UNIVERSITY OF NEVADA LAS VEGAS
University of Nevada Las Vegas

Risk Management and Safety (RMS)
Bloodborne Pathogens Exposure Control Plan
October 15, 2010

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Date
10/18/2010

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11/3/10

Date
11/16/10

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11/8/10

Date
11/2/10

Date
10/19/10

Date
11-17-10
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<table>
<thead>
<tr>
<th>Approved By</th>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jeff Chalfant</td>
<td>Stadium Manager</td>
<td>12/20/10</td>
</tr>
<tr>
<td>Kyle Wilson</td>
<td>Director of Athletic Training</td>
<td>11/4/2010</td>
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<td>Claire Tredwell</td>
<td>Director of University Preschool</td>
<td>11/2/2010</td>
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</table>
A. SCOPE AND APPLICATION

The Exposure Control Plan is established in accordance with 29 CFR 1910.1030, “Occupational Exposure to Bloodborne Pathogens,” and describes the procedures to minimize occupational exposure to bloodborne pathogens at all University of Nevada, Las Vegas (UNLV) properties.

B. COMPLIANCE WITH PROGRAM

This procedure applies to all UNLV employees and student workers who have risk of exposure to blood or other potentially infectious material (OPIM) while completing their duties and assignments.

C. DEFINITIONS

(1) Bloodborne Pathogens (BBP) - Pathogenic microorganisms present in human blood that can cause disease in humans.

(2) Exposure Incident – A specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious material that results from the performance of an employee or student worker’s duties.

(3) Licensed Health Care Professional - A person whose legally permitted scope of practice allows him or her to independently perform the activities required for Hepatitis B Vaccination and Post-Exposure Evaluation and Follow-up.

(4) Occupational Exposure - Reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious
material that may result from the performance of an employee or student worker’s duties.

(5) **Other Potentially Infectious Materials (OPIM)**

a. The following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, body fluid that is visibly contaminated with blood, and all body fluids where it is difficult or impossible to differentiate between body fluids.

b. Any unfixed tissue or organ (other than intact skin) from a human (living or dead).

c. HIV containing cell or tissue cultures, organ cultures, and HIV or HVB containing culture medium or other solutions, and blood, organs or other tissues from experimental animals infected with HIV or HVB.

(6) **Universal Precautions** - An approach to infection control whereby all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV, and other bloodborne pathogens.

D. **DUTIES AND RESPONSIBILITIES**

(1) **Risk Management and Safety Department (RMS)**

a. Establish the BBP Exposure Control Plan for UNLV and conduct an annual review.

b. Develop and offer training at no cost to those covered by this plan.

c. Maintain training records, declination statements (see Appendix B), sharps injury logs, and documentation resulting from occupational exposure incidents.

d. Offer employees and student workers who are involved in exposure incidents, an opportunity to receive post exposure evaluations, treatment, and follow-up care.

e. Provide guidance to UNLV staff responding to BBP incidents occurring on campus, when requested.
(2) **Departmental Managers, and Supervisors**

a. Provide personal protective equipment at no cost to those covered by this plan.

b. Ensure that employees and student workers complete required training.

c. Provide appropriate engineering controls, when necessary.

d. Coordinate with RMS to ensure the proper removal and disposal of biohazard waste.

e. Report exposure incidents to RMS.

f. Refer individuals involved in exposure incidents to RMS for post-exposure evaluation, treatment, and follow-up care when appropriate.

(3) **Student Health Center (SHC)**

a. Maintain an inventory of Hepatitis B vaccine.

b. Provide Hepatitis B vaccinations to those who have completed training and have opted to receive the vaccination series.

c. Provide documentation of Hepatitis B vaccine series completion to RMS.

d. Maintain medical records for the duration of employment or school program plus 30 years.

e. Solicit input from non-managerial employees with regard to the selection of effective engineering and work practice controls.

(4) **School of Dental Medicine**

a. Complete all department manager and supervisor responsibilities as shown in D (2) above.

b. Solicit input from non-managerial employees with regard to the selection of effective engineering and work practice controls.

(5) **Employees and Student Workers**

a. Complete required training.
b. Check personal protective equipment for proper condition prior to use.

c. Wear all personal protective equipment properly.

d. Follow Universal Precautions and when applicable, Standard Precautions, and all safe work practices.

f. Report all exposure incidents to your immediate supervisor at the time of occurrence.

