Exposure Control Plan for Bloodborne Pathogens and Airborne Pathogens/Tuberculosis West Georgia Technical College Academic Year 2024-2025

REVIEWED:	_Dr. Phyllis Ingham	DATE:7/1/2024
	<b>EXPOSURE CONTROL COORD</b>	INATOR
19	West Georgia Technical College	e
APPROVED:	PRESIDENT/EXECUTIVE West Georgia Technical College	DATE: 7/2/24
REVIEWED:		DATE:
	EMERGENCY MANAGER TECHNICAL COLLEGE SYSTEM	M OF GEORGIA
APPROVED:		DATE:
	DIRECTOR OF CAMPUS SAFET	TY VI OF GEORGIA

West Georgia Technical College
Exposure Control Plan for
Occupational Exposure to
Bloodborne Pathogens and Airborne Pathogens/Tuberculosis
Academic Year 2024-2025

#### INTRODUCTION

The State Board of the Technical College System of Georgia (SBTCSG), along with its technical colleges and work units, is committed to providing a safe and healthful environment for its employees, students, volunteers, visitors, vendors, and contractors. SBTCSG Policy 3.4.1. Emergency Preparedness, Health, Safety, and Security compels technical colleges and work units to eliminate or minimize exposure to bloodborne and airborne pathogens following OSHA Standard 29 CFR 1910.1030, "Occupational Exposure to Bloodborne Pathogens" as well as Centers for Disease Control (CDC) "Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health-Care Facilities, 2005." In pursuit of this goal, the Exposure Control Plan (ECP) is maintained, reviewed, exercised, and updated at least annually to ensure compliance and protection for employees and students.

### This Exposure Control Plan includes:

- clarification of program administration
- determination of employee and student exposure
- implementation of various methods of exposure control
  - standard precautions
  - engineering and administrative controls
  - o personal protective equipment (PPE)
  - o housekeeping
  - laundry
  - labeling
- vaccination for hepatitis B
- evaluation and follow-up following exposure to bloodborne/airborne pathogens (tuberculosis)
- evaluation of circumstances surrounding exposure incidents
- communication of hazards and training and
- recordkeeping

#### I PROGRAM ADMINISTRATION

A. Dr. Phyllis Ingham serves as the Exposure Control Coordinator (ECC) and is responsible for the implementation, maintenance, review, and updating of the Exposure Control Plan (ECP). The ECC will be responsible for ensuring that all required medical actions are performed and that appropriate health records are maintained. Further, the ECC will be responsible for training, documentation of training as well as making the written ECP available to employees, students, and any compliance representatives.

Contact Information for Exposu	re Control Coordinator
Dr. Phyllis Ingham EdD. MEd.MLS	S(ASCP)cm
176 Murphy Campus Blvd., Waco	, GA
Phyllis.ingham@westgatech.edu	

- **B.** Those employees and students who are determined to be at risk for occupational exposure to blood, and other potentially infectious materials (OPIM) as well as at risk for exposure to airborne pathogens/tuberculosis must comply with the procedures and work practices outlined in this ECP.
- C. West Georgia Technical College is responsible for the implementation, documentation, review, and training/record keeping of standard precautions concerning the areas of personal protective equipment (PPE), decontamination, engineering controls (e.g., sharps containers), administrative controls, housekeeping, laundry, and labeling and containers as required as assigned to designees. Further, adequate supplies of the aforementioned equipment will be available in the appropriate sizes/fit. {May be detailed in an appended document. Include Contact Information for Responsible Person(s) or Department(s) as well as a list of job and/or student program classifications that have potential for occupational exposure.}
- **D.** West Georgia Technical College engages in the following contractual agreements regarding exposure control: Go Green.
- E. West Georgia Technical College engages in the following training, drills, and exercises regarding exposure control: Exposure control training will be provided before lab or clinical rotations to instructors, staff, and students who are affiliated with and/or enrolled in programs listed in (Appendix) A I.C. The protocol for the retention of training records: such records will be kept by the designated people listed as I.C. Program Administration (see A I.C.).
- F. West Georgia Technical College protocol for the annual review of the ECP: the ECC will review and update annually with peer group, or more frequently if necessary, to

reflect any new or modified tasks/activities that affect occupational exposure or new and/or revised employee classifications or addition of new academic programs with potential exposure. The protocol for the retention of the ECP: the plan will be kept by the ECC and can be accessed in KnightShare, the college's intranet site.

#### II. EXPOSURE DETERMINATION

Employees/or students are identified as having occupational exposure to bloodborne/airborne pathogens based on the tasks or activities in which they engage. These tasks or activities are placed into categories as defined by the 1987 joint advisory notice by the U.S. Department of Labor and the U.S. Department of Health and Human Services. The relative risk posed by these tasks or activities, as well as the measures taken to reduce or eliminate the risk of occupational exposure, are also determined by the category.

**Category I**: A task or activity in which direct contact or exposure to blood, other potentially infectious materials, or airborne pathogens (tuberculosis) is expected and to which standard precautions apply.

Category II: A task or activity performed without exposure to blood or other potentially infectious materials, or airborne pathogens (tuberculosis) and to which standard precautions apply, but exposure to another person's blood or to OPIM might occur as an abnormal event or an emergency or may be required to perform unplanned Category I tasks or activities.

**Category III:** A task or activity that does not entail normal or abnormal exposure to blood or other potentially infectious materials, or airborne pathogens (tuberculosis) and to which standard precautions do not apply.

Employees or students who engage in tasks or activities that are designated as Category I or II, as well as their occupational area, are considered to be "covered" by the parameters of the ECP, including part-time, temporary, contract, and per-diem employees.

The following is a list of job and/or student program classifications that have Category I or II occupational exposure. Included is a list of the tasks or activities or groups of closely related tasks or activities in which occupational exposure may occur for these individuals. See Appendix A II. Category I Task Listing and A-II. Category II Task Listing.

List specific programs/areas falling under the following categories:

# Job/Program/Title/Occupational/Program Area

Category I

Nursing - Registered and Practical Nursing

Clinical Laboratory Technology

Phlebotomy

Dental Assisting and Dental Hygiene

Emergency Medical Technician/First Aid Provider/Fire Safety

**Medical Assisting** 

Radiologic Technology

Surgical Technology

Child Care (Early Childhood Care and Education)

Category II

Maintenance

**Facilities** 

Police/Public Safety/Security

Pharmacy Technology

Barbering/Cosmetology/Esthetician

**Criminal Justice** 

Child Care (Early Childhood Care and Education)

Patient Care Assisting and Nurse Aid

# III. IMPLEMENTATION OF METHODS OF EXPOSURE CONTROL

A. Standard Precautions: All covered employees and covered students will use standard precautions as indicated by the task or activity.

