPIM, contaminated equipment, etc., without proper labels or not appropriately contained.

Hepatitis B Vaccination

The Human Resources department will provide information to SHS Faculty/Staff on hepatitis B vaccinations, addressing safety, benefits, efficacy, methods of administration, and availability.

The PDs will ensure that SHS Students understand the safety, benefits, efficacy, methods of administration, and availability of hepatitis B vaccinations.

The hepatitis B vaccination series is available at no cost to SHS Faculty/Staff and student workers after initial employee training and within 10 days of initial assignment to all employed positions identified in the exposure determination section of this plan. Vaccination is encouraged unless: 1) documentation exists that the employee has previously received the series; 2) antibody testing reveals that the employee is immune; or 3) medical evaluation shows that vaccination is contraindicated.

If a Faculty/Staff member or student worker chooses to receive the vaccination series, he/she must first obtain an authorization form from the Employee Benefits Manager in the Human Resources Department. The employee must then contact the St. Charles County Immunization Clinic at 636-949-1857 to schedule an appointment to receive the vaccination. The vaccination will be administered at the St. Charles County Immunization Clinic located at 1650 Boone's Lick Road (Suite A), St. Charles, MO.

If a Faculty/Staff member or student worker declines the vaccination, the individual must sign a declination form (Appendix E). Faculty/Staff members and student workers who decline the vaccine may request and obtain the vaccination later at no cost.

Documentation of vaccination, or refusal of the vaccination, is maintained by the CC and the Employee Benefits Manager in the Human Resources Department.

Students will be required to show proof of Hepatitis B Vaccination (Appendix D) or sign a declination form (Appendix F) prior to their first day of any class with a clinical component. All expenses associated with obtaining the vaccination for clinical participation will be the responsibility of the student. Documentation of vaccination, or refusal of the vaccination will be maintained by the respective PD as part of the student's file. See the Appendix B for the contact information for the specific department PD.

VI. BLOODBORNE PATHOGEN EXPOSURE INCIDENT

If any Faculty/Staff or Student have an exposure while engaging in a department sanctioned activity, the following procedure is to be implemented.

A. Immediate Post-Incident Actions

1. Initial first aid including cleaning of the wound, flushing of the eyes, or other mucous membranes should be performed. If the victim is having a medical emergency or is otherwise incapacitated, initiate the Emergency Action Plan and call 911.
2. As soon as practical, contact the PD. Contact information for the PD of each department is located in Appendix B.
3. The PD will direct the victim to the most appropriate location for a confidential medical evaluation. If needed, the PD will arrange for transportation of the victim to the medical facility at no cost.
 - If the victim is an employee or student-worker** the individual will be immediately referred to Concentra Urgent Care or St. Joseph's Hospital Emergency Room for evaluation, consultation, testing, and prophylactic treatment (if necessary). The university will provide financial assistance for all associated medical expenses not covered by the victim's health insurance plan.
 - If the victim is a student** the individual will be immediately referred to St. Joseph's Hospital Emergency Room or another appropriate site for evaluation, consultation, testing, and prophylactic treatment (if necessary). The student will be financially responsible for all associated medical expenses.
4. If practical, the PD will travel to the victim and facilitate the exposure incident process. Otherwise the PD will meet the victim at the medical facility.

5. The PD will generate an Exposure Incident Report Form (Appendix G) with the below information:

- a. A description of the victim's job or educational duties as it pertains to the exposure
- b. The routes of exposure
- c. How the exposure occurred
- d. The names of all concerned persons, including the victim, any patients, and witnesses
- e. The exposure source individual
- f. If the source individual consented to medical testing
- g. Pertinent medical history of the source individual
- h. Pertinent medical history of the victim including vaccinations
- i. Individual accounts of the incident by the victim and any witnesses
- j. The results of all blood testing

6. The PD will attempt to identify the source individual whenever possible unless prohibited by law.

7. The PD, or other site-designated individual, will attempt to obtain consent from the source individual (Appendix J) to be tested as soon as possible for HIV, HBV, and HCV. The PD, or other site-designated individual, will make sure those results are relayed to the exposed individual, and the exposed individual's healthcare provider. If the source individual provides information that he/she has HIV, HBV, or HCV, testing is not required.

8. The PD, or other site-designated individual, will obtain written consent from the exposed individual (Appendix I) to be tested for HIV, HBV, and HCV.

9. The PD will inform the victim about applicable disclosure laws and regulations concerning the identity and the infectious status of the source individual.

10. If the victim does not immediately consent to blood testing, the PD will still ask to have a blood specimen provided, in the event the victim consents to testing at a later date. That specimen will be preserved for a minimum of 90 days by the appropriate laboratory. If the victim decides to be tested at a later date, the sample should be tested as soon as possible.

11. The PD will arrange transportation from the test site for the victim through the Safety and Security Department, at no cost to the victim, either to their home or other place of the victim's choice if necessary.

12. The PD will provide the Exposure Incident Report Form (Appendix G) to the CC within 24 hours of the time of the incident.

If the exposure involves a researcher, research team member, or human subject during approved research, the PD will report the incident Institutional Review Board within 10 calendar days.

If the exposure involves an employee, the PD will report the incident to Human Resources.

If the exposure involves a student, the PD will report the incident to the School Dean, Dean of Students, and Academic Provost.

13. The CC will notify the MD of the incident.

14. Post incident follow-up will be performed per the SHS policy.

VII. POST-EXPOSURE EVALUATION AND FOLLOW-UP

When a bloodborne pathogen exposure occurs, the PD of the department in which the incident occurred will notify the CC of the incident. The PD will provide the CC with a copy of the exposure incident report. The CC will then make a case file of the incident. The CC or PD will also follow-up with the MD regarding the incident. The MD will ensure the exposed individual is given all results of testing and a professional written opinion.

If the exposed individual requires further medical evaluation post incident, the CC will ensure the healthcare provider is provided the following information:

- A copy of the exposure incident report form.
- The results of all testing performed
- Relevant medical records of the exposed individuals, including vaccination status.

