



# BLOODBORNE PATHOGEN

## Exposure Control Plan



Laboratory Research  
2011

Location: \_\_\_\_\_

Principal Investigator: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

# **BLOODBORNE PATHOGEN EXPOSURE CONTROL PLAN**

## **Table of Contents**

<b>INTRODUCTION</b>	<b>1</b>
<b>DEFINITIONS</b>	<b>2</b>
<b>EXPOSURE DETERMINATION</b>	<b>5</b>
<b>METHODS OF COMPLIANCE</b>	<b>6</b>
Standard (Universal) Precautions	6
<b>ENGINEERING AND WORK PRACTICE CONTROLS</b>	<b>6</b>
Infectious Sharps Waste	6
Infectious Non-Sharps Waste	9
Tasks/Procedures Involving Blood and/or OPIM	10
Specimens of Blood and/or OPIM	10
Food, Drinks, Cosmetics Application, and Contact Lens	10
Hand Hygiene	11
Contaminated Equipment for Servicing or Shipping	11
Personal Protective Equipment (PPE)	12
Cleaning and Decontaminating Blood Spills	14
Laundry	14
Labels and Signs	15
HIV and HBV Research Laboratories	17
Hepatitis B Vaccination	17
Post-Exposure Evaluation and Follow-Up	18
Communication of Hazards to Employees	18
Training and Education of Employees	19
<b>RECORDKEEPING</b>	<b>20</b>
Medical Records	20
Training Records	20
<b>EMERGENCY CONTACT INFORMATION</b>	<b>21</b>
<b>HEPATITIS B VACCINE DECLINATION</b>	<b>23</b>

## INTRODUCTION

The purpose of this Exposure Control Plan is to provide documentation of the procedures which have been devised to reduce employee exposure to bloodborne pathogens in accordance with Occupational Safety and Health Administration (OSHA) Standard **29 CFR Part 1910.1030** - Occupational Exposure to Bloodborne Pathogens.

The Exposure Control Plan shall contain at least the following elements:

- An exposure determination
- The schedule and method of implementation for:
  - Methods of Compliance,
  - HIV and HBV Research Laboratories and Production Facilities,
  - Hepatitis B Vaccination and Post-Exposure Evaluation and Follow-up,
  - Communication of Hazards to Employees, and
  - Record keeping, of this standard, and
- The procedure for the evaluation of circumstances surrounding exposure incidents.

The Exposure Control Plan must be accessible to employees at all times.

The Exposure Control Plan must be reviewed and updated at least 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.

The Exposure Control Plan must be made available to OSHA upon request for examination and copying.

## DEFINITIONS

- **Blood** means human blood, human blood components, and products made from human blood.
- **Bloodborne Pathogens** means pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to: Hepatitis B Virus (HBV) and Human Immunodeficiency Virus (HIV).
- **Clinical Laboratory** means a workplace where diagnostic or other screening procedures are performed on blood or other potentially infectious materials.
- **Contaminated** means the presence or the reasonably anticipated presence of blood or other potentially infectious materials on an item or surface.
- **Contaminated Laundry** means laundry which has been soiled with blood or other potentially infectious materials or may contain sharps.
- **Contaminated Sharps** means any contaminated object that can penetrate the skin including, but not limited to: needles, scalpels, broken glass, broken capillary tubes, and exposed ends of dental wires.
- **Decontamination** means the use of physical or chemical means to remove, inactivate, or destroy bloodborne pathogens on a surface or item to the point where they are no longer capable of transmitting infectious particles and the surface or item is rendered safe for handling, use, or disposal.
- **Engineering Controls** means controls (e.g., sharps disposal containers, self-sheathing needles) that isolate or remove the bloodborne pathogens hazard from the workplace.
- **Exposure Incident** means a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials those results from the performance of an employee's duties.
- **Hand-washing Facilities** means a facility providing an adequate supply of running potable water, soap, and single use towels or hot air drying machines.
- **Licensed Healthcare Professional** is a person whose legally permitted scope of practice allows him or her to independently perform healthcare.
- **HBV** means Hepatitis B Virus.
- **HIV** means Human Immunodeficiency Virus.