### B. Exposure Control Plan:

- 1. All covered employees and covered students will receive an explanation of this ECP during their initial training or academic experience, as well as a review on an annual basis. All covered employees and covered students can review this ECP at any time while performing these tasks or activities by contacting Dr. Phyllis Ingham. If requested, a hard copy of this ECP will be provided free of charge within 3 business days of request.
- 2. The ECC will review and update the ECP annually, or more frequently if necessary to reflect any new or modified tasks or activities that affect occupational exposure and to reflect new or revised employee classifications or instructional programs with potential for occupational exposure.

# IV. PERSONAL PROTECTIVE EQUIPMENT

Follow standard precautions concerning personal protective equipment for identified Category I and II tasks. The individuals identified in I.C. are responsible for implementing and documenting the following:

A. Appropriate personal protective equipment (PPE) is provided to covered employees at no cost and available to covered students at the student's expense. Training/recording keeping in the use of PPE for specific tasks is provided by I.C Administration. (See Appendix I.C. Program Administration List)

# Types of PPE that are provided include the following:

See Appendix IV.A. Personal Protection Equipment

TaskPPELocationDrawing bloodgloves, eye protectionClassroom A225 Storage Closet

- **B.** All covered employees and covered students using PPE must observe the following precautions:
  - 1. Wash hands immediately or as soon as feasible after removing gloves or other PPE.
  - 2. Remove PPE after it becomes contaminated and before leaving the work area.
  - 3. Used PPE may be disposed of in containers marked as biohazard and labeled for specific use, such as washing, decontamination or disposal.
  - 4. Wear appropriate gloves when it is reasonably anticipated that there may be

- hand contact with blood or OPIM, and when handling or touching contaminated items or surfaces; replace gloves if torn, punctured or contaminated, or if their ability to function as a barrier is compromised.
- Utility gloves may be decontaminated for reuse if their integrity is not compromised. Utility gloves should be discarded if they show signs of cracking, peeling, tearing, puncturing, or deterioration.
- 6. Never wash or decontaminate disposable gloves for reuse.
- 7. Wear appropriate face and eye protection when splashes, sprays, spatters, or droplets of blood or OPIM pose a hazard to the eye, nose, or mouth.
- 8. Remove immediately, or as soon as feasible, any garment contaminated by blood or OPIM, in such a way as to avoid contact with the outer surface.
- **C.** The protocol for handling used PPE is as follows: See (Appendix) A V. Decontamination

#### V. DECONTAMINATION

Follow standard precautions concerning decontamination for identified Category I and II tasks. The individuals identified in I.C. are responsible for implementing and documenting the following:

- **A.** Individuals listed in Appendix I.C. Program Administration and Dr. Phyllis Ingham are responsible for training/record keeping for decontamination.
- **B.** For each category I and II task document the decontamination method required. See Appendix V. Decontamination

# VI. Engineering and Administrative Controls:

Follow standard precautions concerning engineering and administrative controls for identified Category I and II tasks. The individuals identified in I.C. are responsible for implementing and documenting the following:

A. Engineering and administrative controls are developed and implemented to reduce or eliminate occupational exposure. Specific engineering and administrative controls for specified tasks or activities (delineated by instructional program or department) are listed below:

Example: {Expand as necessary to describe appropriate controls.}

Task Engineering/Administrative Controls

Drawing blood needleless systems, non-glass capillary tubes

B. Protocol and documentation of the inspection, maintenance, and replacement of

sharps disposal containers is the responsibility of Dr. Phyllis Ingham and I.C. Program Administration for their respective programs.		

C. The processes for assessing the need for revising engineering and administrative controls, procedures, or products, and the individuals/groups involved are detailed below:

#### Example:

Academic Program Advisory Groups examine exposure control methods during advisory group meetings, and the recommendations are discussed with the ECC by the academic program manager(s).

#### VII. HOUSEKEEPING

Follow standard precautions concerning housekeeping for identified Category I and II tasks. The individuals identified in I.C. are responsible for implementing and documenting the following:

- A. Regulated waste is placed in closable containers, constructed to contain all contents and prevent leakage, appropriately labeled or color-coded, and closed before removal to prevent spillage or protrusion of contents during handling.
- **B.** The protocol for handling sharps disposal containers is: Sharps that have been used, will be discarded into an appropriately labeled container that has adequate space remaining for the item, the container is completely intact and has a lid. Once the sharps container is full, the lid will be secured and the container will be moved to the designated lab area at each respective campus where biohazard waste is picked up by the waste management company.
- C. The protocol for handling other regulated waste is: contaminated waste will be placed into appropriately labeled, color-coded bags and moved to the designated lab area at each respective campus where biohazard waste is picked up by the waste management company.
- D. Contaminated sharps are discarded immediately or as soon as possible in containers that are closable, puncture-resistant, leakproof on sides and bottoms, and appropriately labeled or color-coded. Sharps disposal containers are available at each campus health care program lab area(s). (must be easily accessible and as close as feasible to the immediate area where sharps are used).
- **E.** Bins and pails (e.g., wash or emesis basins) are cleaned and decontaminated as soon as feasible after visible contamination.
- **F.** Broken glassware that may be contaminated is only picked up using mechanical means, such as a brush and dustpan.

#### **VIII. LAUNDRY**

Follow standard precautions concerning laundry for identified Category I and II tasks. The individuals identified in I.C. are responsible for implementing and documenting the following:

- **A.** The following contaminated articles will be laundered: towels and bed linens; and by the simulation lab coordinator or the responsible person in each department at each respective campus where laundry is used.
- B. The following laundering requirements must be met (document procedures):
  - 1. Handle contaminated laundry as little as possible, with minimal agitation.
  - 2. Place wet contaminated laundry in leak-proof, labeled, or color-coded containers before transport. Use red bags for this purpose.
  - 3. Wear the following PPE when handling and/or sorting contaminated laundry:
    - a. Gloves should be the minimum protection worn during the handling of contaminated laundry; and
    - b. Eye protection, gloves, and gown should be worn if a splatter could occur.

