

### Bloodborne Pathogens

**Instructions:** This checklist is intended to help you identify potential hazards in your workplace. The questions are based on applicable Federal OSHA standards. Keep in mind that additional state and local regulations may apply, depending upon your location. Please check one answer for each question. If you select “no,” you should investigate further to determine what corrective action may be needed to address the hazard. You can review the specific OSHA Standards outlined below at [www.osha.gov/law-regs.html](http://www.osha.gov/law-regs.html). Choose “General Industry” or “Construction.”

	Questions	OSHA Regulation	Yes	No	N/A
	<b>Communication of Hazards to Employees</b>				
1)	Are containers of regulated waste labeled with a biohazard warning label?	1910.1030(g)(1)(i)			
2)	Are individuals who are reasonably anticipated to have contact with blood or other potentially infectious materials in the course of their work provided training on bloodborne pathogens?	1910.1030(g)(2)			
3)	Is additional bloodborne pathogen training provided when changes are instituted that might affect exposure such as modification of tasks or procedures or adoption of new tasks or procedures?	1910.1030(g)(2)(v)			
4)	Is bloodborne pathogen refresher training provided at least annually?	1910.1030(g)(2)(ii)(C)			
5)	Is the bloodborne pathogen training material appropriate in content and vocabulary to the educational level, literacy, and language of people to be trained?	1910.1030(g)(2)(vi)			
6)	Is the person(s) who conducts the bloodborne pathogen training knowledgeable in the subject matter?	1910.1030(g)(2)(viii)			
	<b>Engineering and Work Practice Controls</b>				
7)	Are contaminated sharps discarded immediately in containers that are labeled or color-coded?	1910.1030(d)(2)(viii)(B)			

# Bloodborne Pathogens

	Questions	OSHA Regulation	Yes	No	N/A
	<b>Engineering and Work Practice Controls</b>				
<b>8)</b>	Are engineering and work practice controls implemented before personal protective equipment is used?	1910.1030(d)(2)(i)			
<b>9)</b>	Are engineering controls examined and maintained on a regular schedule to ensure their effectiveness?	1910.1030(d)(2)(ii)			
<b>10)</b>	Are food and drink prohibited in refrigerators, freezers, shelves, cabinets, or on countertops or bench tops where blood or other potentially infectious materials are present?	1910.1030(d)(2)(x)			
<b>11)</b>	Are hand washing facilities readily accessible?	1910.1030(d)(2)(iii)			
<b>12)</b>	Are specimens of blood or other potentially infectious materials placed in an appropriate container that prevents leakage during collection, handling, processing, storage, or transport?	1910.1030(d)(2)(xiii)			
<b>13)</b>	Are tasks involving blood or other potentially infectious materials performed in a way that minimizes splashing and generating droplets of these substances?	1910.1030(d)(2)(xi)			
<b>14)</b>	Can it be assured that the shearing and breaking of contaminated needles does not occur?	1910.1030(d)(2)(vii)			
<b>15)</b>	Do employees follow universal precautions to prevent contact with blood or other potentially infectious materials?	1910.1030(d)(1)			
<b>16)</b>	Do employees wash their hands immediately after removing gloves or other personal protective equipment?	1910.1030(d)(2)(v)			
<b>17)</b>	Do employees wash their hands or other skin areas with soap and water after contact with blood or other potentially infectious materials?	1910.1030(d)(2)(vi)			