E. EXPOSURE DETERMINATION

(1) The listing below shows job classifications in which all employees may have an occupational exposure.
   a. Athletic Trainer
   b. Childcare Worker
   c. Clinical Technologist
   d. Custodian Worker
   e. Custodian Supervisor
   f. Lifeguard
   g. Medical Office Assistant
   h. Medical Technologist
   i. Nurse Practitioner
   j. Physician
   k. Physician Assistant
   l. Plumber
   m. Police Officer
   n. Registered Nurse
   o. Security Officer

(2) The listing below shows a list of departments in which some employees may have occupational exposure.
   a. Athletic Training
   b. Biology
   c. Campus Life Maintenance and Facilities
   d. Campus Recreational Services
   e. Dental Medicine
   f. Kinesiology
   g. Landscape/Grounds
   h. Nursing
   i. Outdoor Adventure
   j. Physical Therapy
   k. Psychology
   l. Student Wellness
A listing of tasks in which occupational exposure occurs for those working in job classifications or departments above may be found in Appendix A and B, respectively.

F. METHODS OF COMPLIANCE

(1) Standard Precautions must be practiced by those covered by this plan whenever they handle blood or OPIM.

(2) Engineering and Work Practice Controls

a. Engineering controls are used to minimize exposure to blood and OPIM. Examples of this type of control include, but are not limited to:

   i. Hand and eye washing facilities.

   ii. Containers to properly discard needles and contaminated sharps.

b. Work practice controls shall be used to further minimize exposure to blood or OPIM. Examples of work practice controls include, but are not limited to:

   i. Washing hands and exposed skin with soap and hot water as soon as possible after working in an area where there is blood or OPIM.

   ii. Using antiseptic hand cleaners when soap and hot water are not available.

   iii. Storing personal items (food, drinks, etc.) in areas where blood and/or OPIM are not present.

   iv. Following procedures to minimize splashing, spraying, spattering and the generation of droplets.

G. PERSONAL PROTECTIVE EQUIPMENT

(1) Personal protective equipment (PPE) that is suitable for each employee shall be provided to protect against potential exposure.

(2) PPE shall be made of material that prevents blood and OPIM from passing through.
**H. HOUSEKEEPING**

(1) Work areas shall be kept clean and in a sanitary condition.

(2) Facilities and equipment, including coverings, shall be cleaned and sanitized as soon as possible after contamination and prior to reuse.

(3) Contaminated sharp objects will not be picked up using your hands.

(4) Universal Precautions shall be used during the handling of all soiled laundry.

**I. COMMUNICATION OF HAZARDS**

(1) Labels and Signs.
   
a. Regulated waste, blood, and OPIM will be appropriately identified.

(2) Training and Training Records.
   
a. Bloodborne Pathogens training will be provided during working hours.
   
b. Training will occur upon initial assignment and annually thereafter.
   
b. Training will also be provided whenever tasks or procedural changes occur that affect exposure to blood or OPIM.

**J. HEPATITIS B VACCINATION**

(1) Information concerning Hepatitis B vaccinations (at no cost to employees) will be made available during employee orientation.

(2) Those who do not desire Hepatitis B vaccinations, or have received them previously, will sign a Declination Statement (see Appendix C).

(3) Those who desire to obtain Hepatitis B vaccinations should:
   
a. Acquire a completed Inter-departmental Requisition (IDR) from their department.
c. Deliver the IDR to the SHC to begin/continue the series of vaccinations.

(4) Employees who initially decline Hepatitis B vaccinations retain the option of receiving the vaccinations at a later date at no cost to them.

K. **POST-EXPOSURE EVALUATION AND FOLLOW-UP**

(1) Employees and student workers who are involved in exposure incidents will be offered post-exposure evaluations and follow-up treatment at no cost.

(2) Employees and student workers will receive the evaluating healthcare professional’s post exposure evaluation within 15 days of the evaluation.

a. RMS will file copies of the evaluation received from health care professionals for the duration of an individual's employment plus 30 years.

(3) Employees and student workers who refuse post exposure evaluation and treatment must sign the “Refusal of Post-Exposure Medical Evaluation” form (See appendix D).

