Bloodborne pathogens are disease causing microorganisms present in human blood and certain other body fluids. The two most commonly encountered bloodborne pathogens are hepatitis B virus (HBV) and human immunodeficiency virus (HIV).

Bloodborne diseases are transmitted when pathogens from infectious body fluids enter the bloodstream through breaks in the skin or through mucous membranes. Bloodborne pathogens are not transmitted by casual contact.

Regulatory Guidance

Occupational Safety & Health Administration (OSHA) 29 CFR 1910.1030, Bloodborne Pathogen Standard.

Requirements

The OSHA Bloodborne Pathogen Standard requires the University to establish an Exposure Control Plan that will minimize or eliminate all reasonably anticipated skin, eye, mucous membrane or parenteral (piercing the skin) contact with human blood or other potentially infectious materials (OPIM) in the performance of an employee's duties.

The University of Maine Exposure Control plan is outlined in the University of Maine Bloodborne Pathogens Program. Departments are to ensure that an exposure control plan specific to their department has been developed as outlined in the University of Maine Bloodborne Pathogens Program.

Biohazard warning signs are used to signify the presence of biological hazards and may also indicate precautions to be taken. Biohazard labels or tags are used on equipment or containers that are or may become contaminated with blood or OPIM. Signs and labels must not be used where no hazard exists. Untrained employees should avoid contact with biohazard labeled equipment or containers and should not enter biohazard areas.

Needles and any other "sharps" contaminated with blood or OPIM must be placed in properly labeled, leak-proof, and puncture-resistant containers for disposal. Sharps containers should never be filled more than 2/3 full and they must be closed before disposal.

Following an exposure incident, employees should immediately proceed to their designated workplace injury management facility to receive a confidential medical evaluation including baseline blood tests and post-exposure prophylaxis (e.g. hepatitis B vaccination). Exposure incidents must be reported to the Office of Human Resources Employee Health and Benefits and the Safety and Environmental Management (SEM) within 24 hours using the Supervisor's Workplace Illness/Injury/Incident Report form. The report should include a
description of the route of exposure and the name of the source individual, if available.

Training

Bloodborne pathogen training is required for all employees who are occupationally exposed (i.e. required to provide first aid, cleanup blood spills, wash contaminated laundry or surfaces, or work with samples of human tissue, blood, or body fluids). Training must be provided at the time of initial assignment to tasks where occupational exposure may occur, and annually thereafter. Training must include:

- epidemiology and symptoms of bloodborne diseases
- modes of transmission of bloodborne pathogens
- exposure control plan and the means by which the employee can obtain a copy of the written plan
- appropriate methods for recognizing tasks and other activities that may involve exposure to blood and other potentially infectious materials
- use and limitations of methods that will prevent or reduce exposure including appropriate engineering controls, work practices, and personal protective equipment
- types, proper use, selection, location, removal, handling, decontamination and disposal of personal protective equipment
- hepatitis B vaccine, including information on its efficacy, safety, method of administration, the benefits of being vaccinated, and that the vaccine and vaccination will be offered free of charge
- appropriate actions to take and persons to contact in an emergency involving blood or other potentially infectious materials
- 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
- post-exposure evaluation and follow-up that the employer is required to provide for the employee following an exposure incident
- signs and labels and/or color coding required

Bloodborne pathogen training must be provided annually and must include an opportunity for interactive questions and answers with the person conducting the training session.
Responsibilities

The Safety and Environmental Management Department is responsible for maintaining The University of Maine Exposure Control Plan, conducting exposure determinations, and manifesting of biomedical waste.

The Safety and Environmental Management Department provides bloodborne pathogen Train-the-Trainer training and individualized training for departments with small numbers of exposed employees.

The Department of Human Resources is responsible for maintaining employee medical records including hepatitis B vaccination and exposure records.

Area supervisors are responsible for maintaining employee training records within their department.

Area supervisors are responsible for annually submitting an updated copy of their Department Exposure Control Plan to SEM for incorporation into the University of Maine Exposure Control Plan, and for notifying SEM whenever new employees within their area become potentially exposed to human blood or OPIM.

Employees are responsible for attending required training, proper handling of potentially infectious materials, and following the waste disposal guidelines.

Definitions

**Exposure Incident:** is a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral (piercing the skin) contact with human blood or OPIM as a result of the performance of an employee's assigned duties.

**Occupational Exposure:** is defined as reasonably anticipated skin, eye, mucous membrane or parenteral (piercing the skin) contact with human blood or other potentially infectious materials (OPIM) in the performance of an employee's duties.

**OPIM:** Other Potentially Infectious Materials include the following substances:

- semen, vaginal secretions, amniotic fluid, plural fluid, pericardial fluid, peritoneal fluid, any body fluid that is visibly contaminated with blood, and saliva from dental procedures;
- unfixed human tissue or organs;
- blood, organs, or tissues from research animals experimentally infected with HIV or HBV; and HIV or HBV containing cultures or stocks.

OPIM does **not** include feces, urine, sputum, nasal secretions, sweat, tears or
vomitus unless they contain visible blood.

**Universal Precautions:** refers to a method of infection control in which all human blood and OPIM are considered to be infectious for HIV, HBV, and other bloodborne pathogens regardless of the perceived status of the source individual.

For Additional Information

Contact your Department Safety Coordinator or Safety and Environmental Management at 207/581-4055.

The University of Maine Bloodborne Pathogens Program

BBP Exposure Control Assessment - MF07082

BBP HBV Vaccine Declination Form - MF07083

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