# Bloodborne Pathogens

	Questions	OSHA Regulation	Yes	No	N/A
	<b>Engineering and Work Practice Controls</b>				
<b>18)</b>	Is it prohibited to bend, recap, or remove contaminated needles or sharps except when no feasible alternatives are available?	1910.1030(d)(2)(vii)			
<b>19)</b>	Is it prohibited to eat, drink, smoke, apply cosmetics, and handle contact lenses in work areas where the potential exists for exposure to bloodborne pathogens?	1910.1030(d)(2)(ix)			
<b>20)</b>	Is mouth pipetting and suctioning of blood or other potentially infectious agents prohibited?	1910.1030(d)(2)(xii)			
	<b>Exposure Control Plan</b>				
<b>21)</b>	Has a written exposure control plan been developed?	1910.1030(c)(1)(i)			
<b>22)</b>	Is the exposure control plan accessible to all employees?	1910.1030(c)(1)(iii)			
<b>23)</b>	Is the written exposure control plan available on request for examination or copying?	1910.1030(c)(1)(iii)			
<b>24)</b>	Is the written exposure control plan updated yearly?	1910.1030(c)(1)(iv)			
	<b>General Requirements</b>				
<b>25)</b>	Are accurate medical records maintained regarding hepatitis B vaccinations, examinations, medical testing, follow-up procedures, and copies of written opinions given in response to exposure incidents?	1910.1030(h)(1)			
<b>26)</b>	Has an exposure determination been prepared by job classification with a list of job tasks and procedures in which occupational exposure occurs?	1910.1030(c)(2)(i)			
<b>27)</b>	Has the employer provided the employee with a copy of the evaluating healthcare professional's written opinion?	1910.1030(f)(5)			

# Bloodborne Pathogens

	Questions	OSHA Regulation	Yes	No	N/A
	<b>General Requirements</b>				
<b>28)</b>	Has the healthcare professional responsible for the employee's hepatitis B vaccination been provided a copy of the bloodborne pathogens regulation?	1910.1030(f)(4)(i)			
<b>29)</b>	Is contaminated laundry placed and transported in labeled or color-coded bags or containers?	1910.1030(d)(4)(iv)(a)(2)			
	<b>Hepatitis B Vaccination and Post-exposure Evaluation</b>				
<b>30)</b>	Have persons who refused to take the hepatitis B vaccination series signed a statement to that effect following the form prescribed by the OSHA standard?	1910.1030(f)(2)(iv)			
<b>31)</b>	Is a confidential medical evaluation and follow-up made available to an exposed person following a report of an exposure incident?	1910.1030(f)(3)			
<b>32)</b>	Is the hepatitis B vaccination series made available to all persons who are reasonably anticipated to come in contact with blood or other potentially infectious materials through the performance of their job duties?	1910.1030(f)(1)			
<b>33)</b>	Is the hepatitis B vaccination series made available to persons who have received the required bloodborne pathogen training?	1910.1030(f)(2)			
<b>34)</b>	Within 10 days of initial assignment, is the hepatitis B vaccination series made available to persons whose job is reasonably anticipated to have contact with blood or other potentially infectious materials?	1910.1030(f)(2)(i)			

# Bloodborne Pathogens

	Questions	OSHA Regulation	Yes	No	N/A
	<b>Housekeeping</b>				
<b>35)</b>	Are all equipment and working surfaces cleaned and decontaminated immediately, or as soon as feasible, after contact with blood or other potentially infectious materials?	1910.1030(d)(4)(ii)			
<b>36)</b>	Are all reusable receptacles such as bins, pails, and cans that are likely to become contaminated with blood or other potentially infectious materials cleaned and decontaminated immediately, or as soon as feasible, upon visible contamination?	1910.1030(d)(4)(ii)(C)			
<b>37)</b>	Are containers of regulated waste, other than sharps, that have become contaminated on the outside placed into appropriate secondary containers?	1910.1030(d)(4)(iii)(B)(2)			
<b>38)</b>	Are containers used for sharps disposal closable, puncture resistant, leakproof on sides and bottom, and labeled with a biohazard warning label or colored red?	1910.1030(d)(4)(iii)(A)(1)			
<b>39)</b>	Are containers used for sharps disposal easily accessible and located in the area where sharps are used or can be reasonably anticipated to be found?	1910.1030(d)(4)(iii)(A)(2)(i)			
<b>40)</b>	Are containers used for sharps disposal maintained upright throughout use?	1910.1030(d)(4)(iii)(A)(2)(ii)			
<b>41)</b>	Are containers used for sharps disposal replaced routinely and not allowed to overfill?	1910.1030(d)(4)(iii)(A)(2)(iii)			
<b>42)</b>	Are contaminated sharps discarded immediately or as soon as feasible into containers?	1910.1030(d)(4)(iii)(A)(1)			

