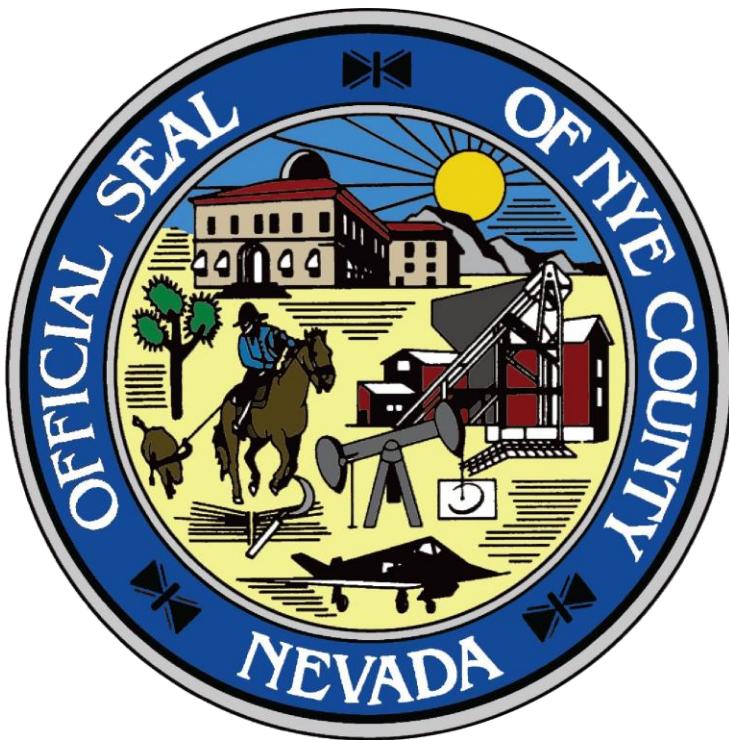


NYE COUNTY, NEVADA EXPOSURE CONTROL PLAN



NYE COUNTY INCIDENT REPORTING AND MANAGEMENT

Nye County Exposure Control Plan Document and Contact Information

File Name:	Nye County Exposure Control Plan
To obtain this document or to make inquiries:	Nye County (775) 277-0307 incidentreporting@nyecountynv.gov
Requirements for Document acceptance and changes:	Acceptance of, and changes to this document must be reviewed and approved by the Nye County Manager and the Workplace Safety and Training Officer.

NYE COUNTY SAFETY COMMITTEE
EXPOSURE CONTROL PLAN, NYE COUNTY, NEVADA

PROGRAM/PLAN APPROVAL SHEET

DATED THIS: 4 day of December, 2025

WORKPLACE SAFETY & TRAINING OFFICER
COUNTY OF NYE, STATE OF NEVADA

By 
Terry Romey

DATED THIS: 4th day of December, 2025

COUNTY MANAGER
COUNTY OF NYE, STATE OF NEVADA

By: 
Brett Waggoner

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Section 1

Purpose of the Plan

Nye County is committed to providing a safe and healthy work environment. Pursuant to this endeavor, the following exposure control plan (ECP) is to eliminate or minimize occupational exposure to bloodborne pathogens in accordance with OSHA standard 29 CFR 1910.1030, “Occupational Exposure to Bloodborne Pathogens “.

This ECP applies to any person acting on behalf of Nye County, regardless of full time, part time, temporary, or volunteer status.

This document shall be utilized to assist in assuring compliance with the standard, thereby protecting our employees/volunteers. This ECP includes:

- Determination of employee/volunteer exposure
- Implementation of various methods of exposure control, including:
 - Universal Precautions
 - Engineering and work practice controls
 - Personal Protective Equipment (PPE)
 - Housekeeping
- Vaccination Program
 - Hepatitis A (HAV)
 - Hepatitis B (HBV)
 - Tetanus (Td or Tdap)
 - Influenza
 - MMR
- Post-exposure evaluation and follow-up
- Communication of hazards to employees and training
- Recordkeeping
- Procedures for evaluating circumstances surrounding an exposure incident

The methods of implementation of these standards are provided in the subsequent pages of this ECP.

