

# RULES CERTIFICATE

STATE OF WISCONSIN )  
 ) SS  
DEPT. OF INDUSTRY, )  
LABOR & HUMAN RELATIONS )

TO ALL TO WHOM THESE PRESENTS SHALL COME, GREETINGS:

I, Carol Skornicka, Secretary of the Department of Industry,  
Labor and Human Relations, and custodian of the official records of said department, do hereby certify that  
the annexed rule(s) relating to bloodborne pathogens

(Subject)

were duly approved and adopted by this department on November 4, 1992

(Date)

I further certify that said copy has been compared by me with the original on file in the department  
and that the same is a true copy thereof, and of the whole of such original.



IN TESTIMONY WHEREOF, I have hereunto set  
my hand and affixed the official seal of the  
department at 9:00 a.m.  
in the city of Madison, this 4th  
day of November A.D. 19 92

Carol Skornicka  
Secretary

**RECEIVED**

NOV - 4 1992  
11:00 am  
Revisor of Statutes  
Bureau





# RULES in FINAL DRAFT FORM

Rule No.: \_\_\_\_\_ Sections ILHR 32.15 and 32.50

Relating to: \_\_\_\_\_ Bloodborne Pathogens

Clearinghouse Rule No.: \_\_\_\_\_ 92-91

SECTION 1. ILHR 32.15 (13) and (14) are created to read:

ILHR 32.15 (13) Occupational Exposure to Bloodborne Pathogens, 29 CFR Part 1910, Federal Register, Vol. 56, No. 235, December 6, 1991.

(a) The exposure control plan required by 29 CFR section 1910.1030 (c) shall be completed by September 1, 1993.

(b) The information and training requirements in 29 CFR section 1910.1030 (g) (2) and the recordkeeping requirements in 29 CFR section 1910.1030 (h) shall take effect on October 1, 1993.

(c) Paragraphs (d) (2), (d) (3), (d) (4), (e), (f) and (g) (1) of 29 CFR section 1910.1030 shall take effect on November 1, 1993.

(14) Occupational Exposure to Bloodborne Pathogens; Correction, 29 CFR Part 1910, Federal Register, Vol. 57, No. 127, July 1, 1992.

SECTION 2. ILHR 32.50 Table 32.50-1 items 13 and 14 are created to read:

Table 32.50-1

13. Occupational Exposure to Bloodborne Pathogens, 29 CFR Part 1910, Federal Register, Vol. 56, No. 235, December 6, 1991.

14. Occupational Exposure to Bloodborne Pathogens; Correction, 29 CFR Part 1910, Federal Register, Vol. 57, No. 127, July 1, 1992.

(END)

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EFFECTIVE DATE

Pursuant to s. 227.22 (2) (b), Stats., these rules shall take effect on July 1, 1993.

\*\*\*\*\*

Tommy G. Thompson  
Governor  
Carol Skornicka  
Secretary



Mailing Address:  
201 E. Washington Avenue  
Post Office Box 7946  
Madison, WI 53707-7946  
Telephone (608) 266-7552

## State of Wisconsin Department of Industry, Labor and Human Relations

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November 4, 1992

Gary Poulson  
Assistant Revisor of Statutes  
2nd Floor  
119 Martin Luther King Blvd.  
Madison, Wisconsin 53703

Douglas LaFollette  
Secretary of State  
10th Floor  
30 West Mifflin Street  
Madison, Wisconsin 53703

Dear Messrs. Poulson and LaFollette:

### TRANSMITTAL OF RULE ADOPTION

CLEARINGHOUSE RULE NO. 92-91

RULE NO. ILHR 32.15 and 32.50

RELATING TO: Bloodborne Pathogens

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Pursuant to section 227.20, Stats., agencies are required to file a certified copy of every rule adopted by the agency with the offices of the Secretary of State and the Revisor of Statutes.

At this time, the following material is being submitted to you:

1. Order of Adoption.
2. Rules Certificate Form.
3. Rules in Final Draft Form.

Pursuant to section 227.114, Stats., a summary of the final regulatory flexibility analysis is included for permanent rules. A fiscal estimate and fiscal estimate worksheet is included with an emergency rule.

Respectfully submitted,

A handwritten signature in cursive script, appearing to read "Carol Skornicka".

