The Hunter College Bloodborne Pathogen Exposure Control Plan

See page #12 for Program Reviews and Updates

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(A) Scope and Application

The mission of the Occupational Health and Safety Administration (OSHA) is to save lives, prevent injuries, and protect the health of America's workers. As part of the Department of Labor, OSHA promotes worker safety and health in every workplace in the United States. OSHA'S bloodborne pathogens standard protects employees who work in occupations where they are at risk of exposure to blood or other potentially infectious materials.

The Hunter College of the City University of New York, here referred as Hunter College, Bloodborne Pathogen Exposure Control Program is intended to protect Hunter College employees who work in occupations where they are at risk of exposure to blood or other potentially infectious materials. Hunter's Exposure Control Program includes procedures intended to meet the requirements of the OSHA bloodborne pathogens standard.

(B) Definitions

Definitions. For purposes of this section, the following shall apply:

Assistant Secretary means the Assistant Secretary of Labor for Occupational Safety and Health, or designated representative.

Blood means human blood, human blood components, and products made from human blood.

Bloodborne Pathogens means 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 (HIV).

Clinical Laboratory means a workplace where diagnostic or other screening procedures are performed on blood or other potentially infectious materials.

Contaminated means the presence or the reasonably anticipated presence of blood or other potentially infectious materials on an item or surface.

Contaminated Laundry means laundry which has been soiled with blood or other potentially infectious materials or may contain sharps.

Contaminated Sharps means 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 means 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.

Director means the Director of the National Institute for Occupational Safety and Health, U.S. Department of Health and Human Services, or designated representative.

Engineering Controls means 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 means 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 means a facility providing an adequate supply of running potable water, soap and single use towels or hot air drying machines.

Licensed Healthcare Professional is a person whose legally permitted scope of practice allows him or her to independently perform the activities required by paragraph (f) Hepatitis B Vaccination and Post-exposure Evaluation and Follow-up.

HBV means hepatitis B virus.

HIV means human immunodeficiency virus.

Needleless systems means a device that does not use needles for:

(1) The collection of bodily fluids or withdrawal of body fluids after initial venous or arterial access is established; (2) The administration of medication or fluids; or (3) Any other procedure involving the potential for occupational exposure to bloodborne pathogens due to percutaneous injuries from contaminated sharps.

Occupational Exposure means 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 means (1) The following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids; (2) Any unfixed tissue or organ (other than intact skin) from a human (living or dead); and (3) HIV-containing cell or tissue cultures, organ cultures, and HIV- or HBV-containing culture medium or other solutions; and blood, organs, or other tissues from experimental animals infected with HIV or HBV.

Parenteral means piercing mucous membranes or the skin barrier through such events as needlesticks, human bites, cuts, and abrasions.

Personal Protective Equipment or PPE 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.

Production Facility means a facility engaged in industrial-scale, large-volume or high concentration production of HIV or HBV.

Regulated Waste means 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 means 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.

Sharps with engineered sharps injury protections means a non-needle sharp or a needle device used for withdrawing body fluids, accessing a vein or artery, or administering medications or other fluids, with a built-in safety feature or mechanism that effectively reduces the risk of an exposure incident.

Source Individual means any individual, living or dead, whose blood or other potentially infectious materials may be a source of occupational exposure to the employee. Examples include, but are not limited to, hospital and clinic patients; clients in institutions for the developmentally disabled; trauma victims; clients of drug and alcohol treatment facilities; residents of hospices and nursing homes; human remains; and individuals who donate or sell blood or blood components.

Sterilize means the use of a physical or chemical procedure to destroy all microbial life including highly resistant bacterial endospores.

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

Work Practice Controls means 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).

(C) Hunter College Exposure Control

The Hunter College of the City University of New York, here referred as Hunter College, is committed to providing a safe and healthful work environment to its employees, students and visitors. In pursuit of this goal, Hunter College, having employees that are reasonably anticipated to have 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, has establish a written Exposure Control Plan designed to eliminate or minimize employee exposure

The Hunter College Exposure Control Plan includes:

a. Exposure Control Plan Administration
b. Exposure Control Plan Implementation
    - Exposure Determination
    - Accessibility to Employees
    - Review and Updates
    - Review From Non-Managerial Employees
c. Methods of Compliance
    - Universal precautions
    - Engineering and work practice controls
    - Personal protective equipment
    - Housekeeping
d. Methods of Compliance
e. HIV and HBV Research Labs and Production Facilities
f. Hepatitis B vaccination and Post-Exposure Evaluation and Follow-up
g. Communication of hazards to employees
    - Labels and Signs
    - Information and Training
h. Recordkeeping
    - Medical Records
    - Training Records
    - Availability of Records
    - Transfer of Records

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

Exposure Control Plan Program Administration

The Office of Environmental Health and Safety, under the guidance of its director, is responsible for implementation of the ECP. The Office of Environmental Health and Safety will be responsible for keeping the Exposure Control Plan up-to-date, providing employee training and documentation of training, making the written ECP available to employees, the authorized employee's representatives, OSHA and other authorized government representatives. The office of Environmental Health and Safety will also ensure that adequate supplies (personal protective equipment, sharps containers, labels, and red bags as required by the standard) are supplied by the responsible college units and ensure that adequate supplies of the aforementioned equipment are available in the appropriate sizes. See list of contacts in Table 2 above

The Office of Facilities Management and Planning will provide and maintain all necessary personal protective equipment (PPE), maintain fume hoods and bio-safety cabinets as needed.

The Office of Human Resources 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. See list of contacts in Table 2 above.

Table 2 ECP Administrators and Their Responsibilities

Contact Name	Admin. Responsibility	Responsibility	Contact Number
Environmental Health & Safety	Director	• Update ECP at least annually and as needed • Ensure that safety supplies and PPE are provided • Provide training and maintain records • Make the ECP available	Office 212.772.4462. After hours & Emergency 212.772.4444
Facilities Management and Planning	Director	• Provide and maintain PPE • Provide and maintain engineering control devices	Office 212.772.4609 After Hours & emergency 212.772.4444
Human Resources	Director	• Ensure that medical actions are performed • Keep OSHA records	Office (212) 772-4451

Exposure Control Plan Program Implementation

Exposure Determination

It is Hunter's Exposure Control Plan policy to make all exposure determinations without regard to the use of personal protective equipment. The tables in this section provide current exposure determinations at Hunter College.