Section 2

Program Administration

The Nye County Workplace Safety and Training Officer will ensure compliance with the standard 29 CFR1910.1030 inclusively. The exception to this is 29 CFR 1910.1030(e) 1-5 as this portion of the standard relates to HIV and HBV research laboratories and production facilities. This responsibility is included but is not limited to:

- Maintain, Review, and update the ECP at least annually
- Review and update the ECP whenever necessary to include new or modified tasks and procedures
- Coordination/Facilitation of training, documentation of training
- Ensure availability of this document to all employees/volunteers, OSHA representative, the Board of Commissioners, etc.
- Ensure that all medical action required are performed
- Evaluation of circumstances surrounding exposure incidents

The Nye County Workplace Safety and Training Officer may utilize Department Managers/Supervisors, Departmental Safety Officers, Local Fire Chiefs, Local Ambulance Coordinators, etc. to aid in maintaining compliance. He/ She will direct, request, approve of, and/or oversee the activities necessary to meet the letter and intent of the standard included.

- Annual training
- New Hire Training
- Availability of this document and 29 CFR 1910.1030 to all employee/volunteer personnel
- The maintenance, ordering, proper utilization of PPE, engineering controls, labels, red bags as required by the standard
- Availability of the aforementioned equipment in quantities and sizes that are sufficient
- Develop and implement a written schedule for cleaning and a method of decontamination for each work area within each department in which exposure is likely

Department Managers & Supervisors

Department Managers/Supervisors are responsible for exposure control in their respective areas, working directly with the Site Safety Representative and Nye County Workplace Safety and Training Officer to ensure that proper policy and procedures are followed.

Volunteer ambulance, fire, and HAZMAT personnel fall under the direction of the Director of Emergency Management. He/She may delegate this responsibility to the appropriate Coordinator/Trainer. The person(s) determined by the Director of Emergency Management shall work directly with the Workplace Safety and Training Officer to ensure that all volunteer ambulance, fire, and HAZMAT personnel, acting on behalf of Nye County maintain compliance with the standard.

Every person who is either an employee or a volunteer for the County of Nye and who perform a task or work in a department in which an exposure may occur shall be responsible for:

- Attending training sessions pursuant to 29 CFR 1910.1030(g)(2)(iv) through 29 CFR 1910.1030(g)(2)(vii)(N)
- Planning and conducting all operations in accordance with safe work practices.
- Developing good personal hygiene habits
- Notifying the Nye County Workplace Safety and Training Officer of any changes in work environment, equipment, task, a change in available PPE, or a change in environmental controls etc., that will require a change in the ECP,
- Recognizing the potential for exposure while performing a task and use proper PPE, engineering controls, and/or equipment
- Notifying in writing, Department Manager/Supervisor, Coordinator/Trainer, or Nye County Workplace Safety and Training Officer in the event of an exposure.
- Being familiar with this document as well as 29 CFR 1910.1030
- Maintaining a clean and sanitary work site

The Nye County Department of Human Resources/Risk Management will maintain all employee/volunteer health records.

Section 3

Availability of the Exposure Control Plan (ECP)

29 CFR 1910.1030 Standard to Employees & Volunteers

Pursuant to 29 CFR 1910.1030(c)(1)(iii) a copy of this document and a copy of the standard 29 CFR 1910.1030 shall be made available to any employee/volunteer of or acting on behalf of Nye County. Employees/Volunteers will be advised of this availability during their education/training sessions. A copy of this plan as well as a copy of the standard 29 CFR 1910.1030 shall be kept in the following locations.

Emergency Management Offices

- **In the Pahrump office and in the Tonopah office**

Each Ambulance Stations

Each Fire Station

- **All Locations**

Human Resources

- **In the Pahrump office and in the Tonopah office**

Road Department Shops

- **In the Pahrump and Tonopah areas**

Buildings and Grounds Shops

- **In the Pahrump and Tonopah areas**

Community Health Offices

- **In the Pahrump and Tonopah areas**

All Justice and District Courts

Detentions Centers

- **In the Pahrump and Tonopah areas**

All Sheriff's Departments including Satellite Offices

Section 4 **Exposure Determination**

Pursuant to 29 CFR 1910.1030(c)(2)(i) – 29 CFR 1910.1030(c)(2)(ii)

Departments in which all Employees have occupational exposure	Departments in which some Employees have occupational exposure
Emergency Management including volunteers Ambulance Personnel Fire Personnel Hazmat Personnel Equipment Services Health Nurse's Office Sheriff's Office Detention Health and Human Services	Buildings and Grounds District Attorney's Office Personnel District Court Personnel Justice Court Personnel Juvenile Public Works Road Department Senior Nutrition Animal Control

Any employee/volunteer may request that their department and/or task/procedure be listed within this document. This can be achieved by contacting either his/her direct supervisor or by contacting the Nye County Workplace Safety and Training Officer. Nye County will endeavor to educate and protect all employees/volunteers within its employ.

