

ABI Resources LLC

Exposure Control Plan for Blood-borne Diseases

PURPOSE

To protect employee's health and safety by limiting their occupational exposure to blood and other potentially infectious materials, which could result in the transmission of blood-borne pathogens.

POLICY

ABI Resources LLC is committed to reducing and handling employee exposure to blood-borne diseases through the establishment of procedures and responsibilities, which are in accordance with Occupational Safety and Health Administration (OSHA) standards and regulations.

DEFINITIONS

1. Occupational Exposure

Occupational exposure means an employee can reasonably anticipate coming into contact with blood or other potentially infectious material during the performance of their duties.

2. Exposure Incident

3. An exposure incident is one wherein an employee has come in direct contact with a potentially infectious disease through the skin, eye, mouth or mucous membrane by being splashed with blood/other body substances or by being pricked with a sharp object.

4. Exposure Control Plan

An exposure control plan is a set of procedures to follow when the health and safety of employees are threatened during the performance of their job duties, should they become exposed to blood or potentially infectious substances.

5. Source Individual

A source individual is a person, whose blood or other potentially infectious substances may be a source of occupational exposure to the employee.

6. Other Potentially Infectious Materials (OPIM)

Other Potentially Infectious Materials refers to semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, amniotic fluid, saliva, any body fluid, which is contaminated with blood, any human unfixed tissue/organ (other than intact skin) and any tissues affected with HIV or HBV.

7. Mucous Membrane

Mucous membrane refers to the wet, thin tissue found in certain openings to the human body including the mouth, eyes, nose, vagina, rectum, and opening of the penis.



EXPOSURE INCIDENT PROCEDURES

Employee Responsibilities for Exposure Incidents:

1. When an exposure incident has occurred, employees shall:
 - a. remove any clothing, which has become soiled by blood or other potentially infectious body substances;
 - b. in the case of contamination to the skin, mucous membrane, eye and/or mouth, flush the area with water for at least 5 minutes;
 - c. in the case of contamination with a sharp object, the exposed area shall:
 - i. immediately be washed with soap and water;
 - ii. be encouraged to bleed; and,
 - iii. be covered with a waterproof bandage.
 - d. report the incident immediately to Supervisor.
 - e. follow-up with a post exposure evaluation by:
 - i. consulting with a licensed Physician/Health Care Professional, as soon as possible, but within 24 hours of exposure (unless it is a medical emergency, in which case call 911); or,
 - ii. visiting a Hospital Emergency within one hour of exposure, if the Supervisor is not available.
 - f. protect others from exposure; and,
 - g. wash hands.

Supervisor Responsibilities for Exposure Incidents:

1. Supervisor shall immediately offer all employees, who experience an exposure incident, a post exposure evaluation and follow-up, which includes:
 - a. investigating the incident and completing the "*Post Exposure Incident Report for Blood-borne Diseases*";
 - b. recording the incident on a post exposure incident log;
 - c. identifying the source individual unless it is prohibited by state/local law or it is not possible;
 - d. obtaining consent from the source individual to be tested for HBV and HIV, as soon as possible:
 - i. If the source individual refuses to give consent, and consent is legally required, the employer's request and the source individual's refusal shall be documented.
 - ii. If the source individual's consent is not required by law, his/her blood sample (if available) shall be tested and the results documented.
 - iii. If the source individual is already known to be infected, it is not necessary to re-test for HBV and/or HIV.
 - e. providing the exposed employee with the results of the source individual's test;
 - f. informing the exposed employee any about laws/regulations regarding disclosing the identity and infectious status of the source individual;
 - g. obtaining consent from the exposed employee to have his/her blood tested for HBV and/or HIV, as soon as possible:
 - i. If the exposed employee consents to a baseline blood collection but declines an HIV test, request that his/her blood sample be retained for 90 days in case he/she changes his/her mind. In that case, ensure that the test is done as soon as possible.



- h. ensuring that all exposures to blood-borne diseases are referred to the appropriate health authorities and, if necessary, to community leadership;
- i. providing information to the Physician/ Health Care Professional, in accordance with the employer's policy "*Reporting and Recording Exposures to Blood-borne Diseases*";
- j. obtaining and providing the exposed employee with a copy of the evaluating Health Care Professional's written opinion, within 15 days of completion of the evaluation;
- k. ensuring the exposed employee receives any medically recommended post-exposure treatments and/or counseling in a timely manner.

