

## Bloodborne Pathogen Exposure Control Program

Contact: Director of Risk Management, 541-956-7061

1. Rogue Community College is committed to the safety of all employees concerning exposure to bloodborne pathogens in the workplace. Rogue Community College is also committed to complying with all applicable federal, state and local health and safety codes and regulations. To ensure that all affected employees are provided with the necessary information concerning the dangers of bloodborne pathogens, the following Bloodborne Pathogen Exposure Control Program has been established. All employees of Rogue Community College will participate and comply with all sections of the Bloodborne Pathogen Exposure Control Program. The written Bloodborne Pathogen Exposure Control Program will be reviewed, updated and maintained by the Rogue Community College Risk Management Department. A printed copy of the program is available at the Risk Management office and online at <https://web.roguecc.edu/risk-management/campus-occupational-safety>.
2. Determining who has Occupational Exposure
  - a. Rogue Community College has determined that the following job positions are considered to have occupational exposure to bloodborne pathogens because of primary or secondary assigned duties. The use of Personal Protective Equipment was not a considering factor when determining occupational exposure. An annual review is completed by the Risk Management Department in coordination with Human Resources to identify any job title that should be added to or removed from the occupational exposure list.
    - i. Campus Security Department Staff
      1. Security and Safety Officer
    - ii. Campus Facilities Staff
      1. All Building and Grounds Maintenance Workers
      2. All Maintenance Custodians
      3. All Maintenance Custodian Leads
      4. All Facilities Operations Assistant - Leads
    - iii. Certain College Nursing Program Clinical Faculty
    - iv. College Allied Health Program Faculty and Assistants
      1. MA/Phlebotomy Faculty and Assistants:
      2. Dental Assisting Faculty:
    - v. Certain College Emergency Services Faculty
    - vi. All College Massage Therapy Faculty
    - vii. All College HPER Faculty – Outdoor Adventure Leadership Program
    - viii. Certain College ROLEA Program Faculty
    - ix. All Athletic Coaches and Trainers
    - x. All students working in a clinical setting that are covered by the colleges workers compensation insurance and that are not being paid by the facility in which they are working **will be** covered under the RCC Bloodborne

Pathogen Exposure Control Program that is administered by the Risk Management Department.

- b. Rogue Community College does not require any college employee to respond to and or provide first aid as part of their job description.
  - c. Good Samaritan
    - i. Good Samaritan acts are not covered under this program. If an employee has an exposure incident while acting as a Good Samaritan and that employee is not expected to render assistance as part of his or her job duties, the Oregon Safe Employment Act does not require Rogue Community College to provide the HBV vaccination series, post-exposure evaluation, follow-up procedures, or any other protections.
  - d. Collateral Duty Clause –
    - i. Employees who are not routinely exposed to blood or OPIM may fall under the collateral duty clause, in which case the hepatitis B vaccination would not need to be offered until an incident involving the presence of blood or OPIM occurs. In the event an employee has an exposure under the collateral duty clause, the employee is required to follow the reporting procedures outlined in this program including but not limited to the following:
      - 1. Reports of incidents must include the names of all involved employees; a description of the circumstances of the incident, including the date and time; and a determination of whether an exposure incident has occurred.
      - 2. Exposure reports must be included on a list of such incidents, readily available to all employees, and provided to Oregon OSHA upon request.
      - 3. All employees who are involved in any situation involving the presence of blood or OPIM, regardless of whether a specific exposure incident occurs, are to be offered the full hepatitis B vaccination series as soon as possible, but no later than 24 hours after the incident. If an exposure incident, as defined in 1910.1030 CFR, occurs, all other post-exposure follow-up procedures according to the standard must be initiated immediately, and Rogue Community College must ensure that the medical provider is familiar with and follows the recommendations for post-exposure follow-up set forth by the Oregon Department of Human Services or the Centers for Disease Control and Prevention.
3. Provide Training
- a. Rogue Community College will ensure all employees with occupational exposure participate in a training program that is:

- i. Provided at no cost to them;
  - ii. Conducted during compensated working hours;
  - iii. Rogue Community College will provide training when any of the following occur:
    - 1. Before assigning tasks where occupational exposure might occur;
    - 2. At least annually and within one year of the previous training.
  - iv. Rogue Community College will ensure the content and vocabulary of all training materials are appropriate to the educational level, literacy, and language of all college employees.
  - v. The Rogue Community College Risk Management Department will ensure the person conducting the required training is qualified and knowledgeable about the subject matter as it relates to the college workplace.
- b. Rogue Community College will ensure the training program contains at least the following elements:
  - i. An accessible copy of Oregon Occupational Safety and Health Division Rules and Regulations related to exposure to bloodborne pathogens and an explanation of the contents.
  - ii. A general explanation of the epidemiology and symptoms of bloodborne diseases.
  - iii. An explanation of how bloodborne pathogens are transmitted.
  - iv. An explanation of the college exposure control plan and how the employee can obtain a copy of the administrative procedure.
  - v. An explanation of how to recognize tasks and other activities that could involve exposure to blood and other potentially infectious materials.
  - vi. An explanation of the use and limitations of methods that will prevent or reduce exposure including:
    - 1. Equipment and safer medical devices
    - 2. Work practices
    - 3. Personal protective equipment
  - vii. Information about personal protective equipment (PPE) including:
    - 1. The types
    - 2. Proper use and limitations
    - 3. Selection
    - 4. Location
    - 5. Putting it on and taking it off
    - 6. Handling
    - 7. Decontamination
    - 8. Disposal
  - viii. Information about the Hepatitis B vaccine, including:
    - 1. Information about its effectiveness
    - 2. Safety
    - 3. Method of administration
    - 4. The benefits of being vaccinated

5. Offered at no cost to the employee for the vaccine and vaccination.
        - ix. Information about what actions to take and persons to contact when exposure to blood or other potentially infectious materials (OPIM) occurs outside of the normal scope of work.
        - x. An explanation of the procedure to follow if an exposure incident occurs including:
          1. The method of reporting the incident;
          2. The medical evaluation and follow-up that will be available.
          3. Information about the post-exposure evaluation and follow-up procedure following an exposure incident.
          4. An explanation of the signs and labeling or color-coding required by OAR Division 2 Subdivision Z
          5. An opportunity for interactive questions and answers with the trainer at the time of the training session.
4. The Rogue Community College Risk Management Department will maintain electronic training records for 3 years from the date of the training.
5. Rogue Community College will include the following information in all training records:
  - a. Dates of the training sessions;
  - b. Contents or a summary of the training sessions;
  - c. Names and qualifications of persons conducting the training;
  - d. Names and job titles of all persons attending the training sessions.
6. Rogue Community College will provide these employee-training records upon request for examination and copying to any of the following:
  - a. Employees
  - b. Employee representatives
7. Control Exposure -The Oregon Occupational Safety and Health Division requires a Bloodborne Pathogen Exposure Control Program when the possibility exists that an employee may be exposed to bloodborne pathogens in the work place. Rogue Community College continuously monitors, evaluates and implements controls to protect employees from bloodborne pathogens. The following control measures will be used by Rogue Community College to address bloodborne pathogen exposure in the workplace.

- a. Engineering Controls – Whenever possible Rogue Community College will implement Engineering Controls to isolate employees from exposure to bloodborne pathogens to include 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.
  - b. Administrative Controls – If Engineering Controls do not sufficiently protect the employee, Rogue Community College will implement Administrative Controls. These type of controls may include policies, procedures and or training.
  - c. Personal Protective Equipment – As a last resort, Rogue Community College will require the use of Personal Protective Equipment for all employees who may have occupational exposure to bloodborne pathogens.
8. Rogue Community College has implemented the following control measures to reduce or eliminate employee exposure to bloodborne pathogens.
- a. Red colored sharps containers have been installed in multiple locations on campus. The containers are maintained by Risk Management Department and are disposed of through a biohazard contract with the Southern Oregon Sanitation and Rogue Disposal.
  - b. Red biohazard disposal containers and bags are utilized by multiple departments across the colleges for the disposal of medical waste and others contaminated materials. The bio hazard containers are managed by the Risk Management Department and are disposed of through a contract with Southern Oregon Sanitation or Rogue Disposal.
  - c. Emergency Eye Wash and Emergency Showers Stations are located across campus and may be activated in the event of a bloodborne exposure incident.
  - d. All employees with occupational exposure to bloodborne pathogens are provided with initial and annual training. Initial training is provided in person by an individual identified by the college Risk Management Department whose background and experience would meet the OSHA standard for qualified and competent. Annual training is provided by the college Risk Management Department and consists of an online training module and the option for a question and answer session with a qualified and competent instructor.
  - e. All employees with occupational exposure have access to blood spill kits, biohazard disposal bags, wash stations and first aid supplies that are maintained by the college Risk Management Department.

