

University of Alaska Anchorage	Section EHS/RM
ADMINISTRATIVE SERVICES MANUAL	Program
EHS/RM Programs	Page 1
Title <i>Bloodborne Pathogens</i>	Effective Date 1005 /25/2018

1. Purpose

University of Alaska Anchorage (UAA) employees, student workers, faculty, staff, and outside contractors exposed to bloodborne pathogens (BBP) in the workplace are at risk to bloodborne diseases including Human Immunodeficiency Virus (HIV) / Acquired Immune Deficiency Syndrome (AIDS), Hepatitis B Virus (HBV), Hepatitis C Virus (HCV). This program establishes minimum requirements to protect workers from these health hazards.

2. Objective

UAA, in its continuing effort to provide employees with safe, healthful working conditions, and to comply with the Occupational Safety and Health Act is implementing the following program for bloodborne pathogens to protect people working at the University, by helping employees, student workers, faculty, staff, and outside contractors better understand the associated hazards.

3. Scope

This policy applies to UAA employees, students, faculty, staff, and outside contractors who work in areas where potential exposures to any bloodborne pathogens may result in contracting a bloodborne disease.

4. Definitions

Acquired Immune Deficiency Syndrome (AIDS) - bloodborne and sexually transmitted disease in which the HIV invades the body, can compromise the immune system, and allow other infectious agents to invade the body and cause disease.

Administrative Controls - methods of control that reduce the likelihood of exposure by altering the manner in which a task is performed

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

Bloodborne Pathogens (BBP) - pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, HBV, HCV and HIV/AIDS.

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

Contaminated Laundry - laundry that 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.

University of Alaska Anchorage	Section EHS/RM
ADMINISTRATIVE SERVICES MANUAL	Program
EHS/RM Programs	Page 2
Title <i>Bloodborne Pathogens</i>	Effective Date 1005 /25/2018

Decontamination - the use of physical or chemical means to remove, inactivate, or destroy bloodborne pathogens where they are no longer capable of transmitting infectious particles.

Engineering Controls - controls that isolate or remove the hazards from the workplace and may include puncture-resistant sharps containers, splashguards, mechanical pipetting, and self-sheathing needles.

Exposure Incident - —a specific unprotected eye, mouth, other mucous membrane, nonintact skin, or parenteral contact with blood or other potentially infectious material that results from the performance of personnel duties.

Handwashing Facilities - —a facility providing an adequate supply of running potable water, soap, and single-use towels or air-drying machines.

Hepatitis B Virus (HBV) - one of the several causes of infectious hepatitis, an inflammation of the liver.

Hepatitis C Virus (HCV) - —one of the several causes of infection hepatitis, an inflammation of the liver.

HIV - Human Immunodeficiency Virus; virus which invades the body causing damage to the immune system and is associated with acquired immune deficiency syndrome.

Infectious Waste - —potentially infected blood, blood products, contaminated sharps, pathological wastes, and microbiological wastes

Physician or other Licensed Health Care Professional (PLHCP) - a person whose legally permitted scope of practice allows him or her to independently perform the activities required for Hepatitis B Vaccination, Post-exposure Evaluation, and Follow-up.

Occupational Exposure - reasonably anticipated skin, eye, mucous membrane, or parenteral contact with potentially infectious materials that may result from the performance of personnel's duties

Other Potentially Infectious Materials (OPIM) - body fluids such as semen, vaginal secretions, cerebrospinal, synovial, pleural, pericardial, peritoneal, amniotic, and any bodily fluid that is potentially contaminated with blood, or all bodily fluids in situations where it is difficult or impossible to differentiate between the fluids. Saliva is considered potentially infectious in dental procedures.

Parenteral - piercing mucous membranes or the skin barrier through such events as needle sticks, human bites, cuts, and abrasions.

