

Appendix A

Bloodborne Pathogens

Occupational exposure to blood and other potentially infectious materials place law enforcement officers at risk for infection with bloodborne pathogens. Bloodborne pathogens are pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, human immunodeficiency virus (HIV), hepatitis B virus (HBV), and hepatitis C virus (HCV).

I. Bloodborne Pathogen Exposure Control Plan

Law enforcement agencies in Wisconsin are subject to the requirements of the Occupational Safety and Health Administration's (OSHA) Bloodborne Pathogen Standard, 29 CFR 1910.1030. This standard has been adopted by the State of Wisconsin (Wisconsin Statutes Section 101.055) for public employees and is enforced by the Department of Commerce's Safety and Buildings Division. The standard requires that an employer having employees with occupational exposure to bloodborne pathogens establish a *Bloodborne Pathogen Exposure Control Plan*. The purpose of the plan is to offer guidelines to minimize chances of exposure to these pathogens. A model exposure control plan is available at [OSHA.gov](https://www.osha.gov).

Topics the BBP Exposure Control Plan should include are

- engineering controls and work practices
- recordkeeping
- personal protective equipment
- housekeeping schedules
- use of biohazard labels
- training and information on the types of exposures
- hepatitis B vaccinations
- post-exposure evaluations

It is your employer's responsibility to offer hepatitis B vaccinations at no cost. Vaccination is not mandatory and you may refuse. If you later change your mind, vaccinations must remain available at no cost.

A basic premise of the plan is the use of **Universal Precautions**. This means **all** human blood and other potentially infectious materials (OPIM) are treated as if known to be infectious for HIV, HBV and other bloodborne pathogens. Other potentially infectious materials include, but are not limited to:

- seminal fluid
- pleural fluid (lungs)
- vaginal secretions
- pericardial fluid (around heart)
- cerebrospinal fluid
- peritoneal fluid (abdominal)
- synovial fluid (joint)
- amniotic fluid (around fetus)
- human tissue

Feces, nasal secretions, sweat, tears, vomit and urine (when they are not contaminated with blood) are not addressed under universal precautions. However, they can transmit other infectious diseases so **caution is advised**. Any body fluid must be handled with caution.

II. General Guidelines to Avoid Exposure

- A. Assess a situation beforehand and wear appropriate personal protective equipment (gloves, mask, goggles, shoe coverings, coveralls, etc.).
- B. Protect eyes, nose and mouth by using goggles and a mask. These provide a barrier to spraying, splashing or aerosol transmission of infectious materials.
- C. Gloves minimize the risk of infectious materials entering the body through a cut or other skin lesion. Most latex gloves have microscopic "holes" and openings. Double gloving (wearing two pair of gloves at the same time) and changing gloves frequently aids in protection.

- D. Wash your hands after removing gloves. Frequent hand washing is a good hygiene and safety practice.
- E. Items that are soaked with blood or other body secretions should be carefully air dried. Dry in a manner that minimizes the exposure of other staff to the liquid or dried material.
- F. Do not assume that a dried sample is risk-free. Current research indicates that the infectious activity of some organisms persists **more than several days** after drying.
- G. Minimize or avoid direct handling of contaminated sharp or pointed objects. Collect syringes in puncture-resistant, leak-proof containers and attach a biohazard label. Never shear, break or bend a contaminated sharp.
- H. Smoking, drinking or eating at a crime scene is hazardous. Avoid these activities when handling evidence.