#### IX. LABELING AND CONTAINERS

Follow standard precautions concerning labeling and containers for identified Category I and II tasks. The individuals identified in I.C. are responsible for implementing and documenting the following:

**A.** The following labeling methods are used in this facility: Red bags with biohazard warning labels and biohazard warning labels are attached to the surface of equipment containing blood, tissue, and/or other OPIM.

Example:

Equipment to be Labeled specimens, contaminated laundry, etc.

Label Type (size, color) red bag, biohazard label

B. Individuals listed in the (Appendix) A I.C. Program Administration List are responsible for ensuring that warning labels are affixed or red bags are used as required if regulated waste or contaminated equipment is brought into or out of the facility. Covered employees and covered students are to notify Dr. Phyllis Ingham if they discover regulated waste containers, refrigerators containing blood or OPIM, contaminated equipment, etc., without proper labels.

#### X.VACCINATION FOR HEPATITIS B

- A. The Executive Director of Human Resources will ensure training is provided to covered employees on hepatitis B vaccinations, addressing safety, benefits, efficacy, methods of administration, and availability. Individuals listed in the (Appendix) A I.C. Program Administration and Dr. Phyllis Ingham will ensure that the same content training to covered students.
- B. The hepatitis B vaccination series is available at no cost after initial covered employee training and within 10 days of initial assignment to all covered employees identified in the exposure determination section of this plan. The hepatitis B vaccination series is available to covered students at cost after initial covered

- student training and within 10 days of initial assignment to all covered students identified in the exposure determination section of this plan.
- C. Vaccination may be precluded in the following circumstances: 1) documentation exists that the covered employee or covered student has previously received the series; 2) antibody testing reveals that the employee is immune; 3) medical evaluation shows that vaccination is contraindicated; or (4) following the medical evaluation, a copy of the health care professional's written opinion will be obtained and provided to the covered employee or student within 15 days of the completion of the evaluation. It will be limited to whether the covered employee or covered student requires the hepatitis B vaccine and whether the vaccine was administered.
- D. However, if a covered employee or covered student declines the vaccination, the covered employee or covered student must sign a declination form. Covered employees or covered students who decline may request and obtain the vaccination at a later date at no cost to covered employees or at cost to covered students. Documentation of refusal of the vaccination is kept in the medical records of the individual.
- **E.** Vaccination will be provided by a licensed healthcare provider at the County Health Department or Employee Occupational Health Clinic or Pharmacy Clinics that provide such services.

#### XI. POST-EXPOSURE FOLLOW-UP

- **A.** Should an exposure incident occur, contact Dr. Phyllis Ingham at the following telephone number770-537-6045 email: Phyllis.ingham@westgatech.edu
- **B.** An immediately available confidential medical evaluation and follow-up will be conducted and documented by a licensed healthcare professional. Following initial first aid (clean the wound, flush eyes or other mucous membrane, etc.), the following activities will be performed:
  - 1. Document the routes of exposure and how the exposure occurred.
  - 2. Identify and document the source individual (unless the employer can establish that identification is infeasible or prohibited by state or local law).
  - 3. For blood or OPIM exposure:
    - a. Obtain consent and make arrangements to have the source individual tested as soon as possible to determine HIV, HCV, and HBV infectivity; document that the source individual's test results were conveyed to the employee's/student's health care provider.
    - **b.** If the source individual is already known to be HIV, HCV, and/or HBV positive, new testing need not be performed.
    - **c.** Exposure involving a known HIV-positive source should be considered a medical emergency and post-exposure prophylaxis (PEP) should be initiated within 2 hours of exposure, per CDC recommendations.
    - d. Assure that the exposed employee/student is provided with the source individual's test results and with information about applicable disclosure laws and regulations concerning the identity and infectious status of the source

individual (e.g., laws protecting confidentiality).

e. After obtaining consent, collect exposed employee's/student's blood as soon as feasible after the exposure incident, and test blood for HBV and HIV serological status.

f. If the employee/student does not give consent for HIV serological testing during the collection of blood for baseline testing, preserve the baseline blood sample for at least 90 days; if the exposed employee elects to have the baseline sample tested during this waiting period, perform testing as soon as feasible.

# 4. For airborne pathogen (tuberculosis):

- a. Immediately after the exposure of a covered employee or covered student, the responsible supervisor, the technical college or work unit Exposure Control Coordinator (ECC), and the authorized contact person at the clinical or work site shall be notified and should receive documentation in writing. Documentation of the incident is to be prepared on the day of the exposure; on an Exposure Incident Report and Follow-Up Form for Exposure to Bloodborne/Airborne Pathogens (Tuberculosis); promulgated within 24 hours of the incident; and recorded in the Exposure Log.
- b. The exposed covered employee/student is to be counseled immediately after the incident and referred to his or her family physician or health department to begin follow-up and appropriate therapy. Baseline testing should be performed as soon as possible after the incident. The technical college or work unit is responsible for the cost of a post-exposure follow-up for both covered employees and covered students.
- c. Any covered employee or covered student with a positive tuberculin skin test upon repeat testing, or post-exposure should be clinically evaluated for active tuberculosis. If active tuberculosis is diagnosed, appropriate therapy should be initiated according to CDC Guidelines or established medical protocol.

# XII. ADMINISTRATION OF POST-EXPOSURE EVALUATION AND FOLLOW-UP

- **A.** Dr. Phyllis Ingham ensures that health care professional(s) responsible for the covered employee or student hepatitis B vaccination and post-exposure evaluation and follow-up are given a copy of this ECP.
- **B.** Dr. Phyllis Ingham ensures that the healthcare professional evaluating a covered employee or student after an exposure incident receives the following:
  - 1. a description of the covered employee's or covered student's tasks or activities relevant to the exposure incident
  - 2. route(s) of exposure
  - 3. circumstances of exposure
  - 4. if possible, the results of the source individual's blood test
  - relevant covered employee or covered student medical records, including vaccination status