Personal Protective Equipment (PPE) - —specialized clothing or equipment worn by personnel for protection against health and safety hazards. General work clothes (e.g., uniforms, pants, shirts or blouses) not intended to function as protection against a health and safety hazard are

University of Alaska Anchorage	Section EHS/RM
ADMINISTRATIVE SERVICES MANUAL	Program
EHS/RM Programs	Page 3
Title <i>Bloodborne Pathogens</i>	Effective Date 1005 /25/2018

not considered personal protective equipment.

Regulated Waste - liquid or semi-liquid blood or other potentially infectious materials or contaminated items which would release blood or other potentially infectious materials in a liquid or semi-liquid material if compressed; contaminated sharps; and pathological and microbiological wastes containing blood or other potentially infectious materials.

Sharps - any object that can penetrate the skin including, but not limited to, needles, razor blades, scalpels, and broken capillary tubes.

Source Individual - any individual whose blood or other potentially infectious materials may be a source of occupational exposure to personnel

Universal Precautions - an approach to infection control in which all human blood and certain body fluids are treated as if known to be infectious for HIV, HBV, and other bloodborne pathogens (e.g., face shield, gloves)

5. Authority and Responsibilities

In addition to the roles and responsibilities outlined in the UAA Training Program, the following apply to the Bloodborne Pathogen Program.

EHS/RM

- Assists departments to determine work groups with the potential for exposure to blood or OPIMs
- Approves PLHCP to provide medical evaluations when required per this program
- Conducts annual review of the program with the department safety coordinator
- Assists with training on the BBP Program, when needed

Supervisor

- Assess job tasks and identify the persons in their work group who have occupational exposure to blood or OPIMs
- Ensure those persons identified as having occupational exposure to blood or OPIMs are included in the exposure control plan
- Ensure all persons in their work group who have occupational exposure to blood or OPIMs, including themselves, complete all required bloodborne pathogen training

Department Safety Coordinator

- Assist in the determination of BBP exposure in the department
- Assist in the determination of engineering, administrative and PPE for specific tasks

University of Alaska Anchorage	Section EHS/RM
ADMINISTRATIVE SERVICES MANUAL	Program
EHS/RM Programs	Page 4
Title <i>Bloodborne Pathogens</i>	Effective Date 1005 /25/2018

- Ensure employees with potential BBP exposure receive training

Employees/Student Workers

- Follow the procedures and work practices required to protect them from potentially infectious materials
- Verifies guards are in place and operations prior to using equipment
- Alerts department supervisor when there is an exposure to potentially infected materials
- Employees who are NOT reasonably anticipated to have contact with or exposure to blood or other potentially infected materials are expected to observe "universal precaution" as described in this Program and use discreet judgment when offering voluntary assistance to a victim.

Outside Contractors

- Perform all work in compliance with their company's program, which will be reviewed and approved by the EHS/RM department.
- ~~Outside Contractors Perform all work in compliance with its company's approved BBP Program approved by the EHS/RM department.~~ If the company does not have a program, they must comply with this program

6. Hazards Associated with Exposure to Bloodborne Pathogens

Any time a UAA employee is exposed to blood or ~~OIPM~~OPIM they are at risk of contracting an infectious disease. Bloodborne pathogens are infectious microorganisms in human blood that can cause disease in humans. These pathogens include, but are not limited to, HBV, HCV and HIV/AIDS. Needlesticks and other sharps-related injuries may expose workers to bloodborne pathogens. Workers in many occupations, including first responders, housekeeping personnel in some industries, nurses and other healthcare personnel, all may be at risk for exposure to bloodborne pathogens.

