



OSU EHS BLOODBORNE PATHOGENS LABORATORY CHECKLIST

Department:		PI/Laboratory Manager:		
Building:		EHS Inspector:		
Type:		Room:		Date:

1. EXPOSURE CONTROL PLAN		YES	NO	N/A	COMMENTS
1.1	Has a written exposure control plan been developed?				
1.2	Is the written exposure control plan available on request for examination or copying?				
1.3	Is the written exposure control plan updated yearly and self-inspection sheet filled out?				
1.4	Is the BBP parameter sheet and list of employees present?				
2. ENGINEERING AND WORK PRACTICE CONTROLS		YES	NO	N/A	COMMENTS
2.1	Do students and employees follow universal precautions to prevent contact with blood or other potentially infectious materials?				
2.2	Are engineering and work practice controls implemented before personal protective equipment is used?				
2.3	Are engineering controls examined and maintained on a regular schedule to ensure their effectiveness?				
2.4	Are handwashing facilities readily accessible?				
2.5	Do students and employees wash their hands immediately after removing gloves or other personal protective equipment after contact with blood or other potentially infectious materials?				
2.6	Do students and employees wash or flush hands or other skin areas with soap and water after contact with blood or other potentially infectious materials?				
2.7	Is it prohibited to bend, recap, or remove contaminated needles or sharps?				
2.8	Can it be assured that the sharing and breaking of contaminated needles does not occur?				
2.9	Is it prohibited to eat, drink, apply cosmetics, and handle contact lenses in work areas where the potential exists for exposure to bloodborne pathogens?				
2.10	Are food and drink prohibited in refrigerators, freezers, shelves, cabinets, or on countertops or benchtops where blood or other potentially infectious materials are present?				

2.11	Are tasks involving blood or other potentially infectious materials performed in a way that minimizes splashing and generating droplets of these substances?				
2.12	Is mouth pipetting and suctioning of blood or other potentially infectious agents prohibited?				
2.13	Are specimens of blood or other potentially infectious materials placed in an appropriate container that prevents leakage during collection, handling, processing, storage, or transport?				
3. PERSONAL PROTECTIVE EQUIPMENT		YES	NO	N/A	COMMENTS
3.1	Is personal protective equipment provided free to persons potentially exposed to bloodborne pathogens?				
3.2	Is personal protective equipment of appropriate sizes readily accessible or issued to all students and employees?				
3.3	Are hypoallergenic gloves, glove liners, powderless gloves, or other similar alternatives readily accessible to those who are allergic to the gloves normally provided?				
3.4	Is personal protective equipment repaired or replaced to maintain its effectiveness?				
3.5	Do students and employees immediately remove garments that have been penetrated by blood or other potentially infectious materials?				
3.6	Do students and employees remove all personal protective equipment before leaving the work area?				
3.7	Do students and employees use an appropriately designated area or container for storage, washing, decontamination, or disposal of personal protective equipment?				
3.8	Do students and employees wear gloves whenever the possibility exists of hand contact with blood or other potentially infectious materials?				
3.9	Are disposable gloves replaced as soon as they are contaminated, torn, punctured or cannot function as a barrier?				
3.10	Is it prohibited to re - use disposable gloves?				
3.11	Are utility gloves decontaminated and re - used only if the integrity of the glove is not compromised?				
3.12	Do students and employees wear masks and eye protection devices whenever splashes or droplets of blood or other potentially infectious materials may be generated and eye, nose, or mouth contamination can be reasonably anticipated?				
3.13	Are gowns, aprons, lab coats, clinic jackets, or similar outer garments worn whenever exposure to blood or other potentially infectious materials is anticipated?				