Occupational Exposure Determinations of job classifications at Hunter College

Table 3.1 Job Classification of Employees with Routine Occupational Exposure

Routine Occupational Exposure		
Job Tile or Faction	Department	Contact
Nurse	HCCS Health Office (BOE employee)	• 212.860.1298
Nurse	Wellness Center/Heath Services	• 212.772.4800
Biomedical Waste Supervisor and waste management personnel	Facilities	• 212.772.4136

Table 3.2 Job Classification of Employees with Possible Occupational Exposure

Possible Occupational Exposure		
Job Tile or Faction	Department	Contact
Biomedical Research Personnel and Laboratory Technicians	• School of Arts and Sciences. • School of Health Professions. • School of Nursing	• 212.772.5121 • 212.481-4312 • 212.481-7596
Public Safety Officers	Public Safety	• 212.772.4421
Athletic Coaches and Assistant Coaches	Athletics	• 212.772.4783
Custodial Services Employees	Facilities Management and Planning	• 212.772.4422

Plumbers	Facilities management and Planning	• 212.772.4422

Table 3.3 Job Classification of Employees with Rare Occupational Exposure

Rare Occupational Exposure		
Job Tile or Faction	Department	Contact
Manager of The Brookdale Dormitory	Residence Life	• 212.481-4311
EHS Personnel	Environmental Health and Safety	• 212.772.4462
Children Learning Center Personnel	Children's Learning Center	• 212.772.4066
Laborers	Facilities Management and Planning	• 212.772.4422

Task and Procedures of or closely related tasks and procedure in which occupational exposure may occur[1]

Table 4.1 Task and Procedures of Employees Potentially Exposed to BBPs, Routine Occupational Exposure

Routine Occupational Exposure		
Job Title or Faction	Department or Supervising Unit	Tasks
Nurse provider	• Campus Schools • Hunter North Wellness Center	Examination, cleaning, and dressing of wounds, first aid, CPR
Diener	Physical Therapy	Dissecting of cadavers (fixed tissue only)
Biomedical waste supervisor	Environmental Health and Safety	Transportation of biomedical waste containers, spill response

[1]Part-time, temporary, contract and per diem employees are covered by the bloodborne pathogens standard. The ECP should describe how the standard will be met for these employees

Table 4.2 Task and Procedures of Employees Potentially Exposed to BBPs, Possible Occupational Exposure

Possible Occupational Exposure		
Job Title or Faction	Department or Supervising Unit	Tasks
Public safety officer	Public Safety	Restrain of unruly people, perpetrators, CPR
Athletic Coaches and Assistants	Athletics	Examination, cleaning, and dressing of wounds, first aid, CPR
Biomedical researchers and Laboratory Technicians	• School of Arts and Sciences. • School of Health Professions. • School of Nursing.	Investigations involving blood or blood products; viruses, bacteria or parasites; cells and cell lines
Plumbers	Facilities Management and Planning	Contact with sanitary plumbing systems
Custodial Services Employees	Facilities Management and Planning	Contact with discarded potentially infectious materials

Table 4.3 Task and Procedures of Employees Potentially Exposed to BBPs, Rare Occupational Exposure

Rare Occupational Exposure		
Job Title or Faction	Department or Supervising Unit	Potential Exposure Tasks
Manager of the Brookdale Dormitory	Residence Life	First aid, CPR
EHS personnel	Office of Environmental Health and Safety	Incidental contact with contaminated surfaces
Children's Learning Center personnel	Children's Learning Center	First aid, CPR
Facilities Laborers	Facilities Management and Planning	Incidental contact with sharp objects, contact with contaminated surfaces

Exposure Control Program Accessibility to Employees

The Hunter College Bloodborne Pathogen Exposure Control Program is accessible to all Hunter College employees, the authorized employee's representatives, OSHA as well as other authorized government representatives. This plan is available for review at the locations listed in Table 1, Availability of the Exposure Control Plan, and it is available for review on all shifts.

When requested, the office of Environmental Health and Safety will provide an employee with a copy of the ECP free of charge and within 15 days of the request.

Table 1.1 Availability of the Hunter College Exposure Control Plan, Main Campus

Main Campus. 695 Park Avenue. New York, NY 10065			
Department or Area	**Contact Person**	**Location**	**Phone Number**
Environmental Health and Safety	Director (Melisa Puglisi)	HE-1211A	212.772.4462
Custodial Services	Superintendent (Zobeida Gomez)	HN-C0098	212.772.4609
Custodial Services	Custodial Supervisor's Room	HN-M021	212.772.4419
Wellness Ctr. (Heath Svces.)	Director (Patricia Jajoute)	HN-307	212.772.4800
Athletics	Director (Terry Wansart)	HW-317	212. 772.4783
Children's Learning Center	Director (OPEN)	HN-207	212.772.4066
Facilities Management and Planning	Director (Peter Plevritis)	HN-C0067	212.772-4422

Table 1.2 Availability of the Hunter College Exposure Control Plan, Brookdale Campus

Brookdale Campus. 425 East 25th St. New York, NY 10010			
Department or Area	**Contact Person**	**Location**	**Phone Number**
Custodial Services	Superintendent (Zobeida Gomes)	HN-C0098	212.772.4609
Facilities Office	Superintendent (Thomas Zwicke)	BC-N106	212.481.4300
School of Heath Profession	Dean (Dr. Ken Olden)	BW-608	212.481.4314
School of Nursing	Dean (Dr. Joyce Griffin-Sobel)	BW-500	212.481.3237
Residence Life	Director (Pamela Burthwright)	BN-C117	212.481.5134

Table 1.3 Availability of the Hunter College Exposure Control Plan, Campus Schools

Campus Schools. 71 East 94th St. New York, NY 100128			
Department or Area	Contact Person	Location	Phone Number
Administration	Director (Dr. Randy Collins)	HCCS-105	212.860.1291
Nurse Office	Nurse (Kenda Ward)	HCCS-Nurse Office	212.860.1298
Health and Physical Education	Chairperson (Robert Gaudenzi)	HCCS-Health and Phys. Ed, Office	212.860.1282
Custodial Services	Superintendent (Thomas Zwicke)	Custodial Services, Basement	212.860.6332

Table 1.4 Availability of the Hunter College Exposure Control Plan, MFA Building

MFA Building. 450 West 41st St, New York, NY 10036			
Department or Area	Contact Person	Location	Phone Number
Custodial Services	Superintendent (Zobeida Gomez)	MFA-502	212.563.4916

Table 1.5 Availability of the Hunter College Exposure Control Plan, School of Social Work

School of Social Work. 2180 East 3rd Avenue NYC, NY 10035			
Department or Area	Contact Person	Location	Phone Number
Custodial Services	Superintendent (Agustin Pita)	SSW-basement	212.563.4916

Exposure Control Plan Review and Update Information

The director of EHS will maintain, review, and update the ECP at least annually, and whenever necessary as follows:

- To include new or modified tasks and procedures to reflect changes in technology that eliminate or reduces exposure to bloodborne pathogens
- To document consideration and implementation of appropriate commercially available and effective safer medical devices designed to eliminate or minimize occupational exposure.