Carol Skornicka  
Secretary



**SAFETY & BUILDINGS DIVISION**

201 E. Washington Avenue  
P.O. Box 7969  
Madison, Wisconsin 53707

**State of Wisconsin  
Department of Industry, Labor and Human Relations**

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November 11, 1992

GARY POULSON  
ASSISTANT REVISOR OF STATUTES  
2ND FLOOR  
119 MARTIN LUTHER KING BOULEVARD  
MADISON WI 53703

DOUGLAS LA FOLLETTE  
SECRETARY OF STATE  
10TH FLOOR  
30 WEST MIFFLIN STREET  
MADISON WI 53703

Dear Messrs. Poulson and La Follette:

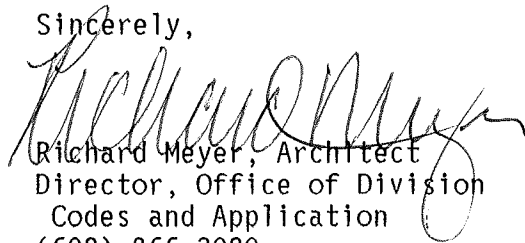
Section 101.055 (3)(a), Stats., allows the Department of Industry, Labor and Human Relations to incorporate by reference federal regulations into our administrative rules relating to the safety and health of public employes. The Department adopted, on November 4, 1992, administrative rules in chapter ILHR 32 that incorporated by reference the following federal regulations:

1. Occupational Exposure to Bloodborne Pathogens, 29 CFR Part 1910, Federal Register, Vol. 56, No. 235, December 6, 1991.
2. Occupational Exposure to Bloodborne Pathogens; Correction, 29 CFR Part 1910, Federal Register, Vol. 57, No. 127, July 1, 1992.

At this time, the Department is filing a copy of these standards with your offices. Copies have also been placed on file with this Department.

Thank you for your assistance in this matter.

Sincerely,

  
Richard Meyer, Architect  
Director, Office of Division  
Codes and Application  
(608) 266-3080

RM:CODES6:57

Enclosures

cc: Ronald H. Acker

**XI. The Standard****General Industry**

Part 1910 of title 29 of the Code of Federal Regulations is amended as follows:

**PART 1910—[AMENDED]****Subpart Z—[Amended]**

1. The general authority citation for subpart Z of 29 CFR part 1910 continues to read as follows and a new citation for § 1910.1030 is added:

Authority: Secs. 6 and 8, Occupational Safety and Health Act, 29 U.S.C. 655, 657, Secretary of Labor's Orders Nos. 12-71 (36 FR 8754), 8-76 (41 FR 25059), or 9-83 (48 FR 35736), as applicable; and 29 CFR part 1911.

Section 1910.1030 also issued under 29 U.S.C. 653.

2. Section 1910.1030 is added to read as follows:

**§ 1910.1030 Bloodborne Pathogens.**

(a) *Scope and Application.* This section applies to all occupational exposure to blood or other potentially infectious materials as defined by paragraph (b) of this section.

(b) *Definitions.* For purposes of this section, the following shall apply:

*Assistant Secretary* means the Assistant Secretary of Labor for Occupational Safety and Health, or designated representative.

*Blood* means human blood, human blood components, and products made from human blood.

*Bloodborne Pathogens* means pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV) and human immunodeficiency virus (HIV).

*Clinical Laboratory* means a workplace where diagnostic or other screening procedures are performed on blood or other potentially infectious materials.

*Contaminated* means the presence or the reasonably anticipated presence of blood or other potentially infectious materials on an item or surface.

*Contaminated Laundry* means laundry which has been soiled with blood or other potentially infectious materials or may contain sharps.

*Contaminated Sharps* means any contaminated object that can penetrate the skin including, but not limited to, needles, scalpels; broken glass, broken capillary tubes, and exposed ends of dental wires.

*Decontamination* means the use of physical or chemical means to remove,

inactivate, or destroy bloodborne pathogens on a surface or item to the point where they are no longer capable of transmitting infectious particles and the surface or item is rendered safe for handling, use, or disposal.

*Director* means the Director of the National Institute for Occupational Safety and Health, U.S. Department of Health and Human Services, or designated representative.

*Engineering Controls* means controls (e.g., sharps disposal containers, self-sheathing needles) that isolate or remove the bloodborne pathogens hazard from the workplace.

*Exposure Incident* means a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials that results from the performance of an employee's duties.

*Handwashing Facilities* means a facility providing an adequate supply of running potable water, soap and single use towels or hot air drying machines.

*Licensed Healthcare Professional* is a person whose legally permitted scope of practice allows him or her to independently perform the activities required by paragraph (f) Hepatitis B Vaccination and Post-exposure Evaluation and Follow-up.

*HBV* means hepatitis B virus.

*HIV* means human immunodeficiency virus.

*Occupational Exposure* means reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials that may result from the performance of an employee's duties.