7. Engineering Controls

Engineering controls are design plans or changes to the working environment to prevent or reduce employee exposure to hazards. When a bloodborne pathogen hazard is present in the workplace every effort should be made to install engineering controls to eliminate the hazard and protect UAA workers. Some examples of engineering controls may include the following:

- Disposable Cardiopulmonary Resuscitation (CPR) mouthpieces
- Sharps disposable containers
- Self-sheathing needles

University of Alaska Anchorage	Section EHS/RM
ADMINISTRATIVE SERVICES MANUAL	Program
EHS/RM Programs	Page 5
Title <i>Bloodborne Pathogens</i>	Effective Date 1005 /25/2018

- Sharps with the engineered sharps injury protection and needleless systems
- Appropriate pipetting devices which minimize potential exposure to the mouth, face and hands
- Tongs, tweezers, and other tools

8. Administrative Controls

Administrative controls are safe work practices and procedures designed to reduce the risks associated with moving equipment. Examples of administrative controls include the following:

- Train employees on equipment use and hazards prior to work with the potential for infectious materials exposure.
- Ensure routine inspections of PPE prior to use.

9. Procedures

Exposure Determination

All job classifications and locations UAA employs that may be expected be exposed to blood or other potentially infectious materials, based on the nature of the job or area equipment and activities, regardless of frequency, will be identified and evaluated. Jobs that are at risk will be classified into two categories defined below. This list will be updated as job classifications or work situations change. Exposure determination shall be made without regard to the use of personal protective equipment.

Category I: A list of job classifications in which personnel are exposed to blood or other potentially infectious materials on a regular basis, and in which such exposures are considered normal course of work, fall into Category I (see Appendix A)

Category II: A list of job classifications in which personnel may have an occasional exposure to blood or other potentially infectious materials, and in which such exposures occur only during certain tasks or procedures that are collateral to the normal job duties, fall into Category II (see Appendix B)

Universal Precautions shall be observed to prevent contact with blood or other potentially infectious materials. When differentiation between body fluid types is difficult or impossible, all body fluids shall be considered potentially infectious materials.

The area supervisor is responsible for determining appropriate controls to protect personnel in Category I and II classifications. This includes all engineering and administrative controls, as well as required PPE. If there is risk for exposure in a specific area, the supervisor may consider restricting access to non-trained personnel in that area while certain events are taking place. ~~This.~~

University of Alaska Anchorage	Section EHS/RM
ADMINISTRATIVE SERVICES MANUAL	Program
EHS/RM Programs	Page 6
Title <i>Bloodborne Pathogens</i>	Effective Date 1005 /25/2018

Required Administrative Controls

- Hands shall be washed thoroughly with soap and water as soon as possible after contact with body fluids or other potentially infectious materials, including immediately after removing protective gloves or other personal protective equipment. When hand washing facilities are not possible for instances where there has been occupational exposure, hands may be decontaminated with a hand cleanser or towelette but shall be washed with soap and running water as soon as feasible.
- Contaminated needles and other sharps shall not be sheared, bent, broken, recapped, or re-sheathed by hand.
- Eating, drinking, smoking, and applying cosmetics, hand lotion or lip balm, or handling contact lenses are prohibited in areas where blood and OPIMs are handled or stored.
- Food and drink shall not be stored in refrigerators, freezers, shelves, cabinets, or on countertops or bench tops where blood or other potentially infectious materials are handled or stored. If food products are required for experimentation, they shall be labeled "NOT FOR HUMAN CONSUMPTION".
- 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/suctioning of blood or other potentially infectious materials is prohibited.
- Specimens of blood or other potentially infectious materials shall be placed in a container which prevents leakage during collection, handling, processing, storage, transport, or shipping.
- Health care providers evaluate personnel after an exposure incident or who are responsible for personnel Hepatitis B vaccination shall be supplied a copy of OSHA Standard 29 CFR 1910.1030. A copy of the Standard shall be made available to affected personnel, if requested.
- All equipment and work surfaces contaminated with blood or other potentially infectious materials shall be cleaned and Equipment shall be cleaned and decontaminated before being serviced, repaired, or transported from the work area. Any parts of the equipment that cannot be decontaminated shall be labeled with the biohazard symbol.