Review Date	Reason	Reviewer's Name	Reviewer's signature
June 6, 2011	BBP Plan	Ricardo Franco	
12/21/11 to 02/27/12	Update #'s / content	Ricardo Franco	
01/15/15	review	Garrett Hauschild	
01/15/16	Contact #'s	Garrett Hauschild	
01/15/17	Contact #'s / review	Garrett Hauschild	
01/15/18	Signs / contact #'s	Garrett Hauschild	
01/15/19	review	Garrett Hauschild	
07/08/19	Contact info	Garrett Hauschild	
10/26/21	Contact info	Garrett Hauschild	

Review Date	Reason	Reviewer's Name	Reviewer's signature

Exposure Control Plan Input from Non-Managerial Employees

A safe and healthful work environment for our entire staff is the product of collaborative effort between management, employees and employee representatives. In pursuit of this endeavor, Hunter College will solicit input from non-managerial employees responsible for direct patient care who potentially are exposed to injuries from contaminated sharps in the identification, evaluation, and selection of effective engineering and work practice controls. Exposure control plan input will be achieved by providing each employee, at the time of training, with a copy of the form *"Input from non-managerial employees: Identification, evaluation and selection of engineering and workplace controls,*" which is provided in Appendix B. Upon completion, this form must be provided to the Office of Environmental Health and Safety for Evaluation and follow-up as necessary.

(D) Methods of Compliance

UNIVERSAL PRECAUTIONS

Universal precautions are a set of strategies developed to prevent of transmission of blood borne pathogens. The focus of universal precautions is on blood and selected body fluids.

The Hunter College's Exposure Control Plan mandates universal precautions in order to prevent contact with blood or other potentially infectious material. The Hunter College universal precautions program is based on the presumption that all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV, and other bloodborne pathogens. Under circumstances in which differentiation between body fluid types is difficult or impossible, all body fluids shall be considered potentially infectious materials.

Work Practices That Support Universal Precautions

The Hunter College Exposure Control Plan requires that all employees follow procedures that support universal precautions as follows:

- Eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses are prohibited in work areas where there is risk for occupational exposure.
- Food and or drinks cannot be stored in refrigerators, freezers, shelves, and cabinets or on countertops or benchtops where blood or potentially infectious materials are present.
- All procedures involving potentially infectious materials must be performed in a manner as to minimize splashing, spraying and spattering and generation of droplets of these substances.
- Mouth pipetting/suctioning of blood or other potentially infectious materials is prohibited.
- Procedures for handling contaminated sharps must be performed using no-hands techniques. Employees must use broom or brush and dust pan to collect broken glass and sharps.
- Precautions to prevent injuries caused by needles, scalpels, razors, and other sharp devices must be observed. These items must be carefully handled and disposed of properly in a sharps container.
- Hand washing must occur immediately or as soon as possible after completing tasks that put them at risk of contact with blood or OPIM (Other Potentially Infectious Materials).
- Employees who have exudative lesions or weeping dermatitis must wear gloves when performing any duties that put them at risk of contact with blood or OPIM.

ENGINEERING CONTROLS AND WORK PRACTICE CONTROLS

Engineering and work practice controls shall be used to eliminate or minimize employee exposure. The difference between the two types of controls is that engineering controls isolate or remove the hazard from the workplace, while work practices reduce the risk of exposure by altering how tasks are performed. Where occupational exposure remains after institution of these controls, personal protective equipment shall also be used.

Engineering Controls

Engineering controls serve to reduce worker exposure by either removing the hazard or isolating the worker from exposure.

Laboratories and clinics where there is a potential of employee exposure are required to use one or a combination of engineering controls to isolate the worker from exposure. The Hunter College Institutional Biosafety Committee will determine what biosafety level and equipment is necessary in these areas. Examples of engineering controls are: protective splatter shields, self-sheathing needles, capture ventilation, biological safety cabinets, air filters, ventilated equipment, sharps disposal containers and enclosures.

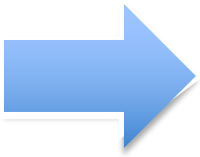
It is important to periodically verify that engineering controls are in place and working; ventilation systems are checked annually by the Office of Environmental Health and Safety.
The Office of Environmental Health and Safety is responsible for the annual testing and certification of biosafety cabinets. Contact Environmental Health and Safety at 212-772-4460 for additional information on certification.

Other mechanisms and engineering controls should be periodically reviewed for integrity and appropriate use by the laboratory, clinic or research area principal investigator/supervisor.

Hand-Washing

Workers must wash their hands immediately after removal of gloves or other personal protective equipment when handling blood or potentially infectious materials.

Workers must wash their hands and any other skin with soap and water or flush mucous membranes with water immediately following contact with blood or potentially infectious materials. (i.e. when splashed)



Hand washing facilities are available in every lavatory, clinic, research area and Facilities porter closet as well as research and teaching laboratories
Eyewash stations are available in all biology and Chemistry research and teaching lab.

Contaminated Sharps

Reusable sharps such as scalpels and syringes/needle systems are prohibited. Reusable sharps are prohibited.

Immediately or as soon as possible after use, disposable sharps shall be placed in color coded, puncture resistant, leak-proof and closable containers. Principal investigators/lab supervisors are responsible for providing and properly maintaining these containers. Orders for sharp containers and infectious waste supplies shall be ordered by calling Environmental Health and Safety at 212-772-4136

Waste Containers for Sharps

All sharps must be placed into appropriate sharps containers. The sharps containers are puncture resistant, labeled with a biohazard label, and are leak proof.

