



Bloodborne Pathogens Exposure Control Plan

Customizable employer template

Designed to help employers organize the written elements required by OSHA 29 CFR 1910.1030. This template must be tailored to the employer's actual workplace, job duties, hazards, controls, procedures, and applicable state requirements.

IMPORTANT

This is a planning template, not a substitute for the OSHA standard or legal advice. The employer is responsible for completing, implementing, reviewing, and updating its Exposure Control Plan.

1. Employer Information & Plan Administration

Complete this section before putting the plan into use.



Employer / Facility Information

Organization / Facility Name

Primary Worksite Address

City / State / ZIP

Plan Administrator / Responsible Person

Title

Phone

Email

Date Initially Prepared

Current Review Date

Plan Administration

The employer will identify who is responsible for implementation of this Exposure Control Plan, make the plan accessible to employees, and review/update it at least annually and whenever changes in tasks, procedures, positions, or technology affect occupational exposure.

Where employees can access this plan:

Paper copy available

Electronic copy available

Accessible on all shifts

Responsible persons / roles for implementation:

2. Exposure Determination

Identify employees with reasonably anticipated occupational exposure without regard to PPE use.



How to use this section

List job classifications where all employees have occupational exposure. Then list job classifications where only some employees have occupational exposure, along with the tasks/procedures that create exposure.

A. Job Classifications - All Employees Have Occupational Exposure

Job Classification	Department / Area	Notes

B. Job Classifications - Some Employees Have Occupational Exposure

Job Classification	Department / Area	Exposure-Related Tasks / Procedures

3. Schedule & Method of Implementation

Assign responsibility for each required component of the plan.



Use this page as the employer's implementation map. Enter the responsible person/role, location of procedures or records, and any timing/frequency that applies.

Program Element	Responsible Person / Role	Method, Location, Timing / Notes
Universal precautions		
Engineering controls		
Work practice controls		
Personal protective equipment		
Housekeeping / decontamination		
Regulated waste / sharps		
Hepatitis B vaccination		
Post-exposure evaluation & follow-up		
Labels / signs / hazard communication		
Employee training		
Recordkeeping		
Exposure incident evaluation		

4. Methods of Compliance

Document how occupational exposure will be eliminated or minimized.



Universal Precautions

Universal precautions are used to prevent contact with blood and other potentially infectious materials (OPIM).

Workplace-specific instructions / exceptions / additional precautions:

Engineering Controls

Controls used in this workplace (check all that apply):

Sharps containers / needleless or safety-engineered devices

Splash guards / barriers

Readily accessible handwashing facilities

Other engineering controls

Inspection / maintenance / replacement schedule and responsible person:

Work Practice Controls

Describe required practices that reduce exposure (examples: hand hygiene, sharps handling, specimen handling, prohibitions on eating/drinking)

5. Personal Protective Equipment (PPE)

Select PPE based on anticipated exposure and document availability, cleaning, disposal, and replacement.



Disposable gloves

Utility gloves

Gowns / protective clothing

Face shields

Eye protection

Masks / respiratory splash protection

Resuscitation barriers

Other PPE

Other PPE:

PPE is provided at no cost to employees and in appropriate sizes / accessible locations:

Yes

No / action needed

PPE storage / access locations:

Procedures for removal, cleaning/laundrying, disposal, repair, and replacement:

Circumstances where PPE selection varies by task or exposure level:

6. Housekeeping, Decontamination & Regulated Waste

Document cleaning schedules and handling procedures for contaminated materials.



Written cleaning / decontamination schedule:

Approved disinfectants / products and contact-time instructions:

Procedures after blood / OPIM spills or contamination of equipment/surfaces:

Contaminated laundry handling / storage / transport (if applicable):

Regulated waste / sharps handling, container placement, closure, storage, and disposal:

No occupational use of contaminated sharps at this workplace / section marked N/A as appropriate.

7. Hepatitis B Vaccination

Document how eligible employees are offered vaccination and how declinations are handled.



Employer requirement

For employees with occupational exposure, the Hepatitis B vaccination series must be made available after required training and within the timeframe specified by the OSHA standard, at no cost, unless an exception applies. Employees who decline must sign the required declination statement.

Healthcare provider / occupational health provider used:

Process for arranging vaccination / antibody testing when applicable:

Vaccination is offered after employees receive the required BBP training.

