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# Blood borne Pathogens Exposure Control Program

October 2016

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San Bernardino Valley College  
701 South Mount Vernon Avenue  
San Bernardino, California 92410

&

Crafton Hills College  
11711 Sand Canyon Road  
Yucaipa, California 92399

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# Policy Statement

The Blood borne Pathogens Exposure Control Program (BBP) has been developed by San Bernardino Community College District (SBCCD) to promote safe work practices for employees in an effort to reduce occupational exposure, including but not limited to Hepatitis Viruses B and C (HBV and HCV) and Human Immunodeficiency Virus (HIV) via potentially contaminated blood and other bodily fluids (blood borne pathogens) as outlined in the California Code of Regulations (CCR) Title 8, Section 5193 and Code of Federal Regulations (CFR) 1910.1030, Blood borne Pathogens – General Industry Standard.

In addition to protecting College employees from the health hazards associated with blood borne pathogens, the BBP identifies provisions for the appropriate treatment and counseling of any employee who may become exposed during the course of the work. The College encourages its employees to use safe work practices including but are not limited to the following:

- Being responsible in following safe work practices to minimize exposure to blood borne pathogens.
- Never underestimating the risk of exposure to blood borne pathogens.

To ensure that the Program is kept current, it will be reviewed and updated as follows:

- At least annually.
- Whenever new or modified work tasks or procedures are implemented which may affect occupational exposure to employees?
- Whenever an employee is exposed to a blood borne pathogen.
- The Program is available for review by employees at any time. An electronic copy of the Program is located on the District Safety & Risk Management website at <https://sbccd.org/safetyrisk>

# Responsibilities

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## Blood borne Pathogens Program Coordinator

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The College Vice President of Administration is the BBP coordinator, and has the authority and responsibility for implementing and maintaining this BBP for their respective campuses.

Assigned campus designees are as follows:

Vice President of Administrative Services/SBVC, Site Safety Officer  
San Bernardino Valley College  
Tel: (909) 384-8958  
&  
Vice President of Administrative Services/CHC, Site Safety Officer  
Crafton Hills College  
Tel: (909) 389-3210

Refer to **Appendix A** “Site-Specific Information- San Bernardino Valley College” for a communication flow chart and contact information. Refer to **Appendix B** “Site-Specific Information- Crafton Hills College” for a communication flow chart and contact information.

The Program Coordinator is responsible for ensuring that college policies and practices are implemented, employees are provided a safe and healthful work place and that operations are in compliance with the Blood borne Pathogens Exposure Control Program and applicable federal, state, and local regulations and standards.

The BBP coordinator may be assisted in their duties by District Safety & Risk Management. District Safety & Risk Management can be reached at (909) 382-4040 during regular business hours.

The duties of the BBP Administrator include, but are not limited to the following:

- Working with Administrators, Division Deans, and other managers to administer the policies or practices required to support the effective implementation of this Program;
- Responsible for providing guidance, resources, and assistance with development of department-specific guidelines;
- Following requirements in accordance with Cal OSHA for implementing an effective program;
- Working with other members of the College staff to ensure that adequate training, review, and implementation of the Program are being completed;
- Implementing suitable education/training programs for employees;
- Maintaining an up-to-date list of College personnel requiring this training as well as maintaining the appropriate documentation showing the training was completed; and
- Reviewing the training programs with College Safety Committee on a regular basis to ensure that the Program includes the appropriate new information and that it is being effectively presented and utilized to the employees.

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## Employees

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It is the responsibility of employees who may become exposed blood borne pathogens during the course of their work to review and acknowledge receipt of the Blood borne Pathogens Exposure Control Program and utilize the following safety provisions:

- Understanding what tasks they perform that may have occupational exposure to blood borne pathogens;
- Completing and signing all required documents, including immunization forms, if needed;
- Reviewing and acknowledging receipt of information regarding the Hepatitis B vaccination series;
- Actively participating in blood borne pathogens training sessions when presented by the College, as required by Cal OSHA;
- Following all work practices in accordance with established BBP safety procedures and post-exposure protocol; and
- Following good personal hygiene habits.

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## Contractors

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Contractors working on the SBVC or CHC campus must meet all regulatory requirements established in T8CCR5193.

Additionally, all SBCCD employees have the right to refuse to perform work where the employee feels unsafe or where specified safe working procedures are not adequate or understood, and to refuse to perform any activity where safe work procedures outlined in the BBP and/or other health and safety-related documents are not being followed.

