# Bloodborne Pathogens Exposure Control Plan

# Magnolia Public Schools

July 2016

## **Table of Contents**

Purpose:
Bloodborne Pathogens Program Coordinator:3
Program Responsibilities:4
Infectious Materials Definition:5
Exposure Determination:
Methods of Compliance:6
Universal Precautions:
Engineering Controls:6
Work Practice Controls:
Hand washing:7
Gloving (and other personal protective equipment):7
Clean-Up of Spills:
Housekeeping:
Labels and Signs:
Information and Training:
Prohibited Practices:
Other Cautions:
Hepatitis B Vaccinations, Post Exposure and Follow-Up:12
Vaccination Program:
Figure 1 - Exposure Determination Worksheets14
Figure 2 - VACCINATION DECLINATION FORM21
Figure 3 - BIOHAZARD WARNING LABEL22
Figure 4 -Post Exposure Investigation and Follow Up Checklist23

## **Purpose:**

The Bloodborne Pathogens Exposure Control Plan has been developed by <CHARTER SCHOOL> (The School) to promote safe work practices for employees in an effort to reduce occupational exposure to hepatitis virus' (HBV, HCV, HIV) and other Bloodborne pathogens as outlined in the California Code of Regulations (CCR) Title 8, Section 5193.

The objectives of this plan are to protect school employees from health hazards associated with bloodborne pathogens, and to provide the appropriate treatment and counseling should an employee be exposed to bloodborne pathogens. The School believes that there are several good, general principles that should be followed by school employees when working with or if exposed to, bloodborne pathogens. These include:

- 1. Being prudent and wise in their work to minimize exposure to bloodborne pathogens.
- 2. Never underestimate the risk of exposure to bloodborne pathogens.
- 3. The District shall work to institute as many engineering and work practice controls as possible to minimize or eliminate employee exposure to bloodborne pathogens.

To ensure that the plan is kept current, it will be reviewed and updated as follows:

- 1. At least annually.
- 2. Whenever new or modified work tasks or procedures are implemented that may affect occupational exposure to employees.
- 3. Whenever an employee is exposed to Bloodborne pathogens.

The plan is available for review by employees at any time. A copy of the plan is located in:

- 1. Human Resources
- 2. Administration

## **Bloodborne Pathogens Program Coordinator:**

Name: Kelly Hourigan, Chief Operations Officer

Phone: (213)628-3634

## Program Responsibilities:

The responsibilities for this program are central to the effective implementation of the Exposure Control Program. All school employees are, in part, responsible for the effective implementation of this program as specifically outlined below:

#### Program Coordinator:

- Working with all levels of employees to develop and administer the policies or practices required to support the effective implementation of this program.
- Collecting and maintaining a suitable reference library on the bloodborne Pathogens regulation and related health and safety information on the subject.
- Following current legal requirements for implementing an effective program.
- Conducting periodic inspections of the site to maintain up-to-date information on the implementation of the program.
- Implementing suitable bloodborne pathogen training programs for employees.
- Maintaining an up-to-date list of employees requiring this training as well as maintaining the appropriate documentation showing the training was completed (i.e.; sign-in sheets, tests, etc.)
- Periodically reviewing the training programs with the School Safety Committee (the Committee), and others to ensure that the program includes the appropriate information and that it is being effectively presented to employees.
- Acting as the School's liaison during any Cal/OSHA or Fed/OSHA inspections concerning this program.

#### Campus Supervisors:

Individual campus supervisors are responsible for working directly with the Program Coordinator to ensure that the ECP is being effectively implemented.

#### Employees:

Are responsible for understanding the ECP and implementing its elements (as necessary) including the following items:

- Understanding what work related tasks they perform which may have occupational exposure to bloodborne pathogens.
- Attending the bloodborne pathogens training sessions as provided.
- Conducting all work practices in accordance with the engineering controls set up and by following established health and safety policies.
- Following good personal hygiene habits.

## **Infectious Materials Definition:**

Infectious materials are defined as any body fluid (except sweat) and broken skin. Specific fluids are: blood, semen, vaginal secretions, breast milk, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid and saliva.

## **Exposure Determination:**

The purpose of the exposure determination is to identify individuals at risk of exposure who shall receive training, protective equipment and vaccination.