VIII. POST-EXPOSURE INCIDENT INVESTIGATION, DOCUMENTATION, AND OUTCOMES

The CC will investigate the circumstances of each exposure incident in order to determine:

- What engineering controls were in use at the time.
- What work practices were or were not followed.
- A description of any pertinent device being used including brand, model and serial number if available.
- What PPE was being worn by the victim at the time.
- Location of the incident.
- The procedure being performed when the incident occurred.
- Records of BBP and relevant safety training that was provided to the victim.

The CC will produce a complete report of the incident using all available facts. The report will include the initial Exposure Incident Report Form and the Exposure Incident Investigation Form. The CC will provide recommendations as to what procedures, additional training, or disciplinary action needs to occur to prevent a similar incident from reoccurring.

The CC will provide a report to the specific program director, dean, designated human resources manager and medical director. The program director, dean and medical director will sign the report. The CC will be responsible to also include documentation of all actions that were actually taken post-incident. The reports will be available for review at the office of the CC.

The CC and PD's are authorized in the interim to make any temporary changes, or work stoppages needed to ensure the safety of everyone.

The CC will also record all percutaneous injuries from contaminated sharps in a Sharps Injury Log (Appendix L). The log will be available at the office of the CC.

IX. EMPLOYEE TRAINING

All Faculty/Staff and Students who have occupational exposure to bloodborne pathogens will receive initial and annual training conducted by the CC, PD, or designee.

All Faculty/Staff and Students who have occupational exposure to bloodborne pathogens will receive training on the epidemiology, symptoms, and transmission of bloodborne pathogen diseases. In addition, the training program covers, at a minimum, the following elements:

- A copy and explanation of the OSHA bloodborne pathogen standard
- An explanation of the ECP and how to obtain a copy
- An explanation of methods to recognize tasks and other activities that may involve exposure to blood and other potentially infectious materials.
- Exposure to blood and OPIM, including what constitutes an exposure incident
- An explanation of the use and limitations of engineering controls, work practices, and PPE
- An explanation of the types, uses, location, removal, handling, decontamination, and disposal of PPE
- An explanation of the basis for PPE selection.
- Information on the hepatitis B vaccine, including information on its efficacy, safety, method of administration, the benefits of being vaccinated, opportunities for faculty/staff to receive the vaccine at no cost, and the expected costs for students
- Information on the appropriate actions to take and persons to contact in an emergency involving blood or OPIM
- An explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that will be made available

- Information on the post-exposure evaluation and follow-up that the employer is required to provide for the employee following an exposure incident
- An explanation of the signs and labels and/or color coding required by the standard and used at this facility
- An opportunity for interactive questions and answers with the person conducting the training session
- At the end of training, a written examination will be provided which each Faculty/Staff member or Student must pass with a minimum passing score of 70%

Training materials for the SHS Bloodborne Pathogen Policy can be made available by contacting the CC, PD, or designee responsible for conducting the annual training.

X. RECORDKEEPING

Training Records

Training records are completed for each employee upon completion of training. These documents will be kept for at least three years in the office of the CC, which is located in the Field House, Room 109, and can be reached at 636-627-2949. The training records for students will be kept as part of the student file in each specific SHS department. Records for each class conducted by the SHS will be maintained for at least three years at the office of the CC. Contact information for each department is provided in the Appendix B. The training records must include:

- The dates of the training sessions
- A summary or abstract of the training sessions
- The names and qualifications of persons conducting training
- The names and job titles of all persons attending the training sessions

Faculty/Staff and Student training records are provided upon request to the employee or the employee's authorized representative within 15 working days. Such requests should be addressed to the CC.

Medical Records

Medical records are to be maintained for each employee or student with an incident of occupational exposure in accordance with 29 CFR 1910.1020, "Access to Employee Exposure and Medical Records."

The CC is responsible for maintenance of the required medical records. These confidential records are kept in at office of the CC, which is located in the Field House, Room 117, for at least the duration of employment plus 30 years in accordance with 29 CFR 1910.1020.

Faculty/Staff and Student medical records are provided upon request of the Faculty/Staff member or student or to anyone having written consent of the employee within 15 working days. Such written requests should be sent to the CC.

OSHA Recordkeeping

An exposure incident is evaluated to determine if the case meets OSHA's Recordkeeping Requirements outlined in 29 CFR 1904. This determination and any recording activities are done by the CC.

Sharps Injury Log

All percutaneous injuries from contaminated sharps are also recorded in a Sharps Injury Log (Appendix L). All incidences must include the following:

- Date of the injury
- Type and brand of the device involved (syringe, suture needle)
- Department or work area where the incident occurred
- Explanation of how the incident occurred

This log is reviewed as part of the annual program evaluation and maintained for at least five years following the end of the calendar year covered. If a copy is requested by anyone, it must have any personal identifiers removed from the report. The Sharps Injury Log shall be maintained for the period required by 29 C.F.R. 1904.33.

APPENDICES

Appendix A - Terminology

Common Bloodborne Pathogen Terminology (OSHA - 29 CFR 1910.1030)

Blood	human blood, human blood components, and products made from human blood
Bloodborne Pathogens	pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV) and human immunodeficiency virus
Clinical Laboratory	a workplace where diagnostic or other screening procedures are performed on blood or other potentially infectious materials
Contaminated	the presence or the reasonably anticipated presence of blood or other potentially infectious materials on an item or surface
Contaminated Laundry	laundry which has been soiled with blood or other potentially infectious materials or may contain sharps
Contaminated Sharps	any contaminated object that can penetrate the skin including, but not limited to, needles, scalpels, broken glass, broken capillary tubes, and exposed ends of dental wires
Decontamination	the use of physical or chemical means to remove, inactivate, or destroy bloodborne pathogens on a surface or item to the point where they are no longer capable of transmitting infectious particles and the surface or item is rendered safe for handling, use, or disposal
Engineering Controls	controls (e.g., sharps disposal containers, self-sheathing needles, safer medical devices, such as sharps with engineered sharps injury protections and needleless systems) that isolate or remove the bloodborne pathogens hazard from the workplace
Exposure Incident	a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials that results from the performance of an employee's duties
Handwashing Facilities	a facility providing an adequate supply of running potable water, soap, and single-use towels or air-drying machines
HAV	hepatitis A virus