L. **SHARPS INJURY LOG**

(1) The log will contain the required information and maintained by RMS for five years following the year that it was originated.

M. **APPENDICES**

Appendix A – “Potential Exposure - Job Classifications”

Appendix B – “Potential Exposure – Department”

Appendix C – “Hepatitis B Declination Statement Form”

Appendix D – “Refusal of Post-Exposure Medical Evaluation”
## Appendix A
### Potential Exposure – Job Classification

<table>
<thead>
<tr>
<th>Job Classification</th>
<th>Work Tasks</th>
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</thead>
<tbody>
<tr>
<td>Athletic Trainer</td>
<td>Provide assistance to athletes who are injured or become ill, clean and sanitize surfaces, and provide other support, as necessary.</td>
</tr>
<tr>
<td>Childcare Worker</td>
<td>Provide assistance to children who are injured or who experience illnesses. Clean and sanitize areas that have become contaminated by blood or OPIM.</td>
</tr>
<tr>
<td>Clinical Technologist</td>
<td>Collect and process blood or OPIM for testing. Handle tools and other components that may be contaminated with blood or OPIM.</td>
</tr>
<tr>
<td>Custodian Worker</td>
<td>Perform responsibilities associated with cleaning facilities and the removal of blood or OPIM. Perform general site cleanup and removal of trash from facilities and collection containers on campus grounds.</td>
</tr>
<tr>
<td>Custodian Supervisor</td>
<td>Perform the duties of custodians when they are not available.</td>
</tr>
<tr>
<td>Lifeguard</td>
<td>Provide emergency rescue and healthcare assistance to those who are injured or become ill while using the services offered.</td>
</tr>
<tr>
<td>Medical Office Assistant</td>
<td>Provide treatment and medical services to students and staff who are injured or experience illnesses. Work with items that contain blood or OPIM. Provide cleanup support, as needed, to equipment and areas that have become contaminated.</td>
</tr>
<tr>
<td>Medical Technologist</td>
<td>Provide treatment and medical services to students and staff who are injured or experience illnesses. Work with items that contain blood or OPIM. Provide cleanup support, as needed, to equipment and areas that have become contaminated.</td>
</tr>
<tr>
<td>Nurse Practitioner</td>
<td>Provide treatment and medical services to students and staff who are injured or experience illnesses. Work with items that contain blood or OPIM. Provide cleanup support, as needed, to equipment and areas that have become contaminated.</td>
</tr>
<tr>
<td>Physician</td>
<td>Provide treatment and medical services to students and staff who are injured or experience illnesses. Work with items that contain blood or OPIM. Provide cleanup support, as needed, to equipment and areas that have become contaminated.</td>
</tr>
</tbody>
</table>
## Potential Exposure – Job Classification

<table>
<thead>
<tr>
<th>Job Classification</th>
<th>Work Task</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physician Assistant</td>
<td>Provide treatment and medical services to students and staff who are injured or experience illnesses. Work with items that contain blood or OPIM. Provide clean up support, as needed to equipment and areas that have become contaminated.</td>
</tr>
<tr>
<td>Plumber</td>
<td>Perform repairs on bathroom and sink fixtures, components, and sewer lines. Assist in cleaning areas contaminated with blood or OPIM.</td>
</tr>
<tr>
<td>Police Officer</td>
<td>Provide assistance to those who are injured or experience illnesses. Apprehending individuals that subsequently become combative. Seize evidence from those apprehended and at accident/crime scenes that may be contaminated with blood or OPIM.</td>
</tr>
<tr>
<td>Registered Nurse</td>
<td>Provide treatment and medical services to students and staff who are injured or experience illnesses. Work with items that contain blood or OPIM. Provide clean up support, as needed, to equipment and areas that have become contaminated.</td>
</tr>
<tr>
<td>Security Officer</td>
<td>Provide assistance to those who are injured or experience illnesses. Apprehending individuals that subsequently become combative. Seize evidence from those apprehended and at accident/crime scenes that may be contaminated with blood or OPIM.</td>
</tr>
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</table>
## Potential Exposure - Department