- **Needleless Systems** means a device that does not use needles for: (1) The collection of bodily fluids or withdrawal of body fluids after initial venous or arterial access is established; (2) The administration of medication or fluids; or (3) Any other procedure involving the potential for occupational exposure to bloodborne pathogens due to percutaneous injuries from contaminated sharps.
- **Occupational Exposure** means reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials that may result from the performance of an employee's duties.
- **Other Potentially Infectious Materials (OPIM)** means (1) The following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids; (2) Any unfixed tissue or organ (other than intact skin) from a human (living or dead); and (3) HIV-containing cell or tissue cultures, organ cultures, and HIV- or HBV-containing culture medium or other solutions; and blood, organs, or other tissues from experimental animals infected with HIV or HBV.
- **Parenteral** means piercing mucous membranes or the skin barrier through such events as needle sticks, human bites, cuts, and abrasions.
- **Personal Protective Equipment (PPE)** is specialized clothing or equipment worn by an employee for protection against a hazard. General work clothes (e.g., uniforms, pants, shirts or blouses) not intended to function as protection against a hazard is not considered to be personal protective equipment.
- **Production Facility** means a facility engaged in industrial-scale, large-volume, or high concentration production of HIV or HBV.
- **Regulated Waste** means liquid or semi-liquid blood or other potentially infectious materials; contaminated items that would release blood or other potentially infectious materials in a liquid or semi-liquid state if compressed; items that are caked with dried blood or other potentially infectious materials and are capable of releasing these materials during handling; contaminated sharps; and pathological and microbiological wastes containing blood or other potentially infectious materials.
- **Research Laboratory** means a laboratory producing or using research-laboratory-scale amounts of HIV or HBV. Research laboratories may produce high concentrations of HIV or HBV, but not in the volume found in production facilities.

- **Sharps with Engineered Sharps Injury Protections** means a nonneedle sharp or a needle device used for withdrawing body fluids, accessing a vein or artery, or administering medications or other fluids, with a built-in safety feature or mechanism that effectively reduces the risk of an exposure incident.
- **Source Individual** means any individual, living or dead, whose blood or other potentially infectious materials may be a source of occupational exposure to the employee. Examples include, but are not limited to: hospital and clinic patients; clients in institutions for the developmentally disabled; trauma victims; clients of drug and alcohol treatment facilities; residents of hospices and nursing homes; human remains; and individuals who donate or sell blood or blood components.
- **Sterilize** means the use of a physical or chemical procedure to destroy all microbial life including highly resistant bacterial endospores.
- **Universal Precautions** is an approach to infection control. According to the concept of Universal Precautions, all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV, and other bloodborne pathogens.
- **Work Practice Controls** means controls that reduce the likelihood of exposure by altering the manner in which a task is performed.

## EXPOSURE DETERMINATION

Each employer who has an employee(s) with occupational exposure as defined by:

*a reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials that may result from the performance of an employee's duties*

shall prepare an exposure determination for every job classification within the clinical practice. This exposure determination shall be as follows:

List all job classifications in your area, which **will have** occupational exposure:

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List job classifications in your area, which **may have** occupational exposure:

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List **all tasks and procedures** that result in occupational exposure:

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**Exposure determination shall be made without regard to the use of Personal Protective Equipment (PPE).**

## **METHODS OF COMPLIANCE**

- **Standard (Universal) Precautions** - Treat all bodily fluids / materials as infectious, including any and all instrumentation and materials which may have come in contact with body fluids such as paper, gauze, bandages, sponges, gloves, etc. **Standard (Universal) Precautions must be observed at all times.**

## **ENGINEERING AND WORK PRACTICE CONTROLS**

Engineering and work practice controls are equipment or practices that reduce or eliminate the potential for exposure to blood or other potentially infective material (OPIM) without reliance on the employee to take self-protective actions. Included are practices and devices used to reduce needlestick injuries, such as a needleless IV system, safety syringes, safe phlebotomy and butterfly devices, and puncture-resistant sharps containers.

Engineering and work practice controls shall be used to eliminate or minimize employee exposure. Where occupational exposure remains after institution of these controls, personal protective equipment shall also be used. Engineering controls shall be examined and maintained or replaced on a regular schedule to ensure their effectiveness.

