

Section 2 Bloodborne Pathogens Exposure Control Plan

Table of Contents

2.0 Bloodborne Pathogens Exposure Control Plan.....	3
1Definitions.....	3
2Objectives.....	3
3Employee Exposure Determination.....	5
1Tasks and Procedures.....	6
2.1Responsibility.....	7
2.2Personal Protective Equipment.....	8
2.2.1Crime Lab PPE Responsibility.....	8
2.2.2Laboratory Personal Protective Equipment.....	9
2.3Universal Precautions.....	11
2.4Engineering and Work Practice Controls.....	12
2.4.1Warning Labels.....	12
2.4.2Building Ventilation.....	13
2.4.3Local exhaust systems and fume hoods.....	13
2.4.4Reducing body fluid spatter.....	14
2.4.5Surfaces.....	14
2.4.6Other Work Practice Controls.....	15
2.4.7Crime Scene Work Practice Controls.....	15
2.4.8Engineering and Work Practice Review.....	16
2.5Sharps.....	16

2.5.1 Sharps Engineering Controls.....	16
2.5.2 Disposal of Contaminated Sharps.....	17
2.5.3 Sharps Injury Log.....	17
2.6 Biohazardous Waste Disposal.....	18
2.6.1 Biohazard Waste Bag/Box Disposal.....	19
2.7 Hepatitis B Vaccination.....	19
2.7.1 Method of Administration.....	20
2.7.2 Hepatitis B Vaccination Declination.....	20
2.8 Exposure Procedures.....	20
2.9 Employee Training.....	20
2.10 Records.....	21
2.10.1 Occupational Exposure and Medical Records.....	21
2.10.2 Training Records.....	21
2.10.3 Sharps Injury Log.....	21
2.10.4 Exposure Control Plan Review.....	22

Section 2 Bloodborne Pathogens Exposure Control Plan

2.0 Bloodborne Pathogens Exposure Control Plan

The LAPD – Forensic Science Division, Criminalistics Laboratory Bloodborne Pathogens Exposure Plan is designed to comply with the California Code of Regulations, Title 8, Section 5193, using the Cal/OSHA guidelines to prevent or minimize employee’s occupational exposure to blood and other potentially infectious material (OPIM). The Bloodborne Pathogens Exposure Control Plan is part of the Criminalistics Laboratory Safety Program.

The following documents were used in preparation of this Bloodborne Pathogens Exposure Plan:

- California Code of Regulations, Title 8, Section 5193, “Bloodborne Pathogens”, and appendices
- *Exposure Control Plan for Bloodborne Pathogens*, Education Unit, Cal/OSHA Consultation Service, California Department of Industrial Relations, 2001

1 Definitions

Bloodborne pathogens are pathogenic microorganisms that are present in human blood and cause disease in humans.

Occupational exposure means skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious material (OPIM) that may result from the performance of an employee’s duties.

Parenteral contact means piercing mucous membranes or the skin barrier through such events as needlesticks, human bites, cuts, and abrasions.

Other potentially infectious materials include various contaminated human body fluids, unfixed human tissues or organs (other than skin).

2 Objectives

The objectives of the Bloodborne Pathogens Exposure Plan are:

- To educate laboratory personnel about the health hazards associated with bloodborne pathogens and how to protect against exposure.

- To provide appropriate post-exposure evaluation, documentation and follow up.

Section 2 Bloodborne Pathogens Exposure Control Plan

The exposure control plan contains the following elements:

- Determination of employee exposure
- Post-exposure evaluation and follow-up
- Procedures for evaluating circumstances surrounding exposure incidents.
- Implementation of various methods of exposure controls, including:
 - Universal precautions
 - Engineering and work practice controls
 - Personal protective equipment
 - Housekeeping

Hepatitis B vaccination

- Communication of hazards to employees

Recordkeeping:

3 Employee Exposure Determination

Job Classifications

All employees in the following job classifications in the Criminalistics Laboratory have occupational exposure to bloodborne pathogens:

- Supervising Criminalist
- Criminalist
- Laboratory Technician

Some employees in the following job classifications in the Criminalistics Laboratory have occupational exposure to bloodborne pathogens:

- Chief Forensic Chemist I and II
- Firearms Examiner
- Architectural Drafting Technician
- Systems Analyst/Systems Programmer
- Questioned Documents Examiner
- Student Professional Worker

1 Tasks and Procedures

The job classifications listed above perform tasks and procedures in which occupational exposure occurs. The tasks and procedures are listed below:

- General evidence handling
- Searching crime scenes
- Collecting evidence from crime scenes
- Preparing evidence for packaging (such as moving evidence into drying cabinets)
- Packaging evidence
- Preparing evidence or samples for analytical procedures (such as cutting or swabbing evidence items)
- Opening vials, jars, or containers containing blood or other potentially infectious materials
- Loading and removing samples from instrumentation or equipment
- Transporting evidence
- Collecting and transporting biohazardous waste

Section 2 Bloodborne Pathogens Exposure Control Plan

2.1 Responsibility

2.1.1 Laboratory Safety Manager/Laboratory Safety Officer

- Develops and updates the Bloodborne Pathogens Exposure Control Plan and appropriate policies and practices.
- Oversees compliance with the Bloodborne Pathogens Exposure Control Plan.
- Maintains and updates a list of job classifications that may have occupational exposure to bloodborne pathogens (exposure determination).
- Coordinates hepatitis B vaccinations for all employees who have occupational exposure risk.
- Conducts the Bloodborne Pathogens Exposure Control Plan training program.

2.1.2 Unit Supervisors

- Ensure implementation of the engineering and work practice controls to minimize employee exposure within the individual unit.
- Ensure contaminated needles/sharps are properly handled and disposed of, and packaged/repacked.
- Ensure that specimens of blood or other potentially infectious materials are handled and contained properly.
- Ensure that personal protective equipment is available to and utilized by all employees with occupational exposure risk.
- Ensure that proper housekeeping measures are followed.
- Conduct preliminary employee exposure evaluations.

2.1.3 LAPD – Medical Liaison Section

- Oversees the Occupational Exposure to Bloodborne Pathogens Program for the City of Los Angeles.
- Determines the occupational exposure risk levels for each job classification.
- Administers hepatitis B vaccinations.
- Confirms/determines employee exposure incidents.
- Prescribes and administers post-exposure care.

2.1.4 City of Los Angeles – Occupational Safety and Health – Safety Administrator

- Maintains employee medical and exposure records.

2.1.5 Employees

Each employee with potential occupational exposure to bloodborne pathogens, shall be trained and have access to a copy of the current Bloodborne Pathogens Exposure Control Plan document. Each employee is responsible for following Universal Precautions and using proper procedures when working with materials that pose a bloodborne pathogen hazard.

2.2 Personal Protective Equipment

Personal Protective Equipment (PPE) is specialized clothing or equipment worn or used by an employee for protection against a hazard. Appropriate personal protective equipment will prevent blood or other potentially infectious materials from contacting skin, eyes, mouth, or clothing. Depending on the job task to be performed, PPE worn during work in the laboratory or in the field generally includes gloves, laboratory coats, aprons, safety goggles, safety glasses, face shields, dust/mist masks, protective jumpsuits, sleeve protectors, and shoe covers. Additional PPE, such as respirators, chemical-resistant or cut-resistant gloves, may be required, depending on the results of hazard assessments.

