Copies of the Bloodborne Pathogens Program:
   1. Human Resources Office
   2. Office of the President (Provost)
   3. Campus Safety Office
   4. Electronic Version (HWS HR website)

Last Date Reviewed: 1/20/14
Reviewed By: Stephen Valentine, CIH – Greystone Risk Management and the HWS Safety Committee
Purpose:
The purpose of the Bloodborne Pathogens Program (further referred to as the program) at Hobart and William Smith Colleges (further referred to as HWS or the colleges) is to ensure controls are in place to prevent faculty, staff and student exposure to blood or other potentially infectious materials (OPIM) that may be encountered during activities (i.e., Hubbs staff, EMS team, Campus Safety, first aid/CPR personnel, etc.) at the colleges. The target bloodborne diseases associated with the program are HIV/AIDS and Hepatitis B virus (HBV).

The program provides personnel with bloodborne pathogens controls through policies and procedures regarding:

- Exposure determination.
- Exposure control procedures.
- Medical consultation.
- Hepatitis B vaccination.
- Personnel training.

Program Definitions:

Bloodborne Pathogens – Pathogenic microorganisms that are present in human blood or OPIM and can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV) and human immunodeficiency virus (HIV).

Exposure Incident – A specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials that results from the performance of one’s duties.

Good Samaritan – A person who voluntarily chooses to help another who is injured or ill. At HWS, this could include faculty, staff and/or students, but excludes those that apply to this program and provide first aid/CPR as part of their job duty.

Occupational Exposure – Reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials that may result from the performance of an employee’s duties.

Other Potentially Infectious Materials (OPIM) –

1. The following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids.
2. Any unfixed tissue or organ (other than intact skin) from a human (living or dead).
3. HIV-containing cell or tissue cultures, organ cultures, and HIV- or HBV-
containing culture medium or other solutions; and blood, organs, or other tissues
infected with HIV or HBV.

*Universal Precautions* – An approach to infection control. According to the concept of
universal precautions, all human blood and certain human body fluids are treated as if
known to be infectious for HIV, HBV or other bloodborne pathogens.

**Program Applicability:**


2. The following job tasks at HWS are considered to have occupational exposure to
blood or OPIM as part of their job duties. Faculty, staff and students conducting
these activities will participate in the program:

   - Emergency Medical Service (EMS) Team Members.
   - Hubbs Health Center Staff.
   - Campus Safety Personnel.
   - And other trained in first aid/CPR/AED.

3. This biology department does work with biohazard materials (i.e., animal tissue), but
does not work with human tissue or any tissue with HIV, HBV or other bloodborne
pathogens. Biology is not part of this program, but will certainly follow their own
biohazard policies for working with these materials.

4. Buildings and Grounds (contracted janitorial services) are required to comply with
their own Bloodborne Pathogens Program in accordance with the OSHA standard.

5. Although not regulated by OSHA or this program, HWS faculty, staff and/or students
acting as a Good Samaritan should still follow the program procedures defined in this
program, such as universal precautions and use of personal protective equipment.

**Program Responsibilities:**

1. The **Office of the President (Provost)** will:
   - Support the policies and procedures of the program.
   - Designate appropriate resources (i.e., funds, personnel, etc.) for the
     implementation of the program.
   - Assign responsibilities and authority to designated personnel to implement and
     maintain the program.

2. The **EHS Coordinator** will:
   - Oversee the policies and procedures of the program.
• Provide knowledge and support to the colleges on the program.
• Coordinate the Hepatitis B Vaccine.
• Facilitate faculty/staff/student training.
• Continually evaluate and improve overall compliance with the program.
• Coordinate an annual review of the program.

3. The **Director of Human Resources** will:

• Coordinate OSHA recordkeeping.
• Maintain records of training and vaccine status (confidential).
• Coordinate all exposure and post exposure medical consultation for exposed personnel.
• Maintain documentation of any needlestick/sharps injuries for record on the OSHA 300 log.