- f. RCC makes the hepatitis B vaccination series available to all employees who have occupational exposure. RCC provides post-exposure evaluation and follow-up to all employees who experience an exposure incident. The vaccinations and all medical evaluations and follow-up is provided at no cost to the employee, provided at a reasonable time and place, and performed by or under the supervision of a licensed physician or other licensed health care professional. Vaccinations must be administered according to current recommendations of the U.S. Public Health Service. Employees who decline the vaccination must sign a declination form. Employees who later request the vaccination series will receive it at no cost if they continue to be exposed. The original copy of an employee's hepatitis b vaccination form will be kept in the employee's medical file in the college Human Resources Department. A copy of the form will be maintained in the college Risk Management Department for audit and compliance purposes.

## 9. Standards of Conduct

- a. Employees will never place any portions of their hands or feet inside a trash can in an attempt to compact the trash or to remove any items from inside the trash can.
- b. Employees will be careful when removing trash bags from trashcans. Ensure that the bag does not come in contact with parts of your body.
- c. Employees will not pick up any broken glass with their bare hands; Use a broom and a dust pan or tongs. Place broken glass or other sharp material in a box or other container that will not allow the material to puncture someone else and dispose of.
- d. Employees will never store, consume or bring food or drinks into an area that is or has the potential to be contaminated with bloodborne pathogens.
- e. The bending, shearing, or breaking of contaminated needles and other contaminated sharps is prohibited.
- f. Mouth pipetting/suctioning of blood or other potentially infectious materials is prohibited.
- g. Employees will dispose of all containment materials, including disposal Personal Protective Equipment (PPE), other than sharps in approved biohazard disposal bags and coordinate with Risk Management Department for disposal.
- h. Employees will treat all discarded needles, scalpels, blades, and other sharp instruments whether having been exposed to potentially infectious materials or not, as infectious sharps materials.

- i. Employees will wash hands and forearms with an appropriate disinfectant following any potential or confirmed exposure.
- j. Employees will not reuse disposable PPE.
- k. Employees will make sure to disinfect reusable PPE and store in a clean and dry environment.
- l. Employees will report any broken needles or drug paraphernalia to Risk Management Department

10. Post Exposure

- a. Employees will wash their hands with hot water and antibacterial soap.
- b. If exposure has occurred in the eyes, nose or mouth, flush with water for 15 minutes.
- c. Be careful to remove all contaminated clothing and place in a sealed red biohazard bag to prevent further exposure.
- d. Immediately notify their supervisor of the incident.
- e. The employee will also attempt to carefully retain the exposure source and any biohazardous materials that may have constituted an exposure.
- f. The supervisor will immediately notify the Risk Management Department of the incident.
- g. Employees will report to the Asante Occupational Health in Grants Pass or Medford for medical evaluation and testing.

**Grants Pass:**

**Asante Occupational Health Services**  
 625 SW Ramsey Ave. Ste. A  
 (Behind Three Rivers Hospital)  
 Grants Pass, OR 97527  
 8 am to 5pm - Monday – Friday  
**(541) 956-6250** Fax: (541) 956-6251

**Medford:**

**Asante Occupational Health Services**  
 781 Black Oak Drive, Suite 102  
 Medford, OR 97504  
 8 am to 5 pm – Monday - Friday  
**(541) 789-4236** Fax: (541) 608-5965

11. Medical Evaluation

- a. The Rogue Community College Human Resources Department will immediately make available a confidential post-exposure evaluation and follow-up to all

employees with occupational exposure to blood or OPIM who report an exposure incident.