Vaccination is offered at no cost to eligible employees.

Signed declination statements are maintained when an eligible employee declines.

Employees who initially decline are informed they may later accept vaccination while still occupationally exposed.

Records / declination storage location and responsible role:

Workplace-specific notes / exceptions:

8. Exposure Incident Response & Post-Exposure Follow-Up

Define immediate actions and confidential medical follow-up procedures before an incident occurs.



Immediate Employee Actions

Workplace-specific immediate response instructions:

Who employees must notify / how to report:

Emergency / after-hours contact process:

Post-Exposure Evaluation & Follow-Up

Designated medical provider / facility:

Procedure for source individual identification/testing, exposed employee testing, counseling, prophylaxis, and provider documentation as applicable.

Post-exposure evaluation and follow-up are provided confidentially and at no cost to the employee.

The healthcare professional receives the information required by the OSHA standard.

The employee receives the healthcare professional's written opinion within the required timeframe.

9. Communication of Hazards & Employee Training

Document labels/signs and annual employee training.



Labels, Signs & Containers

Biohazard labels or red bags/containers are used where required.

Specimen / regulated waste / contaminated equipment labeling procedures are defined as applicable.

Locations / items requiring labels or signs and responsible role:

Employee Training

Training is provided at initial assignment to tasks with occupational exposure.

Training is provided at least annually thereafter.

Additional training is provided when changes in tasks/procedures affect occupational exposure.

Training provider / responsible person:

Training format / method / language considerations:

Where training records are stored:

Any workplace-specific topics or procedures added to annual training:

10. Recordkeeping

Identify how required records are created, maintained, and protected.



Record categories

The OSHA standard includes requirements for medical records and training records. A sharps injury log is also required for covered employers when contaminated sharps injuries occur, with privacy protections and other conditions specified by the standard.

Record Type	Location / System / Custodian	Retention / Privacy / Access Notes
Employee medical records		
Training records		
Sharps injury log		
Exposure incident documentation		
Vaccination / declination documentation		
Annual ECP review documentation		

Person / role responsible for ensuring records are maintained and available as required:

11. Annual Review, Safer Devices & Employee Input

Use this worksheet at least annually and whenever workplace changes affect occupational exposure.



Review date:

Reviewer(s):

Reviewed new or modified tasks/procedures affecting occupational exposure.

Reviewed new/revised employee positions with occupational exposure.

Reviewed changes in technology that may eliminate or reduce exposure.

Considered appropriate commercially available and effective safer medical devices, where applicable.

Solicited input from appropriate non-managerial employees where required.

Changes identified and actions taken:

Safer-device evaluation / devices considered / reasons for selection or non-selection (N/A if not applicable):

Non-managerial employee input - names/roles, method of solicitation, and feedback (N/A if requirement does not apply):

Next scheduled review date:

12. Exposure Incident Evaluation Form

Complete after an occupational exposure incident to evaluate the circumstances and preventive actions.



Employee name / ID:

Date / time:

Job classification:

Department / area:

Location of incident:

Task / procedure being performed:

Route of exposure and circumstances (needlestick, splash, cut, mucous membrane, non-intact skin, etc.):

Engineering controls / PPE in use and whether they functioned as intended:

If a sharp was involved, identify device type/brand and how/when the incident occurred:

Immediate actions and medical follow-up initiated:

Root causes / contributing factors and corrective actions to prevent recurrence:

13. Approval, Revision History & Reference Notes

Keep this page with the current plan and document each formal review or revision.



Employer approval / authorized representative:

Name / Title

Date

Signature (print and sign after completing the plan):

Revision History

Date	Reviewed / Revised By	Summary of Changes

Reference Notes

Primary federal reference: OSHA 29 CFR 1910.1030, Bloodborne Pathogens. OSHA also publishes a Model Exposure Control Plan for employer use. Employers should review the full standard and any applicable state-plan, industry-specific, or healthcare requirements before implementation.

OSHA standard: www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.1030

OSHA model plan: www.osha.gov/bloodborne-pathogens/resources

Template notice:

CPR Safety 411 provides training and educational resources. This template is intended to help organize an employer-specific plan and does not by itself establish compliance. Employers must ensure the final plan accurately reflects their workplace and is implemented in practice.