

Bloodborne Pathogens Exposure Control Plan

Minnesota State University, Mankato

Plan Last Updated Date: April 7, 2017

Regulation: 29 CFR 1910.1030

Scope: All employees not working in a healthcare facility with potential exposure to bloodborne pathogens, including all employees who are trained in first aid.

Policy Statement

It is the policy of Minnesota State University, Mankato to eliminate or minimize occupational exposure to bloodborne pathogens in accordance with federal and state regulations. The Bloodborne Pathogens Exposure Control Plan (ECP) is a key document to assist our organization in implementing and ensuring compliance with the standard, thereby protecting our employees.

Plan Administration

Table 1 provides the roles and contact information for the administration of the Bloodborne Pathogens Exposure Control Plan.

Table 1

Task	Contact Person	Contact Information	
ECP Administrators	Director of Environmental Health, Safety and Risk Management and Safety & Environmental Compliance Officer	Work: (507)389-5568 or (507) 389-2722	Mobile: (507)381-1618 or (507) 508-6767
Medical Surveillance and Recordkeeping	Department Supervisor with Assistance from Safety & Environmental Compliance Officer	Work: Extension of each supervisor and (507) 389-2722	
Training	Safety & Environmental Compliance Officer	(507) 389-2722	(507) 508-6767
Exposure Incident Reporting	Department Supervisor first, Safety & Environmental Compliance Officer	Extension of each supervisor	

ECP Administrator. The ECP Administrators are responsible for implementation of the ECP, and will maintain, review, and update the ECP at least annually, and whenever necessary, to include new or modified tasks and procedures and to reflect new or revised employee positions with occupational exposure. The Administrators will also provide and maintain all necessary

personal protective equipment (PPE), engineering controls (e.g., sharps containers), labels, and red bags as required by regulation and company policies, and will ensure that adequate supplies and PPE are available in the appropriate sizes.

The ECP Administrators will be responsible for ensuring that all medical actions required by the regulations are performed, and that appropriate employee health and OSHA records are maintained.

The Safety and Environmental Compliance Officer will be responsible for training, documentation of training, and making the written ECP available to employees, the regulating authority, and representatives of the National Institute for Occupational Safety and Health (NIOSH).

Department Supervisor will act as the initial contact for reporting exposure incidents and ensure that the appropriate response is carried out.

Those employees determined to have occupational exposure to blood or other potentially infectious materials (OPIMs) will comply with the procedures and work practices outlined in this ECP.

Plan Review and Update

This ECP will be reviewed and updated annually, and whenever new hazards are introduced in the workplace or conditions change that would result in a change in occupational exposure by employees. For example, the ECP will be amended when it is determined that additional job classifications or tasks are likely to or may have occupational exposure to bloodborne pathogens.

Definitions

Bloodborne pathogens-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), hepatitis C virus (HCV), and human immunodeficiency virus (HIV) which causes acquired immune deficiency syndrome (AIDS).

Exposure incident-a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral (i.e., needle stick) contact with blood or other potentially infectious material that results from the performance of an employee's duties.

Other potentially infectious material (OPIM)-bodily fluids visibly contaminated with blood, including saliva in dental procedures, semen, vaginal secretions, amniotic fluid, and other such material where it is difficult to differentiate between bodily fluids.

Personal protective equipment (PPE)-protective covering for the head, eyes, hands, feet, and body, such as nitrile or other liquid-resistant gloves, a face mask, or an apron.

Sharp-any sharp objects including needles, wood or metal splinters, nails, and broken glass, contaminated with blood or OPIM.

Employee Exposure Determination

Table 2 contains a list of all job classifications in which employees are likely to have occupational exposure to bloodborne pathogens. This does not count the Student Health Services Department since they have their own exposure plans.