# Bloodborne Pathogens

	Questions	OSHA Regulation	Yes	No	N/A
	<b>Housekeeping</b>				
<b>43)</b>	Are protective covers used to cover equipment and surfaces removed and replaced as soon as feasible when they become contaminated?	1910.1030(d)(4)(ii)(B)			
<b>44)</b>	Are reusable containers not opened, emptied, or cleaned manually or in any other manner which might expose a person to the risk of skin puncture?	1910.1030(d)(4)(iii)(A)(4)			
<b>45)</b>	Are reusable sharps that are contaminated with blood or other potentially infectious materials not stored or processed in a manner that requires a person to reach by hand into the containers where these sharps have been placed?	1910.1030(d)(4)(ii)(E)			
<b>46)</b>	Are sharps containers closed immediately prior to removal or replacement to prevent spillage or protrusion of contents during handling, storage, transport, or shipping?	1910.1030(d)(4)(iii)(A)(3)(i)			
<b>47)</b>	Are sharps containers placed in an appropriate secondary container if leakage is possible?	1910.1030(d)(4)(iii)(A)(3)(ii)			
<b>48)</b>	Do persons who handle contaminated laundry wear protective gloves and other appropriate personal protective equipment?	1910.1030(d)(4)(iv)(B)			
<b>49)</b>	Is broken contaminated glassware always cleaned up with mechanical means such as a brush and dust pan, tongs, or forceps?	1910.1030(d)(4)(ii)(D)			
<b>50)</b>	Is contaminated laundry bagged or put into other containers at the location it is used?	1910.1030(d)(4)(iv)(A)(1)			

# Bloodborne Pathogens

	Questions	OSHA Regulation	Yes	No	N/A
	<b>Housekeeping</b>				
<b>51)</b>	Is contaminated laundry placed and transported in bags or containers labeled with the biohazard symbol or colored red?	1910.1030(d)(4)(iv)(A)(2)			
<b>52)</b>	Is picking up broken contaminated glassware with your hands prohibited?	1910.1030(d)(4)(ii)(D)			
<b>53)</b>	Is there a written method of decontamination and schedule for cleaning of all areas and surfaces that may become contaminated with blood or other potentially infectious materials?	1910.1030(d)(4)(i)			
	<b>Personal Protective Equipment</b>				
<b>54)</b>	Are disposable (single-use) gloves replaced as soon as they are contaminated, torn, punctured, or cannot function as a barrier?	1910.1030(d)(3)(ix)(A)			
<b>55)</b>	Are gowns, aprons, lab coats, clinic jackets, or similar outer garments worn whenever exposure to blood or other potentially infectious materials is anticipated?	1910.1030(d)(3)(xi)			
<b>56)</b>	Are hypoallergenic gloves, glove liners, powderless gloves, or other similar alternatives readily accessible to those who are allergic to the gloves normally provided?	1910.1030(d)(3)(iii)			
<b>57)</b>	Do employees immediately remove garments that have been penetrated by blood or other potentially infectious materials?	1910.1030(d)(3)(vi)			
<b>58)</b>	Do employees remove all personal protective equipment before leaving the work area?	1910.1030(d)(3)(vii)			
<b>59)</b>	Do employees use an appropriately designated area or container for storage, washing, decontamination, or disposal of personal protective equipment?	1910.1030(d)(3)(viii)			