*Other Potentially Infectious Materials* means

(1) The following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids;

(2) Any unfixed tissue or organ (other than intact skin) from a human (living or dead); and

(3) HIV-containing cell or tissue cultures, organ cultures, and HIV- or HBV-containing culture medium or other solutions; and blood, organs, or other tissues from experimental animals infected with HIV or HBV.

*Parenteral* means piercing mucous membranes or the skin barrier through such events as needlesticks, human bites, cuts, and abrasions.

*Personal Protective Equipment* is specialized clothing or equipment worn by an employee for protection against a hazard. General work clothes (e.g., uniforms, pants, shirts or blouses) not intended to function as protection against a hazard are not considered to be personal protective equipment.

*Production Facility* means a facility engaged in industrial-scale, large-volume or high concentration production of HIV or HBV.

*Regulated Waste* means liquid or semi-liquid blood or other potentially infectious materials; contaminated items that would release blood or other potentially infectious materials in a liquid or semi-liquid state if compressed; items that are caked with dried blood or other potentially infectious materials and are capable of releasing these materials during handling; contaminated sharps; and pathological and microbiological wastes containing blood or other potentially infectious materials.

*Research Laboratory* means a laboratory producing or using research-laboratory-scale amounts of HIV or HBV. Research laboratories may produce high concentrations of HIV or HBV but not in the volume found in production facilities.

*Source Individual* means any individual, living or dead, whose blood or other potentially infectious materials may be a source of occupational exposure to the employee. Examples include, but are not limited to, hospital and clinic patients; clients in institutions for the developmentally disabled; trauma victims; clients of drug and alcohol treatment facilities; residents of hospices and nursing homes; human remains; and individuals who donate or sell blood or blood components.

*Sterilize* means the use of a physical or chemical procedure to destroy all microbial life including highly resistant bacterial endospores.

*Universal Precautions* is an approach to infection control. According to the concept of Universal Precautions, all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV, and other bloodborne pathogens.

*Work Practice Controls* means controls that reduce the likelihood of exposure by altering the manner in which a task is performed (e.g., prohibiting recapping of needles by a two-handed technique).

(c) *Exposure control*—(1) *Exposure Control Plan.* (i) Each employer having an employee(s) with occupational exposure as defined by paragraph (b) of this section shall establish a written Exposure Control Plan designed to

eliminate or minimize employee exposure.

(ii) The Exposure Control Plan shall contain at least the following elements:

(A) The exposure determination required by paragraph (c)(2).

(B) The schedule and method of implementation for paragraphs (d) Methods of Compliance, (e) HIV and HBV Research Laboratories and Production Facilities, (f) Hepatitis B Vaccination and Post-Exposure Evaluation and Follow-up, (g) Communication of Hazards to Employees, and (h) Recordkeeping, of this standard, and

(C) The procedure for the evaluation of circumstances surrounding exposure incidents as required by paragraph (f)(3)(i) of this standard.

(iii) Each employer shall ensure that a copy of the Exposure Control Plan is accessible to employees in accordance with 29 CFR 1910.20(e).

(iv) The Exposure Control Plan shall be reviewed and updated at least annually and whenever necessary to reflect new or modified tasks and procedures which affect occupational exposure and to reflect new or revised employee positions with occupational exposure.

(v) The Exposure Control Plan shall be made available to the Assistant Secretary and the Director upon request for examination and copying.

(2) *Exposure determination.* (i) Each employer who has an employee(s) with occupational exposure as defined by paragraph (b) of this section shall prepare an exposure determination. This exposure determination shall contain the following:

(A) A list of all job classifications in which all employees in those job classifications have occupational exposure;

(B) A list of job classifications in which some employees have occupational exposure, and

(C) A list of all tasks and procedures or groups of closely related task and procedures in which occupational exposure occurs and that are performed by employees in job classifications listed in accordance with the provisions of paragraph (c)(2)(i)(B) of this standard.

(ii) This exposure determination shall be made without regard to the use of personal protective equipment.

(d) *Methods of compliance—(1) General—*Universal precautions shall be observed to prevent contact with blood or other potentially infectious materials. Under circumstances in which differentiation between body fluid types is difficult or impossible, all body fluids shall be considered potentially infectious materials.

(2) *Engineering and work practice controls.* (i) Engineering and work practice controls shall be used to eliminate or minimize employee exposure. Where occupational exposure remains after institution of these controls, personal protective equipment shall also be used.

(ii) Engineering controls shall be examined and maintained or replaced on a regular schedule to ensure their effectiveness.

(iii) Employers shall provide handwashing facilities which are readily accessible to employees.