2.2.1 Crime Lab PPE Responsibility

The Crime Lab is responsible for:

- Providing all necessary PPE to employees at no cost

Section 2 Bloodborne Pathogens Exposure Control Plan

- Ensuring the employee uses appropriate PPE
- Ensuring appropriate PPE is available in appropriate sizes
- Ensuring PPE is readily accessible at the worksite or issued to employees
- Cleaning, laundering, and disposing of PPE
- Repairing or replacing PPE as needed to maintain effectiveness

2.2.2 Laboratory Personal Protective Equipment

Gloves

Gloves shall be worn when it can be reasonably anticipated that the hands may have contact with blood or OPIM, mucous membranes, or non-intact skin. Disposable gloves shall be replaced as soon as practical when contaminated or as soon as feasible if they are torn, punctured, or when their ability to function as a barrier is compromised. Disposable gloves shall not be washed or decontaminated for re-use. Use disposable latex gloves or appropriate glove for the task. Use heavy duty cut-resistant or utility gloves in circumstances involving cut or abrasion hazards where blood or OPIM is present. Utility gloves may be decontaminated for re-use if the integrity of the glove is not compromised.

Masks, Eye Protection, and Face Shields

Masks in combination with eye protection devices, such as goggles or glasses with solid side shields, or chin-length face shields, shall be worn whenever splashes, spray, spatter, or droplets of blood or OPIM may be generated and eye, nose, or mouth contamination can be reasonably anticipated.

Safety Glasses

Safety glasses do not form a seal around the eyes; use for minor splash hazards

Safety Goggles

Safety goggles for a seal around the eyes; use for moderate hazards

Face Shield

Face shield shall be combined with goggles for severe splash hazards

Dust/Mist masks

Use for protection with minor splash hazards

Laboratory Coats, Aprons and Other Protective Body Clothing

Appropriate protective clothing such as, but not limited to, gowns, aprons, lab coats, and other similar outer garments shall be worn in situations where occupational exposure may occur. Use for protection against minor and moderate splash hazards, spills and other exposures to hazardous materials.

Sleeve protectors, shoe covers, and boot coats shall be worn in situations where gross contamination can reasonably be anticipated.

Tyvek sleeve protectors

Sleeve protectors are used for extra protection against moderate and severe splash hazards.

Tyvek shoe covers

Shoe covers protect shoes against gross contamination on floors or ground, including crime scenes.

Tyvek jumpsuits

Jumpsuits are for overall protection against gross contamination, including crime scenes. Use with or without hood and shoe covers when necessary.

Respirators

Respirators must be worn whenever a contaminated atmosphere cannot be controlled by other engineering controls. Respirators must be used with appropriate cartridge for the hazard. Reference Section 4, Respiratory Protection Program for more information.

Removal of PPE

If a garment(s) is penetrated by blood or OPIM, the garment(s) shall be removed immediately or as soon as feasible.

Laboratory coats and aprons, field apparel, and all other personal protective equipment shall be removed prior to leaving the work area, and shall not be worn into conference rooms, office areas, lunch rooms or any carpeted area, to prevent the spread of contamination.

After removing personal protective equipment it shall be placed in the appropriately designated area or container for storage, washing, decontamination, or disposal.

Section 2 Bloodborne Pathogens Exposure Control Plan

Laundering PPE

Contaminated laundry shall be bagged or placed into containers where it is used. Bags or containers shall be of a material which prevents wet contaminated laundry from soaking through.

Laboratory coats and other reusable, washable personal protective clothing shall be commercially laundered or laundered at the Criminalistics Laboratory as soon as feasible with soap and bleach or appropriate disinfectant when visible contamination is present. Employees shall wear personal protective equipment if they have contact with contaminated laundry while laundering.

2.3 Universal Precautions

Three most commonly encountered bloodborne pathogens in occupational exposure are human immunodeficiency virus (HIV), hepatitis B virus (HBV), and hepatitis C virus (HCV). Universal Precautions is the concept and practice of treating all human blood and certain human body fluids as if known to be infectious with HIV, HBV, HCV, or other bloodborne pathogens. When differentiation between body fluids is difficult or impossible, all body fluids shall be considered potentially infectious materials.