Table 2-Likely Occupational Exposure-Job Classifications

Job Classification	Department/Work Area	Exposure Task/Procedure
Grounds Supervisor	Physical Plant - Grounds	Grounds work and maintenance
Groundskeeper	Physical Plant - Grounds	Grounds work and maintenance
Plumbing / Steamfitter Supervisor Master-in- Charge	Physical Plant - Plumbing	Plumbing repairs, work and maintenance
Steam Fitter	Physical Plant - Plumbing	Plumbing repairs, work and maintenance
Plumber	Physical Plant - Plumbing	Plumbing repairs, work and maintenance
Building Services Supervisor	Building Services	Restroom cleaning and maintenance
Building Services Foreman	Building Services	Restroom cleaning and maintenance
General Maintenance Worker	Building Services	Restroom cleaning and maintenance
General Maintenance Worker Supervisor	Residential Life	Restroom cleaning, dorm cleaning and maintenance
General Maintenance Worker	Residential Life	Restroom cleaning, dorm cleaning and maintenance
Building Maintenance Supervisor Zones 1 & 2	Physical Plant – Building Maintenance Zones 1 & 2	Building and Dorm work, maintenance and repairs, Carpentry, Masonry, Machinery repairs.
Carpenter	Physical Plant – Building Maintenance Zones 1 & 2	Building work and maintenance
Carpenter	Physical Plant – Building Maintenance Zones 1 & 2 / Residential Life	Dorm work and maintenance
General Repair Worker	Physical Plant – Building	Building repairs and maintenance

	Maintenance Zones 1 & 2	
General Repair Worker	Physical Plant – Building Maintenance Zones 1 & 2 / Residential Life	Dorm repairs and maintenance
Mason	Physical Plant – Building Maintenance Zones 1 & 2 / Residential Life	Dorm work and maintenance
Machinery Repair Worker	Physical Plant – Building Maintenance Zones 1 & 2	Machinery repairs and maintenance
Machinery Repair Worker	Physical Plant – Building Maintenance Zones 1 & 2 / Residential Life	Machinery repairs and maintenance in Residential Dorms
Safety & Environmental Compliance Officer	Environmental Health & Safety and Risk Management	Assisting with Safety and Environmental issues
Director of Environmental Health & Safety and Risk Management	Environmental Health & Safety and Risk Management	Assisting with Safety and Environmental issues
Professor / Adjunct Professor	Faculty, School of Nursing	Clinical work
Professor / Adjunct Professor	Faculty, Dental Hygiene	Dental Clinical work
Athletic Trainers	Staff, Athletics Dept.	Assisting with athletic injuries
Campus Recreational Services	Faculty & Staff, Campus Rec Dept.	Assisting with recreational injuries
Children’s House	Staff, Children’s House	Assisting with injuries and bloody noses /bodily fluids from children
Security	Staff, Security Dept.	Assisting with accidents and injuries and calls for blood cleanup

Table 3 contains a list of job classifications in which employees may at some time have occupational exposure, including part-time, temporary, contract, or per diem employees. The list includes tasks and procedures, or groups of closely related tasks and procedures, for which occupational exposure may occur for these individuals.

Table 3-Possible Occupational Exposure-Job Classifications

Job Classification	Department/Work Area	Exposure Task/Procedure
Grounds Supervisor	Physical Plant - Grounds	Grounds work and maintenance
Groundskeeper	Physical Plant - Grounds	Grounds work and maintenance
Plumbing / Steamfitter	Physical Plant - Plumbing	Plumbing repairs, work and

Supervisor Master-in-Charge		maintenance
Steam Fitter	Physical Plant - Plumbing	Plumbing repairs, work and maintenance
Plumber	Physical Plant - Plumbing	Plumbing repairs, work and maintenance
Building Services Supervisor	Building Services	Restroom cleaning and maintenance
Building Services Foreman	Building Services	Restroom cleaning and maintenance
General Maintenance Worker	Building Services	Restroom cleaning and maintenance
General Maintenance Worker Supervisor	Residential Life	Restroom cleaning, dorm cleaning and maintenance
General Maintenance Worker	Residential Life	Restroom cleaning, dorm cleaning and maintenance
Building Maintenance Supervisor Zones 1 & 2	Physical Plant – Building Maintenance Zones 1 & 2	Building and Dorm work, maintenance and repairs, Carpentry, Masonry, Machinery repairs.
Carpenter	Physical Plant – Building Maintenance Zones 1 & 2	Building work and maintenance
Carpenter	Physical Plant – Building Maintenance Zones 1 & 2 / Residential Life	Dorm work and maintenance
General Repair Worker	Physical Plant – Building Maintenance Zones 1 & 2	Building repairs and maintenance
General Repair Worker	Physical Plant – Building Maintenance Zones 1 & 2 / Residential Life	Dorm repairs and maintenance
Mason	Physical Plant – Building Maintenance Zones 1 & 2 / Residential Life	Dorm work and maintenance
Machinery Repair Worker	Physical Plant – Building Maintenance Zones 1 & 2	Machinery repairs and maintenance
Machinery Repair Worker	Physical Plant – Building Maintenance Zones 1 & 2 / Residential Life	Machinery repairs and maintenance in Residential Dorms
Safety & Environmental Compliance Officer	Environmental Health & Safety and Risk Management	Assisting with Safety and Environmental issues

Director of Environmental Health & Safety and Risk Management	Environmental Health & Safety and Risk Management	Assisting with Safety and Environmental issues
Professor / Adjunct Professor	Faculty, School of Nursing	Clinical work

If an employee believes that he or she may be occupationally exposed to bloodborne pathogens and his or her job classification or tasks do not appear on the above lists, the employee should contact their Department Supervisor.