(iv) When provision of handwashing facilities is not feasible, the employer shall provide either an appropriate antiseptic hand cleanser in conjunction with clean cloth/paper towels or antiseptic towelettes. When antiseptic hand cleansers or towelettes are used, hands shall be washed with soap and running water as soon as feasible.

(v) Employers shall ensure that employees wash their hands immediately or as soon as feasible after removal of gloves or other personal protective equipment.

(vi) Employers shall ensure that employees wash hands and any other skin with soap and water, or flush mucous membranes with water immediately or as soon as feasible following contact of such body areas with blood or other potentially infectious materials.

(vii) Contaminated needles and other contaminated sharps shall not be bent, recapped, or removed except as noted in paragraphs (d)(2)(vii)(A) and (d)(2)(vii)(B) below. Shearing or breaking of contaminated needles is prohibited.

(A) Contaminated needles and other contaminated sharps shall not be recapped or removed unless the employer can demonstrate that no alternative is feasible or that such action is required by a specific medical procedure.

(B) Such recapping or needle removal must be accomplished through the use of a mechanical device or a one-handed technique.

(viii) Immediately or as soon as possible after use, contaminated reusable sharps shall be placed in appropriate containers until properly reprocessed. These containers shall be:

(A) Puncture resistant;

(B) Labeled or color-coded in accordance with this standard;

(C) Leakproof on the sides and bottom; and

(D) In accordance with the requirements set forth in paragraph (d)(4)(ii)(E) for reusable sharps.

(ix) Eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses are prohibited in work areas where there is a reasonable likelihood of occupational exposure.

(x) Food and drink shall not be kept in refrigerators, freezers, shelves, cabinets or on countertops or benchtops where blood or other potentially infectious materials are present.

(xi) All procedures involving blood or other potentially infectious materials shall be performed in such a manner as to minimize splashing, spraying, spattering, and generation of droplets of these substances.

(xii) Mouth pipetting/suctioning of blood or other potentially infectious materials is prohibited.

(xiii) Specimens of blood or other potentially infectious materials shall be placed in a container which prevents leakage during collection, handling, processing, storage, transport, or shipping.

(A) The container for storage, transport, or shipping shall be labeled or color-coded according to paragraph (g)(1)(i) and closed prior to being stored, transported, or shipped. When a facility utilizes Universal Precautions in the handling of all specimens, the labeling/color-coding of specimens is not necessary provided containers are recognizable as containing specimens. This exemption only applies while such specimens/containers remain within the facility. Labeling or color-coding in accordance with paragraph (g)(1)(i) is required when such specimens/containers leave the facility.

(B) If outside contamination of the primary container occurs, the primary container shall be placed within a second container which prevents leakage during handling, processing, storage, transport, or shipping and is labeled or color-coded according to the requirements of this standard.

(C) If the specimen could puncture the primary container, the primary container shall be placed within a secondary container which is puncture-resistant in addition to the above characteristics.

(xiv) Equipment which may become contaminated with blood or other potentially infectious materials shall be examined prior to servicing or shipping and shall be decontaminated as necessary, unless the employer can demonstrate that decontamination of such equipment or portions of such equipment is not feasible.

(A) A readily observable label in accordance with paragraph (g)(1)(i)(H) shall be attached to the equipment stating which portions remain contaminated.



(B) The employer shall ensure that this information is conveyed to all affected employees, the servicing representative, and/or the manufacturer, as appropriate, prior to handling, servicing, or shipping so that appropriate precautions will be taken.

(3) Personal protective equipment—(i) Provision. When there is occupational exposure, the employer shall provide, at no cost to the employee, appropriate personal protective equipment such as, but not limited to, gloves, gowns, laboratory coats, face shields or masks and eye protection, and mouthpieces, resuscitation bags, pocket masks, or other ventilation devices. Personal protective equipment will be considered "appropriate" only if it does not permit blood or other potentially infectious materials to pass through to or reach the employee's work clothes, street clothes, undergarments, skin, eyes, mouth, or other mucous membranes under normal conditions of use and for the duration of time which the protective equipment will be used.

(ii) Use. The employer shall ensure that the employee uses appropriate personal protective equipment unless the employer shows that the employee temporarily and briefly declined to use personal protective equipment when, under rare and extraordinary circumstances, it was the employee's professional judgment that in the specific instance its use would have prevented the delivery of health care or public safety services or would have posed an increased hazard to the safety of the worker or co-worker. When the employee makes this judgment, the circumstances shall be investigated and documented in order to determine whether changes can be instituted to prevent such occurrences in the future.

