



# OSHA Compliance Checklist

Bloodborne Pathogens  
(1910.1030)

|   | O.K. | Action Needed |
|---|------|---------------|
| <b>Exposure Control Plan (ECP)</b>  |      |               |
| 1. Has a written Exposure Control Plan been completed?  |      |               |
| a. Is it adequately designed to limit or minimize employee exposures?   |      |               |
| 2. Does the written ECP contain explanations of the following:  |      |               |
| a. An exposure determination?   |      |               |
| b. The methods to be used to comply with this standard?   |      |               |
| c. Hepatitis B vaccination, and post exposure and follow-up?  |      |               |
| d. Hazard communication to employees?   |      |               |
| e. Recordkeeping requirements?  |      |               |
| f. Evaluating procedures to be used to evaluate incidents?  |      |               |
| 3. Is a copy of the written ECP accessible to employees?  |      |               |
| 4. Is the ECP reviewed and updated at least annually or whenever necessary to reflect new or modified tasks?              |      |               |
| <b>Exposure Determination</b>   |      |               |
| 1. Has an exposure determination been prepared?   |      |               |
| 2. Does the exposure determination include:   |      |               |
| a. A list of all job classifications with occupational exposures?   |      |               |
| b. A list of all job classifications in which some employees have occupational exposures?                                 |      |               |
| c. A list of all tasks/procedures and related tasks/procedures in which occupational exposures occur?                     |      |               |
| 3. If the exposure determination made without regard to the use of PPE?   |      |               |
| <b>Methods of Compliance</b>  |      |               |
| 1. Are adequate precautions taken to prevent contact with blood or other potentially infectious materials?                |      |               |
| 2. Are engineering and work practice controls used to eliminate/minimize employee exposures?                              |      |               |
| 3. Is PPE used if engineering controls are insufficient to fully protect workers?   |      |               |
| 4. Are engineering controls examined and maintained or replaced on a regular basis to ensure effectiveness is maintained? |      |               |
| 5. Are handwashing facilities readily available?  |      |               |
| a. If not, is an antiseptic hand cleanser provided?   |      |               |
| 6. Are hands washed as soon as possible after the removal of gloves or other PPE?   |      |               |
| 7. Is the shearing or breaking of needles prohibited?   |      |               |
| 8. Is the bending, recapping or removal of needles:   |      |               |
| a. Accomplished only if no other alternative is feasible or is required by a specific medical or dental procedure?        |      |               |
| b. Accomplished only through the use of a mechanical device or a one-handed technique?                                    |      |               |
| 9. Are reusable needles:  |      |               |
| a. Immediately placed in a labeled, puncture-resistant and leak-proof container?  |      |               |



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| 10. Are eating, drinking, smoking, cosmetic applications, applying lip balm or contact lenses prohibited in areas where there is a reasonable chance of occupational exposure? |      |               |
| 11. Are food and drink prohibited from areas where blood or other infectious materials are kept?   |      |               |
| 12. Are procedures involving infectious materials performed in a manner such that splashing, spraying, spattering, and the generation of droplets is minimized?                |      |               |
| 13. Is mouth pipetting prohibited?   |      |               |
| 14. Is all potentially infectious material placed in a container during collection, handling, processing, storage, transport, or shipping?                                     |      |               |
| 15. Are all containers labeled as infectious waste prior to shipping?  |      |               |
| 16. Are containers routinely double-packaged when found to be leaking?   |      |               |
| a. Is the second (outside) container properly labeled?   |      |               |
| 17. Is contaminated equipment properly labeled?  |      |               |
| a. Are all potentially exposed personnel (including servicing personnel) informed of the risks posed by contaminated equipment so as to take the necessary precautions?        |      |               |
| <b>Personnel Protective Equipment (PPE)</b>  |      |               |
| 1. Is all appropriate PPE supplied at no cost to the employee?   |      |               |
| 2. Are all PPE properly impervious to the passage of blood or other potentially impervious materials?  |      |               |
| 3. Does the employer ensure that all required PPE is used unless prevented by medical procedure?   |      |               |
| 4. Does the employer ensure that PPE in the appropriate sizes is readily available to employees?   |      |               |
| 5. Are garments penetrated by potentially infectious materials removed as soon as is feasible?   |      |               |
| 6. Is all PPE removed prior to leaving the work area?  |      |               |
| 7. Are gloves worn when it is reasonably anticipated that contact with potentially infectious materials, mucous membranes, and non-intact skin?                                |      |               |
| 8. Are single-use gloves replaced immediately when torn, punctured, or compromised in any way?   |      |               |
| 9. Is the reuse of single-use gloves prohibited?   |      |               |
| 10. Are masks, eye protection, or face shields used whenever splashes, sprays, etc., are possible and eye, nose, or mouth contamination can be reasonably expected?            |      |               |
| 11. Are surgical caps or hoods, and/or shoe covers or boots worn in instances when gross contamination can be expected?  |      |               |
| <b>Housekeeping</b>  |      |               |
| 1. Are all work sites maintained in a clean and sanitary condition?  |      |               |
| 2. Has the employer established a satisfactory method of disinfection and decontamination?   |      |               |
| 3. Are all equipment and environmental and working surfaces cleaned and decontaminated after contact with blood?   |      |               |