HBV	hepatitis B virus
HCV	hepatitis C virus
HIV	human immunodeficiency virus
Needleless System	a device that does not use needles for: the collection of bodily fluids or withdrawal of bodily fluids after initial venous or arterial access is established; the administration of medication or fluids; or any other procedure involving the potential for occupational exposure to bloodborne pathogens due to percutaneous injuries from contaminated sharps
Occupational Exposure	reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials that may result from the performance of an employee's duties
Other Potentially Infectious Materials (OPIM)	all body fluids where it is difficult or impossible to differentiate between body fluids; amniotic fluid; any body fluid visibly contaminated with blood; any unfixed tissue or organ (other than intact skin) from a human (living or dead); blood, organs, or other tissues from experimental animals infected with bloodborne pathogens; cell, tissue, or organ cultures containing bloodborne pathogens; cerebral spinal fluid; culture media or other solutions containing bloodborne pathogens; pericardial fluid; peritoneal fluid; pleural fluid; saliva in dental procedures (whether or not there is visible blood present); semen; synovial fluid; vaginal secretions
Parenteral exposure	piercing mucous membranes or the skin barrier through such events as needle sticks, human bites, cuts, and abrasions
Personal Protective Equipment	specialized clothing or equipment worn by an employee for protection against a hazard. General work clothes (e.g., uniforms, pants, shirts or blouses) not intended to function as protection against a hazard are not considered to be personal protective equipment
Regulated Waste	liquid or semi-liquid blood or other potentially infectious materials; contaminated items that would release blood or other potentially infectious materials in a liquid or semi-liquid state if compressed; items that are caked with dried blood or other potentially infectious materials and are capable of

	releasing these materials during handling; contaminated sharps; and pathological and microbiological wastes containing blood or other potentially infectious materials
Research Laboratory	a laboratory producing or using research-laboratory-scale amounts of HIV or HBV. Research laboratories may produce high concentrations of HIV or HBV but not in the volume found in production facilities
Source Individual	any individual, living or dead, whose blood or other potentially infectious materials may be a source of occupational exposure to the employee
Sterilize	the use of a physical or chemical procedure to destroy all microbial life including highly resistant bacterial endospores
Universal Precautions	treating all human blood and certain human body fluids as if it is known to be infectious for HIV, HBV, and other bloodborne pathogens
Work Practice Controls	controls that reduce the likelihood of exposure by altering the manner in which a task is performed (e.g., prohibiting recapping of needles by a two-handed technique)

Common School of Health Science Abbreviations

SHS – School of Health Sciences

ECP – Exposure Control Plan

OSHA - Occupational Safety and Health Administration

NIOSH – National Institute for Occupational Safety and Health

PPE – Personal Protective Equipment

OPIM – Other Potentially Infectious Materials

CC – Compliance Coordinator

PD – Program Director

CEC – Clinical Education Coordinator

Appendix B – Departmental Information

Lindenwood University School of Health Sciences Department of Paramedicine Bloodborne Pathogen Policy Committee

Program Director

Name: Darrell DeMartino
Office: Cultural Center, Room 106
Phone: 636-627-6724
Email: ddemartino@lindenwood.edu

Exposure Determination

The following is a list of all Faculty, Staff and student classifications in the Department of Paramedicine in which there is risk of exposure:

Title	Location
Paramedicine student	Lindenwood University Campus and Clinical Sites
Full time Faculty/Staff	Lindenwood University Campus and Clinical Sites
Adjunct Faculty/Staff	Lindenwood University Campus and Clinical Sites
Clinical Preceptors	Lindenwood University Campus and Clinical Sites
Clinical Education Coordinator (CEC)	Lindenwood University Campus and Clinical Sites
Program Director (PD)	Lindenwood University Campus and Clinical Sites

The following is a list of classifications in which individuals have risk of exposure. Included is a list of tasks and procedures in which exposure may occur for these individuals:

Title	Location	Task/Procedure
Full time Faculty	Lindenwood University Campus	Instruction of medical procedures using needles
	Clinical Sites	Instruction/supervision/evaluation of students with live patients
Adjunct Faculty/Staff	Lindenwood University Campus	Instruction of medical procedures using needles

	Clinical Sites	Instruction/supervision/evaluation of students with live patients
Clinical Education Coordinator (CEC)	Lindenwood University Campus	Instruction of medical procedures using needles
	Clinical Sites	Instruction/supervision/evaluation of students
Program Director (PD)	Lindenwood University Campus	Responding to on campus emergencies
	Lindenwood University Campus	Instruction of medical procedures using needles
	Lindenwood University Campus & Clinical Sites	Instruction/supervision/evaluation of students
Clinical Preceptors	Lindenwood University Campus	Instruction of medical procedures using needles
	Clinical Sites	Instruction/supervision/evaluation of students with live patients

Engineering Controls/Work Practices

Engineering Control/Work Practice
Personal protective equipment
Sharps containers
Needleless systems
Needles with post use protective sheaths
Aseptic technique
Sanitization/disinfection of equipment
Biohazard bags and containers
Hand sanitization stations
Eyewash stations

Personal Protective Equipment (PPE)

Location – TBD*

PPE	Location(s)	Use
Disposable gloves	TBD	Emergency response
Eye protection	TBD	Emergency response
Eye/Facemask	TBD	Emergency response
Gowns	TBD	Emergency response
Eyewash stations	TBD	Emergency response
Hand Sanitizer stations	TBD	Emergency response
HEPA masks	TBD	Emergency response

*Clinical Sites

Students are to be shown by their preceptor the locations for all PPE and emergency equipment at the specific clinical site. Students will also follow the BBP policies of the clinical facility in regards to housekeeping and waste disposal. In the event of an actual or potential exposure, contact the Clinical Coordinator at the phone number provided to report the incident. See the clinical handbook for specific information.