The School has determined that all employees in the following job classifications and responsibilities have potential occupational exposure:

- a. School Nurse
- b. Health Clerk
- c. Custodians
- d. Maintenance Workers
- e. Special-Ed Teachers
- f. Aides
- g. Teachers
- h. Office Staff

An exposure determination worksheet (Figure 1) shall be completed for each employee position whose duties may cause exposure to Bloodborne pathogens. The determination shall include the potential for exposure, as well as, actual exposure.

## **Methods of Compliance:**

To effectively eliminate or minimize exposure to bloodborne pathogens, the following outlines the methods of compliance to be taken regarding bloodborne pathogens, including:

- 1. Universal Precautions
- 2. Establishment of appropriate Engineering Controls
- 3. Implementation of appropriate Work Practice Controls
- 4. Use of Personal Protective Equipment
- 5. Implementation of appropriate Housekeeping Procedures

The Program Coordinator (or designee) is responsible for overseeing the methods of compliance implemented and will review them at least annually with Management, and Safety Committee representatives, and if necessary, outside experts as necessary.

#### **Universal Precautions:**

Our site observes the practice of "Universal Precautions" to prevent contact with blood and other potentially infectious materials. Universal precautions include hand washing, gloving (and other personal protective equipment), clean-up and housekeeping techniques used by the School. As a result, all human blood and bodily fluids may be treated as if they are potentially infectious for HBV, HCV, HIV and other bloodborne pathogens.

#### Engineering Controls:

When necessary, the School shall use available engineering controls to eliminate or minimize employee exposure to bloodborne pathogens. The School employs equipment such as sharps disposal containers, self-sheathing needles and, where appropriate, ventilating laboratory hoods. Figure 3 shows the site surveys conducted (at least annually) which identify the following required items:

- Areas where engineering controls are currently employed
- Areas where engineering controls need updating
- Areas where engineering controls could be implemented

Additional engineering controls in use include:

- Hand washing facilities (or antiseptic hand cleansers and towels or antiseptic towels), which are readily accessible to all employees who have the potential for exposure.
- Containers for contaminated reusable sharps having the following characteristics:
  - Puncture-resistant

- Color-coded or labeled with a biohazard warning label
- Leak-proof on the sides and bottom
- Specimen containers which are:
  - Puncture-resistant, when necessary
  - Color-coded or labeled with a biohazard warning label
  - Leak-proof
- Secondary containers which are:
  - Puncture-resistant, when necessary
  - Color-coded or labeled with a biohazard warning label
  - Leak-proof

#### Work Practice Controls:

Work practice controls are those that have been implemented to prevent the spread of infectious diseases. Universal precautions include hand washing, gloving (and other personal protective equipment), clean up and housekeeping techniques.

#### Hand washing:

Because hand washing is the single most important technique for preventing the spread of infectious diseases, the following must be complied with.

• Employees must always wash their hands before eating, before handling clean equipment and utensils, after toileting, or after contact with any bodily secretions or fluids, after removing disposable gloves and after completing custodial tasks.

#### Gloving (and other personal protective equipment):

Gloves and other personal protective equipment (PPE) is the last line of defense that we have against bloodborne pathogens. Because of the serious nature of diseases passed by blood-to-blood contact (e.g., Hepatitis B and AIDS), it is important to use gloves to prevent the possibility of becoming infected.

Gloves and other PPE should be worn at a minimum under the following conditions:

- At all times when contact is anticipated with blood or other bodily fluids.
- When the wearer has an open sore or cut and is handling bodily fluids or blood.
- When rendering first-aid.
- When cleaning up a spill of blood or body fluids (such as vomit, urine, fecal material or saliva).

To protect employees from exposure PPE such as gloves, safety glasses, goggles or pocket masks are available for use. All PPE shall be inspected periodically and replaced as needed to maintain its effectiveness. Reusable PPE such as safety glasses must be cleaned, laundered and decontaminated as needed. Storage of PPE shall be in assigned areas only.

Disposal of gloves, garments and other PPE shall be in properly labeled plastic bags in accordance with the disposal policy set forth under the Maintenance Department.

#### Clean-Up of Spills:

To prevent the spread of infectious disease from the spillage of blood or other bodily fluids, the following safe practices should be followed.

