

## Bloodborne Pathogens Program

Purpose and Scope	2
Responsibilities	2
Determination of Exposure	3
Vaccines	3
HBV Pre-Exposure Vaccine	4
HBV Post-Exposure Vaccine	4
Controlling Exposure	4
Exposure Incident Procedure	6
Training	7
Program Evaluation	7
Recordkeeping	7
Forms and Attachments	8

### Attachment(s):

- Bloodborne Pathogen Annual Program Evaluation
- Bloodborne Pathogen Exposure Determination Form
- Bloodborne Pathogens Equipment List
- Exposed Employee Medical Release Form
- HBV Vaccination Declination
- Sample Letter to Health Care Provider
- Source Individual Medical Release/Refusal Form

## Purpose and Scope

- Purpose** The purpose of this policy is to establish a program and procedures for employee protection from bloodborne pathogens at Linde.
- Note:** This program supports compliance with the Occupational Safety and Health Administration (OSHA) 29 CFR 1910.1030 Bloodborne Pathogens regulations.
- Scope** This plan applies to all Linde employees in the United States where it is reasonably anticipated that employees may come in contact with blood or other potentially infectious materials that may result from the performance of assigned duties. This includes:
- drivers who pick up compressed gas cylinders at Medical Care Industry customers
  - medical responders
  - personnel trained to perform first aid or CPR

## Responsibilities

- Senior Manager** The Senior Manager will ensure that proper resources are available to implement this policy.
- Location Manager or designee** The Location Manager or designee will:
- issue and administer this policy for the site and satisfy the requirements of all applicable federal, state or local bloodborne pathogen regulations
  - identify which employees are likely to be exposed to *Bloodborne Pathogens*
  - develop procedures for post-exposure incidents
  - maintain medical records of *Exposure Incident*, training records, and hepatitis vaccination records
  - complete exposure incident reports and notify affected individuals
  - train employees annually
  - evaluate and update the program annually.
- Drivers** Drivers will:
- inspect compressed gas cylinders, at Medical Care Industry customer sites, for blood and other body fluids before handling

Do **not** pick up or accept compressed gas cylinders from Medical Care Customers that are obviously contaminated with visible blood or other body fluids.

- notify customer personnel, while on site, of any potentially contaminated cylinders
- inform the Location Manager of all exposure incidents.

**First Aid Providers** First aid providers will:

- use *Universal Precautions* in all situations that involve exposure to blood and other body fluids
- inform the Location Manager or designee of all exposure incidents.

## Determination of Exposure

**Determination of Exposure** A list will be made of all job classifications that have the potential for exposure to bloodborne pathogens utilizing the *Bloodborne Pathogen Exposure Determination Form (see attachment)*.  
Specific tasks and procedures will be listed when only some employees in a job classification have the potential to be occupationally exposed.

Examples of Linde job classifications with potential for exposure are:

- Drivers making pickups of compressed gas cylinders at Medical Care Industry customers
- Medical responders
- Personnel trained in first aid or CPR.

## Vaccines

## HBV Pre-Exposure Vaccine

**HBV Pre-Exposure Vaccine** The HBV vaccine and vaccination series will be offered, within 10 working days of initial assignment, to employees who have occupational exposure.

**Note:** First Aid and CPR trained employees do not require a pre-exposure HBV vaccination.

The vaccine and vaccinations, as well as all medical evaluations and follow-up, will be made available to employees at no cost during work hours.

Vaccinations will be administered according to current recommendations of the U.S. Public Health Service.

Employees who decline the HBV vaccination will sign the *HBV Vaccination Declination (see attachment)*. Employees that initially decline the vaccine offer may at a later date decide to accept the vaccination and participate in the program at no cost to the individual.

## HBV Post-Exposure Vaccine

**HBV Post-Exposure Vaccine** If any employee who is not initially identified as having *Occupational Exposure* becomes exposed in the workplace, either voluntarily or inadvertently, they will be offered the HBV vaccine and vaccination series.

**Note:** HBV vaccine will be administered within 24 hours of any reported exposure incident.

## Controlling Exposure

**Employee Requirements** Employees performing tasks listed in *Bloodborne Pathogen Exposure Determination Form (see attachment)* are required to follow the exposure controls in this section.

**Universal Precautions** All blood and body fluid contamination is to be handled as if it were infected with bloodborne pathogens.