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| 4. Are surfaces cleaned immediately when surfaces are overtly contaminated?  |      |               |
| 5. Are surfaces cleaned after each work shift if contamination is possible?  |      |               |
| 6. Are protective coverings removed and replaced immediately if overtly contaminated?  |      |               |
| 7. Are all bins, cans, and similar receptacles having a reasonable likelihood for becoming contaminated with potentially infectious materials: |      |               |
| a. Inspected and decontaminated on a regularly scheduled basis?  |      |               |
| b. Decontaminated immediately when visibly contaminated?   |      |               |
| 8. Are workers prohibited from picking up broken glassware with their bare hands?  |      |               |
| 9. Are workers hand protected from contact with reusable sharps contaminated with infectious materials?  |      |               |
| 10. Are containers for contaminated sharps closable, puncture resistant, leakproof on sides and bottom, and labeled?                           |      |               |
| 11. Are contaminated sharps containers located in reasonably accessible areas where sharps are used?   |      |               |
| 12. Are sharps containers maintained upright throughout use?   |      |               |
| a. Are they replaced routinely?  |      |               |
| b. Are they not allowed to overfill?   |      |               |
| 13. Are employees prohibited from manually opening, emptying, or cleaning any reusable containers?   |      |               |
| 14. Is all regulated waste placed in containers that are closable, able to contain all contents without leakage, and labeled?                  |      |               |
| 15. Are all regulated waste containers closed prior to removal so as to prevent spillage or the protrusion of contents?                        |      |               |
| 16. Is contaminated laundry bagged or contained in containers containing appropriate labeling?   |      |               |
| 17. Is laundry bagged at the location of use?  |      |               |
| 18. Are employees prohibited from sorting laundry at the location of use?  |      |               |
| 19. Is contaminated laundry placed in labeled bags or containers?  |      |               |
| 20. Are employees who have contact with contaminated laundry required to wear PPE, especially gloves?  |      |               |

### **Hepatitis B**

|  |  |  |
|--|--|--|
| 1. Is hepatitis B vaccine offered to all employees who are reasonably exposed to the virus?  |  |  |
| 2. Is post evaluation and followup offered to employees who have had an exposure incident?   |  |  |
| 3. Are the hepatitis B services above:   |  |  |
| a. Provided at no cost to the employee?  |  |  |
| b. Made reasonably available to the employee?  |  |  |
| 4. Performed under the supervision of a properly credentialed healthcare professional?   |  |  |
| 5. Is hepatitis B vaccination offered after initial training within 10 working days of initial assignment to a position having an occupational exposure? |  |  |



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| 6. If employees decline the vaccine, is a proper signed statement provided in accordance with Appendix A of 1910.103?  |      |               |
| a. If the employee changes his/her mind and requests the vaccine, is it provided?  |      |               |
| 7. Are records of all post exposure evaluations made available to the exposed employee?  |      |               |
| 8. Do all post exposure evaluations contain:   |      |               |
| a. Documentation of the routes of exposure?  |      |               |
| b. The circumstances under which the exposure occurred?  |      |               |
| c. The identification and documentation of the source individual and the results of any blood tests on that individual, if possible?   |      |               |
| 9. After an exposure incident, has the blood of the individual been tested as soon as is feasible to determine HBV and HI infectivity?   |      |               |
| 10. If the source individual has not consented to blood testing, has the employer documented that refusal?   |      |               |
| 11. Has the exposed employee's blood been tested as soon as possible after the exposure incident, if consent is given?   |      |               |
| 12. Does routine post exposure support include:  |      |               |
| a. Counseling?   |      |               |
| b. Evaluation of reported illnesses?   |      |               |
| <b>Communication of Hazards to Employees</b>   |      |               |
| 1. Are proper biohazard warning labels affixed to all containers of regulated waste, contaminated equipment, refrigerators and freezers containing potentially infectious materials? |      |               |
| 2. Are labels of the proper color and shade -----?   |      |               |
| 3. Are labels properly affixed to the containers so as to prevent their loss or removal?   |      |               |
| <b>Information and Training</b>  |      |               |
| 1. Is training provided to all potentially exposed workers?  |      |               |
| a. At the time of initial employment?  |      |               |
| b. At least annually, thereafter?  |      |               |