- Always wear gloves and other PPE as necessary to prevent exposure when cleaning-up spills.
- Begin spill clean-up procedures by using the biohazard spill kit which contains disinfectants, PPE and properly labeled disposal containers (plastic bags). Use approved disinfectants as necessary.
- After completing the clean-up procedure, remove gloves and discard them into the same biohazard plastic bag as other contaminated items, tie the bag tightly closed. Notify the Maintenance Department that your area has potentially infectious waste to be properly disposed of.

#### Housekeeping:

One of the best ways to prevent hazards from affecting employees is to eliminate them. It is important that surface areas and equipment be kept clean and sanitary. The following housekeeping practices should be followed to aid in the elimination of potential exposure hazards.

- Always decontaminate any contaminated surfaces immediately with the appropriate disinfectant.
- If equipment or its protective coverings become contaminated, immediately remove and replace them.
- Inspect and decontaminate any bins, pails or other similar receptacles which may become contaminated.
- Make sure broken glassware which may be contaminated is cleaned up using such items as a dust pan, tongs, etc. Do not pick up broken glassware directly with your hands.
- Discard contaminated sharps immediately in containers provided for such. Containers shall be located as close as possible to the work area where the sharps are used, maintained in an upright position and replaced routinely so as to not become overfilled.

- Always close sharps container when it is being moved. If a container is leaking, place it in a secondary container prior to removing it. If sharps containers are reused, never open, empty or clean them manually.
- Whenever employees move containers of pathogen waste from one area to another, the containers must be closed. If containers are leaking, they shall be placed into a secondary container.
- The Maintenance Department is responsible for the collection and handling of the contaminated waste. Written records of any regulated waste disposal offsite shall be kept.

#### Labels and Signs:

To effectively eliminate or minimize exposure to bloodborne pathogens, biohazard warning labels will be used. These labels, which are red in color, shall be used in conjunction with red color-coded (and labeled) containers to warn employees of possible exposures (see Figure 4). The following items shall be properly labeled:

- Containers of biohazard regulated waste and sharps disposal containers.
- Refrigerators/freezers containing blood or other potentially infectious materials.
- Other containers used to store, transport or ship blood or other infectious materials
- Contaminated equipment, PPE or other laundry.

## **Information and Training:**

When attempting to eliminate or minimize employee exposure to bloodborne pathogens, it is important that employees be well informed and educated on the subject. To deal with this need, employees who have a potential for exposure will be provided with a comprehensive training program and furnished with as much information as possible.

At least annually, employees involved in this program shall be retrained to ensure that their knowledge of bloodborne pathogens and their concerns is current. New employees or those who may be assigned a new job task will receive this training as necessary. The Department Supervisor is responsible for ensuring that all employees who have a potential for exposure to blood borne pathogens receives this training. Records of the training shall be maintained by the Program Coordinator (or designee). The training provided shall cover, at a minimum, the following topics:

- The Bloodborne Pathogens regulation
- The epidemiology, symptoms and mode of transmission of bloodborne pathogens and other infectious diseases.
- The location of the written Exposure Control Program and that it is available for employees to review at any time.
- The methods utilized for recognizing work tasks that may involve exposure to blood and other potentially infectious materials.
- The limitations and methods that will prevent or reduce exposure including: engineering controls, work practices, and PPE.
- The visual warnings of biohazards present including signs, labels and color-coded containers.
- Information on Hepatitis B Vaccinations including the effectiveness, safety, method of administration, the benefits of the vaccination, and that there is no cost to the employee for the vaccination.
- Actions to take and persons to contact in an emergency involving blood or other potentially infectious materials, including follow-up reporting if an exposure incident occurs and post-exposure evaluation including medical consultation to be provided.

## **Prohibited Practices:**

- Shearing or breaking of contaminated needles and other contaminated sharps.
- Bending, recapping or removal of contaminated sharps is prohibited.
- Sharps that are contaminated with blood or OPIM shall not be stored in a manner that requires employees to reach by hand into the containers where these sharps have been placed.
- Disposable sharps shall not be reused
- Broken glassware, which may be contaminated, shall not be picked up directly by hand. It shall be cleaned up using mechanical means, such as brush and dustpan, tongs, or forceps.
- The contents of used sharps containers shall not be accessed.
- Sharps containers shall not be opened, emptied, or cleaned manually or in any other manner which would expose an employee to the risk of sharps injury.
- Eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses are prohibited in work areas where there is a likelihood of occupational exposure.
- Food and drink shall not be kept in refrigerators, freezers, shelves, and cabinets or on countertops or bench tops where blood or OPIM are present.

