	Bloodborne Pathogens				
Control number:	HSE-P-8	Revision date:	8/15/2024	Rev #:	0
Approved by:	Derrick Landry	Revised by:	Madison Myers	MOC#:	N/A

PURPOSE


The purpose of this program is to establish Peak NDT Solutions written procedures for the elimination or minimize a "reasonably anticipate exposure" of employees to infectious diseases, which are transmitted by blood and/or bodily fluids.

1.0 EXPOSURE DETERMINATION


- A. The Occupational Safety and Health Administration (OSHA) requires employees to perform an exposure determination concerning which employees are likely to be occupationally exposed to blood or other potentially infectious materials.
- B. The exposure determination is made regardless of the use of personal protective equipment whenever such equipment fails to protect the employee as intended.
- C. This exposure determination includes the listing of all job classifications in which any employee may become exposed, regardless of frequency of exposure.
- D. Peak NDT Solutions will consider the below job classifications and/or positions, subject to exposure:
 - First Aid Responders;
 - Department Supervisors who are trained in First Aid;
 - Field Supervisors who have been trained in First Aid.
 - Company Drivers who may have secondary first aid exposure;
 - Shop cleanup personnel who might assist in cleaning up of an area, which has been contaminated with blood

2.0 ENGINEERING AND WORK PRACTICE CONTROLS

- A. Peak NDT Solutions expects all employees to exercise the practice of universal precautions at all times, whenever there is a possibility of exposure to blood, bodily fluids or other pathological or microbiological wastes containing blood or other potentially infectious materials.
- B. Impervious vinyl or latex gloves, located in the First Aid Kit, is available and shall be worn when examining, cleaning, and/or treating wounds; and cleaning contaminated instruments and equipment.


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- C. Gloves are to be discarded into disposal container, which have the plastic liners, and red biohazard signs on the container. Supervisors should have a separate disposal container with plastic liner, for use on temporary job site locations. Whenever a box of gloves has been opened, it shall be packaged in a sealable plastic bag, and stored away from sources of direct sunlight, heat or dust. Unused gloves should be inspected and/or replaced on a quarterly basis. Unused gloves, which have not been re-bagged, shall be disposed of immediately.
- D. Running water, soap and paper towels shall be made available at each Company work location. Hands should be washed and dried with the paper towels immediately after the gloves have been removed from the hands of the treating employee. Only white towels will be used when caring for an injury.
- E. On temporary job sites the hand washing facilities will be designated by the facilities operator. Follow prescribed disposal procedures. In the absence of running water or other appropriate hand washing facilities, Peak NDT Solutions shall provide employees with appropriate antiseptic hand cleanser in conjunction with cloth/paper towels or antiseptic towelettes. *Note: Clean unopened paper towels shall be available and stored away from sources of heat and dust to assist in the cleaning/sanitizing effort.* Employees should replace all unused packages of paper towels whenever they have become accidentally opened; they have been crushed, soiled or the level of sterility has been compromised; or whenever they have been in storage for more than 30 days without use whichever occurs first.
- F. Sharps (i.e., broken glass, tops of cans, razor blades, etc.) containers are available in the shop area. Supervisors should use the sharps container provided by the facility while on temporary job sites, or store sharps on containers separate from ordinary trash. The container should be sealable or so constructed that sharps will remain secured inside the container once disposed.
- G. Eating, drinking, smoking, handling of contact lenses, applying cosmetics or lip balm, etc., is prohibited in work areas where there is a reasonable probability that exposure to a hazardous substance can occur in the area. Employees should immediately flush with clean running water, for at least fifteen (15) minutes, any exposed skin or mucous membrane, should exposure occur.
- H. Employees are prohibited from contacting blood or other infectious materials by mouth (i.e., for treatment of a snake bite, providing mouth to mouth breathing, etc.).

