



Procedure Checklist

Procedure:
Bloodborne Pathogens Control Plan (BIO02)

#	Question	Yes	No	N/A	Comments
1	Have all personnel who have occupational exposure to blood or OPIMs been identified?				
2	Have all personnel who have occupational exposure to blood or OPIMs completed all required training?				
3	Are devices or equipment used to prevent physical contact with blood or OPIMs without putting the person at risk of exposure? Examples include disposable CPR mouthpieces, sharps disposable containers, self-sheathing needles, sharps with engineered sharps injury protection and needleless systems, appropriate pipetting devices, tongs, tweezers, tools.				
4	Are adequate hand washing stations provided in the facility?				
5	Are contaminated needles and other sharps not bent, broken, recapped or resheathed by hand?				
6	Is eating, drinking, smoking and applying cosmetics, hand lotion, or lip balm, or handling contact lenses prohibited in areas where blood or OPIMs are handled or stored?				
7	Food and drink is not stored in refrigerators, freezers, shelves, cabinets, or on countertops or bench tops where blood or other potentially infectious materials are handled or stored. If food products are required for experimentation, they are labeled "NOT FOR HUMAN CONSUMPTION".				
8	Specimens of blood or other potentially infectious materials are placed in a container which prevents leakage during collection, handling, processing, storage, transport, or shipping.				
9	Disposable gloves are not washed or decontaminated for re-use and are replaced, if they are torn, punctured, or when their ability to function as a barrier is compromised.				
10	Surgical face masks in combination with eye protection devices, such as goggles or glasses with solid side shields, or chin-length face shields, are worn whenever splashes, spray, spatter, or droplets of blood or OPIM may be				



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	generated and eye, nose, or mouth contamination are reasonably anticipated.				
11	When personal protective equipment is removed it is placed in an appropriately designated area or container for storage, washing, decontamination or disposal.				
12	Work areas are maintained in a clean and sanitary condition.				
13	Contaminated work surfaces are decontaminated with an appropriate disinfectant (Lysol and bleach disinfectant of 1:10 dilution) after completion of procedures; immediately or as soon as feasible when surfaces are overtly contaminated or after any spill of blood or other potentially infectious materials; and at the end of the work day if the surface may have become contaminated since the last cleaning.				
14	Protective coverings or imperviously-backed absorbent paper used to cover equipment and environmental surfaces are removed and replaced as soon as feasible when they become contaminated.				
15	All containers intended for reuse (i.e., bins, pails, cans and similar receptacles) which have a potential for becoming contaminated with potentially infectious materials are inspected, cleaned, and disinfected on a regularly scheduled basis.				
16	Broken glassware which may be contaminated is not picked up directly with the hands and mechanical means, such as brush and dust pan, tongs, or forceps are used.				
17	Sharps and other regulated waste are discarded and placed in closable, puncture-resistant, and leak-proof appropriately identified containers for disposal. Sharps containers are maintained upright throughout use, replaced routinely, and are not overfilled.				
18	Contaminated laundry that is wet and presents a reasonable likelihood of soak-through or leakage from the bag or container, is placed and transported in bags or containers which prevent soak-through and/or leakage of fluids to the exterior.				



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19	Contaminated lab coats and clothing are not taken home to launder.				
20	Contaminated laundry is handled as little as possible with a minimum of agitation.				
21	Warning labels, including the standard biohazard label, are affixed to containers of regulated waste, refrigerators and freezers containing blood or OPIMs; and other containers used to store, transport or ship blood or OPIMs.				
22	Labels required for contaminated equipment state which portions of the equipment remain contaminated and this information is conveyed to all affected employees, the servicing representative, and/or the manufacturer, as appropriate, prior to handling, servicing, or shipping.				
23	Autoclaved waste is double bagged in a dark colored bag and labeled "Safe For Trash Disposal".				
24	Have all employees who have occupational exposure to blood or OPIMs been offered Hepatitis B Vaccinations free of charge?				
25	If an employee refuses a Hep. B. Vaccination is it documented on Appendix E?				
26	Have all employees who incur an exposure incident been offered confidential, post-exposure medical evaluation and follow-up?				
27	Is a sharps injury log (Appendix H) completed for percutaneous injuries where the needle or other sharp device is contaminated with another individual's blood or OPIM?				