### **Infectious Sharps Waste**

Sharps containers must be used for the disposal of all syringes, glass ware (broken and intact) petri dishes, pipettes, hard plastic which has the ability to shatter under pressure, and any other materials which may have become contaminated and has the ability to cut, scratch or pierce the skin and /or breach mucus membranes. Sharps containers should not be moved unless properly closed to prevent spillage.

- Sharps containers must be inspected daily. The person performing this inspection will close all containers which are more than 2/3 full and check for adequate labeling.
- Label container with the start date of collection.
- Do not reach into sharps container for any reason.
- Do not dispose of sharps in regular trash.
- Do not dispose non-sharps in sharps container.
- Do not use cardboard containers for disposal of sharps.

- Take care to prevent injuries when using needles, scalpels, and other sharp instruments or devices; when handling sharp instruments after procedures; when cleaning used instruments; and when disposing of used sharps
- Never recap used needles, or otherwise manipulate them using both hands, or use any other technique that involves directing the point of a needle toward any part of the body; rather, use either a one-handed “scoop” technique or a mechanical device designed for holding the needle sheath.
- Do not remove used needles from disposable syringes by hand, and do not bend, break, or otherwise manipulate used needles by hand.
- Immediately or as soon as possible, place used disposable syringes and needles, scalpel blades, and other sharp items in biohazard labeled, puncture resistant, leak-proof on sides and bottom, closable containers that remain in the upright position. Containers are located as close as practical to the area in which the items were used or reasonably anticipated to be found.
- Place reusable sharps, in a manner that does not require employees to reach, by hand, into the container (i.e. syringes, needles, scalpels, scissors) in a biohazard labeled, closable, leak-proof on sides and bottom, puncture-resistant container for transport to the reprocessing area.
- Reusable containers are not opened, emptied, or cleaned manually or in any other manner, which would expose employees to the risk of percutaneous injury.
- Lids are to be kept closed on containers at all times.
- Close container prior to moving.
- Full containers will be removed, disposed, and replaced by an outside contractor on a predetermined schedule. If removal and replacement has not been performed appropriately, close the container and contact (215) 895-5919 and the Drexel University Department of Environmental Health and Safety office.

All infectious sharps waste containers are inspected daily by:

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If primary inspector is absent, sharps containers will be inspected by:

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All infectious sharps waste containers are removed and disposed by:

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Frequency of removal is:

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Full containers are stored in a secure space to prevent accidental or unauthorized access.  
This secure space is located in:

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**Infectious Non-Sharps Waste**

- All Infectious Non-Sharps Waste (INSW) will be disposed in red biohazardous labeled bag.
- Label INSW bag with the start date of collection.
- INSW red bags will be contained in designated and labeled containers.
- Containers used to hold INSW red bags will be routinely cleaned with a 10% (min.) bleach solution.
- Lids are to be kept closed on containers at all times.
- Do not dispose Infectious Sharps in INSW red bags.
- Do not dispose trash in INSW red bags.
- The removal of full INSW red bag waste will be performed routinely.

All infectious non-sharps waste is removed and disposed by:

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Frequency of removal is:

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Full bags are stored in a secure space to prevent accidental or unauthorized access. This secure space is located in:

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### **Tasks/Procedures Involving Blood and/or Other Potentially Infectious Materials**

- All procedures involving blood or other potentially infectious materials shall be performed in such a manner as to minimize splashing, spraying, spattering, and generation of droplets of these substances.
- Mouth pipetting/suctioning of blood and other potentially infectious materials is not permitted under any circumstance.
- Broken glassware, which may be contaminated, is cleaned up using mechanical means such as a brush and dustpan, tongs, or forceps.

### **Specimens of Blood and/or Other Potentially Infectious Materials**

- All specimens of blood or other potentially infectious materials shall be placed in a container which prevents leakage during collection, handling, processing, storage, transport, or shipping.
- If the specimen could puncture the primary container, the primary container shall be placed within a secondary container which is puncture-resistant in addition to the above characteristics.
- If outside contamination of the primary container occurs, the primary container shall be placed within a second container which prevents leakage during handling, processing, storage, transport, or shipping and is labeled.
- Container for storage, transport, or shipping shall have biohazard label and be closed prior to storage transport or shipping.