- b. Rogue Community College will ensure that the post-exposure medical evaluation and follow-up are all of the following:
  - i. Immediately available following an exposure incident
  - ii. Confidential
  - iii. At no cost to the employee
  - iv. At a reasonable time and place
  - v. Administered by or under the supervision of a licensed physician or by another licensed health care professional
  - vi. Provided according to recommendations of the United States Public Health Service current at the time these evaluations and procedures take place.
  
- c. Rogue Community College will ensure that the evaluation and follow-up includes AT LEAST these elements:
  - i. Documentation of the routes of exposure, and the circumstances under which the exposure incident happened.
  - ii. Identification and documentation of the source individual, unless you can establish that identification is infeasible or prohibited by state or local law.
  - iii. Collection and testing of blood to detect the presence of HBV and HIV.
  - iv. Post-exposure preventive treatment, when medically indicated, as recommended by the United States Public Health Service.
  - v. Counseling
  - vi. Evaluation of reported illnesses.
  
- d. Rogue Community College will ensure that all laboratory tests are conducted by a laboratory licensed by the state or Clinical Laboratory Improvement Amendments Act (CLIA). Rogue Community College will arrange to test the source individual's blood for HBV and HIV as soon as feasible after getting their consent.
  
- e. When the source individual is already known to be infected with HBV or HIV, you do not need to test their status.
  - i. If you do not get consent, you must establish that legally required consent cannot be obtained.
  - ii. When the law does not require the source individual's consent, their blood, if available, must be tested and the results documented.
  - iii. Rogue Community College will make sure the results of the source person's blood test are provided to the exposed employee, if possible.
  - iv. Rogue Community College will ensure the exposed employee is informed of applicable laws and regulations regarding disclosure of the identity and infection status of the source person.

- f. Rogue Community College must arrange to have the exposed employee's blood collected and tested as soon as feasible after consent is obtained.
- g. If the employee consents to baseline blood collection, but does not give consent at that time for HIV serologic testing, the sample must be preserved for at least 90 days.
- h. If, within 90 days of the exposure incident, the employee chooses to have the baseline sample tested, it must be done as soon as possible.
- i. Rogue Community College will provide ALL of the following information to the health care professional evaluating an employee after an exposure incident:
  - i. A copy of OAR Division 2 Subdivision Z rule 1910.1030 – Bloodborne Pathogens.
  - ii. A description of the job duties the exposed employee was performing when exposed
  - iii. Documentation of the routes of exposure and circumstances under which exposure occurred
  - iv. Results of the source person's blood testing, if available
  - v. All medical records that Rogue Community College is responsible to maintain, including vaccination status, relevant to the appropriate treatment of the employee.
- j. Rogue Community College will obtain and provide a copy of the health care professional's written opinion on post-exposure evaluation to the employee in compliance with OAR Division 2 Subdivision Z rule 1910.1030 – Bloodborne Pathogens.
  - i. Rogue Community College will obtain and provide to the employee a copy of the evaluating health care professional's written opinion within 15 days of the completion of their evaluation.
    - 1. If the health care professional provides the written opinion directly to the employee, Rogue Community College will not need to do so.
    - 2. If the employee's personal health care professional completes the evaluation, Rogue Community College is not required to obtain the health care professional's written opinion.
  - ii. Rogue Community College will ensure the health care professional's written opinion is limited to the following information:
    - 1. That the employee has been informed of the results of the evaluation;
    - 2. That the employee has been told about any medical conditions resulting from exposure to blood or OPIM which need further evaluation or treatment.
  - iii. Rogue Community College will ensure that all other findings or diagnoses remain confidential and are NOT included in the written report.