## **Other Cautions:**

- Contaminated clothing and equipment must be removed before entering a food consumption area.
- Splattering or the generation of droplets or aerosols of contaminated material must be avoided. If potential for this exists, face protection shall be required.
- Contaminated reusable equipment must be decontaminated to the extent possible. Employees shall wear appropriate personal protective equipment.
- Personal protective clothing must be worn to prevent body contamination and shall be provided by the district.
- Personal protective equipment must not be taken home by the employee and shall remain at work.
- If splashing occurs onto protective clothing, the clothing shall be inspected to ensure that blood or OPIM is not soaked through the material.

## Hepatitis B Vaccinations, Post Exposure and Follow-Up:

We recognize that even with strict adherence to all of the exposure control practices presented here, exposure incidents may occur. Because of this, the District has implemented a Hepatitis B Vaccination Program, as well as set up procedures for post-exposure evaluation and follow-up should an exposure to bloodborne pathogens occur.

## **Vaccination Program:**

The vaccination program has been implemented for those employees who may have been exposed to bloodborne pathogens during their routine work tasks. There is no cost to employees for the vaccinations. The vaccination program consists of a series of three inoculations over a six month period. As part of their bloodborne pathogens training, employees receive information concerning the vaccination, including its safety and effectiveness.

Vaccinations will be performed under the supervision of a licensed physician or other healthcare professional. A list of the employees taking part in the vaccination program shall be kept by the Human Resources Department. A list of the employees who decline to take part in this program shall be kept, as well as a signed copy of the "Vaccination Declination Form" on file.

#### Post Exposure and Follow-Up:

If an employee is accidentally exposed to bloodborne pathogens during the performance of their work, the following shall be immediately conducted:

- Employees shall receive medical consultation and if necessary, treatment.
- An investigation of the circumstances surrounding the exposure incident shall be conducted and a written reported prepared.

The investigation shall obtain as much information as possible concerning the exposure including the use of a comprehensive post-exposure checklist to ensure that all of the steps in the follow-up process have been completed. After the investigation is completed, a written summary of the incident, its apparent cause(s) and recommendations to avoid similar incidents in the future shall be prepared.

The follow-up shall provide the School, and an exposed employee with the following confidential information:

- Documentation regarding the routes of exposure and circumstances under which the exposure incident occurred.
- Identification, if possible, of the source individual (unless infeasible or prohibited by law).

If possible, the source individual's blood shall be tested to determine HBV or HIV infectivity. In addition, the exposed employee shall have blood collected and tested for HBV and HIV infectivity. The information obtained shall also be provided to the exposed employee and a discussion of the applicable

laws and regulations concerning disclosure of the identity and infectious status of a source individual conducted.

It is important to recognize that much of the information involved in this process must remain confidential, and everything possible will be done to protect the privacy of the employee(s) involved in any exposure incident.

The healthcare professional treating an employee shall be sent all necessary documents describing the exposure incident, any relevant employee medical records and any other pertinent information. The healthcare professional shall provide the Schools Human Resources Department (or designee) with a written opinion evaluating the exposed employee's situation as soon as possible. A copy of this opinion shall be forwarded to the employee. After completion of these procedures, the exposed employee shall meet with the qualified healthcare professional to discuss the employee's medical status. This includes the evaluation of any reported illnesses, as well as any recommended treatment. Other findings and diagnoses will remain confidential and will not be included in the written report.

To continue the emphasis on confidentiality, the written opinion shall contain only the following information:

- Whether Hepatitis B Vaccinations is indicated for the employee.
- Whether the employee has received the Hepatitis B Vaccination.
- Confirmation that the employee has been informed of the results of the evaluation.
- Confirmation that the employee has been told about any medical conditions resulting from the exposure incident which require further evaluation or treatment.