ECP Implementation

Access to the ECP

Employees covered by bloodborne pathogens rules and policies will receive an explanation of this ECP during their initial training session. It will also be reviewed in their annual refresher training.

All employees can review this Plan at any time during their work shifts by contacting the Director of Environmental Health, Safety & Risk Management or the Safety & Environmental Compliance Officer. A copy of the ECP will be provided free of charge to any employee who requests it.

Universal Precautions

All employees will use universal precautions in order to prevent contact with blood or OPIM during the administration of first aid, the removal of materials and waste from the first-aid station, clean up of any blood or OPIM, and housekeeping of any areas recently (i.e., same day) contaminated with blood or OPIM. All blood and OPIM will be considered infectious regardless of the perceived status of the source.

Engineering Controls and Work Practices

Engineering controls and work practices will be implemented to prevent or minimize exposure to bloodborne pathogens. Each Department Supervisor / Foreman is responsible for ensuring that the engineering controls and work practices are implemented and updated as necessary.

Engineering Controls/Work Practices/Housekeeping:

- Wash hands immediately after contact with blood or OPIM.
- If handwashing facilities are not immediately available after exposure, exposed employee(s) will be provided with an antiseptic cleanser with cloth or paper towels or antiseptic towelettes. Exposed employees will wash their hands with running water and soap as soon as possible after using the antiseptic alternatives.

- When skin or mucous membranes are exposed to blood or OPIM, those areas of the body will be washed or flushed with running water as soon as possible after contact.
- After removal of PPE used during exposure to blood or OPIM, the employee(s) will wash hands or other exposed skin areas with running water and soap as soon as possible.
- Wash hands immediately or as soon as feasible after removing gloves or other PPE.
- Remove PPE after it becomes contaminated and before leaving the work area.
- Place used contaminated PPE in biohazardous (red) bag.
- Wear appropriate gloves when it is reasonably anticipated that there may be hand contact with blood or OPIM, and when handling or touching contaminated items or surfaces; replace gloves if torn, punctured or contaminated, or if their ability to function as a barrier is compromised.
- Utility gloves may be decontaminated for reuse if their integrity is not compromised; discard utility gloves if they show signs of cracking, peeling, tearing, puncturing, or deterioration.
- Wear appropriate face and eye protection when splashes, sprays, spatters, or droplets of blood or OPIM pose a hazard to the eyes, nose, or mouth.
- Remove immediately or as soon as possible any garment contaminated by blood or OPIM, in such a way as to avoid contact with the outer surface.

The Department Supervisor / Foreman with the assistance of the Environmental Health & Safety Department will evaluate new exposure control procedures and new products regularly.

For large quantities of blood and sensitive areas (such as a suicide or attempted suicide), an outside service, such as Service Master, will be contacted for the clean up.

PPE

All PPE is provided to employees at no cost to them. PPE will be chosen based on the anticipated exposure to blood or OPIM. The PPE will be considered appropriate only if it does not permit blood or OPIM to pass through or reach the employee's clothing, skin, eyes, mouth, or other mucous membranes under normal conditions of use and for the duration of time which it will be used.

Table 4 describes in detail how PPE will be provided and the types of PPE that will be given to employees.

Table 4-Provision of PPE to Employees

How Provided	PPE Distributor	Procedures Requiring PPE	Type of PPE Required
Supervisor or Foreman	Follow State Contracts and Suggestions	Daily Cleaning of Restrooms	Gloves, work clothes
Supervisor or Foreman	Follow State Contracts and Suggestions	Daily Cleaning of Dorms	Gloves, work clothes
Supervisor or	Follow State	Plumbing Work & Repairs	Gloves, work clothes,