Universal Precautions shall be practiced to prevent contact with blood or other potentially infectious materials. Laboratory staff shall follow the general precautions to prevent exposure to bloodborne pathogens:

- Wear appropriate personal protective equipment appropriate for the task.
- Wear gloves, masks, laboratory coat, and additional protection when necessary.
- Follow proper personal hygiene procedures.
- Wash hands, immediately after or as soon as feasible after removal of gloves or other PPE.
- Wash hands immediately, with soap and water, after handling blood or other potentially infectious material.
- Do not touch unprotected areas with gloved hands.
- Do not touch doorknobs, phones, handles or other general lab equipment with gloved hands without decontaminating thoroughly after handling.

- Flushing mucous membranes with water immediately if contacted with blood or other infectious materials.
- Properly handle and store contaminated materials.
- Properly handle and store contaminated needles, [sharps](#), and other hazardous items.
- Use clearly labeled containers.
- Use appropriate clean-up procedures.
- Launder or dispose of personal protective equipment when contaminated.
- Follow appropriate housekeeping procedures.
- Work areas must be maintained in a clean and sanitary condition.
- Report all exposure incidents to the supervisor immediately.

2.4 Engineering and Work Practice Controls

Engineering or work practice controls, reduce the likelihood of an exposure to blood or OPIM, by altering the manner in which a task is performed. The following engineering and work practice controls are practiced in the Criminalistics Laboratory and include the following:

2.4.1 Warning Labels



Warning labels (see the two examples shown above) are used to alert employees of the possibility of exposure to bloodborne pathogens. Orange-red biohazard labels, red colored receptacles, or other universal biohazard symbol shall be found in the following locations throughout the laboratory:

- Refrigerators and freezers containing blood or other potentially infectious materials

Section 2 Bloodborne Pathogens Exposure Control Plan

- All biohazard waste receptacles
- Biohazard waste bags
- Biohazard sharps pouches
- Biohazard incinerator boxes
- All evidence envelopes which may contain blood or other potentially infectious materials
- Accessioning or evidence processing rooms
- Contaminated equipment

2.4.2 Building Ventilation

Building ventilation is designed to exchange fresh air. The airflow reduces employee exposure to airborne contaminants and directs airflow to help keep odors and hazardous gases, dusts, and vapors out of hallways and other public areas.

2.4.3 Local exhaust systems and fume hoods

A local exhaust system has a hood that captures contaminants at the source before the fumes escape to the workroom environment.

Biosafety Cabinets

Biosafety cabinets use HEPA filters to protect laboratory personnel and the environment from aerosols or droplets that could spread biohazardous materials. Particulate free air is passed down from the top of the hood and across the work surfaces, and is captured before entering the analyst breathing zone. Biosafety cabinets provide biological protection for both the user and the specimen.

The air in most biosafety cabinets is re-filtered before being exhausted back into the laboratory. For this reason, most biosafety cabinets cannot be safely used with hazardous gases and vapors. The type of venting on biosafety cabinets should be reviewed prior to working with hazardous substances.

Chemical Fume Hoods

Chemical fume hoods contain hazardous dusts, gases, vapors, and fumes that are generated and remove them via the building ventilation system. When used properly, hoods are extremely effective at protecting lab personnel and the work environment. Chemical fume hoods should not be used to protect the worker or environment against biohazardous materials.

“Snorkels” or “Elephant Trunks”

These exhaust systems are available and intended for small work areas or machines.

2.4.4 Reducing body fluid spatter

A physical barrier should be used, especially when opening Vacutainer® tubes or other potential spatter activities. Procedures shall be performed in a manner that minimizes splashing, spraying, spattering, and generation of droplets of blood or other potentially infectious materials.

Containers of whole blood or other infectious liquids shall be sealed to prevent spillage prior to placing in biohazardous waste storage containers.

2.4.5 Surfaces

Contaminated work surfaces shall be cleaned and decontaminated with dilute bleach or appropriate disinfectant immediately or as soon as feasible after:

- Surfaces become overtly contaminated
- A spill of blood or OPIM occurs
- Procedures are completed

Protective surface coverings shall be removed and replaced as soon as feasible when they become overtly contaminated and at the end of procedures.