All medical records concerning School employees are kept by the Human Resources Department (or designee). No medical information shall be disclosed without the employee's written consent (except as required by law).

## Figure 1 - Exposure Determination Worksheets

Please complete one form for each job classification which lists duties that may cause an employee to be exposed.

#### School:

Employee Position Classification: Office Staff

#### Locations Where this Position is Assigned:

TASKS & PROCEDURES	EXPOSURE RISK:	<ul> <li>✓ if <u>all</u> employees in this classification are at risk</li> </ul>	
	Indicate if risk is	classification are at risk	
	Routine or Occasional		
FILL IN TASKS AS APPROPRIATE			
<ul> <li>Supervises the development &amp; implementation of specialized health care services</li> </ul>	Routine	$\checkmark$	
<ul> <li>Supervises the administration of medication</li> </ul>	Routine	$\checkmark$	
Provides emergency nursing care	Routine	✓	
<ul> <li>Conducts a program directed toward control of communicable disease</li> </ul>	Routine	$\checkmark$	
Additional Comments Regarding Potential Risks			
Will require personal protective equipment,	training and must use uni	iversal precautions with	
blood and OPIM and bags.			
Supervisor's Signature	Date		
Employee's Signature	Date		
We have discussed the potential risks of exposure pertaining to the above job duties and believe this			
represents the exposure determination to the best of our knowledge.			

#### School:

Employee Position Classification: Custodian/ Maintenance

#### Locations Where this Position is Assigned:

All Facilities

TASKS & PROCEDURES	EXPOSURE RISK: Indicate if risk is Routine or Occasional	<ul> <li>✓ if <u>all</u> employees in this classification are at risk</li> </ul>	
FILL IN TASKS AS APPROPRIATE			
Clean restrooms	Occasional	$\checkmark$	
Empties and cleans trash cans	Occasional	✓	
Additional Comments Regarding Potential Risks			
Will require personal protective equipment, training and must use universal precautions with			
blood and OPIM and bags.			

Supervisor's Signature	Date
Employee's Signature	Date
We have discussed the potential risks of exposure pertaining to the above job duties and believe this represents the exposure determination to the best of our knowledge.	

Please complete one form for each job classification which lists duties that may cause an
employee to be exposed.

#### School:

### Employee Position Classification: Special Education Teachers

#### Locations Where this Position is Assigned:

TASKS & PROCEDURES	EXPOSURE RIS	K: ✓ if <u>all</u> employees in	
	Indicate if risk is <i>Rou</i> Occasional	this classification are at	
FILL IN TASKS AS APPROPRIATE			
<ul> <li>Supervise children during class activities, field trips, playground physical ed.</li> </ul>	Routine	✓	
<ul> <li>Perform specialized health care services, catherization, tracheotomy &amp; ostomy care</li> </ul>	Routine	~	
Additional Comments Regarding Pot	ential Risks		
Blood may be present in non-OPIM body fluids; position description implies that the employee renders first aid. Must receive HBV vaccination as a pre-vaccination (before assuming duties).			
Supervisor's Signature	Date		
Employee's Signature	Date		
We have discussed the potential risks of exposure pertaining to the above job duties and believe this represents the exposure determination to the best of our knowledge.			

#### School:

**Employee Position Classification:** Instructional Assistant – Special Education

#### Locations Where this Position is Assigned:

	TASKS & PROCEDURES	EXPOSURE RISK:	✓ if <u>all</u> employees in
		Indicate if risk is <i>Routine</i> or Occasional	this classification are at risk
FII	L IN TASKS AS APPROPRIATE		
•	May accompany students on field trips	Occasional	$\checkmark$
•	Knowledge of first aid techniques and practices	Occasional	$\checkmark$

#### Additional Comments Regarding Potential Risks

Although stated in job description as a duty, position apparently renders first aid as a collateral duty. Additional risks may be present.

Supervisor's Signature	Date
Employee's Signature	Date

We have discussed the potential risks of exposure pertaining to the above job duties and believe this represents the exposure determination to the best of our knowledge.