Foreman	Contracts and Suggestions		safety glasses
Supervisor or Foreman	Follow State Contracts and Suggestions	Any work with sewage and plumbing pipes	Gloves, work clothes, safety glasses
Supervisor or Foreman	Follow State Contracts and Suggestions	Emptying of garbage	Gloves, work clothes
Supervisor or Foreman	Follow State Contracts and Suggestions	Machinery repairs	Gloves, work clothes, safety glasses
Supervisor or Foreman	Follow State Contracts and Suggestions	Carpentry	Gloves, work clothes, safety glasses
Supervisor or Foreman	Follow State Contracts and Suggestions	Building repairs	Gloves, work clothes, safety glasses
Supervisor or Foreman	Follow State Contracts and Suggestions	Masonry	Gloves, work clothes, safety glasses
Supervisor or Foreman	Follow State Contracts and Suggestions	Grounds work	Gloves, work clothes, safety glasses, hearing protection as needed
Athletic Trainers	Follow State Contracts and Suggestions	Assisting with injuries	Gloves, safety glasses, work clothes
Campus Recreational Services	Follow State Contracts and Suggestions	Assisting with injuries	Gloves, safety glasses
Children's House	Follow State Contracts and Suggestions	Assisting with children's injuries, bodily fluids and blood such as bloody noses	Gloves, safety glasses
Security	Follow State Contracts and Suggestions	Assisting with accidents and injuries and possibly blood cleanup	Gloves, safety glasses, work clothes

All PPE will be disposed of by the employer at no cost to employees. All repairs and replacements will be made by the employer at no cost to employees.

All PPE will be removed prior to leaving the work area. If visibly contaminated, PPE will be placed in an appropriately designated area or container for storage, washing, decontamination or

disposal. The biohazardous (red) bags will be used and placed in the appropriate containers in the Environmental Health & Safety's Biohazardous Room.

Blood- or OPIM-contaminated PPE

If PPE or personal clothing is splashed or soaked with blood or OPIM, the person wearing the PPE or clothing will remove the contaminated clothing as soon as possible. This clothing will be laundered at the employer's expense. The clothing would be identified as contaminated and any employee exposed to it would be notified and protected from exposure.

Gloves

Gloves will be worn where it is reasonably anticipated that employees will have hand contact with blood, other potentially infectious materials, non-intact skin, and mucous membranes. Gloves will be available from the Department Supervisor or Foreman.

Disposable gloves will not be washed or decontaminated for re-use and will be replaced when they are torn, punctured, or when their ability to function as a barrier is compromised. Utility gloves may be decontaminated for re-use provided that the integrity of the glove is not compromised. Utility gloves will be discarded if they are cracked, peeling, torn, punctured, or exhibit other signs of deterioration, or when their ability to function as a barrier is compromised.

PPE Training

All employees covered under the requirements of this Plan will be trained to properly use, put on, take off, decontaminate, maintain, and store PPE. Training in the use of the appropriate PPE is provided by the Department Supervisor or Foreman with the assistance of the Safety & Environmental Compliance Officer.

Housekeeping

First-aid stations and areas where an incident involving blood or OPIM exposure occurred, will be cleaned and decontaminated as soon as possible after the incident.

Decontamination of work areas will be accomplished by using the following materials:

- Material to Be Used (e.g., 10% bleach solutions or EPA-registered germicides)
- Other

All contaminated work surfaces will be decontaminated after completion of procedures and immediately or as soon as possible after any spill of blood or OPIM, as well as the end of the work shift if the surface may have become contaminated since the last cleaning.

Broken glassware that may be contaminated is only picked up using mechanical means, such as a brush and dustpan.

Hepatitis B Vaccination

All employees who have been identified as having exposure or potential exposure to blood or OPIM will be offered the hepatitis B vaccine, at no cost to the employee. The hepatitis B vaccination series of shots is available at no cost after initial employee training and within 10 days of initial assignment to all employees identified in the exposure determination section of this ECP.

The Department Supervisor or Foreman, with the assistance of the Safety & Environmental Compliance Officer will provide training to employees on hepatitis B vaccinations-addressing safety, benefits, efficacy, methods of administration, and availability.

When an employee elects to be vaccinated or evaluated for immunity, a licensed healthcare professional at Mankato Clinic Occupational Medicine will conduct these vaccinations or tests.

Vaccination is encouraged unless:

- Documentation exists that the employee has previously received the series;
- Antibody testing reveals that the employee is immune; or
- Medical evaluation shows that vaccination is contraindicated.

The evaluation will be limited to whether the employee requires the hepatitis vaccine and whether the vaccine was administered. Vaccination will be provided by Mankato Clinic Occupational Medicine.

