

MIOSHA Fact Sheet



Bloodborne Infectious Disease

What are bloodborne pathogens?

Bloodborne pathogens are microorganisms that can cause very serious diseases. These pathogens are found in human blood and other body fluids and include hepatitis B (HBV), hepatitis C (HCV), and human immunodeficiency virus (HIV). Body fluids are defined as “other potentially infectious material” (OPIM). Transmission of these and other diseases can occur by exposure to human blood and OPIM.

Is there a standard to protect employees?

Yes, [Part 554, Bloodborne Infectious Diseases](#) applies to general industry. Construction and agriculture are exempt; however, the hazard is still present. It does not apply to incidental exposures which are neither reasonably nor routinely expected or to any type of “Good Samaritan” action.

Occupational exposure refers to employees that are designated or expected to perform work duties where there is actual or reasonably anticipated exposure to blood or OPIM. This includes many health care occupations and designated first aid providers, even if first aid is a collateral job duty. Police, firefighters, tattoo artists, teachers, prison guards, equipment technicians, and others, depending on their job duties, may also be included.

What specifically is OPIM?

“Other potentially infectious material” is defined by Rule 2 (definitions) of Part 554. This includes body fluids such as semen, vaginal, amniotic, pleural, and pericardial; saliva in dental procedures; and any

body fluid in situations where it is difficult to differentiate between fluids. It does not include feces, nasal secretions, tears or urine unless visibly contaminated with blood.

How is employee exposure determined?

The employer must evaluate routine and reasonably anticipated tasks and procedures to determine whether there is actual or reasonably anticipated employee exposure to blood or OPIM. Based on this evaluation, all employees must be categorized as A or B. Category A employees have actual or reasonably anticipated exposure to blood or OPIM. Category B employees do not have exposure to blood or OPIM.

What is “reasonably anticipated?”

“Reasonably anticipated” is not defined by the standard. In general, anytime that an employee has a designated job duty that involves actual or potential exposure to blood or OPIM they will be considered category A. This is especially true in health care settings.

In general, “reasonably anticipated,” does not include janitorial or housekeeping staff employed in a non-health care facility. This applies even if their job duties included discarding feminine hygiene products. It is expected that these products are discarded into lined, waste containers thereby preventing contact. However, each employer must make their own exposure determination as required by Rule 3 of Part 554.

LEO is an equal opportunity employer/program.



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What does Part 554 require?

Establish a written exposure control plan to eliminate or minimize employee exposure. This plan must include all of the following elements:

- The exposure determination.
- Schedule and methods to implement each applicable rule of the standard.
- Contents or summary of the training program,
- Procedures for the evaluation of exposure incidents.
- Task-specific standard operating procedures.

In addition, the plan must include documentation of employee involvement when employees are potentially exposed to injuries from contaminated sharps (needles, scalpels, broken glass, dental wires, etc.). This plan must be reviewed at least annually.

Is there a sample written program?

Yes, MIOSHA has a [sample written exposure control](#) plan. The plan is only a guideline for developing your own, site-specific program.

What are some “highlights” of Part 554?

- **Engineering controls** that isolate or remove biological hazards must be used to minimize or eliminate employee exposure. These includes sharp disposal containers, self-sheathing needles, and needleless systems.
- **Work practice controls** need to be implemented and enforced. Work practices are commonly associated with standard operating procedures such as hand washing, sharps disposal, specimen packaging, decontamination, laundering, and housekeeping activities such as cleaning of work surfaces, spills and broken glassware.
- **Personal protective equipment** must be provided at no cost to the employee. Items including gloves, gowns, masks, face shields, shoe covers, pocket masks, etc. must be properly cleaned, repaired and replaced as needed.
- **Regulated waste** (see Rule 2, definitions) must be disposed of properly. Cloth or paper items

that are not caked with blood or OPIM or cannot be compressed to release these materials are not regulated waste and can be disposed of in a normal manner.

- **Contaminated laundry** must be properly bagged where it was used and cannot be sorted or rinsed in patient care areas. It must be handled as little as possible and laundry employees must wear gloves and other necessary personal protective equipment.
- Within 10 working days of assignment to a category A job, a **hepatitis B vaccination** must be made available as well as HBV antibody testing. If an employee declines to accept the hepatitis B vaccination they must sign a waiver statement that contains the information stated in Rule 13 (4)(d).
- An employee that has an “**exposure incident**” must be provided, at no cost, with a confidential medical evaluation and follow-up. Specific contact of blood or OPIM to the eyes, mouth, other mucus membrane, nonintact skin, and parenteral (needlesticks, human bites, cuts, etc.) are exposure incidents.
- Containers of regulated waste, refrigerators or freezers and other containers that are used to store or transport blood or OPIM must have a biohazard label. Red bags or containers may be substituted for labels.
- **Information and training** must be provided by a knowledgeable trainer to employees at the time of their initial assignment and at least annually. Annually, means within 12 months of the previous training.
- **Recordkeeping** is required for medical records, training records, and a sharps injury log.

Additional Information

Please visit the MIOSHA website at www.michigan.gov/mioshapublications where additional information may be available; or contact the Consultation, Education & Training Division at (517) 284-7720.