**Lindenwood University School of Health Sciences
 Department of Athletic Training
 Bloodborne Pathogen Policy Committee**

Program Director

Name: Tom Godar
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Phone: 636-949-4628
Email: tgodar@lindenwood.edu

Exposure Determination

The following is a list of all Faculty, Staff and student classifications in the Department of Athletic Training in which there is risk of exposure:

Title	Location
Full time Faculty	Lindenwood University Campus
Adjunct Faculty/Staff	Lindenwood University Campus
Clinical Preceptors	Lindenwood University Campus and Clinical Sites
Clinical Education Coordinator (CEC)	Lindenwood University Campus
Program Director (PD)	Lindenwood University Campus

The following is a list of classifications in which individuals have risk of exposure. Included is a list of tasks and procedures in which exposure may occur for these individuals:

Title	Location	Task/Procedure
Full time Faculty	Lindenwood University Campus	Instruction of medical procedures
	Clinical Sites	Instruction/supervision of students with live patients
Adjunct Faculty/Staff	Lindenwood University Campus	Instruction of medical procedures
Clinical Education Coordinator (CEC)	Lindenwood University Campus	Instruction of medical procedures
	Lindenwood University Campus	Instruction/supervision/evaluation of students

Program Director (PD)	Lindenwood University Campus	Responding to on campus emergencies
	Lindenwood University Campus	Instruction of medical procedures
	Lindenwood University Campus	Instruction/supervision/evaluation of students
Clinical Preceptors	Lindenwood University Campus	Instruction of medical procedures
	Clinical Sites	Instruction/supervision/evaluation of students with live patients

Engineering Controls/Work Practices

Engineering Control/Work Practice
Personal protective equipment
Sharps containers
Aseptic technique
Sanitization/disinfection of equipment
Biohazard bags and containers
Hand sanitization stations

Personal Protective Equipment (PPE)

Hyland Performance Arena

PPE	Location(s)	Use
Disposable gloves	Athletic training room, medical bags, classrooms (Rooms 138, 140, 141)	Emergency response
Eye protection	Athletic training room, medical bags, classrooms (Rooms 138, 140, 141)	Emergency response
Eye/Facemask	Athletic training room, medical bags	Emergency response
Hand Sanitizer stations	Athletic training room, all bathrooms, all classrooms	Emergency response

Student Athlete Center

PPE	Location(s)	Use
Disposable gloves	Athletic training room, medical bags	Emergency response
Eye protection	Athletic training room, medical bags	Emergency response
Eye/Facemask	Athletic training room, medical bags	Emergency response
Hand Sanitizer stations	Athletic training room, all bathrooms	Emergency response

Field House

PPE	Location(s)	Use
Disposable gloves	Athletic training room, medical bags	Emergency response
Eye protection	Athletic training room, medical bags	Emergency response
Eye/Facemask	Athletic training room, medical bags	Emergency response
Hand Sanitizer stations	Athletic training room, all bathrooms	Emergency response

Baseball/Softball Clubhouse

PPE	Location(s)	Use
Disposable gloves	Athletic training room, medical bags	Emergency response
Eye protection	Athletic training room, medical bags	Emergency response
Eye/Facemask	Athletic training room, medical bags	Emergency response
Hand Sanitizer stations	Athletic training room, all bathrooms	Emergency response

Centene Community Ice Center

PPE	Location(s)	Use
Disposable gloves	Athletic training room, medical bags	Emergency response
Eye protection	Athletic training room, medical bags	Emergency response
Eye/Facemask	Athletic training room, medical bags	Emergency response
Hand Sanitizer stations	Athletic training room, all bathrooms	Emergency response

Other Clinical Sites

Students are to be shown by their preceptor the locations for all PPE and emergency equipment at the specific clinical site. Students will also follow the BBP policies of the clinical facility in regards to housekeeping and waste disposal. In the event of an actual or potential exposure, contact the Clinical Coordinator at the phone number provided to report the incident. See the clinical handbook for specific information.

Housekeeping

All clinical facilities will be maintained in accordance to daily, weekly, and monthly treatment schedules. Countertops, treatment tables, rehabilitation equipment, and other surfaces will be cleaned with an antiviral/antifungal/antibacterial solution. In addition, tables will be cleaned following each patient use, and any surface with a potential exposure will be treated immediately.

All stainless-steel whirlpools will be treated with a chlorinated cleaning agent during use. In addition, at no time shall more than one individual be in a stainless whirlpool. If it is determined following a treatment that an individual has any open wounds, sores, or other lesions, the whirlpool will be immediately drained and properly disinfected using an antiviral/antifungal/antibacterial cleaning solution. All stainless whirlpools will also be drained and disinfected with an antiviral/antifungal/antibacterial cleaning solution at the end of each day.

The cold and hot whirlpools in the Student Athlete Center are treated on an ongoing basis through a chemical treatment and filtration system. These two whirlpools will also be drained every 2-3 weeks (depending on usage), disinfected, and refilled. All individuals using these whirlpools must receive prior approval from a member of the athletic training staff. If it is observed that an individual with an exposed wound, sore, or other lesion uses the whirlpool, the whirlpool will be drained and properly disinfected before further use.

Laundry

Universal precautions should be followed when laundering items from the athletic training rooms. Thus, all faculty, staff, and students who handle laundry are required to wear protective gloves. Contaminated laundry shall be placed into a plastic bag immediately. These items shall not be placed in the regular laundry hampers or carts, as there is a risk of contaminating the other items. Contaminated items shall be treated separately, soaking them in a 10% bleach solution for a minimum of ten minutes. Following the bleach treatment, the items may be laundered as usual, in the commercial units. Any items that are heavily soiled in blood or OPIM shall be placed in a biohazard bag and then discarded following the normal procedure for the management of biohazard waste. This additional bag is to help prevent blood or fluid from leaking through the biohazard bag in the biohazard container.