## 12. Medical Records

- a. Rogue Community College will establish and maintain medical records, and record all occupational injuries resulting from contaminated needle sticks or cuts from contaminated sharps.
- b. Rogue Community College will establish and maintain an accurate medical record for each employee with occupational exposure.
- c. Rogue Community College will ensure this record includes ALL of the following that apply:
  - i. Name and Social Security number of the employee;
  - ii. A copy of the employee's hepatitis B vaccination status, including the dates of all the hepatitis B vaccinations if provided;
  - iii. Any medical records related to the employee's ability to receive vaccinations;
  - iv. The HBV declination statement;
  - v. A copy of all results of examinations, medical testing, and follow-up procedures related to post-exposure evaluations;
  - vi. Rogue Community Colleges copy of the health care professional's written opinion;
  - vii. A copy of the information provided to the health care professional as required.
- d. Rogue Community College will ensure that employee medical records are:
  - i. Kept confidential
  - ii. Not disclosed or reported to any person, without the employee's written consent, except as required by this section or as may be required by law.
- e. Rogue Community College will follow the requirements for reporting and recording occupational injuries and illnesses including needle stick and sharps injuries to include the type and brand of device involved in injuries resulting from a needle stick or cut with a sharps that is contaminated with another person's blood or other potentially infectious material on the OSHA 300 log or equivalent form.

## 13. Disposal

- a. Employees must discard contaminated sharps immediately, or as soon as possible, in containers that are all of the following:
  - i. Closable
  - ii. Puncture resistant
  - iii. Leak-proof on sides and bottom
  - iv. Appropriately labeled or color-coded
  - v. Easily accessible to personnel

- vi. Located as close as feasible to the immediate area where sharps are used or areas sharps can be reasonably anticipated to be found (for example, laundries)
  - vii. Maintained upright throughout use
  - viii. Replaced routinely and not allowed to overfill.
- b. Employees will ensure when they move containers of contaminated sharps, the containers are:
- i. Closed prior to removal or replacement to prevent spilling or protrusion of contents during handling, storage, transport, or shipping;
  - ii. Placed in a secondary container, if leaking is possible. The second container must be:
    - 1. Closable
    - 2. Constructed to contain all contents and prevent leakage during handling, storage, transport, or shipping
    - 3. Appropriately labeled or color-coded.
  - iii. You must make sure regulated waste other than sharps is placed in containers that are all of the following:
    - 1. Closable
    - 2. Constructed to contain all contents and prevent leakage of fluids during handling, storage, transport, or shipping
    - 3. Closed prior to removal to prevent spillage or protrusion of contents during handling, storage, transport, or shipping
    - 4. Placed in a second container if outside contamination of the primary regulated waste container occurs.
- c. Employees will ensure the second container is appropriately labeled or color-coded.
- d. Rogue Community College will dispose of all regulated waste according to applicable state and county regulations.

#### 14. Personal Protective Equipment

- a. Rogue Community College will provide at no cost to employees, position appropriate personal protective equipment based on a job hazard analysis that may include but is not limited to:
  - i. Gloves
  - ii. Gowns
  - iii. Laboratory coats
  - iv. Face shields or a combination of masks and eye protection
  - v. Mouthpieces
- b. PPE is considered “appropriate” only if it does NOT permit blood or OPIM to pass through to or reach the employee’s work clothes, street clothes, undergarment, skin,

eyes, mouth, or other mucous membranes under normal conditions of use and for the duration of time that the protective equipment will be used.

- c. Rogue Community College will ensure that employees use appropriate PPE. In rare and extraordinary circumstances, employees can briefly and temporarily choose not to use PPE if, in their professional judgment, they believe pose an increased hazard to themselves or co-workers. If the employee makes this judgment, Rogue Community College will investigate and document to determine if changes can be made to prevent future occurrences of the same situation.
- d. Rogue Community College will ensure that appropriate PPE, in sizes to fit all employees, is readily accessible at the worksite or issued to employees.
- e. Rogue Community College will ensure employees remove all PPE before leaving the work area.

## 15. Specific Personal Protective Equipment

- a. Gloves - Rogue Community College will ensure that gloves appropriate to the situation are worn when:
  - i. It can be reasonably anticipated that the employee may have hand contact with blood, OPIM, mucous membranes, or skin that is not intact
  - ii. Handling or touching contaminated items or surfaces
  - iii. Performing vascular access procedures, for example, drawing blood or inserting an IV.
  - iv. Rogue Community College will ensure that employees who are allergic to the gloves that are normally provided have ready access to at least one of the following:
    - 1. Non-latex gloves
    - 2. Glove liners
    - 3. Powderless gloves
    - 4. Other similar alternatives.
  - v. Rogue Community College will replace disposable (single use) gloves such as surgical or examination gloves:
    - 1. As soon as practical when contaminated;
    - 2. As soon as practical if they are torn or punctured;
    - 3. When their ability to function as a barrier is compromised.
  - vi. Rogue Community College will ensure that disposable (single use) gloves are used only once.
  - vii. Employees will discard utility gloves if they are cracked, peeling, torn, punctured, or show other signs of deterioration or when their ability to function as a barrier is compromised. Employees may decontaminate utility gloves for reuse if they can continue to function as a barrier.