# Bloodborne Pathogens

	Questions	OSHA Regulation	Yes	No	N/A
	<b>Personal Protective Equipment</b>				
<b>60)</b>	Do employees wear gloves whenever the possibility exists of hand contact with blood or other potentially infectious materials?	1910.1030(d)(3)(ix)			
<b>61)</b>	Do employees wear masks and eye protection devices (such as goggles or glasses with solid side shields or chin-length glasses face shields) whenever splashes or droplets of blood or other potentially infectious materials may be generated and eye, nose, or mouth contamination can be reasonably anticipated?	1910.1030(d)(3)(x)			
<b>62)</b>	Is it prohibited to re-use disposable (single use) gloves?	1910.1030(d)(3)(ix)(B)			
<b>63)</b>	Is personal protective equipment of appropriate sizes readily accessible or issued to all employees?	1910.1030(d)(3)(iii)			
<b>64)</b>	Is personal protective equipment repaired or replaced to maintain its effectiveness?	1910.1030(d)(3)(v)			
<b>65)</b>	Is personal protective equipment such as gloves, gowns, laboratory coats, face shields or masks, and eye protection provided free to persons potentially exposed to bloodborne pathogens?	1910.1030(d)(3)(i)			
	<b>Recordkeeping</b>				
<b>66)</b>	Does the employer maintain a copy of all results of examinations, medical testing, and follow-up procedures related to the exposure incident?	1910.1030(h)(1)(ii)(C)			
<b>67)</b>	Does the employer maintain a copy of information provided to the healthcare professional?	1910.1030(h)(1)(ii)(E)			
<b>68)</b>	Does the employer maintain medical records for at least the duration of employment plus 30 years?	1910.1020(h)(1)(iv)			



# Bloodborne Pathogens

	Questions	OSHA Regulation	Yes	No	N/A
	<b>Recordkeeping</b>				
<b>69)</b>	Does the employer maintain medical records on employees with occupational exposure that includes the name and social security number?	1910.1030(h)(1)(ii)(A)			
<b>70)</b>	Does the employer maintain the names and qualifications of persons conducting the training?	1910.1030(h)(2)(i)(C)			
<b>71)</b>	Does the employer maintain the summary of the training sessions?	1910.1030(h)(2)(i)(B)			
<b>72)</b>	Does the employer maintain training records for at least three years from the date on which the training occurred that includes the dates of the training sessions?	1910.1030(h)(2)(i)(A)			
<b>73)</b>	Does the sharps injury log contain the type and brand of device involved in the incident, the department or work area where the exposure incident occurred, and an explanation of how the incident occurred?	1910.1030(h)(5)			
<b>74)</b>	Has the employer established and maintained a sharps injury log for the recording of injuries from contaminated sharps?	1910.1030(h)(5)			

**Safety Checklist Disclaimer:** This safety checklist (the "Material") is made available to the user or other receiver of the Material for general informational purposes only. The Material has been developed with consideration of various factors relevant to the subject area, including federal laws and regulations in effect at the time the Information was created and/or certain good management practices relevant to the subject area. Because every industry and/or workplace presents unique circumstances, the Material does not constitute and is not intended to provide specific advice, assurances, or guarantees concerning any user's compliance with particular regulatory requirements (e.g., OSHA) or other applicable safety and/or health requirements or good management practices. The Material does not constitute training and does not replace the need to properly train all employees nor is the Material a substitute for an assessment of any safety or health hazards present at your facility by a health or safety professional or expert. Users are advised to consult with a legal or other professional advisor concerning specific regulatory compliance requirements applicable to their workplaces and appropriate use of the Material. Users and receivers of the Material are subject in all respects to the terms and conditions set forth [www.grainger.com](http://www.grainger.com), including those provisions relating to limitation of liability. Users and receivers of the Material assume all responsibility and risk arising from any and all use of and/or reliance upon the Material, including any modifications made thereto. W.W. Grainger, Inc. makes no warranty, express or implied, that the Material is current, accurate, appropriate or complete for any particular facility or requirements applicable to a particular facility.