### **Food, Drinks, Cosmetics Application, and Contact Lens**

- Eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses are prohibited in work areas where there is a reasonable likelihood of occupational exposure to blood and other potentially infectious materials.
- Food and drink shall not be kept in refrigerators, freezers, shelves, cabinets, countertops, or benchtops where blood or other potentially infectious materials are present.

## **Hand Hygiene**

- Wash hands with soap and water after touching blood, bodily fluids, secretions, excretions, other potentially infectious materials and contaminated items, whether or not gloves are worn.
- Perform hand hygiene prior to donning gloves and immediately after gloves are removed, between patient contacts, and when otherwise indicated to avoid transfer of microorganism to other patients or environments.
- It may be necessary to perform hand hygiene between tasks and procedures on the same patient to prevent cross-contamination of different body sites.
- Hand washing facilities must be present in every lab / clinical area. Hand washing shall be performed prior to and after the use of gloves, personnel protection equipment, and/or patient contact.

## **Contaminated Equipment for Servicing or Shipping**

- Equipment which may become contaminated with blood or other potentially infectious materials shall be examined prior to servicing or shipping and shall be decontaminated as necessary, unless the employer can demonstrate that decontamination of such equipment or portions of such equipment is not feasible.
- A readily observable Bio-Hazard label shall be attached to the equipment stating which portions remain contaminated. The employer shall ensure that this information is conveyed to all affected employees, the servicing representative, and/or the manufacturer, as appropriate, and prior to handling, servicing, or shipping so that appropriate precautions will be taken.

## Personal Protective Equipment (PPE)

When there is occupational exposure, the employer shall provide, at no cost to the employee, appropriate personal protective equipment such as, but not limited to, gloves, gowns, laboratory coats, face shields or masks and eye protection, and mouthpieces, resuscitation bags, pocket masks, or other ventilation devices. Personal protective equipment will be considered "appropriate" only if it does not permit blood or other potentially infectious materials to pass through to or reach the employee's work clothes, street clothes, undergarments, skin, eyes, mouth, or other mucous membranes under normal conditions of use and for the duration of time which the protective equipment will be used.

- The employer shall ensure that appropriate personal protective equipment in the appropriate sizes is readily accessible at the worksite or is issued to employees.
- The employer shall clean, launder, and dispose of personal protective equipment
- The employer shall repair or replace personal protective equipment as needed to maintain its effectiveness, at no cost to the employee.
- All personal protective equipment shall be removed prior to leaving the work area.
- When personal protective equipment is removed it shall be placed in an appropriately designated area or container for storage, washing, decontamination, or disposal.
- **Gloves** - shall be worn when it can be reasonably anticipated that the employee may have hand contact with blood, other potentially infectious materials, mucous membranes, and non-intact skin; when performing vascular access procedures, and when handling or touching contaminated items or surfaces.
  - Disposable (single use) gloves such as surgical or examination gloves shall be replaced as soon as practical when contaminated or as soon as feasible if they are torn, punctured, or when their ability to function as a barrier is compromised.
  - Disposable (single use) gloves shall not be washed or decontaminated for re-use.
  - Hypoallergenic gloves, glove liners, powderless gloves, or other similar alternatives shall be readily accessible to those employees who are allergic to the gloves normally provided.

- **Masks, Eye Protection, and Face Shields** - Masks in combination with eye protection devices, such as goggles or safety glasses with solid side shields, or chin-length face shields, shall be worn whenever splashes, spray, spatter, or droplets of blood or other potentially infectious materials may be generated and eye, nose, or mouth contamination can be reasonably anticipated.
  
- **Gowns, Aprons, and Other Protective Body Clothing** - Appropriate protective clothing such as, but not limited to, gowns, aprons, lab coats, clinic jackets, or similar outer garments shall be worn in occupational exposure situations. The type and characteristics will depend upon the task and degree of exposure anticipated.
  - If a garment(s) is penetrated by blood or other potentially infectious materials, the garment(s) shall be removed immediately or as soon as feasible.
  