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THIS BBP IS AVAILABLE ON THE DISTRICT WEBSITE:

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- <https://sbccd.org/safetyrisk>

## Exposure to Infectious Materials

Infectious Materials Definition (see **Appendix C** for additional definitions pertaining to this program)

**Infectious materials** are defined as follows:

- I. Human body fluids: blood, semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures and all body fluids including saliva or vomitus in situations where it is difficult or impossible to differentiate between body fluids such as in an emergency response;
- II. Any unfixed tissue or organ (other than intact skin) from a human (living or dead); and
- III. Any of the following:
  - a. Cell, tissue, or organ cultures from humans or experimental animals;
  - b. Blood, organs, or other tissues from experimental animals; or
  - c. Culture mediums or other solutions when it is difficult or impossible to determine content or contamination.

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## Exposure Risk Determination

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Exposure risk determination refers to the process of assessing an employee's exposure to blood borne pathogens on the job. Job titles and job descriptions of employees were analyzed by the SBCCD Office of Human Resources to determine the potential for occupational exposure to blood and/or infectious materials. Exposure risks are categorized as regular exposure (Category I), occasional exposure (Category II), or non-exposure (Category III). Job titles and job descriptions of employees with the potential for occupational exposure to blood, infectious materials as defined above or regulated wastes are identified in Appendix D of this document.

### ***Category I : Regular Exposure***

- Employees regularly exposed to blood or other potentially infectious material. Examples include but not limited to:
  - Allied Health Instructors;
  - Biological Sciences Instructors;
  - Child Care Instructors and Instructor Aides;
  - College Police Officers;
  - Custodians;
  - Disabled Student Services Coordinator, Learning Disability Specialist, Senior Student Services Technician and Instructional Assessment Technician;
  - EMF Instructors;
  - Health Services Center/Health and Wellness Center Director, Coordinator, Nurses and Secretaries; and
  - Maintenance personnel who assist plumbing projects.

### ***Category II : Occasional Exposure***

- Employees occasionally exposed to blood or other potentially infectious material.

### ***Category III : Non-Exposure***

- Employees not exposed to blood or other potential infectious materials

## **Exposure Modes**

Exposure modes refer to the activities in which exposure to blood borne pathogens can potentially occur. They are identified as:

- Blood drawing and injections
- Sterilizing and disinfecting instruments
- Patient/child or disabled student's care (including diapers handling sharps, and handling contaminated clothing)
- Wound treatment
- Clinical laboratory procedures
- Biology laboratory procedures
- Law enforcement and emergency response
- Human cadaver or animal dissection

# Compliance

SBCCD will utilize the following means and methods to limit their exposure to blood borne pathogens:

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## Universal Precautions

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Universal precautions are 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, HCV, and other blood borne pathogens. The college observes the practice of “universal precautions” to prevent contact with blood and other potentially infectious materials. As a result, all body fluids as well as instruments, environmental surfaces, materials, laboratory waste and other articles with potential to be contaminated with blood or other body fluids, shall be treated as if they are infectious for HIV, HBV, HCV and other blood borne pathogens. Universal precautions include hand washing, gloving (and other personal protective equipment), and clean-up techniques used by the college.

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## Engineering and Work Practice Controls

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When necessary, the College shall use available engineering controls to eliminate or minimize employee exposure to blood borne pathogens.

- I. *Engineering controls* serve to isolate or remove the blood borne pathogen hazard from the workplace. Examples include:
  - a. Hand washing facilities (or antiseptic hand cleansers and towels or antiseptic towelettes);
  - b. Needle recapping devices;
  - c. Sharps containers;
  - d. Self-sheathing needles;
  - e. Disposable platforms for lancet devices; and
  - f. Infectious waste bags.
- II. *Work practice controls* reduce the likelihood of exposure by altering the manner in which tasks are performed. Examples can be found in **Appendix E** of this document and include:
  - a. Hand washing;
  - b. Not eating, drinking or applying make-up in areas where there may be infectious materials present;
  - c. Wearing appropriate personal protective equipment;
  - d. Proper disinfection of equipment and work areas;
  - e. Use of sharps engineered to prevent injury;
  - f. Place potentially infectious materials in containers designed to prevent leakage;
  - g. Containers that contain such materials will be properly labeled; and
  - h. When the potential exists for the specimen to puncture the primary container, the primary container will be placed inside a secondary container that is puncture resistant.