Declination of the vaccine. If an employee declines the vaccination, the employee must sign a declination form. See Attachment Number 1 for a copy of the form. Employees who decline may request and obtain the vaccination at a later date at no cost. Signed declination forms are kept at the department office.

Vaccination for First-Aid Providers

The full hepatitis B vaccination series will be made available to all unvaccinated first-aid providers who assisted in an incident involving the presence of blood or OPIM no later than 24 hours after the incident, regardless of whether exposure has occurred.

Exposure Incident Report

Any incident that results in occupational exposure to blood or OPIM will be reported immediately (no later than the end of the work shift) to the Department Supervisor or Foreman and EHS. The report will include the names of all first-aid providers who rendered assistance, and the time and date of the incident. The report will include a determination of whether an exposure has occurred. If so, a post-exposure evaluation will be performed.

A report that lists all first-aid incidents will be readily available to employees who request it.

Post-Exposure Evaluation and Follow-up

Should an exposure incident occur, a confidential medical evaluation and follow-up will be conducted by Mankato Clinic Occupational Medicine. Following initial first aid (e.g., clean the wound, flush eyes or other mucous membrane), the following activities will be performed by Minnesota State University, Mankato:

- Document the routes of exposure and how the exposure occurred.
- Identify and document the source individual (unless the employer can establish that identification is infeasible or prohibited by state or local law).
- Obtain consent and make arrangements to have the source individual tested as soon as possible to determine HIV, HCV, and HBV infectivity; document that the source individual's test results were conveyed to the employee's healthcare provider. The source individual can refuse consent.
- If the source individual is already known to be HIV, HCV and/or HBV positive, new testing need not be performed.
- Assure that the exposed employee is provided with the source individual's test results and with information about applicable disclosure laws and regulations concerning the identity and infectious status of the source individual (e.g., laws protecting confidentiality).
- After obtaining consent, collect exposed employee's blood as soon as feasible after exposure incident, and test blood for HBV and HIV serological status.

If the employee does not give consent for HIV serological testing during collection of blood for baseline testing, the baseline blood sample will be preserved for at least 90 days. If the exposed employee elects to have the baseline sample tested during this waiting period, testing will be performed as soon as possible.

Administration of Post-Exposure Evaluation and Follow-up

The Department Supervisor or Foreman and EHS will ensure the healthcare professional(s) responsible for employee's hepatitis B vaccination and post-exposure evaluation and follow-up are given a copy of the bloodborne pathogens regulation and this ECP. The Department Supervisor or Foreman and EHS will ensure that the healthcare professional evaluating an employee after an exposure incident receives:

- A description of the employee's job duties relevant to the exposure incident
- A description of route(s) of exposure
- Circumstances of exposure
- If possible, results of the source individual's blood test
- Relevant employee medical records, including vaccination status

The Department Supervisor or Foreman and EHS will provide the employee with a copy of the evaluating healthcare professional's written opinion within 15 days after completion of the evaluation.

Procedures for Evaluating the Circumstances Surrounding an Exposure Incident

The Department Supervisor or Foreman and EHS will review the circumstances of all exposure incidents to determine the:

- Engineering controls in use at the time
- Work practices followed
- Description of the device being used (including type and brand)
- Protective equipment or clothing that was used at the time of the exposure incident (gloves, eye shields, etc.)
- Location of the incident
- Procedure or task being performed when the incident occurred
- Employee's training

Employee Training

All employees who have occupational exposure to bloodborne pathogens and OPIM will receive initial and annual training conducted by the Safety & Environmental Compliance Officer.

All employees who have occupational exposure to bloodborne pathogens and OPIM will receive training on the epidemiology, symptoms, and transmission of bloodborne pathogen diseases. In addition, the training program covers, at a minimum, the following elements:

- A copy and explanation of the OSHA bloodborne pathogen standard
- An explanation of our ECP and how to obtain a copy
- An explanation of methods to recognize tasks and other activities that may involve exposure to blood and OPIM, including what constitutes an exposure incident
- An explanation of the use and limitations of engineering controls, work practices, and PPE
- An explanation of the types, uses, location, removal, handling, decontamination, and disposal of PPE
- An explanation of the basis for PPE selection
- Information on the hepatitis B vaccine, including information on its efficacy, safety, method of administration, the benefits of being vaccinated, and that the vaccine will be offered free of charge
- Information on the appropriate actions to take and persons to contact in an emergency involving blood or OPIM
- An explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that will be made available
- Information on the post-exposure evaluation and follow-up that the employer is required to provide for the employee following an exposure incident
- An explanation of the signs and labels and/or color coding required by the standard and used at this facility
- An opportunity for interactive questions and answers with the person conducting the training session

Training materials for this facility are available in EHS.