**Lindenwood University School of Health Sciences
 Department of Exercise Science
 Bloodborne Pathogen Policy Committee**

Program Director

Name: Dr. Kyle Sunderland
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Exposure Determination

The following is a list of all Faculty, Staff and student classifications in the Exercise and Performance Nutrition Laboratory in which there is risk of exposure:

Title	Location
Full time Faculty	Lindenwood University Campus classrooms and teaching laboratories
Adjunct Faculty	Lindenwood University Campus classrooms and teaching laboratories
Undergraduate Student	Lindenwood University Campus classrooms and teaching laboratories
Graduate student	Lindenwood University Campus classrooms and teaching laboratories
Undergraduate Student Worker	Lindenwood University Campus classrooms and teaching laboratories
Graduate Student Worker	Lindenwood University Campus classrooms and teaching laboratories
Classroom Participant	Lindenwood University Campus classrooms and teaching laboratories

The following is a list of classifications in which individuals have risk of exposure. Included is a list of tasks and procedures in which exposure may occur for these individuals:

Title	Location	Task/Procedure
Full time Faculty	Lindenwood University Campus	Classroom instruction
	Research Laboratory Sites	Classroom instruction
Adjunct Faculty	Lindenwood University Campus	Classroom instruction
	Research Laboratory Sites	Classroom instruction
Undergraduate Student	Lindenwood University Campus	Classroom instruction
	Research Laboratory Sites	Classroom instruction
Graduate Student	Lindenwood University Campus	Classroom instruction
	Research Laboratory Sites	Classroom instruction
Undergraduate Student Worker	Lindenwood University Campus	Classroom instruction
	Research Laboratory Sites	Classroom instruction
Graduate Student Worker	Lindenwood University Campus	Classroom instruction
	Research Laboratory Sites	Classroom instruction
Classroom Participant	Lindenwood University Campus	Completion of data collection procedures

Engineering Controls/Work Practices

Engineering Control/Work Practice
Personal protective equipment
Sharps containers
Aseptic technique
Sanitization/disinfection of equipment
Biohazard bags and containers
Hand sanitization stations

Personal Protective Equipment (PPE)

Exercise and Performance Nutrition Laboratory

PPE	Location(s)	Use
Disposable gloves	Exercise physiology laboratory, biochemistry laboratory	Periodic use as part of classroom activities; Emergency use
Eye protection	Biochemistry laboratory	Periodic use as part of classroom activities; Emergency use
Eye/Facemask	Biochemistry laboratory	Periodic use as part of classroom activities; Emergency use
Eyewash stations	Biochemistry laboratory	Emergency use
Hand Sanitizer stations	Exercise physiology laboratory, biochemistry laboratory, all bathrooms	Emergency use

Fitness Center

PPE	Location(s)	Use
Disposable gloves	Emergency kit	Daily use as part of data collection and instruction; Emergency use
Eye protection	Emergency/phlebotomy kit	Daily use as part of data collection and instruction; Emergency use
Hand Sanitizer stations	All bathrooms	Emergency use

Hyland Performance Arena

PPE	Location(s)	Use
Disposable gloves	Emergency kit	Daily use as part of data collection and instruction; Emergency use
Eye protection	Emergency/phlebotomy kit	Daily use as part of data collection and instruction; Emergency use
Hand Sanitizer stations	Athletic training room, all bathrooms	Emergency use

Field House

PPE	Location(s)	Use
Disposable gloves	Emergency kit	Daily use as part of data collection and instruction; Emergency use
Eye protection	Emergency/phlebotomy kit	Daily use as part of data collection and instruction; Emergency use
Hand Sanitizer stations	Athletic training room, all bathrooms	Emergency use

Housekeeping

All clinical facilities will be maintained in accordance to daily, weekly, and monthly schedules. Countertops, treatment tables, research equipment, and other surfaces will be cleaned with an antiviral/antifungal/antibacterial solution. In addition, tables will be cleaned following each patient use, and any surface with a potential exposure will be treated immediately.

Laundry

Universal precautions should be followed when laundering any items as part of activities within the Exercise Science program. Thus, all faculty, staff, and students who handle laundry are required to wear protective gloves. Soiled laundry that has been contaminated with biohazard containing waste shall be placed into a plastic bag immediately. These items are not to be placed in the regular laundry hampers or carts, as there is a risk of contaminating the other items. Contaminated items shall be treated separately, soaking them in a 10% bleach solution for a minimum of ten minutes. Following the bleach treatment, the items may be laundered as usual, in the commercial units. Any items that are heavily soiled in blood or OPIM shall be placed in

a biohazard bag and then discarded following the normal procedure for the management of biohazard waste. The additional bag is to help prevent blood or fluid from leaking through the biohazard bag in the biohazard container.

**Lindenwood University School of Health Sciences
 Department of Health Science
 Bloodborne Pathogen Policy Committee**

Program Director

Name: Scott Richmond, PhD
Office: Field House, Room 107
Phone: 636-627-4621
Email: srichmond@lindenwood.edu

Exposure Determination

The following is a list of all Faculty, Staff and student classifications in the Exercise and Performance Nutrition Laboratory in which there is risk of exposure:

Title	Location
Full time Faculty	Lindenwood University Campus classrooms and teaching laboratories
Adjunct Faculty	Lindenwood University Campus classrooms and teaching laboratories
Undergraduate Student	Lindenwood University Campus classrooms and teaching laboratories
Graduate student	Lindenwood University Campus classrooms and teaching laboratories
Undergraduate Student Worker	Lindenwood University Campus classrooms and teaching laboratories
Graduate Student Worker	Lindenwood University Campus classrooms and teaching laboratories
Classroom Participant	Lindenwood University Campus classrooms and teaching laboratories

The following is a list of classifications in which individuals have risk of exposure. Included is a list of tasks and procedures in which exposure may occur for these individuals:

Title	Location	Task/Procedure
Full time Faculty	Lindenwood University Campus	Classroom instruction
	Research Laboratory Sites	Classroom instruction
Adjunct Faculty	Lindenwood University Campus	Classroom instruction
	Research Laboratory Sites	Classroom instruction
Undergraduate Student	Lindenwood University Campus	Classroom instruction
	Research Laboratory Sites	Classroom instruction
Graduate Student	Lindenwood University Campus	Classroom instruction
	Research Laboratory Sites	Classroom instruction
Undergraduate Student Worker	Lindenwood University Campus	Classroom instruction
	Research Laboratory Sites	Classroom instruction
Graduate Student Worker	Lindenwood University Campus	Classroom instruction
	Research Laboratory Sites	Classroom instruction
Classroom Participant	Lindenwood University Campus	Completion of data collection procedures

