



**Oregon**  
Theodore R. Kulongoski, Governor

**Department of Consumer and Business Services**  
Oregon Occupational Safety & Health Division (OR-OSHA)  
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January 15, 1997

**Reviewed:** October 8, 2007

Nancy Heapes  
PARS  
1273 University of Oregon  
Eugene, OR 97403-1273

Dear Ms. Heapes:

This letter is in response to your letter dated January 9, 1997, regarding the collateral duty clause in 1910.1030, "Bloodborne Pathogens."

As you may already know, Oregon OSHA has viewed any occupational exposure to blood or other potentially infectious materials (OPIM) as being within the scope of 1910.1030 and did not make any distinction between routine exposures and "collateral duty." However, we have recently adopted the collateral duty clause.

Employers with employees who are not routinely exposed to blood or OPIM may fall under the collateral duty clause, in which case the hepatitis B vaccination would not need to be offered until an incident involving the presence of blood or OPIM occurs.

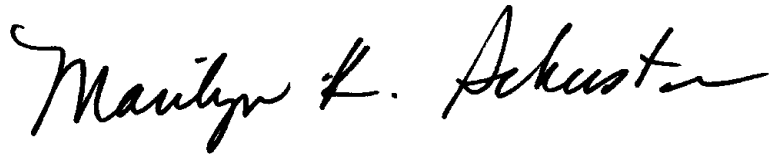
In order for an employer to qualify under the collateral duty clause, the following conditions must be met:

1. Reporting procedures must be in place under the exposure control plan to ensure that all incidents involving blood or OPIM are reported to the employer before the end of the work shift during which the incident occurred;
2. Reports of incidents must include the names of all involved employees and a description of the circumstances of the incident, including the date and time, as well as a determination of whether an exposure incident, as defined by the standard, has occurred;
3. Exposure reports must be included on a list of such incidents and be readily available to all employees and provided to OR-OSHA upon request;

4. The specifics of the reporting procedure must be included in the bloodborne pathogens training; S:\share\TEC\_TEMP\Interps\uofocoll.doc
5. All employees who are involved in any situation involving the presence of blood or OPIM, regardless of whether a specific exposure incident occurs, must be offered the full hepatitis B vaccination as soon as possible but no later than 24 hours after the incident. If an exposure incident as defined in 1910.1030 occurs, all other post-exposure follow-up procedures in accordance with the standard must be initiated immediately, and the employer must ensure that the medical provider is familiar with and follows the recommendations for post-exposure follow-up set forth by the Oregon Health Department and/or the Centers for Disease Control.
6. Bloodborne pathogens training must be provided to all affected employees;
7. Appropriate personal protective equipment, clean-up materials, and equipment must be provided.

We hope this answers your question regarding bloodborne pathogens. If you have any questions or if we can be of further assistance, please contact David McLaughlin at (503) 378-3272.

Sincerely,

A handwritten signature in black ink that reads "Marilyn K. Schuster". The signature is written in a cursive, flowing style.

Marilyn K. Schuster, Manager  
Standards and Technical Resources Section  
Oregon Occupational Safety and Health Division