Recordkeeping

Training Records

Training records are completed for each employee upon completion of training. These documents will be kept for at least 3 years in the Office of Environmental Health, Safety & Risk Management - WC111.

Training records will include the:

- Dates of the training sessions
- Contents or a summary of the training sessions
- Names and qualifications of persons conducting the training
- Names and job titles of all persons attending the training sessions

Employee training records will be provided upon request to the employee or the employee's authorized representative within 15 working days. Such requests should be addressed to the Department Supervisor or Foreman or EHS.

Medical Records

Medical records are maintained for each employee with occupational exposure in accordance with the employee exposure and medical records regulation. The Department Supervisor or Foreman and EHS are responsible for maintenance of the required medical records. These confidential records are kept for at least the duration of employment plus 30 years.

OSHA Recordkeeping

An exposure incident will be evaluated to determine if the case meets OSHA's recordkeeping requirements (29 CFR 1904). This determination and the recording activities are done by EHS.

Employee Hepatitis B Vaccination Consent or Declination Record

The Hepatitis B vaccine is a non-infectious recombinant DNA Hepatitis B vaccine produced in yeast cells. Antibody response to this vaccine is immuno-chemically similar to those induced by the plasma-derived vaccine. Clinical trials in healthy adults receiving three doses of the vaccine showed a conversion rate of seventy nine percent at six months post-vaccination and ninety six percent at seven months after vaccination. This is comparable to the results of the plasma-derived vaccine. The duration of immunity has not been determined. The new yeast cell recombinant B vaccine should be safe and effective for prevention of Hepatitis B. It is not effective in the protection against other types of Hepatitis.

You will be given three doses of 1.0 ml of vaccine, with the second dose being given one month after the first and the third dose being given six months after the initial dose. A titer (blood test) is checked 4-6 weeks after the last dose to check immunity.

Adverse side effects are most commonly mild, temporary soreness at the injection site. No serious immediate or long-term reactions have been reported. If you do have an adverse reaction, please report this to the physician immediately.

The vaccine is not recommended for anyone who is hypersensitive to yeast products and any other components of the vaccine such as aluminum hydroxide, thimersal, sodium chloride or phosphate buffers.

If you are pregnant or nursing, or become pregnant during your vaccination series, written permission from your attending physician is required before the vaccine can be administered.

Individuals who terminate their employment prior to completing the series of three vaccinations assume all responsibility for follow-up, including the cost of the vaccine and its administration.

You also have the option of having a titer to determine if you still have immunity. If this is negative, a booster dose is administered and another titer checked 4-6 weeks after the booster dose.

Carefully read the information below and then check one of the three boxes indicating your acceptance or declination of the Hepatitis B vaccination.

- I wish to be vaccinated for/against Hepatitis B at no charge to me. I give permission to the Safety & Environmental Compliance Officer in EHS to confirm through MIIC (Minnesota Immunization Information Connection) database that I have not been immunized in the past. If information shows I have been immunized, I will then receive a titer (blood test) to determine immunity. If negative, a booster will be administered followed by another titer in 4-6 weeks. These are at no charge to me. In order to access the database, I give permission to use my first and last name and will provide my birth date for this purpose only. The birth date on this form will then be marked with black to conceal it.
- I have already received the Hepatitis B vaccine series.
- I have already received the Hepatitis B vaccine and would like a titer (blood test) to check immunity. If negative, I would like a booster followed by another titer in 4-6 weeks. These are at no charge to me.
- I decline Hepatitis B vaccination at this time. I have been given the opportunity to be vaccinated with Hepatitis B vaccine at no charge to myself. I understand that by declining this vaccine, I continue to be at risk of acquiring Hepatitis B, a serious disease. I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring Hepatitis B virus (HBV) infection. If, in the future, I continue to have occupational exposure to blood or other potentially infectious materials, and I want to be vaccinated with Hepatitis B vaccine, I can receive the vaccination series at no charge to me.

Sign and return a copy of this form to the Environmental Health, Safety and Risk Management Office, WC 111, as soon as possible. Provide a copy to the employee and keep the original for departmental records. For questions contact the Environmental Health, Safety and Risk Management Office at (507)389-2722.

Employee Name: (Printed) _____	Employee Signature: _____
Date: _____	Title: _____
Birth Date (Optional: For use in MIIC if requesting vaccination) _____	Department: _____