Task/Procedure List

- **Treatment and transport or persons involved in or suffering from some form of illness or injury**
- **Transport of Blood, Urine, Emesis (vomit)**
- **Handling of body parts**
- **Handling, transporting, or cleaning/disinfecting any contaminated materials, equipment, or workspace**
- **Handling of deceased individuals**
- **Investigation of crime scenes**
- **Arrest/detainment of intoxicated individuals**
- **Septic System, sewage system, waste containment repair**
- **Immunization, gynecological exams, handling of biological specimens**
- **Repair of vehicles used in the transport and treatment of ill or injured persons**
- **Providers of CPR and or First Aid**
- **Arrest/detainment of violent persons**
- **Care of the Elderly**
- **Care of the homeless and/or transient**
- **Work assignments that put an employee in close proximity to any of these tasks/procedures**

Section 5

Methods of Compliance

Universal Precautions – Body Substance Isolation

All employees/volunteers regardless of classification will follow universal precautions any time that there is a likelihood of coming into contact with any body fluids, solids, or semi-solid human body substance. Personnel are to assume that any bodily fluid, solid, or semi-solid substance that may have come from another human is contaminated. This same assumption shall be applied to any surface, equipment, and/or material that may be contaminated by any bodily fluids, solids, or semi-solid substance from another human. Having made this assumption, every employee will, in these instances, utilize proper Personal Protective Equipment (PPE) while performing any task that may put them at risk of contamination. Meaning that employees/volunteers shall always utilize an acceptable barrier between themselves and anybody substance thereby disallowing said substance to come into contact with their own body. The only acceptable exception is when an employee/volunteer is in a circumstance or situation in which PPE would prevent the delivery of health care, or public safety service; or PPE would in those circumstances pose an increased hazard to the safety of the employee/volunteer or co-worker/co-volunteer; the employee/volunteer may elect not to utilize PPE. However, in such a situation an investigation and documentation shall ensue to determine whether changes can be instituted to prevent such occurrences in the future.

Personal Protective Equipment (PPE)

PPE utilized shall be of a type and construction as to prevent direct contact between the employee's/volunteer's skin, work clothing, street clothing, undergarments, eyes, mouth and/or other mucous membrane and the body substance. This is to include but not limited to the following list of Personal Protective Equipment:

Disposable Latex, or Latex like (i.e., Vinyl, Nitril) Gloves

- Leather gloves or any glove that allows fluids to permeate the materials of its construction are **not considered proper PPE**.

Gowns

Lab coats

Overalls (Tyvek)

Eyeglasses, goggles

Disposable facemask or face shield

Barrier devices (CPR)

Resuscitation bags

- PPE should be replaced any time that it threatens to become ineffective due to wear, contamination, puncture/tear, improper fit, etc.
- PPE shall be removed, replaced at any point that the PPE itself becomes a source of contamination to another employee/volunteer or other person
- If blood or other potentially infectious materials penetrate a garment, the PPE shall be removed or replaced immediately

- PPE that has been used or has become contaminated shall be placed in an appropriately designated area or container for proper storage, washing and decontamination, or disposal.
- PPE will be supplied, disposed of, laundered, replaced, repaired, at no cost to the employee/volunteer.
- PPE shall be worn any time an employee/volunteer is washing, laundering, or decontaminating surfaces, or handling, equipment, surfaces, or materials that have been contaminated.
- All PPE shall be removed prior to leaving the work area.

Ambulance Stations – Decontamination Areas

Engineering controls will be maintained at each ambulance facility for the purpose of equipment decontamination and to provide decontamination for employees or volunteers, such as a shower. Stainless steel or approved basins must be provided for decontamination of small equipment and large tub floor basins must have been installed for larger items such as backboards. The walls of the BIOHAZARD rooms must be smooth and have a composition to be cleaned and disinfected appropriately. The floor must have a drain and have a composition that enables proper decontamination. The door must have a locking device and a proper BIOHAZARD label placed outside for identification. There will be no drinking, eating, smoking, applying cosmetics or lip balm, and handling contact lenses in the BIOHAZARD room or in the ambulance. In addition, there will not be any food or drink stored in the BIOHAZARD rooms in refrigerator or freezer units.