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I. Employees who are designated to clean an area which has been exposed to blood or other bodily fluid, will need to follow the below procedures for cleanup:


1. The area where employees will be treated is to be cleaned and will be washed with soap and water. It will be sprayed and wiped with a 1 part to 10 parts chlorine and water solution after cleaning. The chlorine solution must not be pre-mixed; it should be a fresh batch.
2. Where there has been contamination due to injury or other circumstances, all equipment or environmental surfaces shall be cleaned & decontaminated after contact with blood or other infectious materials.
3. Waste cans and pails in the restrooms or shop area will be lined with plastic bags, and will be cleaned and disinfected monthly by spraying them with the 1 to 10 parts bleach and water solution.
4. Broken glassware that may be contaminated will be picked up with forceps and placed in the sharp's container. Small fragments will be picked up with wet paper towels, or swept up using a broom and dustpan. Employees should never use their hands, gloved or ungloved, to pick up sharps. Employees who will work offshore should avoid having any glass containers in their possession at any time.
5. Disposable towels, cloths or other materials will be used to limit laundry handling of contaminated articles.
6. Toilets, urinals, sinks, showers, waste cans and pails in the restrooms, located in areas where the program is in effect, will be maintained cleaned and disinfected by washing with soap and water, then sprayed with a 1 to 10 bleach and water solution and wiped dry.
7. Non-sharp waste, (bandages, swabs, dressings, etc.), that are not classified as "regulated waste" will be disposed of as domestic waste.
8. Non-sharp waste, which is heavily contaminated and therefore regulated by the standard, will be placed in red bags and red disposable containers, and collected for disposal. If outside contamination should occur, the bag will be placed in a second red closable container. Bags and container will display the biohazard label.

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- J. Warning labels and signs shall be used to warn employees of items containing blood or other potentially infectious material.

3.0 PERSONAL PROTECTIVE EQUIPMENT


- A. Peak NDT Solutions will provide personal protective equipment, for the protection of the designated employee against infection to bloodborne pathogens, at no cost to the employee. Personal Protective Equipment provided by Peak NDT Solutions includes:
- Masks
 - Gloves
 - Face Shield
 - Eye Protection
 - Disposal Mouth Shields
 - Disposable Impermeable Apron
- B. PPE shall be used unless the employee temporarily declines to use under rare circumstances, in which case, the employee will be removed from the contaminated area or task. Peak NDT Solutions shall repair and/or replace PPE as needed to maintain its effectiveness.
- C. PPE will be available in various sizes. Employees are responsible for selecting the size which offers the best fit.
- D. Cleaning: Peak NDT Solutions will provide laundering, maintaining, and disposal of personal protective equipment:
1. If the garment or bandage is penetrated by blood or other infectious materials, then it should be removed as soon as possible. Contaminated laundry will be disposed of in red plastic bags displaying the biohazard label.
 2. Personal protective equipment will be removed prior to leaving the work area and placed in appropriately designated areas. The employee who last used it should clean it.
 3. Gloves will be worn when it can be anticipated that the employee may have hand contact with blood, other potentially infectious materials, and when touching or handling contaminated items or surfaces.

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4. Single use, disposable gloves should be replaced as soon as practical when contaminated, punctured, or when their ability to act as a barrier is compromised.
5. Masks and eye protection, or a face shield shall be worn whenever splashes, spray, spatter, or droplets of blood or other potentially infectious materials may be generated and eye, nose, and mouth contamination can be reasonably anticipated.
6. The disposable gloves, mask, apron, and glasses will be worn when cleaning up blood or other bodily fluids.
7. All PPE shall be stored in a clean re-sealable plastic bag away from sources of direct sunlight, heat or dust. Face shields and other eye protection should be inspected at least quarterly, and replaced if found to be defective or the protective integrity has otherwise been compromised.

4.0 HEPATITIS B VACCINATION


- A. The Hepatitis B vaccine (Recombivax) is made from yeast and cannot be infected with HIV or other bloodborne pathogens. It is given to employees who have not previously received the series.
- B. The complete series of HBV vaccination is 85 to 97 percent effective at protecting exposed individuals from getting HBV or becoming a carrier for 9 years or longer.
- C. A single dose of Hepatitis B Immune Globulin (HBIG) will be given within 7 days of exposure.
- D. The vaccine will be available at no cost to the employee. It will be available within ten days of the employee's initial assignment to work involving potential exposure.
- E. Prior to the HBV series, antibody testing will be performed by the Company's approved testing/treatment facility. The facility may be selected upon the advice of the Company's authorized physician.
- F. If employees do not choose immunization, they will sign the attached mandatory "Statement of Declination"

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- G. Employees may initially decline immunization and choose to accept immunization at a later date under the same conditions as before.
- H. If routine immunization boosters are recommended at a future date, vaccine will be made available to employees at no cost to the employee.
- I. The immunization program will be under the supervision of the treating physician (or designee).
- J. Each employee's immunization status will be maintained in a confidential manner in his/her employee medical file.