- b. Face Protection - Rogue Community College will ensure appropriate masks, eye protection, and face shields are worn. Rogue Community College will ensure either chin-length face shields or a combination of masks and eye protection are used, whenever splashes, spray, spatter, or droplets of blood or OPIM may be generated and eyes, nose, or mouth contamination can be reasonably anticipated. **Note:** Examples of eye protection devices include goggles and glasses with solid side shields.
  - i. Rogue Community College will ensure appropriate protective clothing is worn when splashes to skin or clothes are reasonably anticipated. The type and characteristics will depend upon the sort of work being done and how much exposure is anticipated. Note: Examples of protective clothing include Gowns; Aprons; Lab coats; Clinic jackets; similar outer garments; surgical caps or hoods; Shoe covers or boots.
  - ii. Employees must remove a garment as soon as feasible if blood or OPIM penetrate it.
- c. Rogue Community College will clean, repair, replace, launder, and dispose of personal protective equipment required by this chapter, at no cost to the employee.
- d. Rogue Community College will ensure, when PPE is removed; it is placed in an appropriately designated area or container for storage, washing, decontamination, or disposal.
- e. All employees using PPE will observe the following precautions:
  - i. Wear appropriate face and eye protection when splashes, sprays, splatters, or droplets of blood or OPIM pose a hazard to the eyes, nose, or mouth.
  - ii. Wear appropriate gloves when you:
    - 1. Can reasonably anticipate hand contact with blood or OPIM
    - 2. Handle or touch contaminated items or surfaces.
  - iii. Replace gloves if torn, punctured, contaminated, or otherwise damaged.
  - iv. Decontaminate reusable gloves if they do not show signs of cracking, peeling, tearing, puncturing, or other deterioration.
  - v. Never wash or decontaminate disposable gloves for reuse.
  - vi. Wash hands immediately or as soon as feasible after removal of gloves or other PPE.
  - vii. Remove PPE after it becomes contaminated, and before leaving the work area.
  - viii. Dispose of contaminated PPE in designated containers.
  - ix. Remove blood-or OPIM-contaminated garments immediately or as soon as feasible, in a manner that avoids contact with the contaminated surface.

## 16. Facility Housekeeping and Cleaning

- a. Under the standard, each place of employment must be kept clean and sanitary. Employers must develop and implement a cleaning schedule that includes the methods of decontamination and procedures to be used. The cleaning schedule must explain which areas and surfaces are to be cleaned, the type of contamination present, and how they are to be cleaned. Employers must ensure that the following housekeeping procedures are followed:
  - i. Cleaning and decontaminating the environment, including equipment and work surfaces that have been contaminated with blood or OPIM.
  - ii. Decontaminating work surfaces with an appropriate disinfectant after completion of procedures; immediately, if obviously contaminated; after spills of blood or OPIM; and at the end of work shifts if contaminated since last cleaning.
  - iii. Removing and replacing protective coverings such as plastic wrap and aluminum foil when contaminated.
  - iv. Regularly inspecting and decontaminating reusable receptacles such as bins, pails, and cans that are likely to become contaminated. When contamination is visible, clean and decontaminate receptacles immediately or as soon as feasible.
  - v. Using mechanical means such as tongs, forceps, or a brush and a dustpan to pick up contaminated broken glass.
  - vi. Storing or processing reusable sharps in a way that ensures safe handling.
  - vii. Placing other regulated waste in closable, leak-proof, and labeled or color-coded containers for storage, handling, transporting, or shipping. "Other regulated waste" means liquid or semi-liquid blood or OPIM; items contaminated with blood or OPIM that would release these substances in a liquid or semi-liquid state if compressed; items caked with dried blood or OPIM capable of releasing these materials during handling; contaminated sharps; and pathological and microbiological wastes containing blood or OPIM.
  - viii. Placing discarded contaminated sharps in labeled or color-coded containers that are closable, puncture-resistant, and leak-proof on the sides and bottom.
    - Providing sharps containers that are easily accessible to employees and as close as feasible to the area where sharps are used. Sharps containers must be kept upright during use, replaced routinely, closed when moved, and not overfilled. If cracked or punctured, sharps containers must be replaced.
  - ix. Prohibiting the manual opening, emptying, or cleaning of reusable sharps containers and other employee exposure to percutaneous injury.
  - x. Handling contaminated laundry as little as possible and using appropriate PPE when handling it.
  - xi. Placing wet, contaminated laundry in labeled or color-coded leak-proof containers for transporting and bagging contaminated laundry without sorting or rinsing it in its area of use.