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## Personal Protective Equipment (PPE)

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Appropriate Personal Protective Equipment (PPE) will be available to Category I employees regularly exposed to blood or other potentially infectious materials. PPE may include gloves, gowns, face shield, safety goggles, chemical goggles, as well as CPR shields. When potential for exposure has been identified, the responsible manager or supervisor will determine which type of PPE will be used. It is the college's responsibility to provide proper PPE training and every designated employee who is issued PPE is expected to follow procedures as outlined in this document or prescribed by departmental procedures. Additional information on the use of PPE can be found in **Appendix F** of this document.

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## Clean-Up of Regulated Waste

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Universal Precautions, outlined above, should be employed in the clean-up of regulated waste.



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## Handling Infectious Waste

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It is important that surface areas and equipment be kept clean and sanitary. The following practices should be followed to aid in the elimination of potential exposure hazards:

- If equipment or its protective covering becomes contaminated, isolate, tag, and notify the appropriate supervisor or manager;
- All equipment and environmental surfaces must be cleaned and decontaminated after contact with blood or other potentially infectious material;



- Regulated waste other than sharps is required to be placed in a red biohazard container labeled with the appropriate biohazard's warning label;
- When containers are not located within the immediate area, a red waste disposal bag from the biohazard kit may be used;
- Discard contaminated sharps immediately in containers provided for such. Containers shall be located as close as possible to the work area where the sharps are used, maintained in an upright position and replaced routinely so as to not become overfilled;
- Sharps containers shall be secured or monitored at all times. When/if containers are used in unsecured areas, the containers shall be removed as quickly as practicable to a designated secure area;
- The Program Coordinator or designee is responsible for the collection and handling of regulated waste; and
- The Vice President of Administrative Services is responsible for keeping written records of regulated, offsite waste disposal.

Below are examples of engineering and work practices that will be followed campus-wide:

- Hand washing and washing of skin and eyes — All employees must wash their hands as soon as possible after removing gloves or any other personal protective equipment (PPE) such as gowns, protective eyewear, and masks. Employees shall immediately wash any skin that comes in contact with blood or other potentially infectious materials. Antimicrobial packets will be provided and used in situations where hand-washing facilities are not readily available. Employees in these situations shall wash contaminated skin as soon as practical. Eyes shall be flushed for 15 minutes using nearest eyewash station.
- Sharps — Procedures for proper use of sharps will be followed.
- Eating and drinking in the workplace — No eating, drinking, smoking, or application of cosmetics is allowed in work areas where there is a potential for contamination with infectious materials.
- Storage of food and drink — No food or drink may be kept in refrigerators, freezers, shelves, cabinets, countertops or bench tops where infectious materials may be present.
- Handling specimens of blood, tissue and other potentially infectious material — the following rules will be observed when handling these types of materials:
  - ❖ All potentially infectious materials will be placed in containers designed to prevent leakage.
  - ❖ Universal precautions will be observed at all times.
  - ❖ Containers that contain such materials will be properly labeled.
  - ❖ When the potential exists for the specimen to puncture the primary container, the primary container will be placed inside a secondary container that is puncture resistant.

## Labels and Signs

To effectively minimize exposure to blood borne pathogens, the biohazard warning labeling system is in use. **Contact District Safety and Risk Management Office at (909) 382-4040** for guidance on biohazard warning labeling. These labels, which are red with lettering and symbols in a contrasting color, shall be used in conjunction with the approved red color-coded containers to warn employees of possible exposures.

The following items shall be labeled:

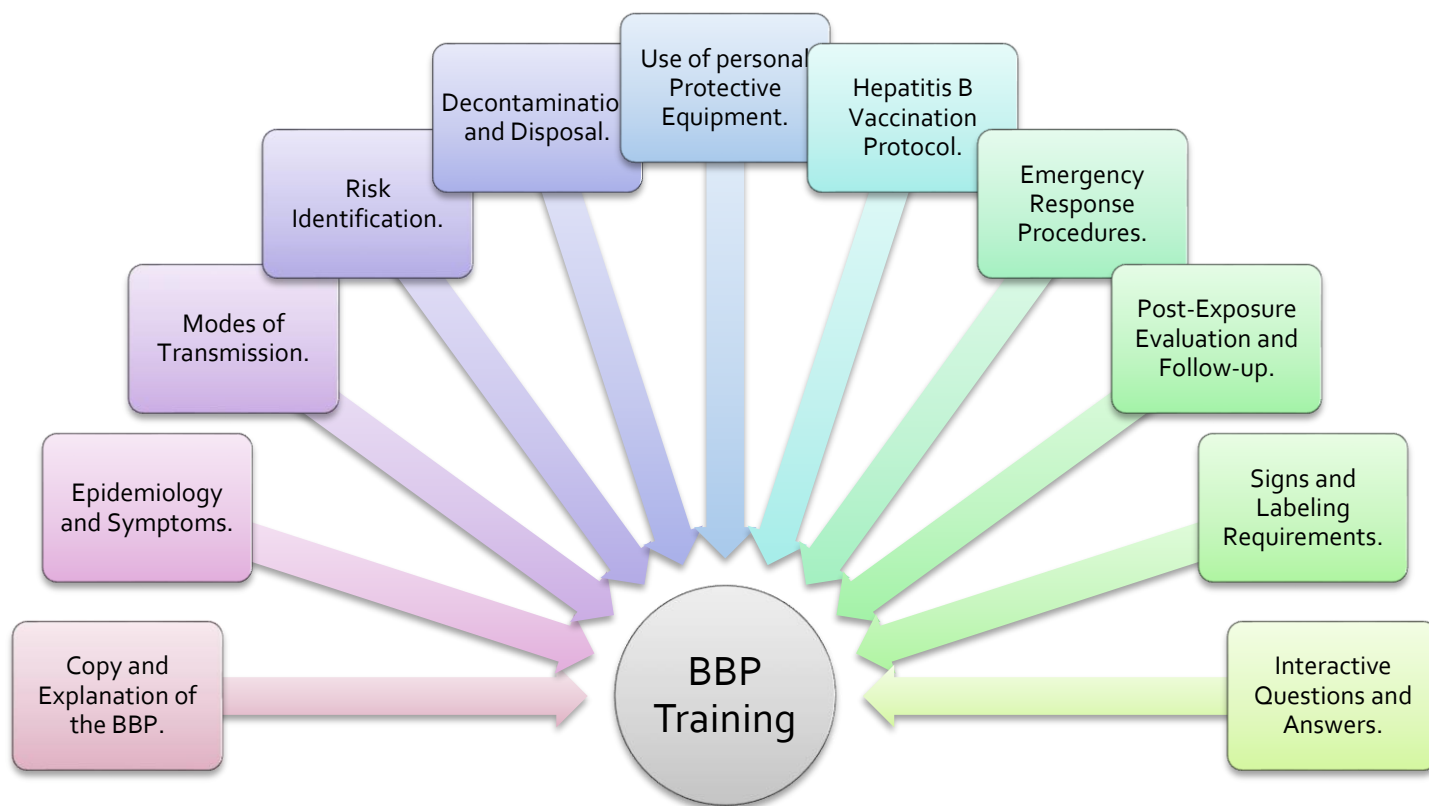
- ▼ Refrigerators or freezers containing potentially infectious materials;
- ▼ Containers of regulated waste;
- ▼ Other containers used to store, transport, or ship potentially infectious materials;

- ▼ Contaminated equipment, PPE or other laundry (equipment sent for repair/maintenance should state on the label which portions of the equipment are contaminated); and
- ▼ Sharps disposal containers.

## Employee Training

BBP Training shall be provided as follows:

- Employees identified as having a Category 1 exposure risk (per Section 3.2), shall obtain initial and annual BBP training.
- Employees identified as having a Category 2 exposure risk shall receive a minimum of initial BBP training.
- Prior to assignments when potentially exposed to new materials and when assigned to new work tasks.
- Specific employee training will be determined/identified by Management. This training will be designed to address department and task specific compliance and BBP prevention requirements.
- Employees attending or receiving training mandated by this Program shall sign attendance sheets and actively participate in the training. The BBP training program shall contain at a minimum the following elements:



## RECORDKEEPING

- Records of BBP employee training, exposure assessments, and BBP related safety inspections will be maintained for at least 5 years;
- BBP employee training records shall include the name of the employees trained, date and type of training provided, and the provider of the training;
- Administrators, Division Deans, Department Directors, and Managers are responsible for ensuring:
  - Employee training records are generated; and
  - A copy is sent to SBCCD Human Resources to be maintained on file for five years.
- After receiving BBP training, administrators, division deans, department directors, managers and supervisors are responsible for working with the SBCCD Office of Human Resources to identify employees who shall receive training on the BBP;
- Injury records are generated and submitted in accordance with the SBCCD Injury and Illness Prevention Program (BBP) in the event of any sharps injuries in their respective areas.
- SBCCD Human Resources will maintain a Sharps Injury Log for at least 5 years;
- Blood borne pathogen occupational exposure and investigation records are to be retained by SBCCD Human Resources for a period of duration of employment plus 30 years; and
- All medical information and records, verbal and written, concerning the occupational exposure of a College employee will not be disclosed or released to anyone without the employee's written consent except as required by law. These records will be kept by the **San Bernardino Community College District Human Resources Department**.