5.0 POST EXPOSURE EVALUATION AND FOLLOW-UP


- A. If there is an exposure to blood or other potentially infectious materials, the employee will immediately have a medical evaluation performed under the direction of the Company's authorized physician. If exposed, follow these procedures:
 1. Suspect that contamination has occurred.
 2. Notify a co-worker to alert supervisory personnel of the exposure, if notification cannot be achieved by the exposed employee.
 3. Proceed to the closest wash station and cleanse the affected area with mild soap and clean running water.
 4. Identify the location where the incident occurred so it can be secured.
 5. Identify the site and route of entry.
 6. Identify the source individual; state his/her name, department, description and present location.
 7. Request the Hepatitis B Vaccination within 24 hours of exposure if not already immunized.
 8. Source blood shall be tested as soon as consent is obtained to determine HIV and HBV status. If consent is not obtained, this will be documented. If the source is known to be HIV or HBV positive, retest is not necessary.

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9. The exposed employee will be informed of the source individual's test results or of their refusal to submit to such testing.
 10. Peak NDT Solutions will have testing performed on the source individual as soon as consent is obtained. If consent is not given for HIV testing, the specimen obtained from the exposed employee will be kept for 90 days. If the exposed employee decides to have a baseline test done within the 90-day period, it will be completed as soon as possible after such decision.
 11. Post exposure referral and treatment will be provided as appropriate and as recommended by the U.S. Public Health Service, and an appointed physician.
- B. Peak NDT Solutions appointed physician would counsel with the exposed employee and evaluate any reported illness. Peak NDT Solutions appointed physician would provide a written opinion within fifteen (15) days stating to include the following:
1. Whether Hepatitis B vaccine is needed and if immunization has begun;
 2. What post-exposure evaluation and follow-up is needed;
 3. The employee has been informed of the results of the evaluation of any medical condition(s) resulting from exposure; &
 4. All other findings shall be held confidential and shall not be included in the report.

6.0 EMPLOYEE TRAINING

- A. Training will cover the different labels & signs that serve as warnings of infectious materials. Peak NDT Solutions shall ensure that all employees with occupational exposure participate in a training program.
- B. Peak NDT Solutions shall provide training at the time of initial assignment & annual training for all employees will be provided within 1 year of their previous training.
- C. A copy of the Exposure Control Plan

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D. shall be accessible to all employees in accordance with 29 CFR 1910.1020(e), and will be retained in the office of the HSE Manager as well as provided to any employee upon request within a reasonable time and manner.

E. Training will include, but not be limited to:

- Defining exposure
- Labels and signs
- Cleaning procedures
- Universal precautions
- Recognizing tasks which might result in exposure
- Explanation of the use and limitations of work practice and engineering controls
- Information on the types, selection, proper use, location, removal, handling, decontamination and disposal of personal protective equipment
- Information on the Hepatitis B vaccination such as the safety benefits and methods of administering and availability
- Information on how to report exposure incidents


F. Peak NDT Solutions shall establish and maintain an accurate record for each employee with occupational exposure in accordance with CFR 1910.1020. A record of training sessions will be prepared and maintained on site for a minimum of three years. The record will include:

- The trainer's name
- Date of Training
- Names of Participants
- Job title of Participants
- Content of the training program, and applicable videos.

G. A copy of the "Exposure Control Plan" as well as training records will be accessible to employees to the Assistant Secretary of Labor for OSHA and the Director of NIOSH (National Institute of Occupational Safety and Health).

7.0 RECORDKEEPING

A. Peak NDT Solutions will maintain all records related to this program at the main office. The "Exposure Control Plan" shall be reviewed and updated annually and whenever necessary to reflect new or modified tasks and procedures which affect occupational exposure and to reflect new or revised employee positions with occupational exposure.

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- B. Accurate records for each employee with occupational exposure must be maintained for at least the duration of employment plus 30 years. The individual responsible for ensuring that these records are maintained by the Company's HSE Manager. Employees may have access to these records, within a reasonable period of time, upon request. Peak NDT Solutions will not release any information pertaining to an employee's health condition to any third parties without the written authorization of the affected employee.
- C. All records pertaining to Hepatitis B vaccinations, and post exposure follow-up, shall also be maintained for a period of thirty years. These records will be available at main office (as mentioned under 7.0, A., above) for employee review should they be requested.
- D. Peak NDT Solutions shall comply with the requirements involving the transference of records set forth in 29 CFR 1910.1020(h).

REVISION INFORMATION

This is applicable to changes made to the current version of the preceding document.

Revision Number	Description