- b. Products registered by the EPA as sterilants (List A), disinfectants that are effective against tuberculosis (List B), and disinfectants that are effective against Hepatitis B and HIV (List D). These lists are available from the EPA, 703-308-0127 and on its website, [www.epa.gov/pesticide-registration/selected-eparegistered-disinfectants](http://www.epa.gov/pesticide-registration/selected-eparegistered-disinfectants). A solution of 5.25 percent sodium hypochlorite (household bleach) diluted 1:10 to 1:100 with water and prepared daily is acceptable for cleanup of contaminated items or surfaces. Quaternary ammonia products are appropriate for general housekeeping procedures that do not involve the cleanup of contaminated items or surfaces. “Contaminated” is defined as the presence or reasonably anticipated presence of blood or OPIM.

## 17. Disposal

- a. Red Colored Sharps Containers – Rogue Community College maintains multiple red colored, hard plastic, sharps containers in various locations across campus. Containers that are placed in public areas are maintained by the Risk Management Department. Containers that are utilized specifically in the college Nursing Program and not generally accessible to the public are maintained by the college Nursing Program. At the end of each academic year, the Risk Management Department will coordinate with the Nursing Program for the disposal of all full sharps containers via a contract with the multiple outside vendors.
- b. Red Biohazard Bags – Rogue Community College maintains red biohazard bags that are available for employee use during a confirmed or potential blood borne pathogen exposure. Biohazard bags are utilized for the disposal of any material that is or has the potential to be contaminated with a bloodborne pathogen, except for any material that may be sharp or has the ability to puncture the bag. If a biohazard bag is utilized during an exposure, the employee will immediately contact Risk Management Department to coordinate proper disposal.

## 18. Definitions

- a. Blood - Human blood, human blood components and products made from human blood. Also included are medications derived from blood, such as immune globulins, albumin.
- b. Bloodborne pathogens - Pathogenic microorganisms that are present in human blood and can cause disease in humans. Examples of these pathogens include:
  - i. Human immunodeficiency virus (HIV);
  - ii. Hepatitis B virus (HBV);
  - iii. Hepatitis C virus, malaria;
  - iv. Syphilis;

- v. Babesiosis;
  - vi. Brucellosis;
  - vii. Leptospirosis;
  - viii. Arboviral infections;
  - ix. Relapsing fever;
  - x. Creutzfeld-Jakob Disease;
  - xi. Human T-lymphotrophic virus Type I;
  - xii. Viral Hemorrhagic Fever.
- c. Clinical laboratory - A workplace where diagnostic or other screening procedures are performed on blood or OPIM.
- d. Contaminated - The presence or the reasonably anticipated presence of blood or OPIM on an item or surface.
- e. Contaminated laundry - Laundry that has been soiled with blood or OPIM or may contain contaminated sharps.
- f. 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.
- g. Decontamination - The use of physical or chemical means to remove, inactivate, or destroy bloodborne pathogens on a surface or item to the point where they are no longer capable of transmitting infectious particles and the surface or item is rendered safe for handling, use, or disposal.
- h. Exposure incident - A specific eye, mouth, other mucous membrane, non-intact skin or parenteral contact with blood or OPIM that results from the performance of an employee's duties. Examples of non-intact skin include skin with dermatitis, hangnails, cuts, abrasions, chafing, or acne.
- i. Handwashing facilities - A facility providing an adequate supply of running potable water, soap and single-use towels or air drying machines.
- j. Hepatitis B - is a liver disease caused by the hepatitis B virus (HBV). Hepatitis B, formerly called "serum hepatitis," is a life-threatening bloodborne pathogen and a major risk to employees in jobs where there is exposure to blood and other potentially infectious material (OPIM). Hepatitis, which means inflammation of the liver, can be caused by drugs, toxins, autoimmune disease, and infectious agents, including viruses.
- k. Hepatitis C - is a liver disease caused by the hepatitis C virus (HCV). It is the most common chronic bloodborne infection in the United States and is primarily