Documentation will be maintained on cleaning equipment. Methods of decontamination will be with a 10% bleach solution. BIOHAZARD containers will be supplied in each designated BIOHAZARD room and these containers must have lids. In addition, these containers must be large enough to provide adequate accumulation of waste materials. The waste will be disposed of following all applicable regulations through the disposal companies in their respective areas. Personnel filling or disposing of these containers will wear a minimum PPE of latex gloves.

Different agency personnel for the purpose of decontamination of personnel and/or equipment may use these BIOHAZARD rooms. Different agencies may include but are not limited to Fire Department personnel, Sheriff's Office personnel, or any agency that may have received an exposure to bloodborne pathogens. These different agency personnel must have the proper training to perform decontamination in the facility. Personnel not trained adequately will not be allowed to enter the room or decontaminate equipment. Documentation must be provided to the facility and to the separate agency performing the procedures to meet the OSHA Standards.

Proper PPE must be worn while decontaminating equipment. A gown or other protective clothing and a face shield shall be worn any time that there is the potential of contamination secondary to splash or spray.

It will be the responsibility of the employee/volunteer to follow all established guidelines and regulations. Failure to follow these guidelines will constitute retraining and up to progressive disciplinary actions.

Section 6

Engineering and Work Practice Controls

- Hand washing facilities, antiseptic hand cleansers, or antiseptic towelettes will be provided in areas where exposure is likely to occur. Or in a location that will facilitate easy access for any employee/volunteer who may become contaminated.
- Disposal containers for sharps shall be located in all areas where they are used, and/or in a location that will facilitate easy, safe access by an employee/volunteer immediately after use. Sharps disposal containers shall be puncture-resistant, color-coded or labeled with a BIOHAZARD warning label, and leak-proof on the sides and bottom.
- Easily accessible to personnel and located as close as is feasible to the immediate working area where sharps are used or can be reasonably anticipated to be found
- Maintained upright throughout use.
- Replaced routinely and not be allowed to overfill.
- All equipment that is considered a “sharp” shall whenever possible be non-reusable.
- Biohazard bags, containers, labels etc. shall be accessible in all areas in which contamination of equipment, laundry, etc. may occur.
- Biohazard bags, containers, labels etc. shall be readily accessible to any employee/volunteer who may need to contain such a hazard.
- All equipment, equipment storage bags, surfaces, shall be of such a nature and construction that decontamination is made easy and practical.
- Routinely used items (equipment) that vary by the nature of their designated use, which is expected to become contaminated during the normal usage of such item shall, whenever practical be of the disposable (one time use only) variety.
- Containers used for medical specimens shall be leak-proof, color-coded or labeled with a BIOHAZARD warning label, and puncture resistant when necessary.
- Specimen of blood or other potentially infectious materials shall be placed in a container, which prevents leakage during collection, handling, processing, storage, transport, or shipping.

- The container for storage, transport, or shipping of blood or other potentially infectious materials shall be labeled or color-coded according to 29 CFR 1910.1030(g)(1)(i) and closed prior to being stored, transported, or shipped.
- If outside contamination of the primary container occurs, the primary container shall be placed within a second container which prevents leakage during handling, processing, storage, transport, or shipping and is labeled or color-coded according to the requirements of 29 CFR 1910.1030. Specimens of blood or other materials are placed in designated leak-proof containers, appropriately labeled, for handling and storage.
- If specimen could puncture the primary container, the primary container shall be placed within a secondary container, which is puncture-resistant in addition to the above characteristics.
- Contaminated needles and other contaminated sharps shall not be bent, recapped, or removed unless such an action is required by a specific medical procedure. Shearing or breaking of contaminated needles is prohibited.
- Such bending, recapping, or removal shall be done through the use of a mechanical device or a one-handed technique.
- When moving a container of contaminated sharps from the area of use, the container shall be:
 - Closed immediately prior to removal or replacement to prevent spillage or protrusion of contents during handling, storage, transport, or shipping
 - Placed in a secondary container if leakage is possible; The secondary container shall be:
 - Closeable.
 - Constructed to contain all contents and prevent leakage during handling, storage, or shipping; and
 - Labeled or color-coded according to 29 CFR 1910.130(g)(1)(i).
 - Reusable containers may not be used for the disposal of sharps.
- Immediately or as soon as possible after use, contaminated items shall be placed in the proper container or area (i.e., dirty laundry placed in appropriate containers, sharps placed in sharps containers etc.).
- Eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses are prohibited in work areas where there is a reasonable likelihood of occupational exposure.