## HEPATITIS B VACCINATIONS, POST EXPOSURE & FOLLOW-UP

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### Vaccination Program

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The Hepatitis B vaccination program has been implemented for employees who may be exposed to blood borne pathogens during their routine work tasks. (These jobs are identified in Appendix B) In addition, any employee who has an exposure incident (i.e., needle stick) shall receive the appropriate medical care, including post-exposure inoculation. There is no cost to employees for the vaccinations. The vaccination program consists of a series of three inoculations over a six-month period. As part of their blood borne pathogens training, employees receive information concerning the vaccination, including its safety and effectiveness.

The San Bernardino Community College District Human Resources department is responsible for managing this vaccination program. The vaccinations are to be administered by a qualified medical care facility identified by the Human Resources department.

The following steps shall be taken when an employee is identified as having potential exposure to blood or other potentially infectious materials (either upon hire, assignment change, or otherwise):

- Employees requiring vaccination will be given the Hepatitis B Vaccination Letter and Acknowledgment/Declination form to read, sign and return to Human Resources Department.
- All employees who refuse to be vaccinated, for whatever reason, must indicate the declination on the Acknowledgment/Declination form. If the employee, at a later date, decides to have the vaccine, it will be provided at no cost.
- A copy of the Blood borne Pathogens Exposure Control Program will be provided to healthcare professionals responsible for administering the vaccine.

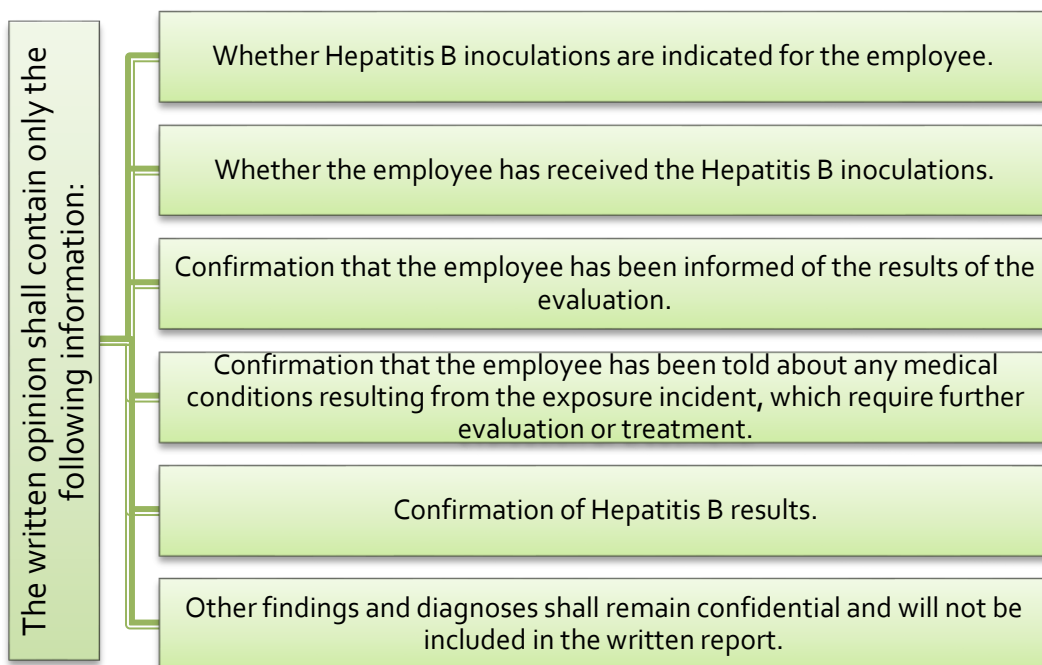
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## Post Exposure & Follow-Up

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If an employee is accidentally exposed to blood borne pathogens during the performance of their work, the following shall be immediately conducted:

- Employee must report any exposure incident (i.e., needle stick, scalpel blade cut, blood in the eyes, etc.) immediately to their supervisor, at which time the employee shall be given a Workers' Compensation forms packet. All forms need to be completed and submitted to the SBCCD Human Resources Department immediately.
- The employee shall be referred to a designated medical facility identified by the Human Resources department, unless they have pre-designated a personal physician prior to an incident. Request forms for the pre-designation of a personal physician are available through the SBCCD Human Resources department
- The responsible supervisor shall complete and submit a Supervisor's Accident Investigation Report to the SBCCD Human Resources Department within 24 hours of the incident.
- The Human Resources Department will review the incident reports to assist with providing recommendations to avoid similar incidents in the future. Recommendations from those reviews, if any, will be submitted in writing to the supervisor and the responsible Site Manager/designee.
- A copy of the Blood borne Pathogens Exposure Control Program will be provided to healthcare professionals responsible for administering the vaccine post-exposure (as necessary).
- If possible, the source individual's blood shall be tested to determine HIV, HBV and HCV infection. The healthcare professional treating the employee shall be sent all necessary documents describing the exposure incident, any relevant employee medical records and any other pertinent information. The healthcare professional shall provide the SBCCD Human Resources department with a written opinion evaluating the exposed employee's situation as soon as possible. A copy of this opinion shall be forwarded to the employee within 15 days of completion of the evaluation. After completion of these procedures, the exposed employee should meet with the qualified healthcare professional to discuss the employee's medical status. This includes the evaluation of any reported illnesses, as well as any recommended treatment.
- It is important for all persons involved in this process to recognize that much of the information involved in this process must remain confidential to protect the privacy of the employee(s) involved in any exposure incident.



## Appendix A: SBVC Site Specific Information

### VP Administrative Services

- (909) 384-8958

### SBCCD Safety & Risk Management

- (909) 382-4040

### Web Links

- <https://sbccd.org/safetyrisk>

### Current Medical Contractor

295 E. Caroline Street, Ste. D1  
San Bernardino, CA 92408

### Fox Occupational Medical Center

1375 Camino Real, Suite 130  
San Bernardino, CA 92408

**\*Tell the receptionist you have had an exposure to blood or other potentially infectious materials and need an appointment immediately. \***

Work-Related Injury Treatment Authorization for treatment authorization and worker's compensation referrals, contact:

▲ SBCCD HUMAN RESOURCES: DEPARTMENT PHONE AT (909) 382-4040

## Appendix B: CHC Site Specific Information

### VP Administrative Services

- (909) 389-3210

### SBCCD Safety & Risk Management

- (909) 382-4040

### Web Links

- <https://sbccd.org/safetyrisk>

### Current Medical Contractor

295 E. Caroline Street, Ste. D1  
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Work-Related Injury Treatment Authorization for treatment authorization and worker's compensation referrals, contact:

▲ SBCCD HUMAN RESOURCES: DEPARTMENT PHONE AT (909) 382-4040

## Appendix C: Definitions

- 1) **Blood borne Pathogens:** Pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include but are not limited to Hepatitis B Virus (HBV) and Human Immunodeficiency Virus (HIV).
- 2) **Contaminated:** The presence or the reasonable anticipated presence of blood or other potentially infectious substances/materials on an item or surface.
- 3) **Contaminated Laundry:** Laundry that has been soiled with blood or other potentially infectious substances/materials or may contain sharps.
- 4) **Contaminated Sharps:** Any contaminated object that can penetrate the skin including, but not limited to needles, scalpels, broken glass, broken capillary tubes and ends of dental wires.
- 5) **Engineering Controls:** Controls that isolate or remove the blood borne pathogens hazard from the workplace. Examples: Sharps disposal containers, self-sheathing needles, etc.
- 6) **Exposure Incident:** A specific eye, mouth, other mucous membrane, non-intact skin or potential contact with blood or other potentially infectious substances/materials that result from the performance of an employee's duties.
- 7) **Occupational Exposure:** Reasonable anticipated skin, eye, mucous membrane or other potential contact with blood or other potentially infectious substances/materials that may result from the performance of an employee's duties.
- 8) **Other Potentially Infectious Substances/Materials:**
  - The following human body fluids: Semen, vaginal secretions, cerebro-spinal fluids, synovial fluids, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva, 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 (such as in emergency response).
  - Any unfixed tissue or organ (other than intact skin) from a human (living or dead).
  - HIV-containing cell or tissue cultures, organ cultures and HIV or HBV contaminating culture medium or other solutions; and blood, organs or other tissues from experimental animals infected with HIV or HBV.
- 9) **Parenteral:** Piercing mucous membranes or the skin barrier through such events such as needle sticks, human bites, cuts and abrasions.
- 10) **Personal Protective Equipment:** Specialized equipment worn by an employee for protection against a hazard. General work clothes are not intended to function as protection against a hazard and are not considered personal protective equipment.



