

**OH Part 554. Bloodborne Infectious Diseases  
Compared With  
29 C.F.R. 1910.1030 Bloodborne pathogens**

**Summary:** The significant differences between OH Part 554. Bloodborne Infectious Diseases and 29 C.F.R. 1910.1030 Bloodborne pathogens are in:

- Exposure determination
- Exposure control plan
- Universal precautions
- Work practices
- Protective work clothing and equipment
- Regulated waste disposal
- Laundry
- Vaccinations and postexposure follow-up
- Communication of hazards to employees
- Recordkeeping
- Information and training

The comparisons show only those provisions where MIOSHA rules are different than OSHA or where MIOSHA rules are not included in 29 C.F.R.

\*\*\*\*means there is a comparable OSHA rule to this paragraph

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<p><b>R 325.70003 Exposure determination.</b>  <b>Rule 3.</b> (1) An employer shall evaluate routine and reasonably anticipated tasks and procedures to determine whether there is actual or reasonably anticipated employee exposure to blood or other potentially infectious material. Based on this evaluation, an employer shall categorize all employees into category A or B as follows:</p> <p>(a) Category A consists of occupations that require procedures or other occupation-related tasks that involve exposure or reasonably anticipated exposure to blood or other potentially infectious material or that involve a likelihood for spills or splashes of blood or other potentially infectious material. This includes procedures or tasks conducted in nonroutine situations as a condition of employment.</p> <p>(b) Category B consists of occupations that do not require tasks that involve exposure to blood or other potentially infectious material on a routine or nonroutine basis as a condition of employment. Employees in occupations in this category do not perform or assist in emergency medical care or first aid and are not reasonably anticipated to be exposed in any other way.</p> <p>(2)****</p>	<p><b>1910.1030(c)(2) Exposure determination.</b>  <b>(i)</b> Each employer who has an employee(s) with occupational exposure as defined by paragraph (b) of this section shall prepare an exposure determination. This exposure determination shall contain the following:</p> <p style="padding-left: 40px;"><b>(A)</b> A list of all job classifications in which all employees in those job classifications have occupational exposure;</p> <p style="padding-left: 40px;"><b>(B)</b> A list of job classifications in which some employees have occupational exposure, and</p> <p style="padding-left: 40px;"><b>(C)</b> A list of all tasks and procedures or groups of closely related task and procedures in which occupational exposure occurs and that are performed by employees in job classifications listed in accordance with the provisions of paragraph (c)(2)(i)(B) of this standard</p> <p>Equivalent</p>

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<p>(3) An employer shall determine and document a rationale for an exposure determination.</p> <p>(4) An employer shall maintain a list of all job classifications which are determined to be category A.</p>	<p><b>No comparable OSHA provisions</b></p>
<p><b>R 325.70004 Exposure control plan.</b>  <b>Rule 4. (a)****</b></p>	<p>Equivalent</p>
<p>(b) An exposure control plan shall contain all of the following information:</p> <p>(i)****</p> <p>(iii) The contents or a summary of the training program required by R 325.70016.</p> <p>(v) Task-specific standard operating procedures (SOPs) that address all of the following areas:</p> <p>(A) Employee recognition of reasonably anticipated exposure to blood and other potentially infectious material.</p> <p>(B) Appropriate selection, use, maintenance, and disposal of personal protective equipment.</p> <p>(C) Contingency plans for foreseeable circumstances that prevent following the recommended SOPs.</p> <p>(c) General employer policies or task-specific SOPs shall address the management of inadvertent exposures such as needlesticks or mucus membrane exposures.</p> <p>(d) to (h)****</p>	<p>Equivalent</p> <p><b>No comparable OSHA provisions</b></p> <p>Equivalent</p>
<p><b>R 325.70005 Universal precautions.</b>  <b>Rule 5.</b> Universal precautions shall be observed to prevent contact with blood and other potentially infectious materials. If differentiation between body fluid types is difficult or impossible, all body fluids shall be considered potentially infectious materials.</p>	<p><b>No comparable OSHA provision</b></p>
<p><b>R 325.70007 Work practices.</b>  <b>Rule 7. (1)</b> After implementing appropriate engineering controls, an employer shall further reduce the likelihood of exposure to blood and other potentially infectious material by developing and implementing work practices for each task.</p> <p>(2) At a minimum, work practices shall ensure all of the following:</p> <p>(a) to (b)****</p>	<p><b>No comparable OSHA provisions</b></p> <p>Equivalent</p>

