

## **Bloodborne Pathogen Plan Filing System**

These pages are designed to help you set up a filing system designed to meet the requirements of OSHA's Bloodborne Pathogen standard.

Essentially, if you set up a three-ring binder or filing system with the following information, you should comply with all the requirements.

### **Employees**

In this section, you should have a list of current employees. All employees (including student employees) must receive training before they are placed in a situation where they could potentially be exposed to bloodborne pathogens. Employees with potential exposure must also be trained on an annual basis.

<b>Bloodborne Pathogen Exposure Plan - Employees</b>					
<b>Name</b>	<b>Initial Training</b>	<b>HBV Vaccination?</b>	<b>Annual 2001</b>	<b>2002</b>	<b>2003</b>
Jane Doe	10-2-99	Declined	1-1-01		
John Doe	02-22-00	Yes	1-10-01		

### **Bloodborne Pathogen Exposure Control Plan**

This section should contain a current copy of OSHA's Bloodborne Pathogen Standard (1910-1030) **and** a copy of your site's Bloodborne Pathogen Exposure Control Plan (see sample below). This plan must be reviewed and updated annually.

All employees must be informed of their right to have their own copy of this plan.

## **Emergency Procedures**

In this section, you should provide information about emergency procedures. Include site-specific information in addition to general information.

For example: How to clean up a blood spill, Information on your blood spill clean up kit.

## **Vaccinations**

In this section, you should provide information about Hepatitis B vaccinations. All employees who might reasonably expect to come in contact with potentially contaminated body fluids as per the OSHA Standard must be offered the Hepatitis B vaccine. The employee may decline to receive it, but it must be offered.

## **Declination Forms**

In this section, you should keep track of all declination forms for employees who have declined the Hepatitis B vaccine.

# **Hepatitis B Vaccination Declination Form**

For: [Print Name] \_\_\_\_\_

I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring 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 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.

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Signature and Date

## **Training Records**

In this section, you should keep training records such as class rosters, sign-in sheets, and tests.

Training shall be provided at the time of initial assignment to tasks where occupational exposure may take place and at least annually thereafter.