**Personal Protective Equipment (PPE)**

A list of all PPE, where it is stored, and who is responsible for the equipment will be maintained on *Bloodborne Pathogens Equipment List (see attachment)*. Personal protective equipment will be used as necessary to prevent contact with the surfaces of objects, equipment, or materials contaminated with blood or body fluid. The following guidelines must be adhered to:

- Employees will be provided with PPE at no cost.
- All sites with emergency medical responders or personnel certified in first aid or CPR will have available disposable latex gloves, CPR pocket masks with one-way valves and disposable gowns or suits in the event of exposures to large quantities of blood or other infectious material.
- PPE will be removed before leaving the work area or after a garment becomes contaminated.
- Used protective equipment will be placed in designated containers.
- Gloves will be worn when the employee may have contact with blood or other potentially infectious materials.
- Gloves will be replaced if torn, punctured or contaminated.
- Utility gloves will be decontaminated for reuse if they are not torn or cracked.
- Decontaminated disposable gloves will never be reused.
- Appropriate face and eye protection will be worn when splashes, sprays, spatters or droplets of blood or other potentially infectious materials pose a hazard to the eye, nose or mouth.
- Appropriate protective body covering will be worn when occupational exposure is anticipated.

**Decontamination and Disposal**

A list of all decontamination and disposal materials, where they are stored, and who is responsible for the materials will be maintained on *Bloodborne Pathogens Equipment List (see attachment)*. All equipment and work surfaces that have been contaminated with blood or other potentially infectious materials will be cleaned and decontaminated with an appropriate disinfectant. The following guidelines apply to cleaning and disposal:

- A ten percent bleach solution (one part bleach to ten parts water) may be used.
- Tongs, forceps, or a brush and dustpan will always be used to pick up contaminated broken glass.
- All infectious waste and contaminated clothing will be placed in red-colored plastic bags for disposal.
- All regulated waste will be discarded according to federal, state, and local regulations.

**Labeling**

All infectious waste containers and bags will be labeled with the word *Biohazard* and symbol:



## Exposure Incident Procedure

- Exposure Incident Procedure** Follow procedures for investigating and reporting personal injuries; see *IMS-24-05 : Accident/Incident Investigation and Reporting in Gases America*. In addition, the following will be done and properly documented in the investigation report:
- The routes of exposure and how exposure occurred will be documented.
  - The *Source Individual* will be identified and documented.
  - Obtain a consent or refusal to test the source individual for HBV and HIV utilizing *Source Individual Medical Release/Refusal Form (see attachment)*. If consent is given, the source individual's blood will be tested and documented as soon as possible to determine HIV and HBV infectiousness.
  - The exposed employee(s) will be provided with the source individual's test results and information about applicable laws and regulations concerning source identity.
  - Obtain a consent or refusal to test the exposed individual(s) for HBV and HIV utilizing *Exposed Employee Medical Release Form (see attachment)*.
    - After consent is given, the exposed employee's blood will be tested for HBV and HIV serological status.
    - If the employee does not give consent for HIV serological testing, the baseline blood sample will be preserved for at least 90 days.
  - Recommendations by the U.S. Public Health Service will be followed.
  - The *Sample Letter to Health Care Provider (see attachment)* should be used to inform the Health Care Provider of the incident. The health care provider will receive a description of the exposed employee's job duties relevant to the exposure incident, documentation of the route of exposure, circumstances of exposure, results of the source individual's blood tests and all relevant employee medical records, including vaccination status.
  - The health care provider who is responsible for administering the vaccine and post-exposure evaluation will also be given a copy of the OSHA Standard.
  - Contact the Manager, Loss Control for a copy of the standard when needed.
  - The employee will be provided with a copy of the health care provider's written opinion within 15 days after the evaluation.

## Training

Training	<p>Employees with the risk of exposure will be trained when hired and annually thereafter. The training will include:</p> <ul style="list-style-type: none"><li>• knowledge of the OSHA standard</li><li>• symptoms of bloodborne diseases</li><li>• ways in which bloodborne pathogens are transmitted</li><li>• an explanation and copy of the exposure control plan, and</li><li>• how to recognize tasks that might result in occupational exposure.</li></ul> <p><b>Note:</b> This training can be provided by most First Aid companies such as ZEE Medical, Respond, or the American Red Cross.</p> <p>In addition, drivers will be trained not to pickup or accept compressed gas cylinders from Medical Care Industry customers when they are obviously contaminated with visible blood or body fluid. Drivers will also be instructed to inspect cylinders before handling.</p> <p>A record of this training will be maintained in the employee training file.</p>
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## Program Evaluation

Program Evaluation	<p>The Location Manager or designee will conduct an annual program evaluation using the <i>Bloodborne Pathogen Annual Program Evaluation (see attachment)</i>. This form will be permanently retained on site.</p>
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## Recordkeeping

Retention	<p>The Location Manager or designee will ensure that all forms in this chapter are permanently retained on site.</p>
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## Forms and Attachments

### Forms

The following forms are used in this chapter:

- *Bloodborne Pathogen Exposure Determination Form (see attachment)*
- *Bloodborne Pathogens Equipment List (see attachment)*
- *Source Individual Medical Release/Refusal Form (see attachment)*
- *Exposed Employee Medical Release Form (see attachment)*
- *Bloodborne Pathogen Annual Program Evaluation (see attachment)*

### Attachments

The following attachments are used in this chapter:

- *HBV Vaccination Declination (see attachment)*
- *Sample Letter to Health Care Provider (see attachment)*