<table>
<thead>
<tr>
<th>Departments</th>
<th>Work Tasks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Athletic Training</td>
<td>Assist trainers who are caring for athletes and also trainers who experience injuries.</td>
</tr>
<tr>
<td>Biology</td>
<td>Handle blood and OPIM in classroom settings and laboratories during instructional activities, research experiments and studies.</td>
</tr>
<tr>
<td>Campus Life Maintenance and Facilities</td>
<td>Provide cleanup of blood and OPIM in the Residence Halls, Student Union, and Student Recreational facilities released during injuries and illnesses by students, staff, and patrons of these facilities.</td>
</tr>
<tr>
<td>Campus Recreational Services</td>
<td>Provide cleanup of blood and OPIM on recreational equipment and facilities released during injuries and illnesses by employees and patrons of the facility.</td>
</tr>
<tr>
<td>Dental Medicine</td>
<td>Observe and assist students who are performing exams and other procedures on patients. Assist patients or students who may become ill while in the dental facility.</td>
</tr>
<tr>
<td>Kinesiology</td>
<td>Handle blood and OPIM in classroom settings and laboratories during instructional activities, research experiments and studies.</td>
</tr>
<tr>
<td>Landscape/ Grounds</td>
<td>Removal of trash from containers outside of buildings and response to BBP incidents to perform cleanup operations.</td>
</tr>
<tr>
<td>Nursing</td>
<td>Handle blood and OPIM in classroom settings and laboratories during instructional activities, research experiments and studies.</td>
</tr>
<tr>
<td>Outdoor Adventure</td>
<td>Provide first aid and treatment to those who are injured during outdoor activities.</td>
</tr>
<tr>
<td>Physical Therapy</td>
<td>Oversee students who practice rehabilitation techniques. Respond to student injuries or illnesses. Clean equipment or other surfaces that may be contaminated with blood or OPIM.</td>
</tr>
<tr>
<td>Psychology</td>
<td>Obtain urine samples for analysis at both on/off campus locations.</td>
</tr>
</tbody>
</table>
### Appendix B
### Potential Exposure – Department

<table>
<thead>
<tr>
<th>Departments</th>
<th>Work Tasks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student Wellness</td>
<td>All employees of Student Wellness come in contact with individuals seeking center services and may have direct or indirect exposure to those patrons, and their body fluids, while assisting a student to check in or checkout, in the elevator or common use areas, while assisting a student with insurance or referral needs, while assisting a student with transportation from the center, while working with students that present with emergencies, while assisting the center with large immunization and vaccination clinics, or while being in the vicinity of a client that has had major decompensation of their mental health status.</td>
</tr>
</tbody>
</table>
Appendix C

Hepatitis B Declination Statement Form

DECLINATION STATEMENT

I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring the Hepatitis B Virus infection. I have been given the opportunity to be vaccinated with Hepatitis B vaccine, at no charge to myself. However, I decline the Hepatitis B vaccination at this time. I understand that by declining this vaccination, 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 virus, I can receive the vaccination series at no charge to me.

_________ I have completed the Hepatitis B vaccine on _________________________(date)

_________ I have not completed the Hepatitis B vaccine and decline at this time.

______________________________________________
Name (print)

______________________________________________
Signature

______________________________________________
Department

______________________________________________
UNLV Employee ID Number

______________________________________________
Date

Mail completed form to:
Risk Management and Safety
University of Nevada, Las Vegas
Mailstop 1042
4505 Maryland Parkway
Las Vegas, NV 89154-1042
Appendix D

UNLV
UNIVERSITY OF NEVADA LAS VEGAS

Refusal of Post – Exposure Medical Evaluation

My employer has offered to provide post-exposure medical evaluation and follow-up care for me in order to assure that I have full knowledge of whether I have been exposed to, or contracted an infectious disease from this incident.

However, I, of my own free will and volition, have elected not to have a medical evaluation. If in the future I elect to receive the post-exposure evaluation and any follow-on treatment, these services will be provided to me at no cost. I will contact RMS to receive information about the medical facilities providing this service.

________________________________________
Name (print)

________________________________________
Signature

________________________________________
Department

________________________________________
UNLV Employee ID Number

________________________________________
Date

Mail completed form to:
Risk Management and Safety
University of Nevada, Las Vegas
Mailstop 1042
4505 Maryland Parkway
Las Vegas, NV 89154-1042