Personal Protective Equipment

- Personal protective equipment shall be chosen based on the anticipated exposure to blood or other potentially infectious material. The protective equipment will be selected to

University of Alaska Anchorage	Section EHS/RM
ADMINISTRATIVE SERVICES MANUAL	Program
EHS/RM Programs	Page 7
Title <i>Bloodborne Pathogens</i>	Effective Date 1005 /25/2018

prevent blood or other potentially infectious materials to pass through or reach the personnel's clothing, skin, eyes, mouth, or other mucous membranes under normal conditions.

- Required personal protective equipment will be provided to the employees in appropriate sizes and shall be readily accessible to personnel at no cost.
- Disposable gloves shall not be washed or decontaminated for re-use and shall be replaced, at no cost to personnel, as soon as practical when they become contaminated, torn, punctured, or no longer protect the employee.
- Surgical facemasks in combination with eye protection, such as goggles, glasses with solid side shields, or chin-length face shields, shall be worn whenever splashes, spray, spatter, or droplets of blood or OPIM may be generated.
- When personal protective equipment is removed, it shall be placed in an appropriately designated area or container for storage, washing, decontamination or disposal
- Dirty or used PPE should not be worn into areas that are designed as clean
- PPE utilized for blood or OPIMs includes, but is not limited, to latex, nitrile or neoprene gloves, goggles, face shields, aprons, lab coats, Tyvek suits or equivalent, and CPR masks.

House Keeping Practices

- Work areas shall be maintained in a clean and sanitary condition. An appropriate cleaning schedule shall be determined for rooms or surfaces where blood or OPIM may be present. Schedules shall be as frequent as necessary depending on the area, type of surface to be cleaned, and tasks or procedures being performed in an area.
- All work surfaces contaminated by blood or other OPIM will be decontaminated as soon as feasible, after any spill of blood or other potentially infectious materials.
- Only approved cleaning products shall be used for decontamination of work surfaces contaminated with blood or OPIMs. Approved disinfectants such as Lysol and bleach disinfectant (1:10 dilution) shall be used for decontamination.
- 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 contaminated.
- All containers intended for reuse (i.e., bins, pails, cans and similar receptacles) which have a potential for becoming contaminated with potentially infectious materials shall be inspected, cleaned, and disinfected on a regularly scheduled basis.

University of Alaska Anchorage	Section EHS/RM
ADMINISTRATIVE SERVICES MANUAL	Program
EHS/RM Programs	Page 8
Title <i>Bloodborne Pathogens</i>	Effective Date 1005 /25/2018

- Broken glassware, which may be contaminated, shall not be picked up directly with the hands. Mechanical means, such as brush and dustpan, tongs, or forceps shall be used.
- Reusable sharps that are contaminated with blood or OPIMs shall not be stored or processed in a manner that requires personnel to reach by hand into the containers where these sharps have been placed.
- Specimens of potentially infectious materials shall be placed in a closable, leak-proof container that is labeled with a Biohazard label or otherwise identified as required in this procedure. The container used to store or transport potentially infectious materials shall be leak-proof and puncture-resistant. If transporting biohazard samples between labs or buildings, a secondary leak-proof container shall be used.

Infectious Waste Disposal

- All infectious wastes requiring handling, collecting and disposal shall be disposed of in accordance with all federal, state and local regulations.
- Immediately after use, sharps and other regulated waste shall be discarded and placed in closable, puncture-resistant, and leak-proof appropriately identified containers for disposal. Sharps containers shall be maintained upright throughout use, easily accessible to personnel, located as close as feasible to the immediate work area where sharps are used or can be anticipated to be found, replaced routinely, and shall not be allowed to overfill.
- When moving contaminated sharps or other regulated wastes, the containers shall be appropriately labeled and closed to prevent spillage or protrusion during handling, storage, transport, or shipping. Secondary containers shall be used if leakage is possible. The secondary container shall also be biohazard labeled, sealed and constructed to contain all contents and prevent leakage.
- Contaminated laundry shall be placed in appropriately labeled bags or containers at the location where it was used and shall not be sorted or rinsed in the location of use.
- Whenever contaminated laundry is wet and presents a reasonable likelihood of soak-through ~~of~~ or leakage from the bag or container, it shall be placed and transported in bags or containers that prevent soak-through and/or leakage of fluids to the exterior.
- Contaminated lab coats and clothing shall not be taken home to launder.
- Personnel who have contact with contaminated laundry shall wear protective gloves and other appropriate personal protective equipment. Contaminated laundry shall be handled as little as possible with a minimum of agitation.

