Lakeside Family Dental
100 Lakeside Way, Suite 1, Harbor City, CA

Bloodborne Pathogens Exposure Control Plan

Owner: Safety coordinator | Reviewed every January | Version 4

1. Purpose and scope

This plan meets the OSHA Bloodborne Pathogens Standard (29 CFR 1910.1030). It applies to every team member who can reasonably be expected to contact blood or other potentially infectious materials (OPIM) while doing their job. A copy is kept in the break room binder and in the practice library, and any team member may read it at any time.

2. Exposure determination

- Dentists, hygienists and dental assistants: exposure is expected in all clinical tasks.
- Sterilization technician: exposure is expected while cleaning, packaging and loading instruments.
- Front desk and billing: no occupational exposure is expected; they do not handle instruments or specimens.

3. Methods of compliance

Standard precautions apply to every patient. Engineering controls come first: a sharps container is mounted at every chair, anesthetic needles are recapped only with the one-handed scoop technique or a recapping device, and instruments move in locked cassettes between the operatory and sterilization.

- Gloves, masks, protective eyewear and gowns are provided at no cost, in every size, in every operatory.
- Hands are washed or sanitized before gloving and immediately after removing gloves.
- No eating, drinking or applying cosmetics in the operatories, sterilization or the lab.
- Contaminated laundry is bagged at the point of use and sent to the linen service in labeled bags.

4. Hepatitis B vaccination

The vaccine series is offered at no cost within 10 working days of assignment to a role with exposure. A team member who declines signs the declination form, which is kept on file; they may change their mind later and receive the series then.

5. After an exposure incident

- Wash the site with soap and water right away; flush eyes or mouth with water for 15 minutes.
- Tell the safety coordinator or the office manager immediately, before the next patient.
- Complete the exposure incident report the same day, including the route and circumstances.
- The team member is referred to the occupational health clinic that day for a confidential evaluation.
- With consent, the source patient is asked to be tested; results are shared only as the law allows.

6. Training and records

Every team member with exposure is trained at hire and every year after, during paid time. Training records are kept for three years. Medical records are kept for the length of employment plus 30 years. Every needlestick or sharps injury goes in the sharps injury log, without the team member's name.

7. Annual review

The safety coordinator reviews this plan every January with the clinical team, asks for their input on safer devices, and records what changed. The dentist-owner signs the review.