

BLOOD BORNE PATHOGENS PROCEDURE
(SAF-P004)
Clarksville-Montgomery County School System

1.0 SCOPE:

- 1.1 This procedure outlines the process for reporting potential exposure of an employee to blood borne pathogens.

The online version of this procedure is official. Therefore, all printed versions of this document are unofficial copies.

2.0 RESPONSIBILITY:

- 2.1 Risk Manager / Safety Coordinator

3.0 APPROVAL AUTHORITY:

- 3.1 Chief Human Resources Officer (CHRO)

4.0 DEFINITIONS:

- 4.1 Blood Borne Pathogen Exposure (BBPE): Any exchange of body fluid into, or from, an entry point.
- 4.2 TOSHA: Tennessee Occupational Safety & Health Administration

5.0 PROCEDURE:

- 5.1 A potential exposure occurs.
- 5.2 The potential exposure is reported to the designated Building Administrator.
- 5.3 The Administrator reports the incident to the Risk Manager/Safety Coordinator by telephone.
- 5.4 The Risk Manager/Safety Coordinator determines if there has been a BBPE.
- 5.4.1 If there was no exposure, this procedure ends.
- 5.5 If an exposure is determined, the Risk Manager/Safety Coordinator contacts and/or meets with the affected employee and the building administrator.
- 5.6 An exposure report is written by the Risk Manager/Safety Coordinator.
- 5.7 Employee is offered a copy of Clarksville-Montgomery County School System's Bloodborne Pathogen Exposure Control Program, (Refer to [RSK-PRO1](#)) and a copy of Tennessee Occupational Safety & Health Administration's (TOSHA) Blood Borne Pathogen standard.
- 5.8 Employee chooses from three options and completes and signs Blood Borne Pathogen Exposure Form. Refer to [SAF-F006](#). The options are:
- 5.8.1 Employee has the right to be tested for HIV & Hepatitis B.
- 5.8.2 Employee has the right to request that student/employee/other individual who caused exposure be tested.
- 5.8.3 Employee has the right to decline both.

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5.9 The report is closed by the Risk Manager/Safety Coordinator and submitted to the Chief Human Resources Officer. If the employee requests to be tested or requests the student/employee/other individual be tested, the Risk Management/Safety Department will make the arrangements.

6.0 ASSOCIATED DOCUMENTS:

6.1 Bloodborne Pathogen Exposure Control Program [RSK-PRO1](#)

6.2 TOSHA Standard

6.3 Bloodborne Pathogen Exposure Form [SAF-F006](#)

7.0 RECORD RETENTION TABLE:

<u>Identification</u>	<u>Storage</u>	<u>Retention</u>	<u>Disposition</u>	<u>Protection</u>
Exposure Report and Exposure Form	Risk Management/Safety Department	30 years	Shredded	Secured Building

8.0 REVISION HISTORY:

<u>Date:</u>	<u>Rev.</u>	<u>Description of Revision:</u>
1/28/03		Initial Release
2/24/05	A	Change responsibility and authority, replace Safety Officer with Safety Coordinator throughout procedure, update flowchart
4/18/07	B	Remove WC reference, add form SAF-F006, update flowchart
6/11/09	C	Add 4.2, update employee titles, add Employee Safety Handbook web link to 6.1, revise flowchart
4/6/11	D	Changed wording from "issued" to "offered" in 5.7, Added clarification to title of Bloodborne Pathogen Program and added link to 5.7, Added clarification to Associated Documents 6.1, Changed storage of exposure reports/forms from Safety Office to Risk Management/Safety Department in Record Retention.

9.0 FLOWCHART:

9.1 A flowchart detailing this process can be found in "Exhibit A" of this procedure.

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Blood Borne Pathogens Flowchart