C. See (Appendix) A XII.C. Exposure Incident Log

# XIII. PROCEDURES FOR EVALUATING THE CIRCUMSTANCES SURROUNDING AN EXPOSURE INCIDENT

- **A.** Dr. Phyllis Ingham will review the circumstances of all exposure incidents to determine:
  - 1. engineering controls in use at the time
  - 2. administrative practices followed
  - 3. a description of the device being used (including type and brand)
  - 4. protective equipment or clothing that was used at the time of the exposure incident (gloves, eye shields, etc.)
  - 5. location of the incident (O.R., E.R., patient room, etc.)
  - 6. procedure being performed when the incident occurred
  - 7. training records of covered employee or student
- **B.** Dr. Phyllis Ingham will record all percutaneous injuries from contaminated sharps in a Sharps Injury Log.
- C. If revisions to this ECP are necessary Dr. Phyllis Ingham will ensure that appropriate changes are made. (Changes may include an evaluation of safer devices, adding individuals/occupational areas to the exposure determination list, etc.).
- **D.** The ECC will contact the individual who submitted the incident report, and then evaluate the circumstances of the incident as stated in XIII.A. After reviewing, the ECC will report back findings to the dean and/or (Appendix) A I.C. Program Administration as deemed necessary.

#### XIV. COMMUNICATION OF HAZARDS AND TRAINING

- A. All covered employees and covered students who have occupational exposure to bloodborne/airborne pathogens receive training on the epidemiology, symptoms, and transmission of bloodborne/airborne pathogen diseases. In addition, the training program covers, at a minimum, the following elements:
  - 1. a copy and explanation of the ECP;
  - 2. an explanation of the ECP and how to obtain a copy;
  - an explanation of methods to recognize tasks and other activities that may involve exposure to blood, OPIM, and respiratory hazards including what constitutes an exposure incident;
  - **4.** an explanation of the use and limitations of engineering controls, work practices, and PPE:

- **5.** an explanation of the types, uses, location, removal, handling, decontamination, and disposal of PPE;
- 6. an explanation of the basis for PPE selection;
- 7. information on the hepatitis B vaccine, including information on its efficacy, safety, method of administration, the benefits of being vaccinated, and that the vaccine will be offered free of charge to covered employees and at cost to covered students;
- **8.** information on the appropriate actions to take and persons to contact in an emergency involving blood, OPIM, or respiratory hazards;
- 9. an explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that will be made available:
- **10.** information on the post-exposure evaluation and follow-up that the employer/college is required to provide for the covered employee or covered student following an exposure incident;
- 11. an explanation of the signs and labels and/or color coding required by the standard and used at this facility:
- **12.** and an opportunity for interactive questions and answers with the person conducting the training session.
- **B.** Training materials are available from individuals listed in (Appendix) A I.C. Program Administration.

#### XV. RECORDKEEPING

#### A. Training Records

- 1. Training records are completed for each covered employee and covered student upon completion of training. These documents will be kept for at least three years at Human Resources for employees and by individuals listed in the (Appendix) A I.C. Program Administration for students.
- 2. The training records include:
  - a. the dates of the training sessions
  - b. the contents or a summary of the training sessions
  - c. the names and qualifications of persons conducting the training
  - d. the names and job titles/departments of all persons attending the training sessions
- 3. Training records are provided upon request to the covered employee or covered student or the authorized representative of the employee or student within 15 working days. Such requests should be addressed to the Executive Director of Human Resources for employees and to individuals listed in (Appendix) A I.C. Program Administration for students.

#### B. Medical Records

 Medical records are maintained for each covered employee or covered student under 29 CFR 1910.1020, "Access to Employee Exposure and Medical Records."

- 2. The Executive Director of Human Resources is responsible for the maintenance of the required medical records for employees and the individuals listed in (Appendix) A I.C. Program Administration for students. These confidential records are kept in the Human Resources Department for at least the duration of employment or attendance plus 30 years.
- 3. Covered employee or covered student medical records are provided upon request of the employee or student or to anyone having written consent of the employee or student within 3 working days. Such requests should be sent to the Executive Director of Human Resources for employees and Dr. Phyllis Ingham regarding students.

#### **C.** Recordkeeping

An exposure incident is evaluated to determine if the case meets OSHA's Recordkeeping Requirements (29 CFR 1904). This determination and the recording activities are done by Dr. Phyllis Ingham.

D. Sharps Injury Log

- 1. In addition to the 29 CFR 1904 Recordkeeping Requirements, all percutaneous injuries from contaminated sharps are also recorded in a Sharps Injury Log. All incidents must include at least:
  - a. Date of the injury
  - **b.** Type and brand of the device involved (syringe, suture needle)
  - c. Department or work area where the incident occurred explanation of how the incident occurred.
- 2. The Sharps Injury Log is reviewed as part of the annual program evaluation and maintained for at least five years following the end of the calendar year covered. If a copy is requested by anyone, it must have any personal identifiers redacted from the report. The protocol for the annual review of sharps injuries will consist of looking for incidents that are repetitive in nature among individuals involved or the program of study. The goal will be to recognize and reduce preventable incidents through re-training, etc.

WGTC AY 2024-2025 Exposure Control Plan Appendix V. Decontamination

# WGTC AY 2024 – 2025 Exposure Control Plan

# Appendix V. Decontamination

#### V. Decontamination

Follow standard precautions concerning personal protective equipment for identified Category I and II tasks. The individuals identified in I.C. are responsible for implementing and documenting the following:

- A. Individuals listed in the I.C. spreadsheet and Dr. Phyllis Ingham are responsible for training/record keeping for decontamination.
- B. For each Category I and II task, document the decontamination method required.