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<p>(c) An employee shall wash his or her hands immediately after removing gloves or other protective clothing, as soon as possible after hand contact with blood or other potentially infectious material, and upon leaving the work area. Hand-washing shall be completed using the appropriate facilities, such as utility or rest room sinks. Waterless antiseptic hand cleansers shall be provided on responding units to use when hand-washing facilities are not available. When hand-washing facilities are available, hands shall be washed with warm water and soap or antiseptic cleanser. When hand-washing facilities are not available, a waterless antiseptic hand cleanser shall be used. The manufacturer's recommendations for the product shall be followed. When antiseptic cleaners or towelettes are used, employees shall wash their hands with soap and water as soon as feasible.</p> <p>(d) to (i)****</p>	<p><b>No comparable OSHA provisions</b></p> <p>Equivalent</p>
<p><b>R 325.70008 Protective work clothing and equipment.</b>  <b>Rule 8. (1)(a) to (1)(b)****</b></p> <p>(c) Where splashes can be reasonably anticipated, face shields or protective eyewear and masks shall be provided. If the conditions of exposure include the likelihood that clothing will become soaked with blood, protective outer garments, such as impervious gowns, shall be worn. Appropriate protective equipment shall be used in all of the following instances:</p> <ul style="list-style-type: none"> <li>(i) In performing invasive procedures when the health care worker has cuts, scratches, or other breaks in his or her skin.</li> <li>(ii) Where there is a high risk of skin or mucous membrane contamination with blood, for example, when performing invasive procedures on an uncooperative patient.</li> <li>(iii) In phlebotomy when performing finger or heel sticks in infants and children.</li> <li>(iv) When persons are receiving training in invasive procedures.</li> </ul> <p>(d) An employer shall assure that appropriate protective equipment and clothing in the appropriate sizes are readily accessible at the worksite or issued to employees at no cost to the employees. Hypoallergenic gloves, glove liners, powderless gloves, or other similar alternatives shall be readily accessible to employees who are allergic to the gloves normally provided. See appendix A for more information.</p> <p>(e) An employer shall provide for the cleaning, laundering, or disposing of protective clothing and equipment required by this rule.</p>	<p>Equivalent</p> <p><b>No comparable OSHA provisions except:</b></p>

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<p>(f) An employer shall repair or replace required protective clothing and equipment as needed to maintain their effectiveness.</p> <p>(g) .....Gloves shall be changed between patient contacts.....</p> <p>(h)****</p> <p>(i) Masks and eye protection or chin-length face shields shall be worn as appropriate if splashes, sprays, spatters, droplets, or aerosols of blood or other potentially infectious material may be generated and if there is a likelihood for eye, nose, or mouth contamination. If there is a significant risk of eye protection breakage or unintended removal, protective eyewear that is suitable for the work to be performed, as required by General Industry Safety Standard Part 33., being R 408.13301 et seq. of the Michigan Administrative Code, and R 325.60001 et seq. of the Michigan Administrative Code, shall be worn.</p> <p>(j) to (k)****</p> <p>(l) To minimize the need for direct mouth-to-mouth resuscitation, pocket masks, resuscitation bags, or other ventilation devices shall be provided in strategic locations and to trained personnel where the need for resuscitation is likely.</p>	<p><b>No comparable OSHA provisions</b></p> <p>Equivalent</p> <p><b>1910.1030(x) Masks, Eye Protection, and Face Shields.</b> Masks in combination with eye protection devices, such as goggles or 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.</p> <p>Equivalent</p> <p><b>No comparable OSHA provisions</b></p>
<p><b>R 325.70009 Housekeeping.</b> <b>Rule 9. (1)****</b></p> <p>(2) All equipment and environmental and working surfaces shall be maintained in a sanitary condition as follows:</p> <p>(a) to (b)****</p> <p>(c) Equipment that may become contaminated with blood or other potentially infectious material shall be examined before servicing or shipping and shall be decontaminated as necessary unless the employer can demonstrate that decontamination is not feasible. If decontamination is not feasible, the employer shall ensure that a readily observable label which states the portions of the equipment that remain contaminated and which is in compliance with the provisions of R 325.70014(2)(h) is attached to the equipment. The employer shall ensure that all affected employees, the servicing representative, or the manufacturer, as appropriate, is notified that equipment decontamination is not feasible and is notified of the portions of the equipment that remain contaminated before handling, servicing, or shipping so that appropriate precautions will be taken.</p>	<p>Equivalent</p> <p>Equivalent</p> <p><b>No comparable OSHA provisions</b></p>