  - Surgical caps or hoods and/or shoe covers or boots shall be worn in instances when gross contamination can reasonably be anticipated.

List all protective equipment available (at no cost to employees) in your work area. Include safety glasses and/or goggles, splash shields, gloves (chain mail, latex, PVC, etc.), chemical aprons, masks, etc.

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PPE is stored in:

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PPE inventory is routinely inspected by:

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Frequency of PPE Inspection:

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Additional PPE can be obtained by:

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## **Cleaning and Decontaminating Blood Spills**

- All spills shall be immediately contained and cleaned up by appropriate professional staff or others properly trained and equipped to work with potentially concentrated infectious materials.
- Always wear protective gloves and safety glasses.
- First wipe with a towel and dispose of the towel as infectious waste.
- Apply a biocide / germicide or 10% bleach in water solution over entire area.
- Repeat for manufactures recommended exposure time (usually 5-10 minutes)
- Allow surface to air dry.
- If the surface is a floor, demarcate with slippery when wet signs.

## **Laundry**

- Standard (Universal) Precautions must be observed at all times when handling all linens.
- Contaminated linen is handled while wearing appropriate PPE, as little as possible with minimal agitation and kept away from employee's body.
- Laundry contaminated with blood or other potentially infectious materials should be placed in a designated container that prevents leakage.
- Laundry in this area is processed by: \_\_\_\_\_
- Phone number for service is: \_\_\_\_\_

## Labels and Signs

Labels and Signs required by this section shall include the following legend:



- Signs must be present on all doors leading to areas containing potentially contaminated materials (i.e. laboratory doors, HIV and HBV Research Laboratory and Production Facilities).
- Labels must be present on all containers of regulated waste, refrigerators, and freezers containing blood or other potentially infectious material.
- Labels must be placed on all vessels or containers containing infectious waste or other potentially contaminated materials, including transport containers, refrigerators, freezers, centrifuge, etc.
- Labels must be placed on all containers used for holding red Infectious Non-Sharps Waste bags.
- Labels must be placed on all Infectious Sharps Waste containers.
- The date of the first time an infectious waste container or bag is used must be on the label.

List additional engineering controls here. Include needleless syringes, needleless blood draw kits, shatter proof plastic, Engineered Sharps Injury Protection (ESIP) devices, etc.

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List additional work practice controls here. Include one handed techniques, sterilization, labeling, procedures to minimize needle sticks and splashing, etc:

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## **HIV and HBV Research Laboratories and Production Facilities**

These facilities will follow all policies and procedures outlined in the University Lab Safety Manual. This manual contains biosafety procedures that have been developed and approved by the Drexel University biosafety committee. A copy of this manual is located in each of the HIV, HBV, and other biological research laboratories. Copies are available on our website at [www.drexel.edu/facilities/healthSafety/labSafety/](http://www.drexel.edu/facilities/healthSafety/labSafety/).

### **Hepatitis B Vaccination**

The Hepatitis B vaccination shall be made available to all employees who have a potential for occupational exposure (as defined by this document). It shall be made available after the employee has received the training in occupational exposure and within ten (10) working days of initial assignment. Vaccination is not recommended for employees that have revealed that they are immune, or that the vaccine is contraindicated for medical reasons. Any such employees will be noted accordingly.

- The employee must schedule an appointment through the Department of Environmental Health and Safety prior to visiting Occupational Health to receive this Hepatitis B vaccination. If you would like to schedule an appointment please contact Diana Dukes at (215) 895-5907.
- Any clinical personnel that need an annual PPD can go to the Occupational Health office that they went to in the previous year. Prior authorization is not required.
- If the employee initially declines the Hepatitis B vaccination but at a later date decides to accept the vaccination, the vaccination shall then be made available.
- All employees who decline the Hepatitis B vaccination offered shall sign the OSHA required waiver indicating their refusal. This form can be found at the end of the exposure control plan.
- If a routine booster dose of Hepatitis B vaccine is recommended by the US Public Health Service at a future date, such booster doses shall be made available at no cost to the employee.