- Food and drink are not kept in refrigerators, freezers, on countertops or in other storage areas where blood or other potentially infectious materials are present.
- All procedures involving blood or other infectious materials must minimize splashing or other actions generating droplets of these materials.
- Mouth pipetting/suctioning of blood or other potentially infectious materials is prohibited
- Equipment which becomes contaminated, is examined prior to servicing or shipping, and decontaminated as necessary (unless it can be demonstrated that decontamination is not feasible).
- An appropriate BIOHAZARD warning label is attached to any contaminated equipment, identifying the contaminated portions.
- Information regarding the remaining contamination is conveyed to all affected employees. This is to include the equipment manufacturer and the handling, servicing, or shipping.
- Gloves shall be worn when it can be anticipated that the employee/volunteer may have hand contact with blood, other potentially infectious materials, mucous membranes, and non-intact skin, when performing vascular access and when managing or touching contaminated items or surfaces.
- Disposable (one time use only) gloves shall not be washed or decontaminated for re-use.
- Utility gloves may be decontaminated for re-use if the integrity of the glove is not compromised. However, they must be discarded if they are cracked, peeling, torn, punctured, or exhibit other signs of deterioration or when their ability to function as a barrier is compromised.
- Masks in combination with eye protection devices, such as goggles or glasses with solid side shields, or chin length face shields, shall be worn whenever splashes, spray, spatter, or droplets of blood or other potentially infectious materials may be generated and eye, nose, or mouth contamination can be reasonably anticipated.
- Appropriate protective clothing such as gowns, aprons, lab coats, or similar outer garments shall be worn in occupational exposure situations. The type and characteristics will depend upon the task and degree of exposure anticipated.

Section 7 **Housekeeping**

For the sake of clarity, the following definitions shall be applied throughout this document. Cleaning is defined as; to remove any obvious signs of contamination and/or debris, cleaning does not render the surface/item “safe” for handling, use, or disposal. Decontamination is defined as to remove, inactivate, or destroy bloodborne pathogens on a surface/item to the point where they are no longer capable of transmitting infectious particles and the surface/item is rendered safe for handling, use, or disposal.

Employees/volunteers may use for the purpose of decontamination any commercially produced product specifically designed for the purpose of removing, inactivating, or destroying bloodborne pathogens. While using such products employees/volunteers shall follow all of the manufacture’s recommendations for safe and proper usage.

Employees/volunteers shall refer to the Material Safety Data Sheet for that product prior to using the product. Alternatively, employees/volunteers may use a 10% bleach/water solution for the decontamination of surfaces/items where applicable.

All employees/volunteers shall maintain all work areas in a clean and sanitary condition. It is the responsibility of employees to follow and maintain a regular cleaning and decontamination schedule as set by their respective department manager/supervisor and/or by the Nye County Workplace Safety and Training Officer. The cleaning and decontamination schedule shall include the following information.

- The area to be cleaned/decontaminated.
- Day and time of scheduled work.
- Cleansers and disinfectants to be used.
- Any special instructions that are appropriate.

This Record shall be kept for a period of three (3) years.

In addition to the regular cleaning/decontamination schedules employees/volunteers shall also be responsible for:

- All equipment and environmental and working surfaces shall be cleaned and decontaminated after contact with blood or other potentially infectious materials.
- And/or after completion of procedure.
- And/or any surface which is overtly contaminated.
- And/or after any spill of blood or potentially infectious material
 - This shall be done immediately or as soon as is feasible.
- At the end of the work shift the surface may have been contaminated since the last cleaning.
- Protective covers including but not limited to, plastic wrap, tin foil, gear bags, imperviously backed paper, used to cover equipment and environmental surfaces shall be removed and replaced as soon as feasible when they become overtly contaminated or at the end of the work shift if they may have become contaminated during the shift.