4. The **EMS Team, Hubbs Health Center, Campus Safety and First Aid/CPR/AED training personnel** will:

• Understand and follow the requirements of the program.
• Follow established practices to control exposure to bloodborne pathogens.
• Participate in safety training.
• Participate in the Hepatitis B Vaccine program, if desired.
• Immediately report any potential exposure incident to your supervisor and Human Resources and report to Geneva General Hospital for appropriate medical treatment and/or consultation.

5. **Hubbs Health Center** will:

• Properly store and dispose of any biohazard waste.

6. Any **Good Samaritan** will (although not part of this program):

• Follow universal precautions and use appropriate personal protective equipment when providing assistance.
• Immediately report any potential exposure incident.

**Bloodborne Pathogens Procedures:**

**Bloodborne Pathogens Exposure Prevention:**

1. Universal precautions shall be followed at all times regarding exposure to blood or other potentially infectious materials. That is, all blood and body fluids should be treated as potentially infectious material.
2. Guidelines have been established to eliminate and/or reduce the risk of bloodborne pathogen exposure. The following guidelines shall be implemented:

- When feasible, standard operating procedures shall be established to eliminate and/or minimize exposure to human blood, body fluid or other infectious material associated with any job task.
- When providing first aid and/or CPR, follow these rules:
  a. Wear latex rubber/nitrile gloves at all times. Change your gloves immediately if there is any breach in glove integrity (i.e., cut, hole, etc.). Wash your hands with antibacterial soap and water after removing your gloves.
  b. Wear safety goggles, face shield, protective apron, face mask or similar protective equipment, where there is the potential for blood or other materials to splash on your body.
  c. Use a CPR mask equipped with one way valve if providing CPR.
  d. Remove blood or OPIM stained clothing or materials as soon as possible following assistance. Wash these areas of your body with antibacterial soap and water as soon as possible.
  e. In the event of an exposure incident (i.e., blood or OPIM in your eyes, mouth, nose or open wounds, etc.), wash the area immediately and report the exposure to your supervisor and Human Resources and report to Geneva General Hospital for appropriate medical treatment and/or consultation.

3. The following supplies and equipment will be made available all faculty, staff and students participating in this program:

- Latex rubber/nitrile gloves.
- Safety goggles, face shield, protective apron, face mask or similar protective equipment, as needed.
- One-way CPR mask.
- Antibacterial/Cleaning solution or wipes.
- Red biohazard bags.
- Sharps containers (Hubbs Health Center).

4. Personnel responsible for or required to clean up blood or OPIM following an incident or service will use a commercial disinfecting cleaning solutions or 10:1 (water/bleach) solution to clean the surface.

5. All medical waste or blood/OPIM contaminated materials will be disposed in red biohazard bags, with all sharps in rigid and enclosed containers. Biohazard waste will be managed at the Hubbs Health Center in a designated location. All biohazard waste will be disposed of in accordance with regulatory requirements, currently a contracted services.
**Hepatitis B Vaccination:**

1. All faculty, staff and students participating in this program will be offered the Hepatitis B vaccine and vaccination series prior to potential exposure. Information about the vaccine is attached at the end of this program.

2. If the program participant declines the vaccination, they are required to sign the Hepatitis B Declination Form, which is also attached at the end of this program.

3. Program participants who initially decline the vaccination and later decides to receive the vaccine will be permitted to still receive the vaccine at that time.

4. Program participants who may already have the vaccine can provide documentation of the vaccine to HWS for records.

5. Documentation of the vaccine will be maintained confidential within Human Resources.

**Post-Exposure Evaluation and Followup:**

1. In the event an exposure incident (i.e., blood or OPIM in your eyes, mouth, nose or open wounds, etc.) for a program participant, the following actions should be followed:

   - Wash the exposed area immediately with soap (if appropriate) and water.
   - Report the incident immediately to your supervisor and Human Resources and obtain medical attention immediately (Geneva General Hospital).
   - Complete an incident report with Human Resources.
   - The exposed program participant will be offered immunization, vaccines and the appropriate counseling/treatment in accordance with the OSHA standard within 24 hours as deemed appropriate by a licensed physician or health care professional.
   - All medical services and consultation will remain confidential, including entry on the OSHA 300 log.