## **Post-Exposure Evaluation and Follow-up**

- Should an exposure occur, immediately cleanse skin with soap and water. Be sure to use plenty of soap and a strong stream of water. If the eyes, nose or mouth are exposed, rinse with plenty of water and no soap.
- The employee must seek medical care at WorkNet Occupational Health, or the nearest Emergency Room immediately for post exposure evaluation.
- When an injury occurs, it should be immediately reported to the employee's supervisor and/or Principal Investigator (PI). An Employee Injury Report should be completed and faxed to Risk Management and the Department of Environmental Health and Safety within 24 hours. The Department of Environmental Health and Safety will conduct an accident investigation.
- Supervisors must offer post-exposure evaluation and follow-up. Follow-up will include the following:
  - Documentation of route of exposure and circumstances related to the incident.
  - Identification and status of the source individual. If consent is given the source individual will be tested.
  - The source individual's blood shall be tested as soon as feasible and after consent is obtained in order to determine HBV and HIV infectivity. If consent is not obtained, the employer shall establish that legally required consent cannot be obtained. When the source individual's consent is not required by law, the source individual's blood, if available, shall be tested and the results documented.
  - HIV test results of source individual will be made available only if negative.
  - Employees will be offered blood tests if warranted for HIV, HBV, HCV, and HIV serological agents.
  - Employees will be offered post-exposure prophylaxis.
  - Counseling will be given to employee(s) on precautions after the exposure, potential illnesses and reporting procedures.
- The Drexel Department of Environmental Health and Safety will conduct an Accident Investigation after an exposure incident.

## Communication of Hazards to Employees

Standard (Universal) Precautions must be observed at all times. Treat all bodily fluids / materials as infectious, including any and all instrumentation and materials which may have come in contact with body fluids such as paper, gauze, bandages, sponges, gloves, etc.

Warning label or sign that includes the universal biohazard symbol followed by the term “biohazard” and is fluorescent orange or orange-red in color must be affixed, in a manner that prevents loss, unintentional removal, or unintentional access to biohazardous materials or areas at all times.

## Training and Education of Employees

### Training Contents

- An explanation of the OSHA Bloodborne Pathogen Standard 29 CFR 1910.1030
- The Drexel University Exposure Control Plan for Drexel University Physicians
- Standard Precautions
- Work Practice Methods
- Engineering Controls
- Management of regulated waste such as sharps and infectious waste
- Epidemiology and symptomology of Hepatitis B, C, and HIV
- Modes of transmission of HBV, HCV, and HIV
- Review of procedures which may result in exposure to potentially infectious materials
- Use of Personal Protective Equipment
- An explanation of labels and signs used
- The Drexel University Hepatitis B Vaccine Program
- Post-exposure evaluation and follow-up procedures

### Frequency of Training

***New Hire*** – All new employees will be trained on-line via the Department of Environmental Health and Safety training website: <http://www.drexelehstraining.com/>

Training will focus on the contents of the bloodborne pathogen standard 29 CFR 1910.1030 and information specific to their individuals work areas.

***Annual*** – Annual training is required by the anniversary of the last completed training session. The annual training session will review items covered in the initial new hire training, but will also include changes in regulations and any new policies adapted by the University.

## **RECORDKEEPING**

- **Medical Records** - Complete records must be retained for at least thirty (30) years after the last day of employment of any individuals which had an occupational exposure. These records must be kept confidential. Medical records must be made available to subject employee and/or subject employee's representative (with written consent), OSHA, and NIOSH.
- **Training Records** - Training records must be retained for three (3) years. These records must include dates, name and qualifications of trainer, individuals trained and their job titles. The Drexel Department of Environmental Health and Safety will maintain these records.