- All bins, buckets, cans, and similar receptacles intended for reuse which have a reasonable likelihood of becoming contaminated with blood or other potentially infectious materials shall be inspected and decontaminated on a regularly scheduled basis and cleaned and decontaminated immediately or as soon as feasible upon visible contamination.
- Broken glassware, which may be contaminated, shall not be picked up directly with the hands. It shall be cleaned up using mechanical means, such as a brush, dustpan, tongs, or forceps.
- When moving a container of contaminated sharps from the area of use, the container shall be
 - Closed immediately prior to removal or replacement to prevent spillage or protrusion of contents during handling, storage, transport, or shipping
 - Placed in a secondary container if leakage is possible; The secondary container shall be:
 - Closeable.
 - Constructed to contain all contents and prevent leakage during handling, storage, or shipping.
 - Labeled or color-coded according to 29 CFR 1910.130(g)(1)(i).
 - Reusable containers may not be used for the disposal of sharps.
- Reusable sharps that are contaminated with blood or other potentially infectious materials shall not be stored or processed in a manner that requires employees to reach by hand into the containers where these sharps have been placed.

Section 8

Regulated Waste Containment

All waste shall be managed, stored, shipped in accordance with **29 CFR 1910.1030(d)(4)(iii)** through **29 CFR 1910.1030(d)(4)(iv)(C)**.

Waste shall be defined as any liquid or semi-solid blood or other potentially infectious materials; contaminated items that would release blood or other potentially infectious materials in a liquid or semi-liquid state if compressed; items that are caked with dried blood or other potentially infectious materials and are capable of releasing these materials during handling; contaminated sharps; and pathological and microbiological wastes containing blood or other potentially infectious materials.

- All containers used to hold, transport, or store waste shall be labeled or color-coded appropriately.
- Shall not be allowed to over fill.
- Shall be of a construction that minimizes or prevents accidental spillage, puncture, or leakage.
- Closed prior to removal to prevent spillage or leakage.
- Disposed of in accordance with county, state, and federal guidelines.

Section 9 **Laundry**

Disposable or “one time use only” items shall be used whenever a comparable alternative is available.

Contaminated laundry shall be managed as little as possible with a minimum of agitations.

Universal precautions shall be utilized when it is reasonable to assume that laundry is or may have been contaminated.

Contaminated Laundry shall be placed and transported in bags or containers labeled or color-coded in accordance with 29 CFR 1910.1030.

Whenever contaminated laundry is wet or presents a reasonable likelihood of soak-through or leakage from the bag or container, the laundry shall be placed and transported in bags or containers, which prevents soak-through and/or leakage of fluids to the exterior.

Contaminated Laundry shall not be allowed to pile up in decontamination areas; it shall be laundered as soon as practical.

Section 10 **Vaccination Program**

To protect our employees/volunteers in the event that there is an exposure Nye County will offer, at no cost to employee/volunteer, vaccination not only against Hepatitis B (HBV) (as mandated by 29 CFR 1910.1030) but also to Hepatitis A (HAV), Influenza, Tetanus, and Mumps, Measles, and Rubella (MMR). Due to the requirements of 29 CFR 1910.1030 those employees/volunteers who decline the Hepatitis B (HBV) immunization must sign a declination form. Employees/volunteers may at any time request said immunizations during their employment/affiliation with Nye County, even if they have signed the declination form.

Current immunization schedules are as follows.

- Hepatitis B (HBV)
 - Must be offered to employee/volunteer within ten working days of initial assignment. Should the employee/volunteer elect to decline, the declination form shall be signed within the initial ten working days.
 - A series of three injections given over a six-month period.
 - Post vaccination test is conducted within 30-60 days following the third injection. A failure to convert will require either a booster or a second series of injections. Employee/volunteer will follow current recommendations of the provider.
- Hepatitis A (HAV)
 - Two injections given over 12 to 18 months
- Mumps, Measles, Rubella (MMR)
 - One to two injections in a lifetime
- Tetanus (Tdap or TD)
 - One injection every 7-10 years
- Influenza
 - One injection annually.

Employee/volunteer shall obtain written authorization from their Department Managers/Supervisors. Employee/volunteer must produce this signed authorization form at the time of their appointment. (See Forms section of this manual)

The Employee/Volunteer will receive direction from Human Resources or Workplace Safety & Training Officer in regard to current approved place of inoculation.