Types of decontamination include the following:

#### Clinical Laboratory Technology

Task	Appropriate PPE
Collection of body fluid specimens	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Venipuncture	Appropriate removal technique of used PPE,
·	discarded into appropriate biohazard container,
	followed by hand washing
Cleaning/handling contaminated equipment	Appropriate removal technique of used PPE,
<b>G</b> .	discarded into appropriate biohazard container,
	followed by hand washing
Applying Band-Aids following specimen collection	Appropriate removal technique of used PPE
	followed by hand washing
Handling contaminated linens	Appropriate removal technique of used PPE,
·	discarded into appropriate biohazard container,
	followed by hand washing
Resuscitation/CPR	Appropriate removal technique of used PPE
	followed by hand washing
Handling blood specimens	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Finger and heel stick for bedside testing	Appropriate removal technique of used PPE,
•	discarded into appropriate biohazard container,
	followed by hand washing
Packaging and handling of body fluid specimens;	Appropriate removal technique of used PPE,
blood, urine, sputum, feces, spinal fluid, wound	discarded into appropriate biohazard container,
drainage, etc.	followed by hand washing
Assisting with biopsy/lumbar puncture	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing

#### **Exposure Control Plan**

Appendix V. Decontamination

Task	Appropriate PPE
Care of emptying drainage tubes and collection	Appropriate removal technique of used PPE,
containers	discarded into appropriate biohazard container,
	followed by hand washing
Cleaning spills of body fluids	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Handling of stool specimens	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Working with synovial and tissue fluids	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Handling of sharps	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing

Category II Task

Task	Appropriate PPE
Specimen transport in closed container in plastic	Appropriate removal technique of used PPE
bag	followed by hand washing
Routine cleaning of equipment	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing

# Cosmetology/Barbering/Esthetician

Category I Task

Task	Appropriate PPE
Waxing / Arching Eyebrows	Appropriate removal technique of used PPE
	followed by hand washing
Cutting hair with scissors, razor, clippers	Appropriate removal technique of used PPE
	followed by hand washing
Beard Trimming	Appropriate removal technique of used PPE
· ·	followed by hand washing
Hair and skin care of clients with non-intact skin	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Handling and cleaning contaminated instruments	Appropriate removal technique of used PPE,
0	discarded into appropriate biohazard container,
	followed by hand washing
Manicure and Pedicure	Appropriate removal technique of used PPE
	followed by hand washing

Task	Appropriate PPE
Draping patron	N/A
Shampoo/hair care of patrons with intact skin	N/A
Scalp treatments	N/A

**Exposure Control Plan** 

Appendix V. Decontamination

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Task	Appropriate PPE
Bleaching and tinting	Appropriate removal technique of used PPE
0	followed by hand washing
Cold waving	Appropriate removal technique of used PPE
<b>3</b>	followed by hand washing
Chemical relaxing	Appropriate removal technique of used PPE
3	followed by hand washing
Thermal curling	Appropriate removal technique of used PPE
•	followed by hand washing
Applying artificial nails	Appropriate removal technique of used PPE
	followed by hand washing
Skin care (facial) performance on patrons with	Appropriate removal technique of used PPE
intact skin.	followed by hand washing

#### Criminal Justice

Category II Task (No Category I Tasks)

Task	Appropriate PPE
Crime scene collection of evidence and	Appropriate removal technique of used PPE,
fingerprinting/Finger Print Processing	discarded into appropriate biohazard container,
3 1 3, 3	followed by hand washing
Blood typing	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Fuming tank	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing

# **Dental Assisting**

Task	Appropriate PPE
Intraoral examinations	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Assisting with chair-side dental procedures	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Intraoral radiography	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Assisting with prophylaxis	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Taking impressions	Appropriate removal technique of used PPE
	followed by hand washing
Handling and performing laboratory procedures	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing

**Exposure Control Plan** 

Appendix V. Decontamination

ppendix v. Decontamination	
Task	Appropriate PPE
Removing sutures	Appropriate removal technique of used PPE,
· ·	discarded into appropriate biohazard container,
	followed by hand washing
Assisting in extractions	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Placing or removing rubber dams and clamps	Appropriate removal technique of used PPE,
,	discarded into appropriate biohazard container,
	followed by hand washing
Resuscitation/CPR	Appropriate removal technique of used PPE
	followed by hand washing
Removing periodontal dressings	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Handling and cleaning contaminated instruments,	Appropriate removal technique of used PPE,
equipment, and supplies	discarded into appropriate biohazard container,
	followed by hand washing
Handling of sharps	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Cleaning up vomitus or other bodily fluids	Appropriate removal technique of used PPE,
,	discarded into appropriate biohazard container,
	followed by hand washing

Category II Task

Task	Appropriate PPE
Routine cleaning of patient care areas	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Routine cleaning of equipment	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing

# Dental Hygiene

category i rask	14
Task	Appropriate PPE
Intraoral examinations	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Periodontal sealing	Appropriate removal technique of used PPE,
G	discarded into appropriate biohazard container,
	followed by hand washing
Prophylaxis	Appropriate removal technique of used PPE,
,	discarded into appropriate biohazard container,
	followed by hand washing

Task	Appropriate PPE
Intraoral radiography	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Ultrasonic sealing	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Removing sutures	Appropriate removal technique of used PPE,
· ·	discarded into appropriate biohazard container,
	followed by hand washing
Assisting in extractions	Appropriate removal technique of used PPE,
<u> </u>	discarded into appropriate biohazard container,
	followed by hand washing
Placing or removing rubber dams and clamps	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Resuscitation/CPR	Appropriate removal technique of used PPE
,	followed by hand washing
Removing dressing post periodontal surgery	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Handling of sharps	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Handling and cleaning contaminated instruments,	Appropriate removal technique of used PPE,
equipment and supplies	discarded into appropriate biohazard container,
	followed by hand washing
Cleaning up vomitus or other bodily fluids	Appropriate removal technique of used PPE,
,	discarded into appropriate biohazard container,
	followed by hand washing

Category II Task

Task	Appropriate PPE
Routine cleaning of patient care areas	Appropriate removal technique of used PPE, discarded into appropriate biohazard container,
	followed by hand washing
Routine cleaning of equipment	Appropriate removal technique of used PPE,
0 11	discarded into appropriate biohazard container,
	followed by hand washing

# Early Childhood Care and Related Care

Task	Appropriate PPE
Changing Diapers	Appropriate removal technique of used PPE
	followed by hand washing
Assistance with toileting hygiene	Appropriate removal technique of used PPE
3 76	followed by hand washing

Task	Appropriate PPE
Cleaning any spills of body fluids	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Mouth Care	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Handling contaminated linens, clothes, etc.	Appropriate removal technique of used PPE,
, ,	discarded into appropriate biohazard container,
	followed by hand washing
Wound care – examination, cleansing, bandaging	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Resuscitation/CPR	Appropriate removal technique of used PPE
	followed by hand washing
Bathing/Skin care of non-intact skin	N/A
Wiping tears, comforting crying children	N/A
Wiping saliva	Appropriate removal technique of used PPE
	followed by hand washing
Hair care of non-intact skin	N/A