Engineering Controls/Work Practices

Engineering Control/Work Practice
Personal protective equipment
Sharps containers
Aseptic technique
Sanitization/disinfection of equipment
Biohazard bags and containers
Hand sanitization stations

Personal Protective Equipment (PPE)

Exercise Performance Nutrition Laboratory

PPE	Location(s)	Use
Disposable gloves	Exercise physiology laboratory, biochemistry laboratory	Periodic use as part of classroom activities; Emergency use
Eye protection	Biochemistry laboratory	Periodic use as part of classroom activities; Emergency use
Eye/Facemask	Biochemistry laboratory	Periodic use as part of classroom activities; Emergency use
Eyewash stations	Biochemistry laboratory	Emergency use
Hand Sanitizer stations	Exercise physiology laboratory, biochemistry laboratory	Emergency use

Fitness Center

PPE	Location(s)	Use
Disposable gloves	Emergency kit	Daily use as part of data collection and instruction; Emergency use
Eye protection	Emergency/phlebotomy kit	Daily use as part of data collection and instruction; Emergency use

Hyland Performance Arena

PPE	Location(s)	Use
Disposable gloves	Emergency kit	Daily use as part of data collection and instruction; Emergency use
Eye protection	Emergency/phlebotomy kit	Daily use as part of data collection and instruction; Emergency use
Hand Sanitizer stations	Athletic training room, all bathrooms	Emergency use

Field House

PPE	Location(s)	Use
Disposable gloves	Emergency kit	Daily use as part of data collection and instruction; Emergency use
Eye protection	Emergency/phlebotomy kit	Daily use as part of data collection and instruction; Emergency use
Hand Sanitizer stations	Athletic training room, all bathrooms	Emergency use

Housekeeping

All clinical facilities will be maintained in accordance to daily, weekly, and monthly schedules. Countertops, treatment tables, research equipment, and other surfaces will be cleaned with an antiviral/antifungal/antibacterial solution. In addition, tables will be cleaned following each patient use, and any surface with a potential exposure will be treated immediately.

Laundry

Universal precautions should be followed when laundering any items as part of activities within the Human Performance program. Thus, all faculty, staff, and students who handle laundry are required to wear protective gloves. Soiled laundry that has been contaminated with biohazard containing waste shall be placed into a plastic bag immediately. These items are not to be placed in the regular laundry hampers or carts, as there is a risk of contaminating the other items. Contaminated items shall be treated separately, soaking them in a 10% bleach solution for a minimum of ten minutes. Following the bleach treatment, the items may be laundered as usual, in the commercial units. Any items that are heavily soiled in blood or OPIM shall be placed in a biohazard bag and then discarded following the normal procedure for the management of biohazard waste. The additional bag is to help prevent blood or fluid from leaking through the biohazard bag in the biohazard container.

**Lindenwood University School of Health Sciences
 Exercise and Performance Nutrition Laboratory
 Bloodborne Pathogen Policy Committee**

Program Director

Name: Chad Kerksick, PhD
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Exposure Determination

The following is a list of all Faculty, Staff and student classifications in the Exercise and Performance Nutrition Laboratory in which there is risk of exposure:

Title	Location
Full time Faculty	Lindenwood University Campus and Research Laboratory Sites
Adjunct Faculty	Lindenwood University Campus and Research Laboratory Sites
Laboratory Coordinator	Lindenwood University Campus and Research Laboratory Sites
Undergraduate Intern/Volunteer	Lindenwood University Campus and Research Laboratory Sites
Graduate Intern/Volunteer	Lindenwood University Campus and Research Laboratory Sites
Undergraduate Student Worker	Lindenwood University Campus and Research Laboratory Sites
Graduate Student Worker	Lindenwood University Campus and Research Laboratory Sites
Research Participant	Lindenwood University Campus and Research Laboratory Sites

The following is a list of classifications in which individuals have risk of exposure. Included is a list of tasks and procedures in which exposure may occur for these individuals:

Title	Location	Task/Procedure
Full time Faculty	Lindenwood University Campus	Instructing and executing data collection and laboratory procedures, emergency response
	Research Laboratory Sites	Instructing and executing data collection and laboratory procedures, emergency response
Adjunct Faculty	Lindenwood University Campus	Instructing and executing data collection and laboratory procedures, emergency response
	Research Laboratory Sites	Instructing and executing data collection and laboratory procedures, emergency response
Laboratory Coordinator	Lindenwood University Campus	Instructing and executing data collection and laboratory procedures, emergency response
	Research Laboratory Sites	Instructing and executing data collection and laboratory procedures, emergency response
Undergraduate Intern/volunteer	Lindenwood University Campus	Execution of data collection and laboratory procedures, emergency response
	Research Laboratory Sites	Execution of data collection and laboratory procedures, emergency response
Graduate Intern/Volunteer	Lindenwood University Campus	Execution of data collection and laboratory procedures, emergency response
	Research Laboratory Sites	Execution of data collection and laboratory procedures, emergency response
Undergraduate Student Worker	Lindenwood University Campus	Execution of data collection and laboratory procedures, emergency response

	Research Laboratory Sites	Execution of data collection and laboratory procedures, emergency response
Graduate Student Worker	Lindenwood University Campus	Instructing and executing data collection and laboratory procedures, emergency response
	Research Laboratory Sites	Instructing and executing data collection and laboratory procedures, emergency response
Research Participant	Lindenwood University Campus	Completion of data collection procedures

Engineering Controls/Work Practices

Engineering Control/Work Practice
Personal protective equipment
Sharps containers
Aseptic technique
Sanitization/disinfection of equipment
Biohazard bags and containers
Hand sanitization stations
Eyewash stations
Autoclave operation

Personal Protective Equipment (PPE)

Sports Science Center

PPE	Location(s)	Use
Disposable gloves	Exercise physiology laboratory, biochemistry laboratory	Daily use as part of data collection and instruction; Emergency use
Eye protection	Biochemistry laboratory	Daily use as part of data collection and instruction; Emergency use
Eye/Facemask	Biochemistry laboratory	Daily use as part of data collection and instruction; Emergency use
Eyewash stations	Biochemistry laboratory	Emergency use
Hand Sanitizer stations	Exercise physiology laboratory, biochemistry laboratory	Emergency use

Fitness Center

PPE	Location(s)	Use
Disposable gloves	Emergency/phlebotomy kit	Daily use as part of data collection and instruction; Emergency use
Eye protection	Emergency/phlebotomy kit	Daily use as part of data collection and instruction; Emergency use

Housekeeping

All clinical facilities will be maintained in accordance to daily, weekly, and monthly schedules. Countertops, treatment tables, research equipment, and other surfaces will be cleaned with an antiviral/antifungal/antibacterial solution. In addition, tables will be cleaned following each patient use, and any surface with a potential exposure will be treated immediately.