transmitted through large or repeated direct percutaneous exposures to blood. Most people who are chronically infected are not aware of their infection because they are not clinically ill. Infected people can infect others and are at risk for chronic liver disease or other HCV-related chronic diseases. Currently, there is no vaccine against hepatitis C.

- l. Licensed health care professional - A person whose legally permitted scope of practice allows him or her to independently perform the activities required by this rule.
- m. Needleless systems - A device that does not use needles for any of the following:
  - i. The collection of bodily fluids or withdrawal of body fluids after initial venous or arterial access is established;
  - ii. The administration of medication or fluids;
  - iii. Any other procedure involving the potential for occupational exposure to bloodborne pathogens due to percutaneous injuries from contaminated sharps.
- n. Occupational exposure - Reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or OPIM that may result from the performance of an employee's duties.
- o. Other potentially infectious materials (OPIM). Includes all of the following:
  - i. 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.
  - ii. Any unfixed tissue or organ (other than intact skin) from a human (living or dead).
  - iii. 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.
  - iv. Blood and tissues of experimental animals infected with bloodborne pathogens.
- p. Parenteral contact - When mucous membranes or skin is pierced by needle sticks, human bites, cuts, or abrasions.
- q. Personal protective equipment (PPE) - Specialized clothing or equipment worn by an employee for protection against a hazard. General work clothes (for example, uniforms, pants, shirts, or blouses) not intended to function as protection against a hazard are not considered to be PPE.

- r. Production facility - A facility engaged in industrial-scale, large-volume or high-concentration production of HIV or HBV.
- s. Regulated waste - is any of the following:
  - i. Liquid or semiliquid blood or other potentially infectious materials (OPIM);
  - ii. Contaminated items that would release blood or OPIM in a liquid or semiliquid state, if compressed;
  - iii. Items that are caked with dried blood or OPIM and are capable of releasing these materials during handling;
  - iv. Contaminated sharps;
  - v. Pathological and microbiological wastes containing blood or OPIM.
- t. Research laboratory - a laboratory producing or using research-laboratory-scale amounts of HIV or HBV. Research laboratories may produce high concentrations of HIV or HBV but not in the volume found in production facilities.
- u. Safer medical devices - Medical devices that have been engineered to reduce the risk of needle sticks and other contaminated sharps injuries. These include not only sharps with engineered sharps injury protections and needleless systems but also other medical devices designed to reduce the risk of sharps injury exposures to bloodborne pathogens. Examples include blunt suture needles and plastic or Mylar-wrapped glass capillary tubes.
- v. Secondary duty - Any job expectation outside the primary job duties assigned to that position. Sharps with engineered sharps injury protections (SESIP). 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.
- w. Source person - A person, living or dead, whose blood or OPIM may be a source of occupational exposure to the employee. Examples include:
  - i. Hospital and clinic patients;
  - ii. Clients in institutions for the developmentally disabled;
  - iii. Trauma victims;
  - iv. Clients of drug and alcohol treatment facilities;
  - v. Residents of hospices and nursing homes;
  - vi. Human remains;
  - vii. Individuals who donate or sell blood or blood components.
- x. Standard microbiological practices - Standard microbiological practices refer to procedures comparable to those outlined in the current edition of the Center for Disease Control "Biosafety in Microbiological and Biomedical Laboratories."

- y. Sterilize - The use of a physical or chemical procedure to destroy all microbial life including highly resistant bacterial endospores.
- z. Universal precautions - 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.