Category II Task

Task	Appropriate PPE
Bathing, dressing, feeding children with intact	N/A
skin, with no diarrhea, bleeding and drainage	
Routine medication (with parental permission)	N/A
Preparation and delivery of food	N/A
Routine cleaning of child care areas	N/A
Feeding infants or adults	N/A

Emergency Medical Technology/Fire Safety/First Aid Provider

Task	Appropriate PPE
Oral exams, suctioning of nose, mouth, upper	Appropriate removal technique of used PPE,
airway.	discarded into appropriate biohazard container,
	followed by hand washing
Managing Vomiting	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Venipuncture / Finger Stick Glucose Testing /	Appropriate removal technique of used PPE,
Injections	discarded into appropriate biohazard container,
	followed by hand washing
Collection of body fluid specimens	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Cleaning/handling contaminated equipment	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing

Task	Appropriate PPE
Applying dressings	Appropriate removal technique of used PPE, discarded into appropriate biohazard container, followed by hand washing
Wound care – irrigation, packing, examination	Appropriate removal technique of used PPE, discarded into appropriate biohazard container, followed by hand washing
Handling contaminated linens	Appropriate removal technique of used PPE, discarded into appropriate biohazard container, followed by hand washing
Emergency delivery of infant, post- partum care, Newborn care, cord care	Appropriate removal technique of used PPE, discarded into appropriate biohazard container, followed by hand washing
Intubation, extubation	Appropriate removal technique of used PPE, discarded into appropriate biohazard container, followed by hand washing
Resuscitation/CPR	Appropriate removal technique of used PPE followed by hand washing
Managing frank blood from any source	Appropriate removal technique of used PPE, discarded into appropriate biohazard container, followed by hand washing
Management of trauma patients	Appropriate removal technique of used PPE, discarded into appropriate biohazard container, followed by hand washing
Handling tears, eye care, comforting crying persons, administering eye irrigation	Appropriate removal technique of used PPE followed by hand washing
Cleaning spills of body fluids	Appropriate removal technique of used PPE, discarded into appropriate biohazard container, followed by hand washing
Handling of sharps	Appropriate removal technique of used PPE, discarded into appropriate biohazard container, followed by hand washing

Task	Appropriate PPE
Assessing patients with intact skin, no diarrhea,	Appropriate removal technique of used PPE
bleeding, or drainage	followed by hand washing
Routine medication administration	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing.
Obtaining Vital Signs	Appropriate removal technique of used PPE
0	followed by hand washing
Routine cleaning of patient care area	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing

**Exposure Control Plan** 

Appendix V. Decontamination

Task	Appropriate PPE
Routine cleaning of equipment	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Transporting patients for routine care /	Appropriate removal technique of used PPE,
treatment	discarded into appropriate biohazard container,
	followed by hand washing
Oxygen Administration	Appropriate removal technique of used PPE
70	followed by hand washing
Applying restraints, splints, protective devices	Appropriate removal technique of used PPE,
7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	discarded into appropriate biohazard container,
	followed by hand washing
Specimen transport in closed container in plastic	Appropriate removal technique of used PPE
bag	followed by hand washing

# **Medical Assisting**

Task	Appropriate PPE
Collection of body fluid for specimens	Appropriate removal technique of used PPE, discarded into appropriate biohazard container,
	followed by hand washing
Rectal temperature collections	Appropriate removal technique of used PPE,
, , , , , , , , , , , , , , , , , , ,	discarded into appropriate biohazard container,
	followed by hand washing
Venipuncture / Injections	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Applying dressings	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Wound care – irrigation, packing, and suture	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Resuscitation/CPR	Appropriate removal technique of used PPE
	followed by hand washing
Oral examinations	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Finger stick testing (glucose, hematocrit, white	Appropriate removal technique of used PPE,
cell count)	discarded into appropriate biohazard container,
	followed by hand washing
Handling and cleaning contaminated instruments	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Eye care (irrigation, tears, administering eye	Appropriate removal technique of used PPE
medications)	followed by hand washing

Appendix v. Decontamination	
Task	Appropriate PPE
Assisting with invasive procedures (biopsy,	Appropriate removal technique of used PPE,
incision and drainage)	discarded into appropriate biohazard container,
	followed by hand washing
Managing frank blood from any source	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Cleaning spills of body fluids	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Administering enemas, rectal suppositories,	Appropriate removal technique of used PPE,
rectal exams	discarded into appropriate biohazard container,
	followed by hand washing
Changing diapers	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Care of emptying of drainage tubes and collection	Appropriate removal technique of used PPE,
containers	discarded into appropriate biohazard container,
Containers	followed by hand washing
Placement and care of urinary catheters	Appropriate removal technique of used PPE
The content and out of armary such assets	followed by hand washing
Decubitus care	Appropriate removal technique of used PPE,
20002.100	discarded into appropriate biohazard container,
	followed by hand washing
Shaving	Appropriate removal technique of used PPE
	followed by hand washing
Nail care – non-intact skin	Appropriate removal technique of used PPE,
Trum care mon made own	discarded into appropriate biohazard container,
	followed by hand washing
Handling soiled linen	Appropriate removal technique of used PPE,
Harianing Johna Interi	discarded into appropriate biohazard container,
	followed by hand washing
Assisting with vaginal exams	Appropriate removal technique of used PPE,
And Antit Andition evening	discarded into appropriate biohazard container,
	followed by hand washing
Handling of sharps	Appropriate removal technique of used PPE,
Hamming or Sharbs	discarded into appropriate biohazard container,
	followed by hand washing
	Tollowed by Harid Washing

Task	Appropriate PPE
Assessing patients with intact skin, no diarrhea,	Appropriate removal technique of used PPE
bleeding, or drainage	followed by hand washing
Obtaining vital signs	Appropriate removal technique of used PPE
	followed by hand washing
Oxygen administration	Appropriate removal technique of used PPE
,,,	followed by hand washing

Appendix V. Decontamination

Task	Appropriate PPE
Applying splints and protective devices	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Specimen handling in closed containers in plastic	Appropriate removal technique of used PPE
bag	followed by hand washing
Routine medication administration	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Routine cleaning of patient care areas	Appropriate removal technique of used PPE,
<b>.</b>	discarded into appropriate biohazard container,
	followed by hand washing
Routine cleaning of equipment	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing

# Nursing – Registered Nursing/Practical Nursing

.ategory i lask	
Task	Appropriate PPE
Collection and testing of body fluid specimens;	Appropriate removal technique of used PPE,
blood, urine, sputum, feces, spinal fluid, wound	discarded into appropriate biohazard container,
drainage, etc.	followed by hand washing
Assisting with biopsy, lumbar puncture,	Appropriate removal technique of used PPE,
thoracentesis or other invasive procedures	discarded into appropriate biohazard container, followed by hand washing
Care of emptying drainage tubes and collection	Appropriate removal technique of used PPE,
containers	discarded into appropriate biohazard container,
containers	followed by hand washing
Assisting with administration of blood and/or	Appropriate removal technique of used PPE,
blood products	discarded into appropriate biohazard container,
blood products	followed by hand washing
Wound care (irrigation, packing, exam, etc.)	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Postmortem care	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Venipuncture	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Dressing changes (including IV site care)	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Managing frank blood from any source	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing

Task	Appropriate PPE
Management of trauma patients	Appropriate removal technique of used PPE, discarded into appropriate biohazard container, followed by hand washing
Cleaning contaminated equipment	Appropriate removal technique of used PPE, discarded into appropriate biohazard container, followed by hand washing
Cleaning spills of body fluids	Appropriate removal technique of used PPE, discarded into appropriate biohazard container, followed by hand washing
Handling contaminated linens	Appropriate removal technique of used PPE, discarded into appropriate biohazard container, followed by hand washing
Handling tears, eye care, administering of eye meds	Appropriate removal technique of used PPE followed by hand washing
Suctioning mouth, nose, airway	Appropriate removal technique of used PPE, discarded into appropriate biohazard container, followed by hand washing
Tracheostomy care	Appropriate removal technique of used PPE, discarded into appropriate biohazard container, followed by hand washing
Assisting with intubation/extubation	Appropriate removal technique of used PPE, discarded into appropriate biohazard container, followed by hand washing
Resuscitation/CPR	Appropriate removal technique of used PPE followed by hand washing
Performing mouth care	Appropriate removal technique of used PPE, discarded into appropriate biohazard container, followed by hand washing
Gastric suctioning	Appropriate removal technique of used PPE, discarded into appropriate biohazard container, followed by hand washing
Administering enema, rectal suppositories, rectal exam, impaction removal, insertion of rectal tube	Appropriate removal technique of used PPE, discarded into appropriate biohazard container, followed by hand washing
Changing diapers	Appropriate removal technique of used PPE, discarded into appropriate biohazard container, followed by hand washing
Colostomy care	Appropriate removal technique of used PPE, discarded into appropriate biohazard container, followed by hand washing
Tube feeding/irrigation	Appropriate removal technique of used PPE, discarded into appropriate biohazard container, followed by hand washing
Bladder irrigation	Appropriate removal technique of used PPE, discarded into appropriate biohazard container, followed by hand washing

Appendix V. Decontamination

Task	Appropriate PPE
Placement and care of urinary catheters	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Decubitus care	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Pin care	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Shaving	Appropriate removal technique of used PPE
	followed by hand washing
Bathing – client with non-intact skin, leaking	Appropriate removal technique of used PPE,
fluids, fresh newborn	discarded into appropriate biohazard container,
	followed by hand washing
Nail and hair care – non-intact skin	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Post- partum care (assessment, assistance),	Appropriate removal technique of used PPE,
vaginal irrigation, medications	discarded into appropriate biohazard container,
	followed by hand washing
Attending delivery – normal and C-section	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Attending or for observation of surgery	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Perineal care	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Handling of sharps	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing

Task	Appropriate PPE
Bathing, dressing, positioning patients	Appropriate removal technique of used PPE
	followed by hand washing
Assessing patients with intact skin, no diarrhea,	Appropriate removal technique of used PPE
bleeding, or drainage	followed by hand washing
Routine medication administration	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Obtaining vital signs	Appropriate removal technique of used PPE
	followed by hand washing
Delivery of food trays	Appropriate removal technique of used PPE
	followed by hand washing

#### Appendix V. Decontamination

Task	Appropriate PPE
Routine cleaning of patient care areas	Gloves
Feeding infants/children/adults	Appropriate removal technique of used PPE
	followed by hand washing
Specimen transport in closed container in plastic	Appropriate removal technique of used PPE
bag	followed by hand washing
Oxygen administration	Appropriate removal technique of used PPE
	followed by hand washing
Placement of abdominal binder	Appropriate removal technique of used PPE
	followed by hand washing
Transfer activities	Appropriate removal technique of used PPE
	followed by hand washing
Applying restraints, splints, protective devices	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Administering of hot or cold treatments	Appropriate removal technique of used PPE
	followed by hand washing

# Patient Care Assisting (Includes Nurse Aide Course)

Task	Appropriate PPE
Collection of body fluids for specimens	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Foley catheter care of, emptying, draining	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Cleaning contaminated equipment	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Handling soiled linens	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Cleaning spills of body fluids	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Handling tears, eye care	Appropriate removal technique of used PPE
	followed by hand washing
Resuscitation/CPR	Appropriate removal technique of used PPE
	followed by hand washing
Performing assistance with exams (oral, vaginal,	Appropriate removal technique of used PPE,
etc.)	discarded into appropriate biohazard container,
	followed by hand washing
Rectal exam, inspection /removal, administering	Appropriate removal technique of used PPE,
enemas	discarded into appropriate biohazard container,
	followed by hand washing

Appendix V. Decontamination

Task	Appropriate PPE
Changing diapers	Appropriate removal technique of used PPE, discarded into appropriate biohazard container, followed by hand washing
Colostomy care	Appropriate removal technique of used PPE, discarded into appropriate biohazard container, followed by hand washing
Mouth care	Appropriate removal technique of used PPE followed by hand washing
Decubitus care	Appropriate removal technique of used PPE, discarded into appropriate biohazard container, followed by hand washing
Shaving	Appropriate removal technique of used PPE followed by hand washing
Bathing/non-intact skin	Appropriate removal technique of used PPE, discarded into appropriate biohazard container, followed by hand washing
Nail care/ hair care non-intact skin	Appropriate removal technique of used PPE, discarded into appropriate biohazard container, followed by hand washing
Perineal care	Appropriate removal technique of used PPE, discarded into appropriate biohazard container, followed by hand washing
Assisting with elimination	Appropriate removal technique of used PPE, discarded into appropriate biohazard container, followed by hand washing