The Office of Environmental Health and Safety is responsible for supplying sharps containers.

Sharp containers are ordered by calling 212.772.4136.

Eating, Drinking and Smoking

Eating, drinking, smoking and other activities including applying cosmetics or lip balm, handling contact lenses, placing any article in the mouth, eyes, or nose or other contact with mucous membranes is prohibited in work areas where there is a likelihood of occupational exposure to blood or potentially infectious materials. Food and drink shall not be kept in refrigerators, freezers, shelves, and cabinets or on countertops or benchtops where blood or potentially infectious materials are stored.
"No Food" and "Food Only" labels for refrigerators/freezers are available from Environmental Health and Safety (212-772-5260).

Aerosols

All procedures involving blood or potentially infectious materials shall be performed under the supervision of the lab Principal Investigator or unit manager. These procedures shall be executed in such a manner as to minimize splashing, spraying, splattering, and generation of droplets of these substances. Such activity should be conducted in a certified biological safety cabinet.

Mouth Pipetting

Mouth pipetting/suctioning is prohibited.

Centrifuging

Aerosol containment devices such as sealed canisters that fit in the centrifuge bucket or covers for the centrifuge bucket, heat-sealed tubes or sealed rotor bowls are recommended.

Transporting Material

Lab Principal Investigators and unit managers shall oversee all activities related to transportation of blood of OPIM. Specimens of blood or other potentially infectious materials shall be placed in containers that prevent leakage during collection, handling and processing in the laboratory. The specimen container shall be placed inside another container that also contains leakage during transportation in the laboratory.

Specimen containers used for storage shall prevent leakage and be color coded or labeled as necessary. Additional information on color coding or labeling is found in Section G.

Specimens of blood or potentially infectious materials shall be transported in the building and between buildings in a container that contains leakage. This container shall be labeled or color-coded. In addition, all specimens of blood or potentially infectious materials shall be properly packaged for shipment by mail or courier service. Information on packaging is available by contacting the Dangerous Goods Specialist at the courier service.

If the specimen could puncture the specimen container, the specimen container shall be placed within a secondary container that is puncture- resistant, contains leakage and is color coded or labeled.

Equipment Servicing and Maintenance

Equipment that may be contaminated with blood or potentially infectious materials shall be decontaminated prior to servicing. When a portion of the equipment cannot be decontaminated, the equipment must be labeled with the biohazard symbol and the word "biohazard" as well as stating which portion of the equipment remains contaminated. This information must be conveyed to all affected workers and servicing representatives and/or the manufacturer as appropriate prior to handling, servicing, or shipping so that appropriate precautions will be taken.

- The Hunter College Office of Environmental Health and safety requires that the owner of the equipment that may be contaminated with blood or potentially infectious materials to sign and date a form/statement that the equipment has been decontaminated and to attach a label containing this form to the equipment. Lab Principal Investigators shall ensure that this information is conveyed to all affected employees, the servicing representative, and/or the manufacturer, as appropriate, prior to handling, servicing, or shipping so that appropriate precautions will be taken.

Personal Protective Equipment

Provision of PPE

When there is occupational exposure, Hunter College shall provide, at no cost to the employee, appropriate personal protective equipment such as, but not limited to, gloves, gowns, laboratory coats, face shields or masks and eye protection, and mouthpieces, resuscitation bags, pocket masks, or other ventilation devices.

Personal protective equipment shall be considered "appropriate" only if it does not permit blood or other potentially infectious materials to pass through to or reach the employee's work clothes, street clothes, undergarments, skin, eyes, mouth, or other mucous membranes under normal conditions of use and for the duration of time which the protective equipment will be used.

The principal investigator and unit managers shall ensure that appropriate personal protective equipment in appropriate sizes is readily accessible at the worksite or is issued to the worker.

Table 5.1 Units Responsible for Providing Personal Protective equipment

Employee Group	Unit Responsible for Providing and Ensuring that Employees Use PPE	Location
School of Nursing Nurses and Research Personnel and other employees	Purchasing agent, Office of the Dean, Hunter College School of Nursing	Brookdale West. Rm. 500
School of Health Sciences research and lab personnel	Purchasing agent, Office of the Dean, Hunter College School of Health Sciences	Brookdale West, Rm. 703
Facilities Trade Employees	Purchasing agent, Office of Facilities Management and Planning	HN-C0075
Health care providers	Purchasing agent, Hunter College Office of Health Care Services	HN-307

Use of PPE

Custodial Services supervisors, laboratory Principal Investigators and unit managers shall ensure that their employees use appropriate personal protective equipment unless it can shows that the employee temporarily and briefly declined to use personal protective equipment when, under rare and extraordinary circumstances, it was the employee's professional judgment that in the specific instance its use would have prevented the delivery of health care or public safety services or would have posed an increased hazard to the safety of the worker or co-worker. When an employee makes this judgment, Hunter College shall investigate and document the circumstances in order to determine whether changes can be instituted to prevent such occurrences in the future.

Accessibility of PPE

Custodial Service supervisors, laboratory Principal Investigators and unit managers shall ensure that appropriate personal protective equipment in the appropriate sizes is readily accessible at the worksite or is issued to employees. Hypoallergenic gloves, glove liners, powder free gloves, or other similar alternatives shall be readily accessible to those employees who are allergic to the gloves normally provided.

Table 5.2 Availability and distribution of Personal Protective Equipment and Safety Supplies

Occupation or Task	Responsible Unit	Location
Biomedical Waste handler	Office of Environmental Health and Safety	HN-00011
Nurse and Health Care Providers	Main Campus Wellness Center	HN-307H (Wellness Center)
Deaner	Physical Therapy	Brookdale E-005 (Anatomy Lab)
Public Safety Officers	Public Safety	Director
Coaches and Assistants	Athletics	Director
Researchers and Lab Techs	Corresponding academic school	Each lab's Principal Investigator
Custodial Services Employees	Custodial Services	HN-0004B
		HN-0055
		HE-1st floor next to service elevator
		HW-B253 (B2 level)
		HW-B153 (B1 level)
		HW-403
		HW-707A (Carouse Rm.)
		Brookdale E-G21
		HCCS-B14A/B
		MFA-503
		SSW-Custodial Services supply room
Plumbers	Facilities Management and Planning	HN-005A

Cleaning, Laundering or Disposal of PPE

Personal protective equipment shall be provided; cleaned, laundered or disposed of; repaired or replaced at no cost to the worker.