4. SURFACE SANITATION		YES	NO	N/A	COMMENTS
4.1	Is there a written method of decontamination and schedule for cleaning of all areas and surfaces that may become contaminated with blood or other potentially infectious materials?				
4.2	Are chemical disinfectants listed by the EPA as effective against Mycobacterium tuberculosis?				
4.3	Are all equipment and working surfaces cleaned and decontaminated immediately, or as soon as feasible, after contact with blood or other potentially infectious materials?				
4.4	Are protective covers used to cover equipment and surfaces removed and replaced as soon as feasible when they become overtly contaminated?				
4.5	Are all reusable receptacles such as bins, pails, and cans that are likely to become contaminated with blood or other potentially infectious materials inspected and decontaminated on a regular schedule?				
5. SHARPS HANDLING AND DISPOSAL		YES	NO	N/A	COMMENTS
5.1	Is picking up broken contaminated glassware with your hands prohibited?				
5.2	Are contaminated sharps discarded immediately or as soon as feasible into approved containers?				
5.3	Are sharps containers maintained upright and not allowed to overfill?				
5.4	Are sharps containers closed immediately prior to removal or replacement to prevent spillage or protrusion of contents during handling, storage, transport, or shipping?				
5.5	Are sharps containers placed in an appropriate secondary container if leakage is possible?				
5.6	Are reusable sharps that are contaminated with blood or other potentially infectious materials not stored or processed in a manner that requires a person to reach by hand into the containers where these sharps have been placed?				
5.7	Are reusable containers not opened, emptied, or cleaned manually or in any other manner which might expose a person to the risk of skin puncture?				
6. WASTE STORAGE AND TRANSPORT		YES	NO	N/A	COMMENTS
6.1	Are containers of regulated waste labeled with a biohazard warning label?				
6.2	Is regulated waste, other than sharps, placed into containers which are: closable; constructed to contain all contents and prevent leakage of fluid during handling, storage, transport, or shipping; labeled with a biohazard warning label (or colored red); closed prior to removal to prevent spillage or protrusion of contents during handling, storage, transport, or shipping?				

6.3	Are containers of regulated waste, other than sharps, that have become contaminated on the outside placed into appropriate secondary containers?				
7. LAUNDRY		YES	NO	N/A	COMMENTS
7.1	Has a written procedure been developed for handling contaminated laundry?				
7.2	Is contaminated laundry handled as little as possible with a minimum of agitation or movement?				
7.3	Is contaminated laundry bagged or put into other containers at the location it is used?				
7.4	Is contaminated laundry placed and transported in bags or containers labeled with the biohazard symbol (or colored red).				
7.5	Is wet contaminated laundry placed and transported in bags or containers that will prevent soak – through and/or leakage of fluids to the exterior?				
7.6	Do persons who handle contaminated laundry wear protective gloves and other appropriate personal protective equipment?				
7.7	Are garments which have been penetrated by blood or other potentially infectious materials removed immediately or as soon as possible by the user?				
8. VACCINATION AND EXPOSURE INCIDENTS		YES	NO	N/A	COMMENTS
8.1	Is the hepatitis B vaccination series made available to all persons who have received the required bloodborne pathogen training?				
8.2	Within 10 days of initial assignment, is the hepatitis B vaccination series made available to persons whose job is reasonably anticipated to have contact with blood or other potentially infectious materials?				
8.3	Have persons who refused to take the hepatitis B vaccination series signed a statement to that effect following the form prescribed by the OSHA standard?				
8.4	Is a confidential medical evaluation and follow-up made available to an exposed person following a report of an exposure incident?				
9. TRAINING		YES	NO	N/A	COMMENTS
9.1	Is bloodborne pathogen training provided before or at the time of initial assignment where contact with blood or other potentially infectious materials is possible?				
9.2	Is bloodborne pathogen refresher training provided at least annually?				
9.3	Is additional bloodborne pathogen training provided when changes are instituted that might affect exposure such as modification of tasks or procedures or adoption of new tasks or procedures?				

9.4	Is the bloodborne pathogen training material appropriate in content and vocabulary to the education level, literacy, and language of people to be trained?				
9.5	Is the person(s) who conducts the bloodborne pathogen training knowledgeable in the subject matter?				
9.6	Are accurate medical records maintained regarding hepatitis B vaccinations, examinations, medical testing, follow-up procedures, and copies of written opinions given in response to exposure incidents?				
9.7	Are records maintained of training that shows the dates of the training sessions, the contents of the training session, the names and qualifications of person conducting the training, and the names of the persons attending the training sessions?				