University of Alaska Anchorage	Section EHS/RM
ADMINISTRATIVE SERVICES MANUAL	Program
EHS/RM Programs	Page 9
Title <i>Bloodborne Pathogens</i>	Effective Date 1005 /25/2018

Labels and Signage

- Warning labels, including the standard biohazard label, shall be affixed to containers of regulated waste, refrigerators and freezers containing blood or OPIMs; and other containers used to store, transport or ship blood or OPIMs.
- Labels shall include the following legend shown below and contain the word "Biohazard." Labels shall be predominantly florescent orange or orange-red with lettering and symbols in a contrasting color. Some infectious waste labels maybe white with a red symbol.



- Labels/tags shall be an integral part of the container with the infectious materials or shall be affixed as close as feasible to the container by string, wire, adhesive, or other method that prevents their loss or unintentional removal.
- Regulated waste that has been decontaminated does not need to be labeled or color coded. If waste is autoclaved, it shall be double bagged in a dark colored bag and labeled "Safe for Trash Disposal".

Hepatitis B Vaccination

- The Hepatitis B virus (HBV) vaccination shall be offered after initial personnel training and within 10 days of assignment to all persons identified in the exposure determination section of this procedure (Complete form Appendix C) unless the person has previously received the complete HBV vaccination series, antibody testing has revealed that the person is immune, or the vaccine is contraindicated for medical reasons. HBV antibody testing shall also be made available to personnel requesting testing prior to receiving the HBV vaccination.
- The HBV vaccination shall be made available at no cost to the person at a reasonable time and place, and performed by or under the supervision of a PLHCP as selected by EHS/RM.
- A copy of OSHA Standard 29 CFR 1910.1030 shall be provided to the PLHCP where HBV vaccinations are administered.
- Booster dose(s) shall be provided according to standard recommendations for medical practice.

University of Alaska Anchorage	Section EHS/RM
ADMINISTRATIVE SERVICES MANUAL	Program
EHS/RM Programs	Page 10
Title <i>Bloodborne Pathogens</i>	Effective Date 1005 /25/2018

- Personnel refusing the HBV vaccination shall sign the Hepatitis B Vaccine Declination (Complete form Appendix D). This document shall be retained in personnel medical files for (at a minimum) the duration of the person's employment plus 30 years in accordance with OSHA standard 29 CFR 1910.1020.
- Personnel who initially decline the vaccine, but who later wish to have it, may then have the vaccine provided at no cost.
- If the person is not able to finish the series of shots, or the vaccine is not available to complete the series as scheduled, the person should be referred to the PLHCP or vaccine manufacturer for an alternative schedule.
- Supervisors of new personnel who are candidates for the vaccination shall contact EHS/RM upon hiring to initiate the vaccination and training process and obtain, complete and submit the necessary forms.

Post Exposure Follow-Up

All exposure incidents are to be reported, investigated, and documented.