If blood or other potentially infectious materials penetrate a garment, the garment shall be removed immediately or as soon as feasible.

All personal protective equipment shall be removed prior to leaving the work area.

The Hunter College Office of Environmental Health and Safety shall oversee all activities related to cleaning, laundering or disposal of personal protective equipment worn in laboratory areas where there is potential of exposure to blood or potentially infectious materials.

Unit Directors (see table 5.1 above) shall oversee all activities related to cleaning, laundering or disposal of personal protective equipment worn in areas other than laboratories.

Repair and Replacement of PPE

Personal protective equipment that is torn, damaged or defective shall be replaced immediately. Employees shall go to their respective personal protective equipment and supplies area as listed in table 5.2 in order to replace their equipment.

Custodial Services supervisors, laboratory Principal Investigators and unit managers shall ensure that oversee all activities related to repair or replacement of personal protective equipment as needed to maintain its effectiveness, at no cost to the employee.

Management of Personal Protective Equipment

The Hunter College Office of Environmental Health and Safety shall oversee all activities related to the use of personal protective equipment.

- All personal protective equipment shall be removed prior to leaving the work area.
- When personal protective equipment is removed it shall be placed in the laboratories designated area or container for storage, washing, decontamination or disposal.

Use of Gloves

Gloves shall be worn when it can be anticipated that the worker may have hand contact with blood, other potentially infectious materials, mucous membranes, and non-intact skin. To be effective a glove must provide a barrier between the hand and the contaminated material. Occasional testing of the type/brand of glove is recommended.

Double gloving should be used by persons with dermatitis, skin breaks and as deemed appropriate.

Gloves shall be worn when handling or touching contaminated items or surfaces.

Disposable gloves shall be replaced as soon as practical when contaminated, or as soon as feasible if they are torn, punctured, or when their ability to function as a barrier is compromised.

Disposable gloves shall not be washed or decontaminated for reuse.

Utility gloves may be decontaminated for reuse if the integrity of the glove is not compromised. However, they must be discarded if cracked, peeling, torn, punctured, or exhibit other signs of deterioration or when their ability to function as a barrier is compromised.

Hypoallergenic gloves, glove liners, powder-less gloves, or other similar alternatives shall be readily accessible to those workers who are allergic to the gloves normally provided.

Masks, Eye Protection, and Face Shields

Masks in combination with eye protection devices, such as goggles or glasses with solid side shields, or chin-length face shields, shall be worn whenever splashes, spray, spatter, or droplets of blood or other potentially infectious materials may be generated and eye, nose, or mouth contamination can be reasonably anticipated.

Protective Clothing

Appropriate protective clothing such as but not limited to, gowns, aprons, lab coats, clinic jackets, or similar outer garments shall be worn in occupational exposure situations. The type and characteristic will depend upon the task and degree of exposure anticipated.

Surgical caps or hoods and/or shoe covers or boots shall be worn in instances when gross contamination can reasonably be anticipated (e.g., autopsies, orthopedic surgery).

Housekeeping and Worksite Conditions

Responsibility

The Hunter College Office of Environmental Health and Safety shall ensure that college grounds, laboratories and medical facilities are maintained in a clean and sanitary condition.

It is the responsibility of the Hunter College Office of Facilities Management and planning to ensure that all college grounds and public facilities are maintained in a clean and sanitary condition.

It is the responsibility of the principal investigator/supervisor to ensure that the worksite is maintained in a clean and sanitary condition.

Schedule for Cleaning and Decontamination

Precautions must be taken by employees to prevent exposure to bloodborne pathogen during cleanup and disinfection of surfaces. All equipment and environmental and working surfaces shall be cleaned and decontaminated after contact with blood or other potentially infectious materials.

Table 6.1. Implementation and Schedule for Cleaning and Decontamination

Facility Type	Minimum Frequency	Responsible Department or Individual
Grounds	Twice during each work shift, 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.	Director or Custodial Services, Facilities Management and Planning
Restrooms[1]	Twice during each work shift, 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.	Director of Custodial Services, Facilities Management and Planning
Biological research Laboratories	At completion of research related activities, 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.	Laboratory Principal Investigator
Health Services Clinics, patient care facilities	At the end of each patient visit, 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.	Director of Health Care Services

[1]The daily routine cleanup and disinfection of bathrooms and residence halls are not considered activities that fall under the requirements of the BBP Standard. It is recognized, however, that there is likelihood for the presence of infectious agents that are responsible for commonly occurring diseases

Decontamination Procedures

Employees must wear gloves when cleaning up small spills of potentially infectious materials. Goggles should be worn if splashing might occur, especially if a scrubbing device (e.g. scrubbing pad) is used to clean the contaminated surface.

Contaminated objects must either be handled as infectious waste or decontaminated accordingly.

Follow the recommended cleaning as listed in table 6.2

Place cleanup materials that have touched the contaminated surface, including disposable gloves, into a biohazard disposal bag and place in the correct labeled container for disposal. Call the office of Environmental Health and Safety at 212-772-4462 to arrange for disposal of the biohazardous waste.

If there is a chance of contamination of clothes, a fluid-resistant gown/apron must be worn. All disposable clothing will be handled as instructed in section “Cleaning, Laundering or Disposal of PPE”

Broken glass and sharp objects that may be contaminated shall not be picked up directly with the hands. Use a dustpan and broom and placed it in a sharps container or a labeled leak-proof and puncture-resistant container.

Disinfect all tools used to clean up the blood in a fresh bleach solution containing 1-part bleach to 10-parts water and let dry.

Table 6.2 Decontamination Products and Procedures

Area/Location	Disinfectant	Procedure
Public spaces that are contaminated with blood or OPIM like bathrooms, corridors, offices, etc.	Facilities employee should create a fresh batch of bleach-solution by mixing 1-part bleach to 10-parts water (discard whatever amount you don't use at the end of the day.) Bleach is available in the locations listed in table 5.2	Wear personal protective equipment. Spread towels over contaminated surface. Liberally apply disinfectant to contaminant and let stand for at least 10-minutes. Remove blood soaked towels and place them in a bag and label it as biohazard. Mop up the area and make sure to clean every trace of blood. Disinfect all tools used to clean up the blood in a new fresh bleach solution and let dry. Contact the Environmental Health and Safety Office at 212-772-5260 to arrange for disposal of the biohazardous waste.
Laboratories surfaces that are contaminated with blood or OPIM	Individual assigned by the lab Principal Investigator should clean the contaminated surfaces. The lab Principal Investigator shall determine the decontaminant used, but it must either an EPA-registered sterilant or a product registered against HIV/HBV.	Wear personal protective equipment. Apply disinfectant according to manufacturer's instructions.