Task	Appropriate PPE
Bathing, dressing, feeding, positioning patients	Appropriate removal technique of used PPE
with intact skin, no diarrhea, bleeding, or	followed by hand washing
drainage	
Obtaining vital signs	Appropriate removal technique of used PPE
	followed by hand washing
Delivering food trays	Appropriate removal technique of used PPE
	followed by hand washing
Transfer activities	Appropriate removal technique of used PPE
	followed by hand washing
Routine cleaning of patient care area	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Specimen transport in closed container in plastic	Appropriate removal technique of used PPE
bag	followed by hand washing

WGTC AY 2024-2025 Exposure Control Plan Appendix V. Decontamination Pharmacy Technology

# Category II Task (No Category I Tasks)

Task	Appropriate PPE
Handling sharps during pharmaceutical	Appropriate removal technique of used PPE,
preparations	discarded into appropriate biohazard container,
	followed by hand washing

# Phlebotomy

# Category I Task

Task	Appropriate PPE
Venipuncture	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Collection of body fluid specimens	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Finger stick testing	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing s
Handling contaminated linen	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Handling of sharps	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing

#### Category II Task

Task	Appropriate PPE
Specimen transport in closed container in plastic	Appropriate removal technique of used PPE
bag	followed by hand washing
Routine cleaning of equipment	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing

#### Public Safety/Police

#### Category II Task (No Category I Tasks)

Task	Appropriate PPE
Restraining or handcuffing an individual	Appropriate removal technique of used PPE
	followed by hand washing
Resuscitation / CPR	Appropriate removal technique of used PPE
	followed by hand washing

WGTC AY 2024-2025 Exposure Control Plan Appendix V. Decontamination Radiologic Technology

ategory i rusk	T .
Task	Appropriate PPE
Collection of body fluid for specimen; i.e.,	Appropriate removal technique of used PPE,
myelography, sinus tract injection	discarded into appropriate biohazard container,
, O,	followed by hand washing
Venipuncture	Appropriate removal technique of used PPE,
vempuncture	discarded into appropriate biohazard container,
	followed by hand washing
Applying/removing dressings	Appropriate removal technique of used PPE,
- FF-7-16/	discarded into appropriate biohazard container,
	followed by hand washing
Wound care	Appropriate removal technique of used PPE
Would care	followed by hand washing
Resuscitation/CPR	Appropriate removal technique of used PPE
Nesuscitation, CFN	followed by hand washing
Oral examination; i.e., sialography, mandibular	Appropriate removal technique of used PPE,
radiography	discarded into appropriate biohazard container,
Taulography	followed by hand washing
Handling and cleaning contaminated	Appropriate removal technique of used PPE,
objects/instruments/equipment	discarded into appropriate biohazard container,
A state of the toronton or and the state of	followed by hand washing
Assisting with invasive procedures; i.e., special	Appropriate removal technique of used PPE,
procedures, myelography, arthrography, biopsy,	discarded into appropriate biohazard container,
hyster/osalpingography	followed by hand washing
Managing frank blood from any source	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Cleaning spills of body fluids	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Administering enemas	Gloves, face shield
Changing or handling linens when there is	Appropriate removal technique of used PPE,
possible or suspected body fluid contamination	discarded into appropriate biohazard container,
	followed by hand washing
Changing or handling patient clothing when there	Appropriate removal technique of used PPE,
is possible or suspected body fluid contamination	discarded into appropriate biohazard container,
	followed by hand washing
Care of or handling of drainage tubes, suction	Appropriate removal technique of used PPE,
tubes, NG tubes, urinary or other catheters or	discarded into appropriate biohazard container,
tubes containing or contaminated by body fluids	followed by hand washing
Shaving patients	Appropriate removal technique of used PPE
	followed by hand washing
Handling of sharps	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing

# WGTC AY 2024-2025 Exposure Control Plan Appendix V. Decontamination

#### Category II Task

Task	Appropriate PPE
Positioning, patients with intact skin, no diarrhea,	Appropriate removal technique of used PPE
bleeding, or drainage	followed by hand washing
Routine cleaning of equipment	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing

# Surgical Technology

Task	Appropriate PPE
Collection of body fluids for specimens	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Applying dressings	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Wound care – irrigation, packing, and suture	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Resuscitation/CPR	Appropriate removal technique of used PPE
	followed by hand washing
Handling and cleaning contaminated instruments	Appropriate removal technique of used PPE,
-	discarded into appropriate biohazard container,
	followed by hand washing
Assisting with invasive procedures (biopsy,	Appropriate removal technique of used PPE,
incision and drainage)	discarded into appropriate biohazard container,
	followed by hand washing
Cleaning spills of body fluids	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Assisting with biopsy, lumbar puncture,	Appropriate removal technique of used PPE,
thoracentesis or other invasive procedures	discarded into appropriate biohazard container,
	followed by hand washing
Care of emptying drainage tubes and collection	Appropriate removal technique of used PPE,
containers	discarded into appropriate biohazard container,
	followed by hand washing
Assisting with administration of blood and/or	Appropriate removal technique of used PPE,
blood products	discarded into appropriate biohazard container,
	followed by hand washing
Wound care (irrigation, packing, exam, etc.)	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Management of trauma patients	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing

Appendix V. Decontamination

ppendix v. Becontamination	
Task	Appropriate PPE
Cleaning contaminated equipment	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Handling contaminated linens	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Handling tears, eye care, administering of eye	Appropriate removal technique of used PPE
meds	followed by hand washing
Suctioning mouth, nose, airway	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Tracheostomy care	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Assisting with intubation/extubation	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Placement of urinary catheters	Appropriate removal technique of used PPE
	followed by hand washing
Handling of sharps	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Assisting with vaginal, and rectal exams	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Attending delivery – C-section	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing
Attending/assisting with surgery	Gloves, face shield, possible need for gown
Attending/assisting with surgery	followed by hand washing

Task	Appropriate PPE
Positioning, patients with intact skin, no diarrhea,	Appropriate removal technique of used PPE
bleeding, or drainage	followed by hand washing
Routine cleaning of equipment	Appropriate removal technique of used PPE,
	discarded into appropriate biohazard container,
	followed by hand washing