Bloodborne Pathogens Site-Specific Training Checklist

Dear Manager/Trainer:

__________________________ has completed the MSU Initial/Refresher Bloodborne Pathogens training
(Print Employee’s Name) (Date of Training)

In order to complete the training requirements of MIOSHA’s “Bloodborne Infectious Diseases” standard, please review the site-specific training items listed below with the employee. Please check each item as it is reviewed or write N/A if it is not applicable to your work area. Once completed, please sign and date the checklist. Return this form to the employee and keep a copy with departmental records. This BBP checklist or the Laboratory Safety Site-Specific checklist must be completed after initial training, anytime there is a procedure change relevant to the exposure risk, and on a yearly basis.

EHS Biological Safety Staff (517) 355-0153

Specific Work Practices

________ Discussion of tasks that may involve handling potentially infectious materials and how to perform the tasks in a manner that reduces risk of exposure. (Review Task Procedure forms or department procedures)

Personal Protective Equipment (PPE) (gloves, eye protection, ventilation devices, etc.)

________ Explanation of types of PPE required for specific tasks;

________ How to use the PPE;

________ Location and availability of PPE;

________ Maintenance of reusable PPE (cleaning, storage and inspection).

Engineering Controls

________ Location, operation, and use of log for eyewash facilities;

________ Explanation of engineering controls that are specific to the work environment (examples: sharps containers, biological safety cabinets, mechanical pipettors, safer sharps devices, etc.).

Biohazardous Waste Handling

________ Discussion and clarification of which wastes generated in the work area are biohazardous and how those items are to be segregated, stored, transported, treated and disposed of;

________ Review of procedures for on-site treatment methods (i.e. proper use of autoclave for waste decontamination purposes);

________ Review of hazardous waste labeling and Pick-Up procedures as they apply to the work area (refer to the MSU Waste Disposal Guide and Biohazardous Waste Management Plan). For employees working at off campus facilities, review the facility’s medical waste management plan requirements.

Disinfection & Spill Response/Exposure Incident Response/Exposure Control Plan

________ Review of work area’s procedure for handling spills of potentially infectious materials (including location and availability of biohazard spill kits);

________ Review of exposure incident response procedure;

________ Review how to access the BBP Exposure Control Plan.

Additional Requirements for HIV and HBV Research Laboratories:

________ Read the MSU Biosafety Manual;

________ Complete the EHS Biological Safety Training;

________ Review departmental security access procedures.

Verification of Training: I certify that the site-specific training items were reviewed and understood as required by the MSU Exposure Control Plan. (Complete a form for each facility you are working at)

_________________________________________  _____________________________________________
Manager/Trainer Signature - Date  Employee Signature - Date