- 11) **Regulated Waste:** Liquid or semi-liquid blood or other potentially infectious substances/materials, contaminated items that would release blood or other potentially infectious substances/materials in a liquid or semi-liquid state if compressed, items that are caked with dried blood or other potentially infectious substances/materials and are capable of releasing these substances/materials during handling, contaminated sharps and pathological and other micro-biological waste containing blood or other potentially infectious substances/materials. Includes “medical waste” as regulated by California Health and Safety Code, Chapter 6.1.
- 12) **Universal Precautions:** Is an approach to infection control. According to the concept of Universal Precautions, all human blood and certain body fluids are treated as if known to be infectious for HIV, HBV or other blood borne pathogens.
- 13) **Work Practice Controls:** Controls that reduce the likelihood of exposure by altering the manner in which a task is performed. (Example: Prohibiting recapping of needles by two-handed technique.)

## Appendix D: EXPOSURE RISK ASSESSMENT

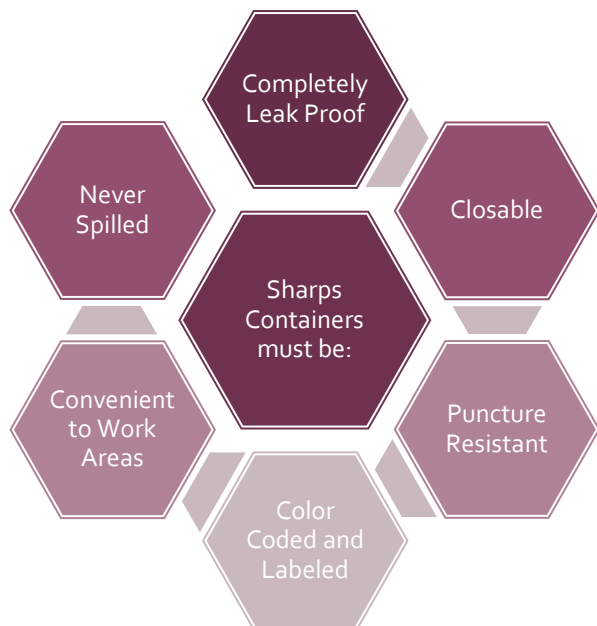
**Category I Employees** are defined as all employees (including part-time, adjunct faculty, interim, or substitute employees) in that job classification have potential occupational exposure.

DEPARTMENT/PROGRAM	POSITION/EMPLOYEES	ACTIVITY WITH POTENTIAL XPOSURE
<b>Category I</b>		
<b>Allied Health</b>	Instructors and Lab Technicians	Instruction and supervision of students involved in patient care: Injections, dressings, etc. Handling sharps and medical waste.
<b>Biological Sciences</b>	Instructors and Lab Technicians	Supervising students' finger pricking for blood-draw. Instructing and assisting with blood tests. Handling biohazardous waste.
<b>Child Care</b>	Instructors Instructor Aides	Possible exposure to children's wounds, bloody mucous or stools, etc.
<b>College Police</b>	Officers and Security Personnel	Involvement in physical altercations involving blood or other body fluids. Public safety employee expected to render first aid in course of work.

DEPARTMENT/PROGRAM	POSITION/EMPLOYEES	ACTIVITY WITH POTENTIAL XPOSURE
<b>Custodial Department</b>	Custodians	Cleaning up blood/body fluid spills. Handling soiled feminine hygiene products.
<b>Disabled Student Services</b>	Coordinator, Learning Disabilities Specialist, Senior Student Services Technician and Instructional Assessment Technician	Possible exposure to wounds, blood/body fluids.
<b>Emergency Medical Services</b>	Instructors, Facilitators, Lab Technicians	Instruction and supervision of students involved in patient care: Injections, dressings, etc. Handling sharps and medical waste.
<b>Health and Wellness Center</b>	Coordinator/Director RN/ Nurses, and Secretaries	Direct patient care: Injections, immunizations, wound care and first aid. Designated first aid provider (routine part of job).
<b>Maintenance Department</b>	Maintenance Personnel	Possible exposure to blood/body fluids when working with plumbing.