Laundry

Universal precautions should be followed when laundering any items as part of activities within the Exercise and Performance Nutrition Laboratory. Thus, all faculty, staff, and students who handle laundry are required to wear protective gloves. Soiled laundry that has been contaminated with biohazard containing waste shall be placed into a plastic bag immediately. These items are not to be placed in the regular laundry hampers or carts, as there is a risk of contaminating the other items. Contaminated items shall be treated separately, soaking them in a 10% bleach solution for a minimum of ten minutes. Following the bleach treatment, the items may be laundered as usual, in the commercial units. Any items that are heavily soiled in blood or OPIM shall be placed in a biohazard bag and then discarded following the normal procedure for the management of biohazard waste. The additional bag is to help prevent blood or fluid from leaking through the biohazard bag in the biohazard container.

Appendix C - Consent for Hepatitis B Vaccination: Employee

I have read and understand the information provided to me regarding hepatitis B. I understand both the clinical course of the disease and its risks and hazards, and the vaccination and its usual and most frequent risks and hazards. I have discussed any concerns or questions with my supervisor. To the best of my knowledge I am not pregnant; if I am pregnant, I have consulted my private physician and obtained written authorization for vaccination (a copy of which is attached to this consent).

I understand there is no guarantee that vaccination will be effective or that my vaccination will be free of side effects. I understand that my participation in the hepatitis B vaccination program is entirely voluntary, although recommended for me, because I am in a work environment at Lindenwood University that presents a reasonable anticipation of my exposure to potentially infectious materials.

I have opted to receive the HEPATITIS B VACCINE. I hereby consent to the administration of the hepatitis B vaccine to be provided by Lindenwood University through the St. Charles County Immunization Clinic over the next 6 months. I understand that I must receive three doses of vaccine, and I must submit documentation of my vaccination to the Human Resources department when completed.

Signature of Employee: _____

Printed Name of Employee: _____ Date: _____

Signature of Supervisor: _____

Printed Name of Supervisor: _____ Date: _____

I have opted to provide proof of my previous hepatitis B vaccination. Vaccination records are attached.

Signature of Employee: _____

Printed Name of Employee: _____ Date: _____

Signature of Supervisor: _____

Printed Name of Supervisor: _____ Date: _____

Appendix D - Consent for Hepatitis B Vaccination: Student

I have read and understand the information provided to me regarding hepatitis B. I understand both the clinical course of the disease and its risks and hazards, and the vaccination and its usual and most frequent risks and hazards. I have discussed any concerns or questions with my program director. To the best of my knowledge I am not pregnant; if I am pregnant, I have consulted my private physician and obtained written authorization for vaccination (a copy of which is attached to this consent).

I understand there is no guarantee that vaccination will be effective or that my vaccination will be free of side effects. I understand that my participation in the hepatitis B vaccination program is entirely voluntary, although recommended for me, because I participate in a clinical environment at Lindenwood University that presents a reasonable anticipation of my exposure to potentially infectious materials.

I have opted to receive the HEPATITIS B VACCINE. I hereby consent to the administration of the hepatitis B vaccine. I understand all expenses associated with obtaining the vaccination will be my responsibility. Furthermore, I understand that I must receive three doses of vaccine, and I must submit documentation of my vaccination to my program director when completed.

Signature of Student: _____

Printed Name of Student: _____ Date: _____

Signature of Program Director: _____

Printed Name of Program Director: _____ Date: _____

I have opted to provide proof of my previous hepatitis B vaccination. Vaccination records are attached.

Signature of Student: _____

Printed Name of Student: _____ Date: _____

Signature of Program Director: _____

Printed Name of Program Director: _____ Date: _____

Appendix E – Hepatitis B Declination Form: Employee

I understand that due to my occupational exposure to blood or other potentially infectious materials that I may be at risk of acquiring hepatitis B virus infection. I acknowledge that I have been given the opportunity to be vaccinated with the hepatitis B vaccine at no charge to myself by Lindenwood University.

However, I decline the 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. I also am aware of the consequences of not being vaccinated against hepatitis B, including the risk of serious illness or death. I am also aware that should I want to be vaccinated at a future date during my employment, the vaccine will be provided to me at no cost.

Signature of Employee: _____

Printed Name of Employee: _____ Date: _____

Signature of Supervisor: _____

Printed Name of Supervisor: _____ Date: _____

Appendix F – Hepatitis B Declination Form: Student

I understand that due to my occupational exposure to blood or other infectious materials that I may be at risk of acquiring hepatitis B virus infection. I acknowledge that I have been advised of the opportunity to be vaccinated with the hepatitis B vaccine.

However, I decline the 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. I am aware of the consequences of not being vaccinated against hepatitis B, including the risk of serious illness or death. I am also aware that should I want to be vaccinated at a future date during my enrollment at Lindenwood University, I will be responsible for all associated expenses, and I must submit proof of vaccination to my program director.

Signature of Student: _____

Printed Name of Student: _____ Date: _____

Signature of Program Director: _____

Printed Name of Program Director: _____ Date: _____

Appendix G – Exposure Incident Report Form (completed by Program Director)

Employee/Student Name _____ Date _____

Date of Birth _____ SS# _____

Telephone (Mobile) _____ (Home) _____

Description of Victim’s Position at the University _____

Previous Vaccinations _____

Pertinent Medical History _____

Date of Exposure _____ Time of Exposure _____ AM / PM

Location of Incident/Address _____

What duties were you performing when the exposure incident occurred?