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<p>(d) to (f)****</p> <p>(g) Reusable items, including reusable sharps, that have been contaminated with blood or other potentially infectious material shall be washed and decontaminated before reprocessing. The order in which washing and decontamination shall be performed shall be chosen so as to minimize exposure to blood or other potentially infectious material. Reusable sharps shall not be stored or processed in a manner that requires reaching by hand into containers where sharps have been placed.</p>	<p>Equivalent</p> <p><b>No comparable OSHA provisions</b></p>
<p><b>R 325.70010 Regulated waste disposal.</b> <b>Rule 10. (1)****</b></p> <p>(2) Immediately after use, contaminated sharps shall be disposed of in closable, leakproof, puncture-resistant, disposable containers that are labeled or color-coded according to the provisions of R 325.70014. These containers shall be easily accessible to personnel; shall be located in the immediate area of use or where sharps are likely to be found, unless needles are mechanically recapped and transported through nonpublic corridors to the container; and shall be replaced routinely and not allowed to overfill.</p> <p>(3)****</p>	<p>Equivalent</p> <p><b>No comparable OSHA provisions</b></p> <p>Equivalent</p>
<p><b>R 325.70011 Laundries.</b> <b>Rule 11.(1) to (4)****</b></p> <p>(5) An employer shall ensure that all contaminated laundry is cleaned and laundered in such a way that any bloodborne pathogens present are inactivated or destroyed.</p> <p>(6) When an employer follows universal precautions in the handling of all soiled laundry, alternative labeling or color coding is sufficient if it permits all employees to recognize the containers that are required to be in compliance with universal precautions.</p> <p>(7)****</p>	<p>Equivalent</p> <p><b>No comparable OSHA provisions</b></p> <p>Equivalent</p>
<p><b>R 325.70013 Vaccinations and postexposure follow-up.</b> <b>Rule 13. (1) to (2)****</b></p> <p>(3) An employer shall assure that all employees will receive appropriate counseling with regard to medical risks and benefits before undergoing any evaluations, procedures, vaccinations, or postexposure prophylaxes.</p>	<p>Equivalent</p> <p><b>No comparable OSHA provisions</b></p>

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<p>(4) Within 10 working days of the time of initial assignment and after the employee has received training required by the provisions of R 325.70016(5)(i), an employer shall make all of the following available to each category A employee:</p> <p>(a)****</p> <p>(b) HBV antibody testing for employees who desire such testing before deciding whether or not to receive HBV vaccination. If an employee has previously received the complete HBV vaccination series, is found to be immune to HBV by virtue of adequate antibody titer, or the vaccine is contraindicated for medical reasons, then the employer is not required to offer the HBV vaccine to that employee.</p> <p>(c)****</p> <p>(d) An employer shall assure that an employee who declines to accept hepatitis B vaccination signs a waiver statement with all of the following provisions:</p> <ul style="list-style-type: none"> <li>(i) Understanding of risk.</li> <li>(ii) Acknowledgment of opportunity of vaccination at no cost.</li> <li>(iii) Declining vaccination.</li> <li>(iv) Future availability of vaccination at not cost if desired, if still in at risk status. See appendix B for a sample of an acceptable waiver statement.</li> </ul> <p>(5) An employer shall provide each exposed employee with an opportunity to have a confidential medical evaluation and follow-up subsequent to a reported occupational exposure incident to blood or other potentially infectious material. The evaluation and follow-up shall include, at a minimum, all of the following elements:</p> <p>(a) to (d)****</p> <p>(e) Counseling on risk reduction and the risks and benefits of HIV testing in accordance with state law.</p> <p>(6) An employer shall ensure that the health care professional who is responsible for the hepatitis B Vaccination is provided with a copy of these rules and appendices. An employer shall ensure that the health care professional who evaluates an employee after an exposure incident is provided with all of the following information:</p> <p>(a) to (d)****</p> <p>(e) A description of any personal protective equipment used or to be used.</p>	<p><b>No comparable OSHA provisions</b></p> <p>Equivalent</p> <p><b>1910.1030(f)(2) Hepatitis B Vaccination.</b></p> <p>(i) Hepatitis B vaccination shall be made available after the employee has received the training required in paragraph (g)(2)(vii)(I) and within 10 working days of initial assignment to all employees who have occupational exposure unless the employee has previously received the complete hepatitis B vaccination series, antibody testing has revealed that the employee is immune, or the vaccine is contraindicated for medical reasons.</p> <p>Equivalent</p> <p><b>1910.1030(f)(2)</b></p> <p>(iv) The employer shall assure that employees who decline to accept hepatitis B vaccination offered by the employer sign the statement in appendix A.</p> <p><b>No comparable OSHA provisions</b></p> <p>Equivalent</p> <p><b>No comparable OSHA provisions</b></p> <p>Equivalent</p> <p><b>No comparable OSHA provisions</b></p>

