

STANDARD ADMINISTRATIVE PROCEDURE

24.01.01.M4.01 Bloodborne Pathogens Exposure Control

Approved February 14, 2003

Revised August 26, 2008

Revised May 8, 2013

Revised February 4, 2019

Next scheduled review: February 4, 2024

Procedure Statement

Texas A&M University is committed to providing a safe and healthful work and educational environment. In accordance with the Texas Health and Safety Code, Chapter 81, Subchapter H, and analogous to the OSHA Bloodborne Pathogens Standard, the University has established an Exposure Control Plan (ECP) to prevent, or minimize, the exposure of employees, students and others to bloodborne pathogens.

Official Procedure/Responsibilities/Process

1. Official Procedure

This procedure applies to all employees, students and visitors of Texas A&M University who have a reasonably anticipated risk of exposure to bloodborne pathogens in the course of their research, teaching or testing activities. It also applies to personnel at Texas A&M University Galveston (TAMUG) to the extent they are participating in research, teaching and testing activities permitted by the Texas A&M University's Institutional Biosafety Committee. The University's Bloodborne Pathogens Exposure Control Plan includes more specific details and is available here: (https://vpr.tamu.edu/wp-content/uploads/2021/10/2020-12-31-TAMU-BBP-ECP_signed.pdf). TAMUG maintains a separate Bloodborne Pathogens Exposure Control Plan for its employees, students and visitors.

The Exposure Control Plan does not apply to employees, students or visitors who may have incidental exposures, that may take place on the job, but that are outside of their normal course of activities, including employees who voluntarily perform first aid or CPR, unless these activities are within the scope of their assigned or implied job functions.

2. Responsibilities

- 2.1 The Office of Biosafety staff shall:
 - 2.1.1 Maintain the Bloodborne Pathogens Exposure Control Plan.
 - 2.1.2 Annually review and update the Bloodborne Pathogens Exposure Control Plan as necessary.
 - 2.1.3 Annually review and update training materials as necessary.
 - 2.1.4 Provide subject matter guidance for persons completing Bloodborne Pathogens training.
 - 2.1.5 Maintain records for training, immunization election, immunization services, sero-surveillance and post exposure evaluation and care as required by the Bloodborne Pathogens Exposure Control Plan.
 - 2.1.6. Upon being notified of a potential bloodborne pathogens exposure incident, assist individual(s) in receiving post-exposure evaluation and treatment, as appropriate.
- 2.2 Employing Departments shall:
 - 2.2.1 Ensure their staff complies with the provisions of the Bloodborne Pathogens Exposure Control Plan.
 - 2.2.2 Ensure adequate resources necessary for compliance with the Bloodborne Pathogens Exposure Control Plan are available, including, but not limited to, personal protective equipment (PPE), soap, disinfectant, commercially constructed sharps containers, biohazard waste disposal and labeling materials.
- 2.3 Supervisors shall:
 - 2.3.1 Ensure that all employees, students, and visitors receive Bloodborne Pathogens training within 10 days of beginning work in which there is a potential for exposure to blood and/or other potentially infectious materials (OPIM), and annually thereafter, for as long as the potential for exposure to blood and/or other potentially infectious materials remains a part of their duties.
 - 2.3.2 Verify visitors to University facilities have completed bloodborne pathogens training equivalent to that outlined in the Bloodborne Pathogens Exposure Control Plan, prior to participating in activities having any potential for exposure to blood and/or OPIM.
 - 2.3.3 Follow and ensure that their employees, students, volunteers and visitors adhere to proper work practices, follow universal precautions, wear appropriate personal protective equipment, and practice proper cleanup/waste disposal techniques, as described in the Bloodborne Pathogens Exposure Control Plan.
 - 2.3.4 Ensure the completion of a Texas Department of Insurance – Division of Workers’ Compensation (DWC-1) First Report of Injury or Illness form for any injury or exposure incident reported to them by their employees.
 - 2.3.5 Report any potential bloodborne pathogens exposure to the Office of Biosafety.
- 2.4 Employees, students, and visitors shall:

- 2.4.1. Adhere to proper work practices, follow universal precautions, wear appropriate personal protective equipment, and practice cleanup/waste disposal techniques, as described in the Bloodborne Pathogens Exposure Control Plan.
 - 2.4.2. Report all potential bloodborne pathogens exposure incidents to their supervisor immediately.
- 3. Training
 - 3.1 Bloodborne pathogens training must be provided to individuals prior to their initial assignment to tasks where occupational exposure may occur. Annual refresher training shall be completed within one year of the individual's previous training.
- 4. Hepatitis B Vaccination Program
 - 4.1 All persons assessed as having a reasonably anticipated risk of occupational exposure to blood or OPIM are offered the hepatitis B vaccine at no cost to the individual.
 - 4.2 Vaccination is offered after bloodborne pathogens training and within 10 working days of initial assignment to work unless: 1) the individual has previously received the complete hepatitis series; 2) antibody testing has revealed that the individual is immune; or 3) the vaccine is contraindicated for medical reasons.
 - 4.3 Persons will receive the vaccination through the services of a healthcare facility designated by the Office of Biosafety.
 - 4.4 Individuals at particularly high risk of occupational exposure to bloodborne pathogens (ex. phlebotomists, hepatitis research personnel and others routinely handling blood or blood products) will be tested for serological response (immunity) to Hepatitis B following vaccination or at time of hire as recommended by the CDC Advisory Committee on Immunization Practices.
- 5. Incident Response and Follow Up
 - 5.1 In the event of an occupational exposure to bloodborne pathogens, the individual is responsible for reporting the incident to his/her supervisor. The supervisor must verify the completion of a DWC-1 First Report of Injury or Illness form and by the relevant departmental HR Liaison, and notify the Office of Biosafety immediately.
 - 5.2 If exposure to bloodborne pathogens is known or suspected, the supervisor and the individual must complete and submit the Office of Biosafety's Incident Report form.
 - 5.3 The Office of Biosafety is responsible for ensuring that appropriate evaluation and follow up measures are taken and that required records are maintained as required by the Bloodborne Pathogens Exposure Control Plan.
- 6. Contaminated Sharps Injury Log
 - 6.1 The System Office of Risk Management and Safety maintains the Texas Department of State Health Services Contaminated Sharps Injury Log. The required information related to a contaminated sharps injury is obtained from the Workers Compensation Insurance form DWC-1 by the System Office of Risk Management and Safety.

7. Records

- 7.1 Confidential employee occupational health records are maintained by the Office of Biosafety as appropriate to document compliance with the provisions of the Texas A&M University Bloodborne Pathogens Exposure Control Plan. These records shall be maintained in accordance with the University's Records Retention Schedule.

Related Statutes, Policies, or Requirements

Supplements [System Policy 24.01](#) and [System Regulation 24.01.01](#)

29 C.F.R. 1910

OSHA Bloodborne Pathogens Standard

Texas Health and Safety Code Section 81.304

University Bloodborne Pathogens Exposure Control Plan

TAMU Galveston Bloodborne Pathogens Exposure Control Plan

Contact Office

Division of Research

Office of Biosafety 979-845-6649