## EMERGENCY CONTACT INFORMATION

### University City Campus - Emergency Contact Numbers

Department	Name	Office Number	Mobile Number	Pager Number
<b>Public Safety</b>		<b>215-895-2222</b>		
<b>Emergency Room</b>	<b>HUP</b>	<b>215-662-3920</b>		
<b>Student Health</b>	<b>Drexel</b>	<b>215-895-5800</b>		
<b>Occupational Health</b>	<b>WorkNet</b>	<b>215-487-5800</b>		
<b>Univ. Safety</b>	<b>Jon Chase</b>	<b>215-895-5891</b>	<b>215-669-6122</b>	
<b>Univ. Safety</b>	<b>Martin Bell</b>	<b>215-895-5892</b>	<b>215-778-4278</b>	
<b>Univ. Safety</b>	<b>Phil Leo</b>	<b>215-895-5909</b>	<b>215-768-1624</b>	
<b>Univ. Safety</b>	<b>Jaime Barbaro</b>	<b>215-895-5896</b>	<b>215-768-1623</b>	
<b>Univ. Safety</b>	<b>Joseph Nihill</b>	<b>215-895-1624</b>	<b>267-249-0348</b>	
<b>Univ. Safety</b>	<b>Jeff Nemetz</b>	<b>215-895-5913</b>	<b>215-778-3039</b>	
<b>Univ. Safety</b>	<b>Diana Dukes</b>	<b>215-895-5907</b>	<b>215-778-4279</b>	
<b>Radiation Safety</b>	<b>Kent Lambert</b>	<b>215-255-7860</b>	<b>215-651-2211</b>	<b>4-1260</b>
<b>Facilities</b>		<b>215-895-2808</b>		<b>215-308-1058</b>
<b>Maintenance</b>		<b>215-895-2808</b>		<b>215-308-1058</b>
<b>Environmental Services</b>		<b>215-895-2808</b>	<b>267-446-1086</b>	<b>215-265-0583</b>

### Center City Campus - Emergency Contact Numbers

Department	Name	Office Number	Mobile Number	Pager Number
<b>Emergency Operator</b>		<b>215-762-7110</b>		
<b>Emergency Room</b>	<b>HUH</b>	<b>215-762-7963</b>		
<b>Student Health</b>		<b>215-762-8590</b>		
<b>Occupational Health</b>	<b>WorkNet</b>	<b>215-762-8590</b>		
<b>Univ. Safety</b>	<b>Jon Chase</b>	<b>215-895-5891</b>	<b>215-669-6122</b>	
<b>Univ. Safety</b>	<b>Martin Bell</b>	<b>215-895-5892</b>	<b>215-778-4278</b>	
<b>Univ. Safety</b>	<b>Phil Leo</b>	<b>215-895-5909</b>	<b>215-768-1624</b>	
<b>Univ. Safety</b>	<b>Jaime Barbaro</b>	<b>215-895-5896</b>	<b>215-768-1623</b>	
<b>Univ. Safety</b>	<b>Joseph Nihill</b>	<b>215-895-1624</b>	<b>267-249-0348</b>	
<b>Univ. Safety</b>	<b>Jeff Nemetz</b>	<b>215-895-5913</b>	<b>215-778-3039</b>	
<b>Univ. Safety</b>	<b>Diana Dukes</b>	<b>215-895-5907</b>	<b>215-778-4279</b>	
<b>Hospital Facilities</b>	<b>Luis Gonzalez</b>	<b>215-762-3519</b>	<b>215-762-3000</b>	
<b>Hospital Safety</b>	<b>Steven Morrissey</b>	<b>215-762-6133</b>	<b>215-779-8901</b>	<b>4-2830</b>
<b>Radiation Safety</b>	<b>Kent Lambert</b>	<b>215-255-7860</b>	<b>215-651-2211</b>	<b>4-1260</b>
<b>Facilities</b>	<b>Patricia Lewis</b>	<b>215-762-6500</b>	<b>215-783-2672</b>	<b>4-1015</b>
<b>Facilities</b>	<b>Brian Lynch</b>	<b>215-255-7318</b>	<b>215-783-2557</b>	
<b>Facilities</b>	<b>John Mahony</b>	<b>215-255-7320</b>	<b>215-668-7114</b>	
<b>Tenet Security</b>		<b>215-762-7110</b>		
<b>Tenet Maintenance</b>		<b>215-762-3000</b>		
<b>Environmental Services</b>		<b>215-762-4700</b>		

