

Blood exposure-control plan

REVIEW DRAFT - DO NOT SIGN OR USE FOR CLIENT TESTING

Coach/employer planning draft; applicability and professional review required

For proposed adult capillary finger-lactate testing. This original planning draft is not an OSHA-approved plan, a compliance determination, or authority to collect blood. No testing until legal scope, procedures, supplies, waste handling and prompt post-exposure care are resolved.

Responsible legal provider/employer, plan owner, version and dates

Reviewer: employment relationships, anticipated occupational exposure and applicable requirements

OSHA's Bloodborne Pathogens Standard applies to covered employers with occupationally exposed employees. Do not assume that a solo operator is covered or exempt based on the business label alone; determine the actual relationships and applicable duties. Other professional-practice, public-health, waste, insurance and local requirements still need review.

Exposure determination WITHOUT regard to PPE: job classifications and exposed tasks

Testing, cleanup, storage and waste-handling locations and responsible persons

Blood exposure-control plan

REVIEW DRAFT - DO NOT SIGN OR USE FOR CLIENT TESTING

Coach/employer planning draft; applicability and professional review required

Engineering and work-practice controls

Use appropriate blood precautions for every person. Use a new single-use auto-disabling safety lancet for each puncture; never share or reuse fingerstick devices. Do not recap, bend or break contaminated sharps. Place used lancets directly into an accessible, upright, closable, puncture-resistant, leak-resistant, labeled sharps container at the point of use; replace before overfilling.

Exact lancet, meter, strip and safer-device choices; current IFU versions

Manufacturer-supported shared-meter cleaning/disinfection SOP, compatible product and contact time

Do not share a meter if its current instructions do not establish an appropriate between-person cleaning/disinfection procedure. Do not substitute a generic wipe or assume a new strip removes contamination.

Handwashing facilities, glove changes, PPE selection and additional splash protection when needed

Work area separation, surface/spill cleaning, responsible person and supplies

Sharps/regulated-waste storage, lawful disposal arrangement/vendor, pickup and contact

Blood exposure-control plan

REVIEW DRAFT - DO NOT SIGN OR USE FOR CLIENT TESTING

Coach/employer planning draft; applicability and professional review required

Exposure response and employee protections

After a puncture/exposure, stop the task, wash affected skin or flush exposed mucous membranes as appropriate, report promptly and obtain licensed medical evaluation without delay. Follow the reviewed response procedure. Do not wait for paperwork or arrange unauthorized client/source testing.

Confirmed post-exposure provider, contact, hours/after-hours backup and access arrangement

Immediate response/reporting procedure, responsible contact and confidential record route

Where OSHA applies, provide the required hepatitis B vaccination offer to eligible exposed employees at no cost, following the standard's timing, exceptions and declination provisions. Provide required confidential post-exposure evaluation/follow-up by a licensed healthcare professional at no cost and a reasonable time/place. Use official required declination wording separately when applicable; this draft does not replace it.

Applicable employee vaccination offer/access and confidential record process

Process for providing exposure details to clinician and handling lawful source evaluation/consent

Blood exposure-control plan

REVIEW DRAFT - DO NOT SIGN OR USE FOR CLIENT TESTING

Coach/employer planning draft; applicability and professional review required

Training, records and annual review

Where required, train at initial assignment, at least annually, and when changed tasks create new exposure. Document competency in the actual procedures. Review the plan at least annually and when tasks or devices change; document safer-device consideration and input from affected nonmanagerial employees where applicable.

Trainer, content, dates, competency review and training-record location

Record custodian/access and applicable retention rules for medical, training and sharps-injury records

When applicable, the OSHA standard calls for employee medical records for employment plus 30 years and training records for 3 years. Sharps-injury-log applicability and retention follow the referenced occupational recordkeeping requirements; do not use these periods as a blanket client-record policy. Confirm exact obligations with a qualified reviewer.

Annual/change review: date, reviewer, safer devices, employee input and updates

Unresolved prerequisites, owner and due date; do not operate until resolved

Qualified reviewer and provider approval record after all prerequisites are satisfied