When a protective work bench covering (such a butcher paper or plastic-backed paper) is used to separate an item of biologically stained evidence from a workbench, the paper shall be placed in a biohazard disposal receptacle immediately after the examination. Protective bench coverings used for blotter shall be placed in a biohazard receptacle immediately after it has become soiled.

Section 2 Bloodborne Pathogens Exposure Control Plan

2.4.6 Other Work Practice Controls

Equipment and reusable tools that come into contact with blood or other potentially infectious materials shall be decontaminated immediately or as soon as feasible after use.

Broken blood vials or contaminated glassware shall not be picked up directly with the hands. Mechanical devices like forceps, tongs, tweezers, or brush and dust pan shall be used.

Eating, smoking, drinking, applying cosmetics or lip balm, and handling contact lenses are all prohibited in work areas where exposure to blood or infectious materials occur.

Food and/or drink shall not be kept in refrigerators, freezers, shelves, cabinets, drawers, countertops where blood or other potentially infectious materials are present.

Mouth pipetting of any substance in the laboratory is forbidden.

All spills of blood or potentially infectious materials shall be decontaminated with dilute bleach solution prior to clean-up. All clean-up materials shall be placed into biohazard waste bags.

Hands shall be washed with soap and water immediately after removing gloves or other personal protective equipment.

2.4.7 Crime Scene Work Practice Controls

All employees working at crime scenes and other locations where exposure to blood or other potentially infectious materials is possible shall follow all the feasible engineering and work practice controls. When reporting to crime scenes, the following items must be stocked and available prior to departure to the scene:

- Antiseptic hand cleaner and paper towels (Hands shall be washed with soap and water as soon as feasible)
- Appropriate personal protective equipment
- Biohazard waste bags and cardboard biohazard sharps disposal containers
- Bottle of dilute bleach solution or appropriate disinfection

Upon returning from the crime scene, employees shall immediately dispose of any biohazardous waste collected at the scene into biohazardous waste storage bins.

2.4.8 Engineering and Work Practice Review

The engineering and work practice controls practiced in the Criminalistics Laboratory are reviewed and maintained at least yearly for effectiveness, unless a more frequent schedule is required, and is described in the Unit Manual which uses the engineering or work practice control.

2.5 Sharps

A sharp is any object used or encountered that can penetrate the skin or any part of the body resulting in an exposure incident. Sharps include, but are not limited to, needle devices, scalpels, and broken glass. A sharps injury is any injury caused by a sharp which is potentially contaminated with bloodborne pathogens, including cuts, abrasions, or needlesticks.

2.5.1 Sharps Engineering Controls

While working with blood or OPIMs in the Criminalistics Laboratory, if the use of a sharp implement is necessary, only single-use, retractable safety scalpels shall be used, or equivalent sharp with engineered sharp injury protection as described by 8 CCR 5193(b).

Engineering Controls for sharps:

- Shearing, bending, or breaking of contaminated needles and other contaminated sharps is prohibited.
- Sharps that are contaminated with blood or OPIM shall not be stored or processed 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.
- Sharps containers shall not be opened, emptied, or cleaned manually or in any other manner which would expose employees to the risk of sharps injury.

Immediately or as soon as possible after use, contaminated sharps will be placed in appropriate containers.

Section 2 Bloodborne Pathogens Exposure Control Plan

When needles are encountered, recapping shall only be done when necessary, and shall be performed using a mechanical device or a one-handed technique.

One Handed Needle Recapping Technique

The one-handed technique prevents accidental needle sticks if recapping is necessary.

- Place the cap on a flat surface like the table or counter
- Holding the syringe with the needle attached in one hand, slip the needle into the cap without using the other hand

2.5.2 Disposal of Contaminated Sharps

Contaminated or infectious sharps shall be placed into benchtop containers specifically designed and labeled for biohazard sharp object disposal, biohazard sharp disposal pouch, or biohazard waste box. Sharps containers shall be rigid, puncture resistant, leakproof on the sides and bottom, portable, and labeled appropriately with biohazard labels.

