

APPENDIX 5NORTH CAROLINA DEPARTMENT OF LABOR
DIVISION OF OCCUPATIONAL SAFETY AND HEALTH
RALEIGH, NORTH CAROLINAField Information System
SN/OPNOperations Procedures Notice
103**Subject: Hepatitis B Vaccine for Employees with Collateral Occupational Exposure to Blood and Other Potentially Infectious Materials**

- A. Purpose This document transmits a change to the North Carolina enforcement policy regarding the Bloodborne Pathogens Standard. Specifically, this change concerns the requirement to provide the hepatitis B vaccine series for employees who have occupational exposure to blood or other potentially infectious materials (OPIM) as a consequence of a collateral job duty to perform first aid and/or cardiopulmonary resuscitation (CPR).
- B. Scope This change applies to all employees who may encounter blood or OPIM incidental to their primary job duties, but for whom this is still a reasonable expectation. The North Carolina Department of Labor, Division of Occupational Safety and Health (OSHNC) anticipates that this will ease the burden on employers who may want to or be required to train an adequate number of employees in first aid and CPR but would otherwise be faced with a burdensome expenditure due to the cost of the hepatitis B vaccine series.
- C. Background 29 CFR 1910.1030(f)(2)(I) states the following: "*Hepatitis B vaccination shall be made available after the employee has received the training required in paragraph (g)(2)(vii)(I) and within 10 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.*"

On July 1, 1992, Federal OSHA published a change to OSHA Instruction CPL 2-2.44C "Enforcement Procedures for the Occupational Exposure to Bloodborne Pathogens Standard." This change permitted employers to offer the hepatitis B vaccine series on a post-exposure basis to employees who have a collateral job duty to provide first aid and/or CPR. This alternative to pre-exposure hepatitis B vaccination did not, however, apply to employees for whom occupational exposure to blood and OPIM was the result of a primary job duty function, e.g., emergency response, medical practice, dentistry, life guard, etc.

At the time, North Carolina adopted this change to the enforcement policy to apply only to seasonal and temporary workers whose occupational exposure to blood and OPIM was through collateral first aid responsibilities. The term of temporary employment for these workers was defined as six (6) months or less.

- D. Cancellation This document cancels Standards Notice 59, which was incorrectly used to convey the original North Carolina enforcement policy change regarding occupational exposure to blood or OPIM.

- E. Statement of policy A violation of 29 CFR 1910.1030(f)(2)(I) will not be cited for failure to provide the hepatitis B vaccine to designated first aid providers when all of the following criteria have been met:
1. The primary job assignment of such designated first aid and CPR providers is not rendering first aid;
 - a. Any first aid rendered by such persons is rendered *only as a collateral duty* responding solely to injuries resulting from workplace accidents, generally at the site of the accident.
 - b. This provision does not apply to designated first aid providers who render assistance on a regular basis, for example, at a first aid station, clinic, dispensary or other location where injured employees routinely go for such assistance, nor does it apply to any health care, emergency, or public safety personnel who are expected to render first aid in the course of their work.
 2. The employer's Exposure Control Plan specifically addresses the provision of the hepatitis B vaccine to all unvaccinated first aid providers who have rendered assistance in any situation involving the presence of blood or OPIM, including:
 - a. Provision for a reporting procedure that ensures that all first aid incidents involving the presence of blood or OPIM will be reported to the employer before the end of the work shift during which the first aid incident occurred.
 - 1 The report must include the names of all first aid providers who rendered assistance, regardless of whether personal protective equipment was used and must describe the first aid incident, including time and date.
 - The description must include a determination of whether or not an exposure incident, as defined by the standard, occurred.
 - This determination is necessary to ensure that proper follow-up procedures are initiated, as required by section (f)(3) of the standard.
 - 2 The report shall be recorded on a list of such first aid incidents. It shall be made readily available to all employees and shall be provided upon request of the Commissioner of Labor or his designee.
 - b. Provision for the bloodborne pathogens training program for designated first aiders to include the specifics of this reporting procedure.

- c. Provision for the full immunization series to be made available to all unvaccinated first aid providers who have rendered assistance in any situations involving the presence of blood or OPIM regardless of whether or not a specific "exposure incident," as defined by the standard, has occurred.
 - d. Provision for initiating the full vaccination series as soon as possible, but in no event later than 24 hours, after the employee renders such assistance.
3. In addition, the employer must implement a procedure to ensure that all of the provisions for post-exposure evaluation and follow-up are met if pre-exposure hepatitis B vaccine is not provided.

NOTE: All other requirements of the Bloodborne Pathogens Standard, 29 CFR 1910.1030, continue to apply.

- F. Term of Action This policy applies to all affected employees (full time, part time, temporary, and *per diem*) and constitutes a permanent change to the OSHNC enforcement policy for the Bloodborne Pathogens Standard enforcement policy which becomes effective immediately. It will remain in effect until such time as it is canceled by a new or revised policy.

Effective date: February 1, 1996

Signed by: Charles Jeffries, OSHNC Director