2. Records of the incident and maintained by the Human Resources shall include at least the following:

   - Timeline of the incident.
   - Routes of exposure and how exposure occurred.
   - Source of the blood and OPIM.
   - Steps taken after exposure.
   - Further evaluation by medical personnel.
3. A physician's or health care professional's written opinion must be completed within 15 days of the evaluation with specific information of the Hepatitis B vaccine status and any further recommendations.

4. The exposed program participant will be provided with the appropriate medical services and follow up as dictated by the licensed physician or health care professional and the OSHA Standard.

5. Following an exposure incident, an investigation will be conducted to determine the circumstances resulting in the incident. Procedures within this program will be updated, as feasible, to prevent exposure in the future.

6. All exposure incidents must be recorded on the OSHA 300 log (entered as confidential). Additionally, any needlestick injuries must be maintained on a separate needlestick log (maintained by Human Resources).

**Information and Training:**

1. All faculty, staff and students participating in this program will be provided with information and training on bloodborne pathogens. Training will be conducted:
   - At the time of their initial job assignment.
   - Annually for all program participants.
   - As deemed appropriate to ensure the continued effectiveness of the program.

2. Bloodborne Pathogens training includes the following topics:
   - Requirements of the OSHA Bloodborne Pathogens Standard.
   - Understanding of bloodborne pathogens and exposure to bloodborne pathogens.
   - Discussion on the HWS Bloodborne Pathogens Program and accessibility.
   - Methods to control exposure to bloodborne pathogens.
   - Description of the HBV vaccination series.
   - Exposure incidents and post-exposure evaluation.
   - Questions and answer session.

**Program Evaluation:**

1. The EHS Coordinator will review the Bloodborne Pathogen Program on an annual basis to ensure the continued effectiveness of the policy and procedures.

2. The program will be updated, as needed, to address any deficiencies and to reflect any changes in the implementation of the program.
HEPATITIS B VACCINE INFORMATION
HEPATITIS B VACCINE

WHAT YOU NEED TO KNOW

1 What is hepatitis B?

Hepatitis B is a serious disease that affects the liver. It is caused by the hepatitis B virus (HBV). HBV can cause:

Acute (short-term) illness. This can lead to:
- loss of appetite
- diarrhea and vomiting
- tiredness
- jaundice (yellow skin or eyes)
- pain in muscles, joints, and stomach

Acute illness is more common among adults. Children who become infected usually do not have acute illness.

Chronic (long-term) infection. Some people go on to develop chronic HBV infection. This can be very serious, and often leads to:
- liver damage (cirrhosis)
- liver cancer
- death

Chronic infection is more common among infants and children than among adults. People who are infected can spread HBV to others, even if they don't appear sick.

- In 2005, about 51,000 people became infected with hepatitis B.
- About 1.25 million people in the United States have chronic HBV infection.
- Each year about 3,000 to 5,000 people die from cirrhosis or liver cancer caused by HBV.

Hepatitis B virus is spread through contact with the blood or other body fluids of an infected person. A person can become infected by:
- contact with a mother's blood and body fluids at the time of birth;
- contact with blood and body fluids through breaks in the skin such as bites, cuts, or sores;
- contact with objects that could have blood or body fluids on them such as toothbrushes or razors;
- having unprotected sex with an infected person;
- sharing needles when injecting drugs;
- being stuck with a used needle on the job.

2 Hepatitis B vaccine: Why get vaccinated?

Hepatitis B vaccine can prevent hepatitis B, and the serious consequences of HBV infection, including liver cancer and cirrhosis.

Routine hepatitis B vaccination of U.S. children began in 1991. Since then, the reported incidence of acute hepatitis B among children and adolescents has dropped by more than 95% – and by 75% in all age groups.

Hepatitis B vaccine is made from a part of the hepatitis B virus. It cannot cause HBV infection.

Hepatitis B vaccine is usually given as a series of 3 or 4 shots. This vaccine series gives long-term protection from HBV infection, possibly lifelong.

3 Who should get hepatitis B vaccine and when?

Children and Adolescents

- All children should get their first dose of hepatitis B vaccine at birth and should have completed the vaccine series by 6-18 months of age.
- Children and adolescents through 18 years of age who did not get the vaccine when they were younger should also be vaccinated.

