



## POLICY

### **Title:** Bloodborne Pathogens Exposure Control

#### Policy Statement

All “at-risk” employees, students, and non-employee affiliates are required to adhere to guidelines established in the UVM Exposure Control Plan for Bloodborne Pathogens.

#### Reason for the Policy

The purpose of this policy is to maintain a safe place to work and study and to comply with applicable safety regulations. The University’s [Bloodborne Pathogens Exposure Control Plan \(ECP\)](#) exists to bring the University into compliance with the [Occupational Safety and Health Administration \(OSHA\) Bloodborne Pathogens Standard](#).

#### Applicability of the Policy

This policy applies to those University of Vermont employees, students, and non-employee affiliates determined to be at risk for exposure to bloodborne pathogens (BBP) or other potentially infectious materials (OPIM) in the course of work-related duties.

#### Definitions

**At-Risk Employee:** An employee is considered to be at-risk for exposure to bloodborne pathogens if it is reasonably expected that they could come into contact with bloodborne pathogens or other potentially infectious materials in the course of the employee’s normal duties; this may include emergency responders but does not include “good Samaritans.” This may include students and affiliates performing work-related duties on behalf of UVM, but does not include students conducting research on a voluntary basis, visiting scientists involved in research, and students in health science or biomedical science classes.

**Bloodborne Pathogens (BBP):** Pathogenic microorganisms that are present in human blood and can cause disease in humans.

**Contaminated:** The presence or the reasonably anticipated presence of blood or other potentially infectious materials on any item or surface, including laundry.

**Other potentially infectious materials (OPIM):** Human semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pericardial fluid, amniotic fluid, saliva in dental procedures, any body fluid visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids. In addition, any unfixed

tissue or organ (other than intact skin) from a human (living or dead) and any pathogen-contaminated cell or tissue cultures or organ cultures; pathogen-contaminated culture medium or solutions; or blood, organs, or tissues from pathogen-contaminated animals are OPIM.

## Procedures

### **Bloodborne Pathogens Standard**

The Occupational Safety & Health Administration's (OSHA) Bloodborne Pathogens (BBP) standard applies to reasonably anticipated exposures to blood or other potentially infectious materials by University personnel as a result of that person's duties. The University of Vermont complies with the standard by:

- Maintaining an exposure control plan,
- Implementing control measures,
- Communicating the hazards to employees
- Providing a vaccine for Hepatitis B, and
- Providing medical evaluation following a potential exposure.

All of these required elements are detailed in the Exposure Control Plan.

### **Exposure Control Plan**

The University's Exposure Control Plan (ECP) details the responsibilities of at-risk employees and personnel, their supervisors, and employees of the Environmental Health & Safety Department. The ECP provides guidance for supervisors to use when determining whether a person is considered to be at risk for occupational exposure to BBP or OPIM. Supervisors document the "at-risk" status using the [Infectious Materials Risk Designation Form](#) available in the ECP.

### **Control Measures**

The ECP requires the use of Universal Precautions, as defined in the BBP standard, as well as the use of engineering controls and, when necessary, personal protective equipment. Personal protective equipment selection, purchase, and use is described in the ECP as is waste disposal, laundering, and other specific methods to control the risks associated with BBP and OPIM.

### **Communicating the Hazards**

BBP-related hazards are communicated through labeling and training. All containers of contaminated materials must be labeled in accordance with the University's ECP. All at-risk employees are required to receive training on BBP-induced disease symptoms and transmission as well as measures used to control exposures. This training is required at the beginning of the at-risk employee's work at the University and must be refreshed annually. The content and availability of the University's general BBP training is detailed in the ECP. Training regarding the work practices specific to individual workplaces within the University is left to individual departments and supervisors.

### **Hepatitis B Vaccine**

The Hepatitis B vaccine is offered to at-risk employees at no cost to themselves. Payment for these vaccines at the University is the responsibility of the Environmental Health & Safety Department, which contracts with occupational health providers to administer the vaccine. At-risk employees who are students will contact UVM's Student Health Services regarding vaccines.

Each at-risk employee must complete the [Hepatitis B Vaccine Consent/Refusal form](#), available in the ECP, regardless of whether they opt to receive the vaccine or not.

## Post Exposure Medical Evaluation

Any at-risk employee exposed to a BBP or OPIM is entitled to a medical review of the exposure and relative risk. The evaluation is at no cost to the employee. The elements of the evaluation and procedures for initiating the review are included in the ECP. Supervisors of at-risk employees (including students and affiliates as defined above) involved in an exposure incident must complete an [Employer's First Report of Injury form](#).

## Contacts

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| <b>Questions concerning the daily operational interpretation of this policy should be directed to the following (in accordance with the policy elaboration and procedures):</b> |  |
| <b>Title(s)/Department(s):</b>  | <b>Contact Information:</b>  |
| Environmental Health & Safety Department  | (802) 656-7233<br><a href="mailto:safety@uvm.edu">safety@uvm.edu</a> |

## Forms/Flowcharts/Diagrams

- [Infectious Materials Risk Designation Form](#)
- [Hepatitis B Vaccine Consent/Refusal Form](#)
- [Employer's First Report of Injury Form](#)

## Related Documents/Policies

- [University of Vermont Exposure Control Plan for Bloodborne Pathogens](#)
- [CDC Vaccine Information Statement](#)
- [Laboratory Health and Safety Policy](#)

## Regulatory References/Citations

- [OSHA Bloodborne Pathogens Standard](#)

## Training/Education

Training/education related to this policy is as follows:

|                            |  |                      |   |
|----------------------------|--|----------------------|---|
| <b>Training Topic:</b>     | CITI OSHA Bloodborne Pathogens   |                      |   |
| <b>Training Audience:</b>  | UVM at risk employees  | <b>Delivered By:</b> | CITI  |
| <b>Method of Delivery:</b> | Online:<br><a href="https://www.uvm.edu/riskmanagement/citi-online-training">https://www.uvm.edu/riskmanagement/citi-online-training</a> | <b>Frequency:</b>    | Within 30 days of hire and annually thereafter. |

|                            |  |                      |   |
|----------------------------|--|----------------------|---|
| <b>Training Topic:</b>     | OSHA Bloodborne Pathogens specific to Department/Unit (i.e., UVM Rescue, UVM Police, Custodial Services, etc.) when more appropriate than CITI training. |                      |   |
| <b>Training Audience:</b>  | UVM at risk employees  | <b>Delivered By:</b> | Various and must be approved by EHS             |
| <b>Method of Delivery:</b> | Various  | <b>Frequency:</b>    | Within 30 days of hire and annually thereafter. |

## About This Policy

|                              |   |                            |               |
|------------------------------|---|----------------------------|---------------|
| <b>Responsible Official:</b> | Chief Safety and Compliance Officer   | <b>Approval Authority:</b> | President     |
| <b>Policy Number:</b>        | V. 3.1.5  | <b>Effective Date:</b>     | March 7, 2017 |
| <b>Revision History:</b>     | <ul style="list-style-type: none"> <li>• V. 4.1.21.1 originally approved January 25, 2007</li> <li>• V. 4.1.21.2 approved March 18, 2010</li> <li>• V. 4.1.21.3/V. 5.2.3 approved November 12, 2012</li> <li>• V. 3.1.4/V. 5.2.4 approved March 7, 2017. Reaffirmed September 11, 2019 and May 2, 2022</li> <li>• V. 3.1.5 approved December 1, 2022</li> </ul> |                            |               |

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