FSU ENVIRONMENTAL HEALTH & SAFETY FACILITIES

EXPOSURE DETERMINATION WORKSHEET

The purpose of this worksheet is to identify job classifications where incumbents are exposed to blood and/or other potentially infectious materials (OPIM). The exposure determination must be done without regard to the use of personal protective equipment.

Please complete and submit to your department for review. If you have questions or concerns, feel free to contact EH&S at 644-6895 or the BSO at 644-8916 or 644-5374 for assistance.

			Γ	Male Female	
First Name	Last Name	Date of Birth	Social Security Number	Gender	
Positi	ion Title		Position Description		
Department informa	ition				
Department			Principal Investigator/Supervisor		
Building	Room	Campus phone			
General, healthcare	, and emergency r	esponse questions			
Does the worker:					
		Is involving exposure to blo	ood, or other potentially infectious	□Yes □No	
materials (C		l by individuals whose wor	k involves human blood, OPIM,	□Yes □No	
tissues or o		i by individuals whose wor	k involves numan blood, OFINI,		
	an blood or OPIM?			∏Yes ∏No	
	xed human tissue?				
Perform CP	R and/or act as a d	esignated first aid respond	ler?	□Yes □No	
	dial, building serv	ice, housekeeping servio	ces, animal handlers, and glassv	vare washers	
Does the worker:					
			od, blood products, OPIM, tissues,	□Yes □No	
			ans, of animals infected with HIV		
		hav come into contact with	leak any of the above materials		
			nan blood, blood products, OPIM,	∏Yes ∏No	
			ues, organs, of animals infected		
			at may contain sharp instruments		
	se individuals?				
		ry where blood or other pot	tentially infectious materials may b	e ∐Yes ∏No	
present?	-	-			
			d or OPIM, or be punctured by	□Yes □No	
		ne in contact with the emp	loyee skin?		
Questions for labora	atory personnel				
Does the worker:	an black need to the				
		such as serum, plasma, ar d products such as hemog		□Yes □No □Yes □No	
	ary human cell line				
		d cells/tissues cultures and	d/or virus preparations?		
			areas where such animals are		
housed?			···· ·································		

If the answer to any of the above questions is YES, then the employee is covered by the OSHA Standard.

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ENVIRONMENTAL HEALTH & SAFETY FACILITIES

Exposure Determination Worksheet (continued)

Tasks and Procedures

List tasks and procedures that expose the employee to blood or bloodborne pathogens

Occupational exposure to bloodborne pathogens

It has been determined that reasonably anticipated contact with blood or other potentially infectious materials may be expected during the performance of this employee's duties, resulting in occupational exposure to bloodborne pathogens. This employee has been offered the HBV vaccine series.

Employee's Initials

Principal Investigator/Supervisor's Initials

Acknowledgement

Employee Name (please print)	Employee Signature	Date
Principal Investigator/Supervisor Name (please print)	Principal Investigator/Supervisor Signature	Date