Sharps containers shall be located as close as feasible to the immediate work area where sharps are used.

Sharps containers must remain upright during use, replaced as necessary to avoid overfilling, and when ready for disposal they must be sealed prior to removal.

2.5.3 Sharps Injury Log

If any sharps injury occurs, the Sharps Injury Log shall be completed within 14 working days of injury, as required by 8 CCR 5193.

The Sharps Injury Log shall include the following information as required by 8 CCR 5193:

- Date and time of exposure incident
- Type and brand of sharp involved
- Description of the sharps exposure incident shall include:
 - Job classification of exposed employee
 - Work area where exposure occurred

- Procedure being used at the time of exposure
- How the incident occurred
- Body part involved in the exposure
- If the engineered sharps injury protection (ESIP) was activated
- If there were no ESIP, where a mechanism could have prevented the incident
- Whether any other type of control could have prevented the injury

Sharps Injury Log records shall be submitted to the Criminalistics Laboratory Administrative Office, and kept for 5 years after the date of the exposure incident.

2.6 Biohazardous Waste Disposal

Biohazardous waste is any waste containing infectious materials or potentially infectious substances such as blood. Sharp wastes such as needles, blades, glass pipettes, and other wastes that can cause injury during handling are of special concern, and are addressed in Section 2.5.2.

- Waste materials, including disposable labware, gloves, and lab bench paper, which may be contaminated with blood or other potentially infectious materials, shall be placed in red bags labeled for biohazardous waste or biohazard waste boxes lined with a red waste bag
- Biohazard waste bags or containers shall be located throughout the Criminalistics Laboratory, and in all areas where biohazardous waste may be generated
- Biohazard waste bags shall only be used with appropriate frames with lids to prevent spillage or protrusion of contents
- Biohazardous waste bags and boxes are disposed of on a regular basis. Supervisors are responsible for ensuring biohazardous waste containers are emptied as required

Section 2 Bloodborne Pathogens Exposure Control Plan

- All receptacles intended for reuse, for example biohazard waste bag frames, and sharps disposal pouch frames, shall be inspected and decontaminated regularly, and as soon as feasible if visible contamination occurs

2.6.1 Biohazard Waste Bag/Box Disposal

When disposing of biohazard waste bags and boxes, employees shall wear appropriate personal protective equipment, including laboratory coat, gloves, and mist mask with face shield.

When ready for disposal, biohazard waste bags shall be knotted and placed into a new biohazard bag. The second bag shall also be knotted. If a biohazard waste bag needs to be transported for disposal, to protect against contamination if the bag is punctured, the bag shall be transported in a sturdy bottom box or cart shall be used.

Biohazard waste boxes shall be securely sealed prior to transporting.

2.7 Hepatitis B Vaccination

All Criminalistics Laboratory employees who are in a job classification having occupational risk of exposure to hepatitis B are entitled to have hepatitis B vaccinations provided by the City of Los Angeles at no cost to the employee. Vaccinations shall be made available after the employee has received the required training, and within 10 working days of initial assignment. More than 90% of those vaccinated will develop immunity to the hepatitis B virus. The hepatitis B vaccine cannot cause a hepatitis B infection. The hepatitis B vaccine can prevent hepatitis B, and the serious consequences of hepatitis B infection, including liver cancer and cirrhosis.

Employees who decide to receive the hepatitis B vaccine through the City of Los Angeles shall complete the *Hepatitis B Informed Consent Form* after reviewing the CDC Vaccine Information Statement (VIS) and the OSHA hepatitis B Vaccination fact sheet. Hepatitis B vaccinations are available to employees at no cost, can be administered while on duty, and given by the City of Los Angeles Personnel Department, Medical Services Division. Medical Services Division can be contacted using the following information:

Medical Services Division

520 E. Temple Street, Los Angeles (213) 473-6960

Employees who may be exposed to bloodborne pathogens receive yearly bloodborne pathogens training including information on the hepatitis B virus.