Queen Lane Campus - Emergency Contact Numbers

Department	Name	Office Number	Mobile Number	Pager Number
<b>Emergency Operator</b>		<b>215-895-2222</b>		
<b>Public Safety</b>		<b>215-895-2222</b>		
<b>Student Health</b>		<b>215-895-5800</b>		
<b>Occupational Health</b>		<b>215-762-8590</b>		
<b>Univ. Safety</b>	<b>Jon Chase</b>	<b>215-895-5891</b>	<b>215-669-6122</b>	
<b>Univ. Safety</b>	<b>Martin Bell</b>	<b>215-895-5892</b>	<b>215-778-4278</b>	
<b>Univ. Safety</b>	<b>Phil Leo</b>	<b>215-895-5909</b>	<b>215-768-1624</b>	
<b>Univ. Safety</b>	<b>Jaime Barbaro</b>	<b>215-895-5896</b>	<b>215-768-1623</b>	
<b>Univ. Safety</b>	<b>Joseph Nihill</b>	<b>215-895-1624</b>	<b>267-249-0348</b>	
<b>Univ. Safety</b>	<b>Jeff Nemetz</b>	<b>215-895-5913</b>	<b>215-778-3039</b>	
<b>Univ. Safety</b>	<b>Diana Dukes</b>	<b>215-895-5907</b>	<b>215-778-4279</b>	
<b>Radiation Safety</b>	<b>Kent Lambert</b>	<b>215-255-7860</b>	<b>215-651-2211</b>	<b>4-1260</b>
<b>Facilities</b>	<b>Ray Stoffel</b>	<b>215-991-8484</b>	<b>215-651-1321</b>	
<b>Facilities</b>	<b>Brian Lynch</b>	<b>215-255-7318</b>	<b>215-783-2557</b>	
<b>Facilities</b>	<b>John Mahony</b>	<b>215-255-7320</b>	<b>215-668-7114</b>	
<b>Security</b>		<b>215-991-8102</b>		
<b>Maintenance</b>		<b>215-991-8484</b>		
<b>Env. Services</b>		<b>215-991-8145</b>		

PA Biotechnology Center - Emergency Contact Numbers

Department	Name	Office Number	Mobile Number	Pager Number
<b>Security</b>		<b>215-489-2315</b>		
<b>24 Hour Call Center</b>		<b>215-895-2222</b>		
<b>Emergency Room</b>				
<b>Student Health</b>				
<b>Occupational Health</b>				
<b>Univ. Safety</b>	<b>Jon Chase</b>	<b>215-895-5891</b>	<b>215-669-6122</b>	
<b>Univ. Safety</b>	<b>Martin Bell</b>	<b>215-895-5892</b>	<b>215-778-4278</b>	
<b>Univ. Safety</b>	<b>Phil Leo</b>	<b>215-895-5909</b>	<b>215-768-1624</b>	
<b>Univ. Safety</b>	<b>Jaime Barbaro</b>	<b>215-895-5896</b>	<b>215-768-1623</b>	
<b>Univ. Safety</b>	<b>Joseph Nihill</b>	<b>215-895-1624</b>	<b>267-249-0348</b>	
<b>Univ. Safety</b>	<b>Jeff Nemetz</b>	<b>215-895-5913</b>	<b>215-778-3039</b>	
<b>Univ. Safety</b>	<b>Diana Dukes</b>	<b>215-895-5907</b>	<b>215-778-4279</b>	
<b>Radiation Safety</b>	<b>Kent Lambert</b>	<b>215-255-7860</b>	<b>215-651-2211</b>	<b>4-1260</b>
<b>Facilities</b>	<b>Gerald Litschi</b>	<b>215-489-4947</b>	<b>484-767-5779</b>	
<b>Maintenance</b>		<b>215-489-4904</b>	<b>215-778-1184</b>	
<b>Env. Services</b>		<b>215-489-4904</b>	<b>215-778-1184</b>	

## HEPATITIS B VACCINE DECLINATION

I understand that due to my occupational exposure to blood or other infectious materials that I may be at risk of acquiring Hepatitis B virus infection. I have been given the opportunity to be vaccinated with the Hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring Hepatitis B, a serious disease. If in the future I continue to have occupational exposure to blood or potentially infectious materials and I want the Hepatitis B vaccine, I can receive the vaccination series as no charge to me.

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(Signature)

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(Print Name)

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(Title)

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(Date)

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(Department)

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(Building Name)

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(Laboratory Room Number)