Waukesha County Technical College
Instructions for Completing WCTC’s On-line Bloodborne Pathogen Training Packet #2

WCTC’s Bloodborne Pathogens Exposure Control Plan has been implemented to establish procedures to protect employees from occupational exposure to blood and other potentially infectious materials and comply with OSHA’s and Wisconsin Department of Commerce Bloodborne Pathogen Standard requirements.

Based on the exposure determination conducted by the Environmental, Health and Safety Office, your position was identified as one with occupational exposure to blood or other potentially infectious materials. Therefore, you will be required to complete Bloodborne Pathogen Training on an annual basis per OSHA, Department of Commerce and WCTC requirements.

To complete the On-line Bloodborne Pathogen Training, follow the directions outlined below. Training needs to be completed and forms need to be returned to the Environmental, Health and Safety Office by no later than November 21, 2014.

1. Full and Part-time employees should complete this training during their normal work schedule. Adjunct (Part-Time 1) Faculty Employees completing the training will receive ½ hour of meeting rate pay. In order to receive the pay, part-time employees will be required to complete the following:
   a. Complete and turn in the following paperwork to their Associate Dean or Manager:
      • Bloodborne Pathogen Training Acknowledgment Form
      • Bloodborne Pathogen Quiz
      • Hepatitis B Vaccination Acceptance / Declination Form
   b. In NOVAtime, enter “11(meet)” for the PayCode, enter “AMTG” for the Reason and record .50 hours. Please put “Bloodborne Pathogen Training” in the Notes column.

2. The training and quiz will take approximately 30 minutes to complete. To start the training right click the hyperlink below and then from the drop down box select open hyperlink, the presentation will start playing automatically.

http://breeze.fvtc.edu/p17483014/

3. Upon completion of the training and quiz, you need to complete the Hepatitis B Vaccination Acceptance / Declination Form. This form is required to be completed by all employees covered under the Bloodborne Pathogen Exposure Control Plan whether they’ve selected to receive the vaccine or not.

4. Forward the following forms to your Associate Dean or Manager.
   a. Bloodborne Pathogen Quiz
   b. Bloodborne Pathogen Training Acknowledgment Form
   c. Hepatitis B Vaccination Acceptance / Declination Form

If you have any questions regarding the training or would like to review the Bloodborne Pathogen Exposure Control Plan, please contact the Environmental, Health and Safety Office at (262) 691-5226. Thank you for your cooperation.
Waukesha County Technical College
On-line Bloodborne Pathogen Training Acknowledgement

Employees who have occupational exposure to blood or other potentially infectious materials are required to complete Bloodborne Pathogen Training. WCTC’s Bloodborne Pathogen Training Program covers the information outlined below.

• Overview of the OSHA’s Bloodborne Pathogen Standard
• General explanation of bloodborne diseases
• An explanation of the modes of transmission of bloodborne pathogens
• Exposure determination
• Universal Precautions
• Compliance Methods
• Personal Protective Equipment
• Proper glove removal
• Housekeeping requirements
• Bio-hazardous & Sharps Waste Disposal
• Spill Response
• Contaminated Laundry
• Hepatitis B Vaccination
• Post exposure follow-up
• Bloodborne Pathogens Quiz

If you have any questions regarding the training program or the Bloodborne Pathogen Exposure Control Plan, please contact the Environmental, Health and Safety Office (262) 691-5226. A copy of the plan is can be obtained from the Environmental, Health and Safety Office or through the WCTC portal in the Employee Resources Section.

I hereby acknowledge that I have received training on Waukesha County Technical College’s Bloodborne Pathogen Exposure Control Plan and understand it is my responsibility to follow procedures per instruction and training.

________________________________________  __________________________________________
Authorized Employee Name (print)          Authorized Employee Signature:

________________________________________  __________________________________________
Employee I.D. #                             Date:

*Upon completion forward the quiz and Bloodborne Pathogen Training Acknowledgement Form to the Environmental, Health and Safety Office (C-210D).*
Waukesha County Technical College
WCTC Bloodborne Pathogens Quiz #2

Name: ____________________________ Date: __________________

ID#: ____________________________ Dept: __________________

Score: __________

If you have any questions regarding the training or Bloodborne Pathogen Exposure Control Plan contact the Environmental, Health and Safety Office at (262) 691-5226.