What body fluid(s) were you potentially exposed to?

Blood Vomit Cerebrospinal Fluid Cell, Tissue, or Organ Culture

Pericardial Fluid Peritoneal Fluid Pleural Fluid Urine

Other (specify) _____

What was the route of exposure?

Contact with blood on person Contact with contaminated surface

Contact with contaminated instrument Cleaning up blood or OPIM

Needle stick Other (specify) _____

What personal protective equipment was being used at time of exposure?

Gloves Facemask Eye Protection Gown

Other (specify) _____

If personal protective equipment was not being worn, explain clearly why it was not.

Was any personal protective equipment damaged prior to the exposure? Explain.

Was any personal protective equipment damaged during the exposure incident? Explain.

Describe the circumstances under which the exposure incident occurred (what happened that resulted in the incident).

Could this exposure have been prevented? Explain.

Identify the source of the exposure and contact information for the source.

Phone: _____

Did the source of the exposure consent to testing? _____

Was any immediate care provided onsite? Explain what care was provided and who provided it. _

Was any advanced medical personnel called? Or, was the victim sent to a medical facility?
Explain. _____

Witness of the incident _____

Witness account of the incident _____

Results of all blood testing _____

Signature of Program Director: _____

Printed Name of Program Director: _____ Date: _____

BBP and other relevant training of exposed individual (type of training, dates, etc...)

Was any specific equipment, instruments, or hardware being used at the time of the exposure?
Include the brand, model, and serial number if available.

What engineering controls were in use at the time of the exposure?

What work practice controls were in use at the time of the exposure?

What personal protective equipment was being used at time of exposure?

Gloves Facemask Eye Protection Gown Other (specify) _____

Actions Taken post incident (first aid, decontamination, cleanup, reporting, etc.): _____

Determined underlying causes of incident: _____

Recommendations to prevent or mitigate similar incidents: _____

Printed Name of Program Director: _____ Date: _____

Signature of Program Director: _____

Printed Name of School Dean: _____ Date: _____

Signature of School Dean: _____

Printed Name of Medical Director: _____ Date: _____

Signature of Medical Director: _____

Appendix I – Exposure Incident: Victim Consent Form for Blood Collection and Testing

You have been involved in an incident that has exposed you to another individual’s blood or body fluids.

Collection and testing of your blood to determine HBV, HCV and HIV serological status is recommended. If you consent to baseline blood collection, but do not give consent at this time for HIV serologic testing, the sample shall be preserved for at least 90 days. If, within 90 days of the exposure incident you elect to have the baseline sample tested, such testing shall be done as soon as feasible. Follow-up tests may be required at 6 weeks, 12 weeks and 6 months (or as recommended by a physician) to determine if transmission has occurred. If the victim is an employee, all medical expenses not covered by the individual’s primary insurance plan will be reimbursed by the university. If the victim is a student, all medical expenses will be the responsibility of the student.

- Yes – I consent to complete serological testing at this time.**
- Yes – I consent to baseline blood testing at this time but decline HBV, HCV, or HIV testing. I understand that the sample shall be preserved for at least 90 days. If, within 90 days of the exposure incident I elect to have the baseline sample tested, such testing shall be done as soon as feasible.**
- No - I decline to have my blood drawn or tested at this time.**

Signature of Exposure Victim: _____ Date: _____

Printed Name of Exposure Victim: _____

Address of Exposure Victim: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ E-mail: _____

Signature of Witness: _____ Date: _____

Printed Name of Witness: _____

Phone: _____ E-mail: _____

Appendix J – Exposure Incident: Source Person Consent Form for Blood Collection and Testing

You have been involved in an incident during which your blood or other body fluids have come in direct contact with an employee or student of Lindenwood University. In order to provide proper medical follow-up for the exposed individual, you are requested to provide a sample of blood for testing for the hepatitis B virus (HBV), hepatitis C virus (HCV), and the human immunodeficiency virus (HIV). All procedures associated with initial and follow-up testing for HBV, HCV, and HIV will be processed through the source individual’s primary insurance plan, and any related expenses not covered by the individual’s personal insurance will be covered by Lindenwood University. The tests are voluntary and you may withdraw your consent at any time. The test results will only be disclosed to you, the exposed individual, and the licensed healthcare provider evaluating and/or treating the exposed individual. Furthermore, if a positive test were to be determined, you would also be provided with referral information for appropriate treatment.

Consent

The exposed individual and responsible healthcare provider shall make no disclosure of said medical information without a specific written and informed consent signed by you.

I, _____, have read and understand the above information regarding the request to have my blood collected and tested for specific pathogenic bloodborne viruses. Due to an exposure of my blood or other potentially infectious materials, I realize that someone may be at risk of acquiring hepatitis B virus (HBV), hepatitis C (HCV), and/or human immunodeficiency virus (HIV)—all serious illnesses. I understand that the tests are voluntary, that I may withdraw my consent at any time, and that the test results will be disclosed only to the exposed individual and the licensed healthcare provider evaluating/treating the exposed individual relative to his/her exposure incident. Therefore, I hereby consent to blood collections/tests.

Signature of Source Individual: _____ Date: _____

Address of Source Individual: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ E-mail: _____

Signature of Witness: _____

Printed Name of Witness: _____ Date: _____

Phone: _____ E-mail: _____

Appendix K - Exposure Incident: Source Person Refusal Form for Blood Collection and Testing

I, _____, have had the exposure evaluation process explained to me and I hereby refuse to consent to blood testing to determine my infectious status with regard to bloodborne pathogens, including but not limited to hepatitis B Virus (HBV) or Human Immunodeficiency Virus (HIV). I understand that by refusing to do so, those individuals who were exposed to my blood or body fluids will have limited information to determine their potential for contracting these diseases.

Signature of Source Individual: _____ Date: _____

Address of Source Individual: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ E-mail: _____

Signature of Witness: _____

Printed Name of Witness: _____ Date: _____

Phone: _____ E-mail: _____

Appendix L – Sharps Injury Log

Date/Time	Department	Case/Report Number	Type, Brand, Model of Device	Description of Incident