All personnel who incur an exposure incident shall be offered confidential, post exposure medical evaluation and follow-up, including at least the following elements:

- Documentation of the route of exposure and the circumstances under which the exposure incident occurred, including any precautions taken or personal protective equipment utilized during the exposure incident.
- Identification and documentation of the source individual. The blood of the source individual shall be tested as soon as feasible after consent is obtained to determine HBV and HIV infectivity at no cost to the person;
- The PLHCP shall ensure results of testing of the source individual be made available to the exposed person. The exposed person shall be informed about the applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual;
- The exposed personnel shall be offered the option of having his or her blood collected for testing the person's HIV/HBV serological status. The blood sample is preserved for at least 90 days to allow the person to decide if the blood should be tested for HIV serological status. However, if the person decides prior to that time that testing shall not be conducted, then the blood sample can be discarded;
- The exposed person shall be offered post exposure prophylaxis in accordance with the current recommendations of the U.S. Public Health Service;

University of Alaska Anchorage	Section EHS/RM
ADMINISTRATIVE SERVICES MANUAL	Program
EHS/RM Programs	Page 11
Title <i>Bloodborne Pathogens</i>	Effective Date 1005 /25/2018

- The exposed person shall be given appropriate counseling concerning precautions to take during the period after the exposure incident. The person shall also be given information on what potential illnesses to be alert for and to report any related symptoms to appropriate personnel.

Information provided to the evaluating physician shall include:

- A copy of this procedure
- Description of the exposed person's duties as they relate to the exposure incident
- Documentation of the route(s) of exposure and circumstances under which the exposure occurred
- Any other pertinent medical/exposure information which may be beneficial for medical recommendations; including vaccination status
- Results of the source individual's blood testing, if available

The evaluating physician shall provide the person with a copy of a written evaluation within 15 days of the completion of the evaluation. The written evaluation shall include:

- Physician's recommendation as to whether Hepatitis B vaccination is indicated for the person, and if the person has received such vaccination
- Statement that the person has been informed of the results of the medical evaluation and any medical conditions resulting from the exposure which may require further evaluation or treatment
- All other findings or diagnoses shall remain confidential and shall not be included in the written report

If a person refuses to submit to the procedures involved with testing protocol when medically indicated, no adverse action can be taken on that basis alone since the procedures are designed for the benefit of the exposed person. The refusal to consent to testing is to be documented by the evaluating physician.

10. Inspections

All areas where exposure to bloodborne pathogens exists will be inspected on an annual basis by department supervisor with assistance from the EHS/RM group if requested. Supervisors will ensure the following:

- All employees have been properly classified as Category I and II
- Personnel, control plans are in place and being followed

University of Alaska Anchorage	Section EHS/RM
ADMINISTRATIVE SERVICES MANUAL	Program
EHS/RM Programs	Page 12
Title <i>Bloodborne Pathogens</i>	Effective Date 1005 /25/2018

- All employees have proper documented training

11. Training

All personnel in a job classification with reasonably anticipated occupational exposure to blood or OPIMs shall participate in training at the time of initial assignment, and at least annually thereafter.

Personnel shall also participate in training covering lab-specific procedures and whenever:

- Changes such as modification of tasks or procedures occur
- There is an institution of new tasks or procedures affecting a person's occupational exposure
- There are changes to the Bloodborne Pathogens Program

Training shall include the following:

- An accessible copy of OSHA Standard 29 CFR 1910.1030 and an explanation of its contents
- Explanation of the modes of transmission, epidemiology, and symptoms of bloodborne pathogens
- Explanation of the University's exposure control plan and the means by which personnel can obtain a copy of the written plan
- Appropriate methods for recognizing activities that may involve exposure to blood or other potentially infectious materials
- Use and limitations of appropriate engineering controls, work practices, and personal protective equipment
- Types, location, proper use, removal, handling, and decontamination, and disposal of personal protective equipment
- Explanation of the basis for selection of personal protective equipment
- Information on the hepatitis B vaccine, including efficacy, safety, method of administration, benefits of being vaccinated, and that the vaccine and vaccination shall be offered free of charge
- Information on the appropriate actions to take and persons to contact in an emergency involving blood or OPIM
- Explanation of the signs, labels, and/or color codes used to comply with this program,
- An opportunity for interactive questions and answers with the person(s) conducting the training session.