Protective Covers

Protective coverings, such as plastic wrap, aluminum foil, or imperviously-backed absorbent paper used to cover equipment and environmental surfaces, shall be removed and replaced as soon as feasible when they become overtly contaminated or at the end of the work shift if they may have become contaminated during the shift.

Reusable Bins, Pails, cans and Similar Receptacles

All bins, pails, cans, and similar receptacles intended for reuse which have a reasonable likelihood for becoming contaminated with blood or other potentially infectious materials shall be inspected and decontaminated on a regularly scheduled

basis and cleaned and decontaminated immediately or as soon as feasible upon visible contamination. Cleaning of these receptacles is the responsibility of the lab Principal Investigator or unit manager.

Reusable Sharps

Reusable sharps are not permitted

Regulated Waste

It is the responsibility of the Office of Environmental Health and safety to manage all containers that are labeled with the "biohazardous waste" label.

Personnel form Custodial Services and Facilities employees are not allowed to manage biomedical, infectious or biohazardous waste.

All untreated biohazardous waste shall be handled utilizing Universal Precautions.

Waste disposal procedures shall be in compliance with the State of New York regulations pertaining to infectious/biomedical waste.

Reusable waste receptacles for biohazardous are not permitted.

Sharps containers shall not be reused.

Broken, contaminated glassware too large to fit into the 5-gallon sharps container shall be transported and treated in an autoclave-resistant plastic bin and disposed of as laboratory glassware.

Other biohazardous waste that does not pose a threat of skin puncture shall be placed in plastic biohazard bags that are placed inside non-reusable biohazardous waste cardboard boxes

Laundering of Contaminated Clothing

It is the responsibility of the principal investigator/supervisor to assure that laundry service for laboratory personal protective clothing is provided. Workers shall not be required to launder any personal protective clothing in their homes. Image First currently provides this service.

It is the responsibility of unit Directors (see table 5.1 above) to oversee all activities related to cleaning, laundering or disposal of personal protective equipment worn in areas other than laboratories.

All laundry shall be handled utilizing Universal Precautions. Sharps/broken glass must be removed prior to bagging the material. If the contaminated laundry is wet and presents a reasonable likelihood of leakage, it must be bagged in special bags that are available from Consolidated Laundry.

ADMINISTRATIVE CONTROLS

Administrative Controls help employees understand how to avoid accidental exposure to blood and body fluids. Hunter College's administrative controls include:

- Education, training and ongoing infection control education.
  - Training will be provided upon assignment to tasks where employees can be exposed to bloodborne pathogens and annually there after
- Evaluation of protocols and lab procedures where blood or other OPIM may be handled
- Annual evaluation of the Exposure Control Plan

(D) HIV and HBV Research Laboratories and Labels

Hunter College research laboratories and facilities do not engaged in the culture, production, concentration, experimentation, and manipulation of HIV and HBV. There are no approved protocols to handle HIV and HBV research. Should this occur, written procedures will be added in order to eliminate or minimize employee exposure.

(E) Hepatitis B Vaccination; Post-exposure Evaluation and Follow-up (See Appendix A)

General

Hunter College will make available the hepatitis B vaccine and vaccination series to all employees who have occupational exposure to blood or OPIM.

The Hunter College Wellness Center will administer the hepatitis B vaccination series.

Hepatitis B immunization will be provided at no cost to the worker within 10 days from the start of the work assignment unless the employee has previously received the complete hepatitis B vaccination series, antibody testing has revealed that the employee is immune, or the vaccine is contraindicated for medical reasons.

It is the responsibility of the principal investigator and unit supervisor to assure that immunization services are offered to their employees (contact the Hunter College Wellness center at 212-772-4800 in order to schedule appointments for immunization). If the employee initially declines hepatitis B vaccination but at a later date decides to accept the vaccination, the Principal Investigator of unit supervisor shall make available hepatitis B vaccination at that time.

During the evaluation, workers are asked to review their immunization status regarding Hepatitis B. Verification of immunization is requested of workers previously immunized. Information is given on the efficacy, safety, and method of administration and the benefits of the Hepatitis B vaccine. Workers who decline immunization must sign a waiver indicating an understanding of the risks of not receiving immunization.

The Hunter College Wellness center will provide the principal investigator or unit supervisor with a written opinion within 15 days of a medical evaluation. This informs the principal investigator or supervisor that the worker completed the evaluation regarding Hepatitis B immunization. To protect the worker's privacy the written opinion will be limited to answering two questions: 1) is Hepatitis B immunization recommended? 2) Was the vaccine administered? Prescreening of workers (pre-vaccine blood titers) shall not be a condition for beginning the Hepatitis B immunization series. However, a post vaccine antibody titer (Anti-HBs) is recommended to assure the efficacy of the immunization.

Administration of Hepatitis B Immunization

Laboratory Principal Investigators and unit directors are responsible for contacting the Hunter College Wellness center at 212-772-4800 in order to schedule appointments for Hepatitis B immunization for employees under their supervision

Occupational Exposure Incident

Exposure Incident

An exposure incident is defined as specific eye, mouth, other mucous membrane, non-intact skin or parenteral contact with blood or potentially infectious materials. Examples of exposure incidents include needlesticks, splash/spatter to the mucous membranes of the face, and any other incident that involves contact between blood or potentially infectious materials and non-intact skin (cuts, scratches, chapped skin, etc.).

Immediate Response

Following an exposure incident, the exposed worker shall:

- Immediately wash the wound with soap and water or flush mucous membranes with water.
- Immediately report the incident to the principal investigator/laboratory supervisor, or unit director who will assist the worker in the follow-up exposure incident evaluation.
- Seek immediate medical care. Hunter College is not equipped to provide post-exposure emergency care. Your supervisor will arrange for emergency care at the emergency room closest to your campus. The Emergency Room will provide post-exposure treatment for occupational exposure. The Emergency Room will assess the exposure and administer appropriate therapy. Hunter College's campuses are located within close proximity to major hospitals in NYC. A list of hospitals that are close to each campus is provided in table 6 below.

