



BLOODBORNE PATHOGENS – WHO IS AT RISK?

Bloodborne Pathogens – Who is at risk?

Every time you leave your residence you are taking a risk. Most of us take this risk all the time because we like to get out and live our lives. Leaving being a risk often doesn't cross our minds. However, we know that with infectious disease the more people you are around the greater chance you will contract a disease. You could be working as high school counselor, or perhaps, as a farm hand in Colorado. Both jobs have risks for bloodborne pathogen exposure. It could be argued that the high school counselor is at a greater risk because of the amount of people involved.

For either job mentioned above, it is the employer's responsibility to ensure that all employees are trained on what to do when a bloodborne pathogens exposure event takes place. Every employee, at every company is at risk for bloodborne pathogen exposures. Sharp edges in furniture, working with a hand tool, trying to remove a cell phone case can all cause cuts to the skin. When this happens, blood will follow.



Every company has the freedom to setup the procedures they see fit based on OSHA's standard. Typically, supervisors will be trained on how to deal with the incident hands on, while non-management is usually trained to be able to recognize, avoid, and report the hazard to a direct supervisor. Most companies cover the non-management training portion during their hazard communication training.

A big question we get is how often is bloodborne pathogens training required? Every year all employees with potential exposure need to receive training. Luckily, not everyone needs to be able to assist in a hands-on method.

Bloodborne Pathogens training is an easy 1-hour long course. As we begin the new year it is a great time to check and see when you have your training scheduled for in 2019.

Can anyone describe a bloodborne pathogens event? What happened? Who treated the victim? What was the outcome?

Work Site Review: Hazards/Safety Suggestions

Company Name: _____ Work Site Location: _____

Date: _____ Start Time: _____ Finish Time: _____ Foreman/Supervisor: _____

Employee Signatures: (continue on back of sheet if necessary)

(My signature attests and verifies my understanding of and agreement to comply with, all company safety policies and regulations, and that I have not suffered, experienced, or sustained any recent job-related injury or illness)

Manager/Supervisor's Signature: _____

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