Adults

- All unvaccinated adults at risk for HBV infection should be vaccinated. This includes:
  - sex partners of people infected with HBV,
  - men who have sex with men,
  - people who inject street drugs,
  - people with more than one sex partner,
  - people with chronic liver or kidney disease,
  - people with jobs that expose them to human blood,
  - household contacts of people infected with HBV,
  - residents and staff in institutions for the developmentally disabled,
  - kidney dialysis patients,
- people who travel to countries where hepatitis B is common.
- people with HIV infection.

Anyone else who wants to be protected from HBV infection may be vaccinated.

**Who should NOT get hepatitis B vaccine?**

- Anyone with a life-threatening allergy to baker’s yeast, or to any other component of the vaccine, should not get hepatitis B vaccine. Tell your provider if you have any severe allergies.
- Anyone who has had a life-threatening allergic reaction to a previous dose of hepatitis B vaccine should not get another dose.
- Anyone who is moderately or severely ill when a dose of vaccine is scheduled should probably wait until they recover before getting the vaccine.

Your provider can give you more information about these precautions.

Pregnant women who need protection from HBV infection may be vaccinated.

**Hepatitis B vaccine risks**

Hepatitis B is a very safe vaccine. Most people do not have any problems with it.

The following mild problems have been reported:
- Soreness where the shot was given (up to about 1 person in 4).
- Temperature of 99.9°F or higher (up to about 1 person in 15).

Severe problems are extremely rare. Severe allergic reactions are believed to occur about once in 1.1 million doses.

A vaccine, like any medicine, could cause a serious reaction. But the risk of a vaccine causing serious harm, or death, is extremely small. More than 100 million people have gotten hepatitis B vaccine in the United States.

**What if there is a moderate or severe reaction?**

What should I look for?
- Any unusual condition, such as a high fever or behavior changes. Signs of a serious allergic reaction can include difficulty breathing, hoarseness or wheezing, hives, paleness, weakness, a fast heart beat or dizziness.

**What should I do?**
- Call a doctor, or get the person to a doctor right away.
- Tell your doctor what happened, the date and time it happened, and when the vaccination was given.
- Ask your doctor, nurse, or health department to report the reaction by filing a Vaccine Adverse Event Reporting System (VAERS) form.

Or you can file this report through the VAERS web site at www.vaers.hhs.gov, or by calling 1-800-822-7967.

**VAERS does not provide medical advice.**

In the event that you or your child has a serious reaction to a vaccine, a federal program has been created to help pay for the care of those who have been harmed.

For details about the National Vaccine Injury Compensation Program, call 1-800-338-2382 or visit their website at www.hrsa.gov/vaccinecompensation.

**How can I learn more?**

- Ask your doctor or nurse. They can give you the vaccine package insert or suggest other sources of information.
- Call your local or state health department.
- Contact the Centers for Disease Control and Prevention (CDC):
  - Call 1-800-232-4636 (1-800-CDC-INFO)
  - Visit CDC websites at:
    - www.cdc.gov/ncline/diseases/hepatitis
    - www.cdc.gov/vaccines
    - www.cdc.gov/travel
HEPATITIS B DECLINATION FORM
Hobart and William Smith Colleges
Hepatitis B Declination Form

Name: ________________________________ Date: __________

Signature: ________________________________

☐ I would like to receive the Hepatitis B vaccination.
☐ I already received the Hepatitis B vaccination.
☐ I decline to receive the Hepatitis B vaccination (please read below).

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.

Keep a copy of this form for your Department records and send a copy to Human Resources.
EXPOSURE INCIDENT FLOW CHART
Exposure Incident Flow Chart

Exposed Incident Occurs

Exposed person thoroughly washes exposed area and/or flushes eyes/mucus membranes for 15 minutes.

Immediately notify your supervisor and Human Resources.

Report to Geneva General Hospital for Post Exposure Evaluation.

If not done already, notify Human Resources. HR will coordinate post exposure guidelines and coordinate with the physician and/or health care professional as per this program and OSHA.

Coordinate OSHA record keeping with Human Resources.