## Appendix E: Work Practice Controls

- ✓ The Dean of Science shall develop a schedule of disinfection for any work surface, which may become contaminated by the HIV, HCV or HBV virus. The type of chemical utilized shall be approved for the highest antimicrobial activity in order to kill the viruses.
- ✓ Protective coverings shall be replaced as soon as it is feasible.
- ✓ Broken glassware, which may be contaminated, shall not be picked up with bare hands nor shall any employee reach into a container of broken glassware.
- ✓ Regulated waste shall be disposed of in accordance with local, State and Federal regulations.
- ✓ Disposable sharps containers shall be designed according to regulations, not allowed to overfill and be located so that employees shall not have to walk long distances with used syringes.
- ✓ Sharps containers shall be inspected by laboratory faculty and staff members regularly and replaced as required.
- ✓ Other waste containers shall be of a capacity to hold the volume of waste generated between scheduled pickups.
- ✓ All containers shall be inspected by laboratory faculty and staff for leakage potential. Secondary containers shall be available if leakage is possible.
- ✓ All containers holding contaminated material shall comply with CCR, Title 8, and Chapter 4.



## Appendix F: Personal Protective Equipment Use & Availability

ITEM	HOW TO OBTAIN	COMMENT
<b>Single-Use Gloves</b>	Request from supervisor	Wear latex gloves whenever there is an opportunity for hand contact with blood, blood products, mucous membranes, non-intact skin, other potentially infectious materials or contaminated items and surfaces. Check for leaks, tears, punctures before each use. Use gloves only one time. Dispose in an appropriate waste container.
<b>Other Gloves</b>	Request from supervisor	Check for leaks, tears, punctures before each use. Dispose in an appropriate waste container.
<b>Lab Coats/ Uniforms</b>	Request from supervisor	Check the condition of lab coats before each use. Do not wear lab coats which are obviously soiled. Follow standard laundering or disposal procedures for lab coats, as appropriate.
<b>Masks</b>	Request from supervisor	Wear masks whenever there is a likelihood of splash, sprays, mists or the production of respirable droplets. Ensure that the masks fit properly. Dispose of masks in appropriate containers.
<b>Safety Goggles/ Safety Glasses</b>	Request from supervisor	Wear eye protection whenever there is an opportunity for exposure to blood, blood products or other potentially infectious materials. Clean with appropriate antiseptic agents. Dispose of these items in appropriate containers.
<b>Face Shields</b>	Request from supervisor	Wear face shields whenever there is an opportunity for exposure to large quantities of blood, blood products or other potentially infectious materials. Wear face shields whenever there is a likelihood of splash, sprays, mists or the production of respirable droplets. Clean with appropriate antiseptic agents. Dispose of these items in appropriate containers.
<b>Hoods/ Hair Nets</b>	Request from supervisor	Check for leaks, tears and punctures before each use. Dispose in appropriate waste containers.



## Safety Program Approval Form

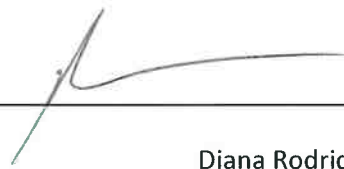
Safety Program: **Blood borne Pathogen Consolidated Safety Program – San Bernardino Valley College – September 2016**

Reviewed by:  Date 09/19/16  
Whitney J. Fields

SBCCD Director, Safety & Risk Management

Approved by:  Date 9.21.16  
Scott Stark

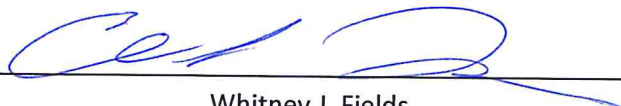
SBVC/Vice President Administrative Services/Business Services

Approved by:  Date 9.21.16  
Diana Rodriguez  
SBVC President

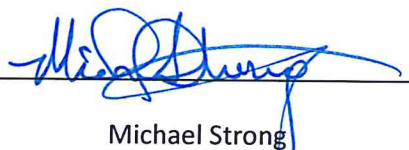


## Safety Program Approval Form

Safety Program: **Blood borne Pathogen Consolidated Safety Program – Crafton Hills College – September 2016**

Reviewed by:  Date 09/19/16  
Whitney J. Fields

SBCCD Director, Safety & Risk Management

Approved by:  Date 9/23/16  
Michael Strong

CHC/Vice President Administrative Services/Business Services

Approved by:  Date 9/27/16

Dr. Wei Zhou

CHC President