STANDARD OPERATING PROCEDURE TEMPLATE · LABORATORY SAFETY (OSHA)

Bloodborne Pathogens Exposure Control Plan

Governing requirement: OSHA 29 CFR 1910.1030

Applies to: ☑ Waived ☑ Moderate complexity ☑ High complexity

Laboratory name		**CLIA number**	
Document number		**Version**	
Effective date		**Next review due**	
Author		**Department / section**	
Approved by (laboratory director)		**Director signature**	
Approval date		**Supersedes document**	

Important: Template only. Before use, this document must be reviewed, adapted to your laboratory's instruments, test systems and the manufacturer's instructions, and approved, signed and dated by the laboratory director. Check current federal, state and accreditation requirements. Not legal advice. Sound Lab Consultants is not affiliated with or endorsed by CMS, CDC, FDA, OSHA, CAP, COLA, The Joint Commission, CLSI or any manufacturer.

1. Purpose

To eliminate or minimize occupational exposure to blood and other potentially infectious materials (OPIM).

2. Scope

All employees with reasonably anticipated occupational exposure at **[Facility name]**.

Facility name	

3. Responsibility

- Laboratory director / safety officer: implements and updates this plan at least annually.
- Supervisor: provides training, ensures equipment and PPE are available and investigates incidents.
- All employees: follow the plan, use PPE and report exposures, spills and hazards immediately.

4. Definitions

OPIM: Other potentially infectious materials, as defined in 1910.1030(b).

Universal precautions: Treating all human blood and OPIM as infectious.

5. Materials, equipment and records

- Sharps with engineered injury protections
- Sharps containers
- PPE
- Sharps injury log
- Hepatitis B vaccine declination forms

6. Procedure

1. Exposure determination: list job classifications with exposure **[Job classifications]** and tasks **[Tasks]**.

Job classifications	
Tasks	

2. Use universal precautions.

3. Engineering controls: safety-engineered sharps, sharps containers, splash shields, biosafety cabinets; evaluate safer devices annually with input from front-line staff.

4. Work practices: no recapping, no eating or drinking in work areas, hand washing after glove removal.

5. Provide PPE at no cost and require its use.

6. Housekeeping: decontaminate surfaces after contact and at end of shift **[Disinfectant]**.

Disinfectant	

7. Offer hepatitis B vaccination within 10 working days of assignment; keep declinations.

8. Post-exposure: wash site, report immediately, document route, test source if consent obtained, refer to **[Occupational health provider]** for evaluation and prophylaxis.

Occupational health provider	

9. Label regulated waste and refrigerators with the biohazard symbol.

10. Train at assignment and annually; keep records 3 years.

11. Maintain a sharps injury log; review and update this plan at least annually.

7. Quality control

• Inspect safety equipment and supplies on the schedule in this plan and record results.

• Review incidents and near misses at least quarterly.

8. Interpretation, reporting and documentation

• Medical records kept for duration of employment plus 30 years.

9. Limitations and cautions

• This is a generic template. Adapt it to your instruments, test systems, manufacturer instructions, state law and accreditation standards before use.

10. References

• OSHA, 29 CFR 1910.1030 Bloodborne pathogens
https://www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.1030

• OSHA, 29 CFR 1904 Recordkeeping (Form 300 log)
https://www.osha.gov/laws-regs/regulations/standardnumber/1904

• CDC, Guidelines for safe work practices in human and animal medical diagnostic laboratories (MMWR 2012)
https://www.cdc.gov/mmwr/preview/mmwrhtml/su6101a1.htm

11. Sharps injury log

Fill in electronically or print. Keep completed forms per the record retention policy.

Date	Case #	Device type and brand	Department	How it happened	Body part	Reported to

12. Lab-specific notes

Notes and local requirements	

13. Revision history

Version	Date	Description of change	Author	Approved by

14. Annual review log

Procedures and changes must be approved, signed and dated by the current laboratory director before use (42 CFR 493.1251(d)).

Review date	Reviewed by	Signature	Changes needed (Y/N)	Comments

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