Circle the letter of the best answer. A passing score for the quiz is 80%.

1. Bloodborne pathogens are disease-causing microorganisms that are present in:
   A. Human blood and body fluids that may contain blood
   B. Sweat, tears and saliva
   C. River water and certain kinds of soil
   D. None of the above

2. Bloodborne pathogens may enter your system through:
   A. Open cuts
   B. Skin abrasion
   C. Dermatitis
   D. Mucous membranes
   E. All of the above

3. HIV means hepatitis immunodeficiency virus.
   A. True
   B. False

4. Hand washing with soap and warm water is an example of:
   A. Work Practice Control
   B. Engineering Control
   C. Personal Protective Equipment

5. Transmission of bloodborne pathogens in the workplace may occur due to:
   A. Accidental puncture - a sharp, contaminated object punctures your skin
   B. Broken skin - infected blood or body fluids come into contact with your already broken or damaged skin
   C. Body openings - infected material comes into contact with your eyes, nose or mouth
   D. All of the above

6. If you wear gloves when cleaning up an accident site, it is not necessary to wash your hands afterwards.
   A. True
   B. False
7. “Universal Precautions” is a plan that treats all blood and body fluids in the workplace as if they are contaminated by bloodborne pathogens.
   A. True
   B. False

8. How should you dispose of contaminated sharps, such as glass or needles that have come into contact with blood?
   A. Place them in a closable, puncture-resistant container in the trash.
   B. Put them in an appropriate sharps container.
   C. Throw them in the trash with all the other garbage.
   D. Put them in a red bag in the trash.

9. Workers who have routine exposure to blood or other potentially infectious materials have the option to receive the hepatitis B vaccine at no cost to themselves.
   A. True
   B. False

10. What actions can you take at work to help keep yourself safe from bloodborne pathogens?
    A. Attend annual training on bloodborne pathogens
    B. Use appropriate personal protective equipment (PPE)
    C. Follow universal precautions any time you might be exposed to a bloodborne pathogen
    D. All of the above
Waukesha County Technical College
Hepatitis B Vaccine Acceptance / Declination Form

Employees identified in the College’s Bloodborne Exposure Control plan as having an occupational exposure to blood or other potentially infectious materials will be offered the Hepatitis B vaccine, at no cost to the employee. If the employee initially declines the Hepatitis B vaccine but at a later date, while still covered under the Bloodborne Exposure Control Plan, decides to accept the vaccination, the vaccination shall then be made available to them at no cost.

Please indicate below if you are accepting or declining the vaccine at this time. If you have any questions please feel free to contact the Environmental, Health and Safety Coordinator at (262) 691-5226 or Ext. 5226.

ACCEPT
I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of being infected by bloodborne pathogens, including Human Immunodeficiency Virus (HIV) and Hepatitis B Virus (HBV).

This is to certify that I have been informed about the symptoms and the hazards associated with these viruses, as well as the modes of transmission of bloodborne pathogens. I have been given the opportunity to be vaccinated with Hepatitis B vaccine, at no charge to myself. In addition, I have received information regarding the Hepatitis B (HBV) vaccine. Based on the training I have received, I am making an informed decision to accept the Hepatitis B (HBV) vaccine.

☐ I ACCEPT the Hepatitis B vaccine.

DECLINE
I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring the Hepatitis B virus (HBV). I have been given the opportunity to be vaccinated with Hepatitis B vaccine, at no charge to myself. However, I decline the Hepatitis B vaccination at this time.

I understand that by declining this vaccine, I continue to be at risk of acquiring Hepatitis B, a serious disease. 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.

☐ I have already received the Hepatitis B vaccine, therefore DECLINE.

☐ I DECLINE the Hepatitis B vaccine.

Employee Name: (Print)__________________________________________ Employee I.D. ________________

Job Title:________________________________________________________ Department:____________________

Employee Signature:____________________________________________ Date:__________________________

Please forward completed forms to the Environmental, Health and Safety Coordinator (C-210D)