## BLOODBORNE PATHOGENS EXPOSURE CONTROL PLAN

Facility Name: GRAMBLING STATE UNIVERSITY

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Grambling State University recognizes its obligation to provide all employees with a safe workplace. This includes all employees that risk occupational exposure to human blood or other potentially infectious organisms.

On December 6, 1991, the Occupational Safety and Health Administration (OSHA) promulgated a final rule entitled "Occupational Exposure to Bloodborne Pathogens" (see Appendix A). The purpose of this standard is to eliminate or minimize occupational exposure to the Hepatitis B virus (HBV), and other bloodborne pathogens. In accordance with the OSHA Bloodborne Pathogens Standard, 29 CFR 1910.1030, the following exposure control plan has been developed.

## A. Purpose

The purpose of this exposure control plan is to:

- 1. Eliminate or minimize employee occupational exposure to blood or certain other body fluids;
- 2. Comply with the OSHA Bloodborne Pathogens Standard, 29 CFR 1910.1030

## **B.** Exposure Determination

OSHA requires employers to perform an exposure determination concerning which employees may incur occupational exposure to blood or other potentially infectious materials. The exposure determination is made without regard to the use of personal protective equipment (i.e. employees are considered to be exposed even if they wear personal protective equipment). This exposure determination is required to list all job classifications in which all employees may be expected to incur such occupational exposure, regardless frequency (see Appendix B).

Job classifications in which all university employees in the specific job classification have occupational exposure.

Athletic Trainer Hazardous Waste Specialist Physicians Registered Nurses

Job classifications in which some university employees in the specific job classifications have occupational exposure:

Custodial Personnel

Facility Plumbers/Repairmen/Laborers/Groundsmen

Full/Associate/Assistant/Adjunct Professors

Health/Safety Specialists

Health Services Clinic Manager

**Laboratory Coordinators** 

Police Officers

Research Faculty Associates/Lab Assistants/Specialists/Technicians

Student Workers

**Teaching Assistants** 

There is a broad range of workers potentially covered under the OSHA Bloodbourne Pathogens Standard including custodian who must clean up blood spills, public safety officers who respond to injury incidents and clinicians process blood or internal body fluids. Those who may be called upon to deliver first aid as collateral part of their job duties are covered by the standard. Those who, as good samaritan, voluntarily deliver first aid during work hours are not covered under the Bloodborne Pathogens Standard but are covered by the Worker's Compensation Plan.

In addition, OSHA requires a listing of job classifications in which some employees may have occupational exposure. Since not all the employees in these categories would be expected to incur exposure to blood or other

potentially infectious material, task or procedures that would cause these employees to have occupational exposure are also required to be listed in order to clearly understand which employees in these categories are considered to have occupational exposure. (See Appendix B)

## C. Definitions

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

Bloodborne Pathogen-pathogenic microorganisms that are present in human blood and can cause disease in humans these include, but are not limited to, hepatitis B virus (HBV) and human immunodeficiency virus (HIV.

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

Contaminated Sharps-any contaminated object that is sharp or has the potential to be a sharp 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 an item or surface 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.

HBV-Hepatitis B Virus infection is the major bloodborne occupational hazard to health care workers. Symptoms of the acute form of the disease may range from none to mild flu-like symptoms, or to more severe symptoms including jaundice, extreme fatigue, anorexia, nausea, and abdominal pain. Outcomes of acute forms of the infection may include hospitalization, weeks to months of work loss, and in severe cases, death.

There are several ways in which the virus can be transmitted. The most efficient and common means of occupational transmission is parenteral, or the direct inoculation of infectious material by piercing through the skin barrier. In the workplace this might occur as a result of needle stick or other accidental injury with a sharp, contaminated object which I capable of penetrating the skin. Direct inoculation is also possible when preexisting lesions on hands from other injuries or from dermatitis provide a route of entry for the virus to enter the body.

A second mode of transmission is for infected blood to contact mucous membranes of the eye, nose, or mouth. Therefore, splashes of blood or serum into an individual's unprotected eyes or mouth poses a risk of transmission of infection. Hepatitis B can also be transmitted sexually and perinatally (from infected mother to newborn infant). These modes of transfer indicate that occupational exposure to this pathogen can also have serious implications for the spouses, sexual partner, and families of infected individuals.

HIV-Human Immunodeficiency Virus affects the immune system, leading to a wide range of clinical disorder, including Aids, which usually lead to death of the HIV infected patient. HIV is known to be transmitted through blood, semen, vaginal secretions and breast milk. Documented modes of transmission includes:

- Engage in sexual intercourse with an infected person
- Using contaminated needles
- Having parenteral, mucous membrane or non-intact skin contact with HIV-infected blood, blood components or blood products
- Receiving transplants of HIV-infected organs or tissues
- Though blood transfusions
- Though semen used for artificial insemination
- Pertinatal transmission

Exposure to HIV may occur through the physical contact described above with an infected individual or with specimens from infected individuals, from parenteral exposure (accidents involving a needle, scalpel, or other sharp instrument or object which has been contaminated with blood or body fluids from an HIV-infected individual), or by splashes of infected blood or other body fluids to the mucous membranes of the mouth, nose, or eyes.