University of Alaska Anchorage	Section EHS/RM
ADMINISTRATIVE SERVICES MANUAL	Program
EHS/RM Programs	Page 13
Title <i>Bloodborne Pathogens</i>	Effective Date 1005 /25/2018

Retraining will be provided when the following occur:

- Change in workplace operations or equipment
- A near loss or exposure incident occurs involving blood or ~~OIPM~~OPI

12. Program Evaluation

The BBP Program shall be evaluated on an annual basis utilizing the protocols set forth by EHS/RM. The evaluation team will consist of a department safety coordinator and a designee from EHS/RM. EHS/RM will define the scope of the evaluation. The final report will be developed by the EHS/RM utilizing the information received during the evaluation. The deficiencies determined in the report will be documented and corrective action plans will be developed.

13. References

OSHA regulations that apply to bloodborne pathogens are included below.

- OSHA Standard 29 CFR 1910.1030
- 29 CFR 1926 Subpart X

14. Revision History

Revision Number	Date Revised	Description of Change	Revised By	Approved By
0	10/25/2018	Initial Issue		VC Shuford
1				
2				

University of Alaska Anchorage	Section EHS/RM
ADMINISTRATIVE SERVICES MANUAL	Program
EHS/RM Programs	Page 14
Title <i>Bloodborne Pathogens</i>	Effective Date 1005 /25/2018

Appendix A – Category I Job Classification/Expected Exposure List

At the University of Alaska Anchorage, the following job classifications are expected to incur occupational exposure to blood or other possibly infectious materials:		
Job Classification	Department/Location	Controls to Protect Workers
Custodian	Facilities and Campus Services	BBP training; offer of Hepatitis B vaccination; appropriate PPE for bodily fluid cleanup

University of Alaska Anchorage	Section EHS/RM
ADMINISTRATIVE SERVICES MANUAL	Program
EHS/RM Programs	Page 15
Title <i>Bloodborne Pathogens</i>	Effective Date 1005 /25/2018

Appendix B – Category II Job Classification/Possible Exposure List

The following Tasks and Procedures at University of Alaska Anchorage may incur occupational exposure to blood or other possibly infectious materials.			
Job Title	Department	Task/Procedure	Controls to Protect Workers
Shuttle Driver	Facilities and Campus Services	Isolation/cleanup of bodily fluids on buses	BBP training; offer of Hepatitis B vaccination; appropriate PPE for bodily fluid cleanup
Grounds Worker	Facilities and Campus Services	Cleanup of homeless camps	BBP training; offer of Hepatitis B vaccination; appropriate PPE for bodily fluid cleanup

University of Alaska Anchorage	Section EHS/RM
ADMINISTRATIVE SERVICES MANUAL	Program
EHS/RM Programs	Page 16
Title <i>Bloodborne Pathogens</i>	Effective Date 1005 /25/2018

Appendix C – Hepatitis B Vaccination/Titer Authorization Form

This form authorizes the below named person to receive a Hepatitis B Vaccination or Titer by a University of Alaska Anchorage selected provider due to their potential occupational exposure to blood or other potentially infectious materials.

Personnel Information

Name

Department

Date of Birth

Phone Number

Signature

Date

Authorizing Supervisor Information

Name

Title

Signature

Date

University of Alaska Anchorage	Section EHS/RM
ADMINISTRATIVE SERVICES MANUAL	Program
EHS/RM Programs	Page 17
Title <i>Bloodborne Pathogens</i>	Effective Date 1005 /25/2018

Appendix D – Hepatitis B Vaccine Declination (Mandatory)

I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring hepatitis B virus (HBV) infection. I have been given the opportunity to be vaccinated with hepatitis B vaccine, at no charge to myself at a reasonable time and place. However, I decline 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.

If in the future I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with the hepatitis B vaccine, I can receive the vaccination at a reasonable time and place and at no charge to me.

☐ I have already been vaccinated for Hepatitis B

☐ I decline the vaccination at this time

Signature

Date

Witness Signature

Date

Hepatitis B Vaccine Declination Form must be submitted to ESH/RM Department