#### School:

#### **Employee Position Classification:** Teachers

#### Locations Where this Position is Assigned:

EXPOSURE RISK:	✓ if <u>all</u> employees in
Indicate if risk is <i>Routine</i> or Occasional	this classification are at risk
Occasional	$\checkmark$
Occasional	$\checkmark$
	Indicate if risk is <i>Routine</i> or Occasional Occasional

#### Additional Comments Regarding Potential Risks

Although stated in job description as a duty, position apparently renders first aid as a collateral duty. Additional risks may be present.

Supervisor's Signature	Date	
Employee's Signature	Date	
We have discussed the potential risks of exposure pertaining to the above job duties and believe this		

represents the exposure determination to the best of our knowledge.

#### School:

#### **Employee Position Classification:** *Teaching Assistants*

#### Locations Where this Position is Assigned:

TASKS & PROCEDURES	EXPOSURE RISK:	✓ if <u>all</u> employees in
	Indicate if risk is <i>Routine</i> or Occasional	this classification are at risk
FILL IN TASKS AS APPROPRIATE		
<ul> <li>May accompany students on field trips</li> </ul>	Occasional	$\checkmark$
Knowledge of first aid techniques     and practices	Occasional	$\checkmark$

#### Additional Comments Regarding Potential Risks

Although stated in job description as a duty, position apparently renders first aid as a collateral duty. Additional risks may be present.

Supervisor's Signature	Date	
Employee's Signature	Date	
We have discussed the potential risks of exposure pertaining to the above job duties and believe this		

represents the exposure determination to the best of our knowledge.

#### School:

Employee Position Classification: Administration / Office Staff

#### Locations Where this Position is Assigned:

TASKS & PROCEDURES	EXPOSURE RISK: Indicate if risk is <i>Routine</i> or <i>Occasional</i>	<ul> <li>✓ if <u>all</u> employees in this classification are at risk</li> </ul>
FILL IN TASKS AS APPROPRIATE		
May accompany students on field trips	Occasional	$\checkmark$
Knowledge of first aid techniques and practices	Occasional	×

#### Additional Comments Regarding Potential Risks

Although stated in job description as a duty, position apparently renders first aid as a collateral duty. Additional risks may be present.

Supervisor's Signature	Date	
Employee's Signature	Date	
We have discussed the potential risks of exposure pertaining to the above job duties and believe this		

represents the exposure determination to the best of our knowledge.

## Figure 2 - VACCINATION DECLINATION FORM

Hepatitis B Virus (HBV)

DATE:	
Employee Name:	
School Site:	_ Department:

I understand that due to my occupational exposure to blood or other potentially infectious materials, I may be at risk of acquiring a Hepatitis B virus (HBV) 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 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 Hepatitis B vaccine, I can receive the vaccination series at no charge to me.

Employee Name (please print):	 
Employee Signature	 _ Date:
Employer Representative (please print):	

Representative's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Figure 3 - BIOHAZARD WARNING LABEL

The Biohazard warning label is commonly black in color on a red or orange background as seen below.







Fiaure 4	-Post Ex	posure	Investigation	and Follow up	Checklist

Date of Incident:	Time of Incident:		
Location of Incident:		_	
Potentially Infectious Materials Involved	d:		
Туре:	Source:		
Туре:	Source:		
Circumstances of Incident (work being pe	erformed, etc.)		
Cause(s) of Incident (accident, equipmen	nt malfunction, etc.)		
Personal Protective Equipment Being Us	sed:		
Actions Taken Following Incident (decontamination, clean-up, reporting, etc.)			
Recommendations for Avoiding Repeat of Incident:			
Person Conducting Investigation:	Date:		
(See reverse side for Follow-Up checklist)	F	Page 1 of 2	

To ensure that adequate understanding and information concerning an employee's exposure to bloodborne pathogens is conducted, the following must be completed.

## ACTIVITY CONDUCTED DATE COMPLETED • Employee shall be furnished with documentation regarding exposure incident • Source Individual Identified: Name of source • Source Individual's blood tested and results provided to exposed employee. Consent to obtain has not been given Exposed employee's blood collected and tested • Appointment arranged for employee with a healthcare professional. Professional's Name: • Investigation of Incident Completed Documentation Forwarded to healthcare professional Description of exposed employee's job \_\_\_\_ Description of exposure incident Results of source individual's blood testing Employee's Medical Records

Person Completing Checklist: \_\_\_\_\_