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<p>(7) For each evaluation pursuant to the provisions of this rule, an employer shall obtain, and provide an employee with a copy of, the evaluating health care professional's written opinion within 15 working days of the completion of the evaluation. The written opinion shall be limited to the following information:</p> <p>(a) The health care professional's recommended limitations upon the employee's use of personal protective clothing or equipment.</p> <p>(b)****</p> <p>(c) A statement that the employee has been informed of the results of the medical evaluation and that the employee has been told about any medical conditions which have resulted from exposure to blood or other potentially infectious material and which require further evaluation or treatment. The written opinion obtained by the employer shall not reveal specific findings or diagnoses that are unrelated to the employee's ability to wear protective clothing and equipment or receive vaccinations. Such findings and diagnoses shall remain confidential.</p> <p>(8)****</p>	<p><b>No comparable OSHA provisions</b></p> <p>Equivalent</p> <p><b>No comparable OSHA provisions</b></p> <p>Equivalent</p>
<p><b>R 325.70014 Communication of hazards to employees.</b>  <b>Rule 14.(1) to (2)****</b></p> <p>(3) All biologically hazardous conditions shall be identified in an identical manner.</p>	<p>Equivalent</p> <p><b>No comparable OSHA provision</b></p>
<p><b>R 325.70015 Recordkeeping.</b>  <b>Rule 15. (1)****</b></p> <p>(2) An employer shall ensure that medical records contain, at a minimum, all of the following information:</p> <p>(a) to (b)****</p> <p>(c) A copy of the medical history and all results of physical examinations, medical testing, and follow-up procedures as they relate to either of the following:</p> <p>(i) The employee's ability to wear protective clothing and equipment and receive vaccination.</p> <p>(ii) Postexposure evaluation after an occupational exposure incident.</p> <p>(d) to 12****</p>	<p>Equivalent</p> <p>Equivalent</p> <p><b>1910.1030(h) Recordkeeping</b>  <b>(1)(ii)(C)</b> A copy of all results of examinations, medical testing, and follow-up procedures as required by paragraph (f)(3).</p> <p>Equivalent</p>

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<p><b>R 325.70016 Information and training.</b>  <b>Rule 16. (1) to (4)****</b></p> <p>(5) The training program shall contain all of the following elements:  (a) to (f)****</p> <p>(g) Information on all of the following with respect to personal protective clothing and equipment:  (i) to (ii)****  (iii) Limitations.  (iv) to (6)****</p> <p>(7) Training shall be conducted in the following manner:  (a) All employees in category A positions shall receive initial training and annual retraining.  (b) Training sessions shall afford employees ample opportunity for discussion and the answering of questions by a knowledgeable trainer.  (c) The training shall include opportunities for supervised practice with personal protective equipment and other equipment which is designed to reduce the likelihood for exposure and which will be used in the employee's work.  (d) The person or persons who conduct training shall be knowledgeable in all of the following areas:  (i) The information presented in the training session.  (ii) The employer's exposure control plan.  (iii) Conditions of the work environment that affect the implementation of the exposure control plan.  (e) An employer shall maintain written documentation of attendance at training.  (f) An employer may reduce the training specified in subrule (5) of this rule to allow for the previous training of an employee who has received the training from other employment or another academic source. In such cases, the previous training shall be evaluated and documented. At a minimum, an employer shall provide an employee with workplace-specific training that covers the exposure control plan and SOPs.</p>	<p>Equivalent</p> <p>Equivalent</p> <p><b>No comparable OSHA provision</b></p> <p>Equivalent</p> <p><b>No comparable OSHA provision</b></p> <p>Equivalent</p> <p><b>1910.1030(g) Communication of hazards to employees (2) Information and Training.</b>  <b>(C)(vii)</b> The training program shall contain at a minimum the following elements:  <b>(N)</b> An opportunity for interactive questions and answers with the person conducting the training session.  <b>(viii)</b> The person conducting the training shall be knowledgeable in the subject matter covered by the elements contained in the training program as it relates to the workplace that the training will address.</p>

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