Section 11

Post Exposure

Should an exposure occur, the employee/volunteer shall report the exposure consistent with the Nye County's accident/incident procedure, additionally the following shall be done:

- Initial first aid (cleanse the wound, flush eyes, or other mucous membranes etc.)
- Employee/volunteer will have an immediate confidential medical evaluation and follow-up will be conducted by a health care professional
 - Health care provider must be supplied with a copy of OSHA's bloodborne pathogens standard
 - Health care providers must also be supplied with the following information.
 - A description of the employee's/volunteer's duties relevant to the exposure
 - Route(s) of exposure
 - If possible, results of the source individual's blood test
 - Relevant employee/volunteer medical records, including vaccination status
 - Documentation of the routes of exposure and how the exposure occurred
 - Identify and document the source individual (unless this identification is not feasible, or is prohibited by law)
 - The supervisor is to follow department policy to obtain consent and decide to have source individual evaluated as soon as possible to determine HIV, HCV, HBV, infectivity.
 - Document that the source individual's test results were conveyed to the employee's/volunteer's health care provider
 - Request consent to collect employee's/volunteer's blood as soon as is feasible after exposure and test blood for HBV and HIV serological status
 - The employee/volunteer will receive a copy of the health care provider's written opinion within 15 days of completion of evaluation
 - Post exposure prophylaxis, when indicated by the by the health care provider will be administered and counseling offered

Nye County Workplace Safety and Training Officer will review the circumstances of all exposure incidents to determine:

- Engineering controls in use at the time
- Work practices followed
- A description of the device being used
- Protective equipment or clothing what was used at the time of the exposure incident (gloves, eye shields, etc.)
- Location of the incident
- Procedure being performed when the incident occurred
- Employee's training
- If any revision to the ECP should be made.

Section 12

Communication of Hazards to Employees/Volunteers

Labels Signs



Employees/volunteers will ensure that warning labels (as shown above), or red bags are placed on any container used to store or transport items that may be contaminated with human body substances. This includes sharps containers, waste containers, storage containers etc. This label shall also be placed on the entrance door to all decontamination rooms, any cabinet or refrigerator where human blood or body substances are stored. Any item that is awaiting decontamination shall be bagged, boxed, or tagged with a label.

Department Managers/Supervisors will ensure that proper labels, bags, boxed, containers are readily available and placed in such a manner as to be immediately accessible to the employee/volunteer.

Employee/Volunteer Training

All employees/volunteers who may have an occupational exposure shall receive initial and annual training. This training will be coordinated through the Nye County Workplace Safety and Training Officer.

Training will include but is not limited to:

- The epidemiology, symptoms, and transmission of bloodborne pathogen disease
- A copy of, and an explanation of 29 CFR 1910.103
- A copy of, and an explanation of the Nye County Exposure Control Plan (ECP)
- Methods of recognition of task and activities that might involve exposure, including what constitutes an exposure
- An explanation of the use and limitations of engineering controls, work practices and PPE
- How to choose the right PPE, and how to properly don and doff PPE

- Information on the Hepatitis B (HBV) vaccine, including information on its efficacy, safety, method of administration, the benefits of being vaccinated, and that the vaccine is offered free of charge
- Immediate action should an exposure occur
- Information on the proper reporting procedure should an exposure occur
- Information on post exposure evaluation and follow up
- An explanation of proper labeling, color-coding, and placing of signs specific to department/task
- An opportunity for interactive questions and answers with the person conducting the training

The Nye County Workplace Safety and Training Officer will approve all lesson plans, all trainers etc. He/she is to ensure that trainers meet the requirements of 29 CFR 1910.1030.

Section 13 **Recordkeeping**

Training Records

Training records will be completed for each employee/volunteer at the completion of training. These records will be kept for a period of at least three years. The Nye County Workplace Safety and Training Officer will provide to the employee/volunteer his/her agent a copy of the employee's/volunteer's training records within fifteen (15) days of receiving a written request.

Training records shall include the following:

- The dates of training sessions
- The content or a summary of the training sessions
- The names and qualifications of persons conducting the training
- The names and job titles of all persons attending the training sessions

Medical Records

Medical records are maintained for each employee with occupational exposure in accordance with 29 CFR 1910.1020.

The Human Resources department will maintain all required medical records. These confidential records are kept for at least the duration of employment plus thirty (30) years. Copies of these records are provided at the written request of the employee/volunteer and to anyone having written consent of the employee/volunteer within fifteen (15) days of receipt of written consent.