    - ✓ **NOTE**: The CDC currently recommends that when treatment is necessary, it should begin within 2 hours of exposure.

Table 6 Emergency Response Hospitals Closest to Each Campus

Campus	Closest Emergency Room	Phone Number
Main Campus	Lennox Hill Hospital 100 E 77th St New York, NY10075	Dial 911
	New York Presbyterian Hospital-New York Weill Cornell Medical Center 1300 York Ave, New York, NY10065	Dial 911
Brookdale Campus	Bellevue Hospital 462 1st Ave New York, NY 10016	Dial 911
HCCS	Lennox Hill Hospital 100 E 77th St New York, NY10075	Dial 911
	The Mount Sinai Hospital 1 Gustave L Levy Pl, Fl 12, New York, NY 10029	Dial 911
SSW	Lennox Hill Hospital 100 E 77th St New York, NY10075	Dial 911
MFA	Roosevelt Hospital 428 W 59th St, New York, NY 10019	Dial 911

Post-Exposure Evaluation and Follow Up

Following a report of an exposure incident, Hunter College will make immediately available to the exposed employee, at no cost, a confidential medical evaluation and follow-up.

The principal investigator or unit supervisor is responsible for assisting the exposed worker in seeking the necessary and immediate medical evaluation and consultation following an exposure incident. The post-exposure packet provided in Appendix A list all steps required during this process and provides you with the forms necessary to complete this process.
During the evaluation, the principal investigator or unit supervisor is responsible for providing the following information to health care provider:

- A description of the circumstances leading to the exposure incident and the exposure route.

The exposure incident shall be reported to Environmental Health and Safety through the use of the Incident/Accident Report form in Appendix A. The principal investigator or unit supervisor is required to review the report prior to submitting

the form to Environmental Health and Safety. The goal of this review is to identify and correct problems to prevent recurrence of similar incidents.

The Hunter College office of Environmental Health and safety is responsible for reviewing the circumstances of all exposure incidents to determine:

- Engineering controls in use at the time work practices followed
- A description of the device being used (including type and brand)
- Protective equipment or clothing that was used at the time of the exposure incident (gloves, eye shields, etc.)
- Location of the incident (O.R., E.R., patient room, etc.)
- Procedure being performed when the incident occurred
- Employee's training

If revisions to this ECP are necessary, the Hunter College office of Environmental Health and Safety will ensure that appropriate changes are made. (Changes may include an evaluation of safer devices, adding employees to the exposure determination list, etc.)

The Hunter College Office of Human Resources is responsible for procedural processes regarding applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual. Human Resources will follow these steps:

- Obtain consent and make arrangements to have the source individual tested as soon as possible to determine HIV, HCV, and HBV infectivity; document that the source individual's test results were conveyed to the employee's health care provider. If the source individual is already known to be HIV, HCV and/or HBV positive, new testing need not be performed.
- Assure that the exposed employee is provided with the source individual's test results and with information about applicable disclosure laws and regulations concerning the identity and infectious status of the source individual (e.g., laws protecting confidentiality).
- After obtaining consent, arrange to collect exposed employee's blood as soon as feasible after exposure incident, and test blood for HBV and HIV serological status.
- If the employee does not give consent for HIV serological testing during collection of blood for baseline testing, arrange to preserve the baseline blood sample for at least 90 days; if the exposed employee elects to have the baseline sample tested during this waiting period, arrange perform testing as soon as feasible.
- Arrange to provide the exposed individual with post-exposure counseling and education.
- Arrange to provide the exposed individual with evaluation of any reported illnesses.

- Assure that the health care professional evaluating an employee after an exposure incident receives a description of the employee's job duties relevant to the exposure incident.
- Assure that the health care professional evaluating an employee after an exposure incident receives the results of the source individual's blood testing, if available.
- Assure that the health care professional evaluating the employee obtains all medical records relevant to the appropriate treatment of the employee including vaccination status.
- Provide the employee with a copy of the evaluating health care professional's written opinion within 15 days after completion of the evaluation. This written opinion includes whether Hepatitis B vaccination is indicated for an employee and if the employee has received such vaccination. It documents that a medical evaluation took place following the incident exposure, that the employee has been informed of the results of the evaluation and that the employee has been counseled about potential medical conditions resulting from exposure to bloodborne pathogens. All other findings shall remain confidential.

The Hunter College office of Environmental Health and Safety is responsible for the following:

- Ensure that the health care professional(s) responsible for the employee's hepatitis B vaccination and post-exposure evaluation and follow-up are given a copy of OSHA's bloodborne pathogens standard.
- All percutaneous injuries from contaminated sharps in a Sharps Injury Log (see Appendix A)

(F) Communication of Hazard to Employees

Labels and Signs

At Hunter College, the potential presence of a biohazardous agent, including bloodborne pathogens, is generally communicated to employees via standard signage, placards, or labels.

Labels

It is the responsibility of the laboratory principal investigator or clinic manager to ensure that biohazardous labels are affixed to equipment and containers used to manipulate, contain or transport blood or OPIM.

Biohazardous labels consist of a red or fluorescent orange colored background with the traditional biohazard symbol. Biohazard symbol and shall be fluorescent orange or orange-red or predominantly so, with lettering or symbols in a contrasting color.

Biohazardous Labels must be affixed as close as possible to the container by string, wire, adhesive, or other method that prevents their loss or unintentional removal.

These labels shall include the universal biohazard symbol.

All employees handling these containers will be informed of their contents and the need to use universal precautions when handling such items. Items that are transported or shipped need to comply with local and federal regulations.

The following items must be labeled:

- Containers of regulated waste;
- Refrigerators, freezers, incubators or other equipment containing blood or other potentially infectious materials;

- Sharps disposal containers;
- Containers used to store, transport or ship blood and other potentially infectious materials. When a secondary container holds a number of smaller items containing the same potentially infectious substance, only the secondary container needs to be labeled.
- Laundry bags/containers holding contaminated items. Employees handling laundry will be informed of the potential for contamination and/or infectivity of red laundry bags and
- Contaminated equipment.