2.7.1 Method of Administration

ROUTINE IMMUNIZATION: In order to have full protection from the vaccine, three (3) doses of the vaccine according to a specific schedule are administered to get the best effect from the series. The second dose will be given one (1) month after the first dose, and the third dose between five (5) to ten (10) months after the first dose, i.e., 0, 1 and 6 to 12 months.

POST-EXPOSURE IMMUNIZATION: four (4) doses of the vaccine must be received. Three doses are given one month apart and the fourth dose is given eleven (11) months after the first dose, i.e., 0, 1, 2 and 12 months.

2.7.2 Hepatitis B Vaccination Declination

Employees have the right to refuse the hepatitis B vaccine and any post-exposure evaluation and follow-up. If after the appropriate hepatitis B vaccination training, the employee refuses the vaccination, the employee shall complete the *Hepatitis Vaccine Informed Refusal Form*.

2.8 Exposure Procedures

Refer to *Work Instruction SAF – 002 Bloodborne Pathogen Exposure Procedure* for instructions if an employee has a possible bloodborne pathogen exposure.

2.9 Employee Training

All Criminalistics Laboratory employees who have the potential to be exposed to bloodborne pathogens in the course of their work, shall receive Bloodborne Pathogens Training prior to starting work in the laboratory, and annual retraining thereafter.

Topics covered in the training include, but are not limited to the following:

- The Cal-OSHA Bloodborne Pathogens Standard (8 CCR 5193).
- Mode of transmission and symptoms of bloodborne diseases.
- The Criminalistics Laboratory Bloodborne Pathogen Exposure Control Program, and where the program can be accessed.
- Methods for recognizing tasks and other activities that may involve exposure to blood and other potentially infectious materials.

Section 2 Bloodborne Pathogens Exposure Control Plan

- Methods that will prevent or reduce exposure such as, engineering controls, work practice controls, and personal protective equipment.
- Selection and use of personal protective equipment including: types available, proper use, removal, handling, decontamination, and disposal.
- Visual warnings of biohazard risk.
- Information on the hepatitis B vaccine including: methods of administration, efficacy of the vaccine, benefits of the vaccination, and the City of Los Angeles free vaccination program for employees with risk of exposure.
- Exposure protocols and procedures, both emergency and non-emergency response, and incident reporting.
- Information on the post-exposure evaluation and follow-up, including the medical consultation.

2.10 Records

2.10.1 Occupational Exposure and Medical Records

All employee records relating to employee exposure to bloodborne pathogens, hepatitis B vaccinations, results of examinations, and medical testing, are maintained by the City of Los Angeles Occupational Health and Safety Division, Medical Liaison Section in compliance with Title 8 California Code of Regulations 5193.

2.10.2 Training Records

The Safety Manual, Bloodborne Pathogens Exposure Control Plan, and all training documents are available for examination by employees. Bloodborne pathogen training records are maintained in the Quality Assurance Unit.

2.10.3 Sharps Injury Log

The Sharps Injury Log records are maintained in the Administrative Office of the Criminalistics Laboratory for at least five years from the date of the incident.

Sharps Injury Log records are reviewed annually during the review of the Bloodborne Pathogens Exposure Control Plan.

2.10.4 Exposure Control Plan Review

The Criminalistics Laboratory Bloodborne Pathogens Exposure Control Plan is reviewed and updated annually. The review includes the following elements:

- Any new or modified tasks or procedures which affect occupational exposure.
- Any changes in technology that eliminate or reduce exposure to blood.
- Consideration and implementation of appropriate commercially available sharps with injury protection.
- Inclusion of any new or revised employee positions with occupational exposure.
- A review and evaluation of the exposure incidents which occurred since the previous update (including the Sharps Injury Log).
- A review and response to information indicating that the Exposure Control Plan is deficient in any area.

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