Incident Evaluation Documentation

An exposure incident is evaluated to determine reporting needs. The Nye County Workplace Safety and Training Officer made this determination and the recording activities.

In addition to the requirements above a sharp's injury log shall be maintained. All percutaneous injuries from contaminated sharps are to be recorded. All incidences must include at least:

- Date of Injury
- Type and brand of the device involved (syringe, suture needle, etc.)
- Department or work area where the incident occurred
- Explanation of how the incident occurred

This log will be reviewed as part of the annual program evaluation and maintained for at least five years following the end of the calendar year covered.

Section 14 **Vaccination Declination Forms**

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 infection. I have been given the opportunity to be vaccinated with the 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.

Print Name _____

Signed _____

Date _____

I understand the due to my occupational exposure that I may be at risk of acquiring Hepatitis A virus infection. I have been given the opportunity to be vaccinated with the Hepatitis A vaccine, at no charge to myself. However, **I decline Hepatitis A vaccination at this time.** I understand that by declining this vaccine, I continue to be at risk for acquiring hepatitis A, a serious disease. If in the future I continue to have occupational exposure and I want to be vaccinated with Hepatitis A vaccine, I can receive the vaccination series at no charge to me.

Print Name _____

Signed _____

Date _____

Dear Provider,

As part of the Nye County Exposure Control Plan the person named below is eligible to receive one or more of the following vaccinations (s):

Tetanus (Tdap or TD)

Mumps/Measles/Rubella (MMR)

Influenza

Hepatitis A

Nye County will pay all associated cost of immunization(s) as listed.

Employee/Volunteer Name: _____

Department: _____

Supervisor Authorized Signature

Send Invoice to:

(please include a copy of this form)

Dear Provider,

As part of the Nye County Exposure Control Plan the person named below has/is participating in our **Hepatitis B** immunization program. Please obtain a sample and conduct a pre/post (circle one) titer test. Nye County will pay all associated cost of immunizations as listed.

Employee/Volunteer Name: _____

Department: _____

Supervisor Authorized signature

Send Invoice to:

(please include a copy of this form as well as a copy of these results)

Exposure Evaluation Form

Name of Employee/Volunteer: _____

Incident Date: _____ Time: _____

Date Reported: _____ Time: _____

Location: _____

Potentially Infectious Materials involved: _____

Source of Potentially Infectious Materials: _____

Task /procedure being performed: _____

Contributing Factors: _____

PPE being used: _____

Immediate Action Taken After Exposure: _____

Preventative recommendations: _____

Post-Exposure Follow-Up Check List

This form will serve as a timeline of events when an exposure or suspected exposure occurs. Please initial and date those items that you have done. When finished with the items that pertain to your specific realm of authority send this document on to the next link in the chain. This document once completed shall be sent to Nye County Workplace Safety and Training Officer.

Name of Employee/Volunteer: _____

Completion Date	Activity, Form, or Event	Initials	Status
	First aid received or medical attention sought (Immediately after incident)		
	Notifications made to Department Head/Supervisor/Manager (Immediately after incident)		
	* Exposure Evaluation Form Completed & Sent to Workplace Safety and Training Officer (Within 3 days of incident)		
	C-1 form completed (Within 3 days of incident)		
	C-1 form, and all follow up forms Sent to Human Resources – Risk Management (Immediately after completion of each form)		
	* Employee furnished with documentation regarding exposure incident (As soon as feasible after incident)		
	*Source Individual Identified Blood Collected and Tested (As soon as possible, within 72 hrs.)		
	*Employee/volunteer's Blood Collected and evaluated (As soon as possible, within 72 hrs.)		

	*Initial appointment arranged with a health care provider for employee/volunteer (Within 72hrs. of incident)		
	* Follow up appointment(s) scheduled with a contracted provider (Immediately following initial appointment)		
	*Documentation forwarded to Health Care Provider (29 CFR 1910.1030, ECP, exposure evaluation form, Source individual's lab results, employee's medical records)		
	If sharps related incident		

* Denotes those items which are required in accordance with 29CFR 1910.1030

Decontamination Log

Section 15 **Reference**

- OSHA standard 29 CFR 1910.1030
- Department specific Q & A
- BBP Exposure Quick Chart
- Workers Compensation packet
- Body Fluid Spill Clean up
- PPE Sequence