Biohazardous waste that has been decontaminated need not be labeled or color-coded.

Signs

It is the responsibility of the Hunter College Office of Environmental Health and Safety to ensure that appropriate biohazard signs are affixed at entrances to laboratories and areas where blood or OPIM are handled, laboratories working at BSL-2 and above, or when required by the Hunter College Institutional Biosafety Committee.

These signs shall be fluorescent orange-red or predominantly so, with lettering and symbols in a contrasting color.

Signs shall bear the following legend:

- Name of the Infectious Agent
- Special requirements for entering the area
- Name, telephone number of the laboratory director or other responsible person.

Information and Training

All Hunter College employees with occupational exposure are required to participate in a bloodborne pathogen training program that is given at no cost to the employee.

Responsibility

Principal investigators and unit supervisors shall ensure that all workers with occupational exposure participate in a training program at no cost to the employee and during working hours. This training shall be provided at the time of initial assignment to tasks where occupational exposure may take place and annually thereafter.

Training Material shall be appropriate in content and vocabulary to educational level, literacy, and language of the employees (see Appendix F).

The person conducting the training shall be knowledgeable in the subject matter covered by the elements contained in the training program as it relates to the workplace that the training will address.

The Office of Environmental health and safety Environmental offers a training program on bloodborne pathogens. Contact the Training Coordinator at EH&S to register for this class (212-772-4460)

Principal investigators and unit supervisors shall provide additional training when changes such as modification of tasks or procedures or institution of new tasks or procedures affect the worker's occupational exposure. The additional training may be limited to addressing the new exposures created.

Training Requirements

The training program for all potentially exposed workers shall cover the following.

- An accessible copy of the regulatory text of the Bloodborne Standard and an explanation of its contents;
- A general explanation of the epidemiology and symptoms of bloodborne diseases;
- An explanation of the modes of transmission of bloodborne pathogens;
- An explanation of the Hunter College exposure control plan and the means by which the worker can obtain a copy of the written plan;

- An explanation of the appropriate methods for recognizing tasks and other activities that may involve exposure to blood and potentially infectious materials;
- An explanation of the use and limitations of methods that will prevent or reduce exposure including appropriate engineering controls, work practices, and personal protective equipment;
- An explanation of the basis for selection of personal protective equipment; as well as information on the types, proper use, location, removal, handling, decontamination and disposal of personal protective equipment;
- Information on the Hepatitis B vaccine, including information on its efficacy, safety, method of administration, the benefits of being vaccinated, and that the vaccine and immunization will be offered free of charge;
- Information on the appropriate actions to take and persons to contact in an emergency involving blood or potentially infectious materials;
- 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 Hunter College is required to provide for the worker following an exposure incident;
- An explanation of the signs and labels and/or color coding as required and used; and
- An opportunity for interactive questions and answers with the person conducting the training session.

(G) RECORDKEEPING

Medical Records

Medical records are maintained for each employee with occupational exposure in accordance with 29 *CFR* 1910.1020, "Access to Employee Exposure and Medical Records."

The Hunter College office of Environmental Health and Safety is responsible for maintenance of the required medical records. These confidential records are kept in Hunter East, Room 1211A for at least the duration of employment plus 30 years.

Employee medical records are provided upon request of the employee or to anyone having written consent of the employee within 15 working days. Such requests should be sent to the Hunter College Office of Environmental Health and Safety, Room E-1211A, New York, NY 10065.

Medical records shall include:

- The name and social security number of the employee;
- A copy of the employee's hepatitis B vaccination status including the dates of all the hepatitis B vaccinations and any medical records relative to the employee's ability to receive vaccination.
- A copy of all results of examinations, medical testing, and post-exposure follow-up procedures.
- The employer's copy of the healthcare professional's written post-exposure follow up opinion.
- A copy of the exposed employee's information provided to the healthcare professional.

Training Records

All affected Hunter College employees who receive the required Bloodborne Pathogens training must, upon completion, have a signed and dated verification on file with Environmental Health and Safety (See Appendix C). Each affected employee must also have in their personnel file a signed and dated Employee Consent / Declination Form (Appendix D) for the Hepatitis B Vaccination found in the Appendix A.

The Hunter College office of Environmental Health and Safety is responsible for maintenance of the required training records. Training records are completed for each employee upon completion of training. These documents will be kept for at least three years at the Hunter College office of Environmental Health and Safety.

Employee training records are provided upon request of the employee or to anyone having written consent of the employee. Such requests should be sent to the Hunter College Office of Environmental Health and Safety, Room E-1211A; New York, NY 10065.

The training records shall include:

- The dates of the training sessions
- The contents or a summary of the training sessions
- The names and qualifications of persons conducting the training
- The names and job titles of all persons attending the training sessions
- NOTE: Employee 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 Office of Environmental Health and Safety in room Hunter East 1211A. Phone number 212.772.4462

Sharps Injury Log

The Hunter College office of Environmental Health and Safety is responsible for establishing and maintaining a Sharps Injury Log (See Appendix A) for the recording of percutaneous injuries from contaminated sharps. This log is reviewed as part of the annual program evaluation.

The information in the Sharps Injury Log will be recorded and maintained in such manner as to protect the confidentiality of the injured employee. The Sharps Injury Log will be maintained for five years following the end of the year to which the incident occurred.at the Hunter College office of Environmental Health and Safety.

The Sharp Injury Log records shall include:

- 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.

Appendix A

Post-Exposure Follow-Up Packet and Instructions

APPENDIX B

Input from non-managerial employees: Identification, evaluation and selection of engineering and workplace controls

INPOUT FROM NON-MANAGERIAL EMPLOYEES
Identification, Evaluation and Selection of Engineering and Workplace Controls

Document below any suggestions regarding the identification, evaluation, and selection of effective engineering and work practice controls that you feel will help reduce potential occupational exposure to bloodborne pathogens

• (i.e. Use of syringes from XXXXXX company with i**ntegrated safety design** with a safety feature that is built in as an integral part of the device and cannot be removed. This design feature is preferred.)

Document the consideration and implementation of appropriate commercially available and effective safer medical devices designed to eliminate or minimize occupational exposure.

APPENDIX C

BBP Training Records

APPENDIX D

Signed Hepatitis B Consent/Declination Form

APPENDIX E

Content of Training Program

APPENDIX F

OSHA's Bloodborne Pathogen Regulation