(iii) Accessibility. The employer shall ensure that appropriate personal protective equipment in the appropriate sizes is readily accessible at the worksite or is issued to employees. Hypoallergenic gloves, glove liners, powderless gloves, or other similar alternatives shall be readily accessible to those employees who are allergic to the gloves normally provided.

(iv) Cleaning, Laundering, and Disposal. The employer shall clean, launder, and dispose of personal protective equipment required by paragraphs (d) and (e) of this standard, at no cost to the employee.

(v) Repair and Replacement. The employer shall repair or replace personal protective equipment as needed to maintain its effectiveness, at no cost to the employee.

(vi) If a garment(s) is penetrated by blood or other potentially infectious

materials, the garment(s) shall be removed immediately or as soon as feasible.

(vii) All personal protective equipment shall be removed prior to leaving the work area.

(viii) When personal protective equipment is removed it shall be placed in an appropriately designated area or container for storage, washing, decontamination or disposal.

(ix) Gloves. Gloves shall be worn when it can be reasonably anticipated that the employee may have hand contact with blood, other potentially infectious materials, mucous membranes, and non-intact skin; when performing vascular access procedures except as specified in paragraph (d)(3)(ix)(D); and when handling or touching contaminated items or surfaces.

(A) Disposable (single use) gloves such as surgical or examination gloves, shall be replaced as soon as practical when contaminated or as soon as feasible if they are torn, punctured, or when their ability to function as a barrier is compromised.

(B) Disposable (single use) gloves shall not be washed or decontaminated for re-use.

(C) Utility gloves may be decontaminated for re-use if the integrity of the glove is not compromised. However, they must be discarded if they are cracked, peeling, torn, punctured, or exhibit other signs of deterioration or when their ability to function as a barrier is compromised.

(D) If an employer in a volunteer blood donation center judges that routine gloving for all phlebotomies is not necessary then the employer shall:

(1) Periodically reevaluate this policy;

(2) Make gloves available to all employees who wish to use them for phlebotomy;

(3) Not discourage the use of gloves for phlebotomy; and

(4) Require that gloves be used for phlebotomy in the following circumstances:

(i) When the employee has cuts, scratches, or other breaks in his or her skin;

(ii) When the employee judges that hand contamination with blood may occur, for example, when performing phlebotomy on an uncooperative source individual; and

(iii) When the employee is receiving training in phlebotomy.

(x) Masks, Eye Protection, and Face Shields. Masks in combination with eye protection devices, such as goggles or glasses with solid side shields, or chin-length face shields, shall be worn whenever splashes, spray, spatter, or

droplets of blood or other potentially infectious materials may be generated and eye, nose, or mouth contamination can be reasonably anticipated.

(xi) Gowns, Aprons, and Other Protective Body Clothing. Appropriate protective clothing such as, but not limited to, gowns, aprons, lab coats, clinic jackets, or similar outer garments shall be worn in occupational exposure situations. The type and characteristics will depend upon the task and degree of exposure anticipated.

(xii) Surgical caps or hoods and/or shoe covers or boots shall be worn in instances when gross contamination can reasonably be anticipated (e.g., autopsies, orthopaedic surgery).

(4) *Housekeeping.* (i) General. Employers shall ensure that the worksite is maintained in a clean and sanitary condition. The employer shall determine and implement an appropriate written schedule for cleaning and method of decontamination based upon the location within the facility, type of surface to be cleaned, type of soil present, and tasks or procedures being performed in the area.

(ii) All equipment and environmental and working surfaces shall be cleaned and decontaminated after contact with blood or other potentially infectious materials.

(A) Contaminated work surfaces shall be decontaminated with an appropriate disinfectant after completion of procedures; immediately or as soon as feasible when surfaces are overtly contaminated or after any spill of blood or other potentially infectious materials; and at the end of the work shift if the surface may have become contaminated since the last cleaning.

(B) Protective coverings, such as plastic wrap, aluminum foil, or imperviously-backed absorbent paper used to cover equipment and environmental surfaces, shall be removed and replaced as soon as feasible when they become overtly contaminated or at the end of the workshift if they may have become contaminated during the shift.

(C) All bins, pails, cans, and similar receptacles intended for reuse which have a reasonable likelihood for becoming contaminated with blood or other potentially infectious materials shall be inspected and decontaminated on a regularly scheduled basis and cleaned and decontaminated immediately or as soon as feasible upon visible contamination.

(D) Broken glassware which may be contaminated shall not be picked up directly with the hands. It shall be cleaned up using mechanical means.

(3) Paragraph (g)(2) Information and Training and (h) Recordkeeping shall take effect on or before June 4, 1992.

(4) Paragraphs (d)(2) Engineering and Work Practice Controls, (d)(3) Personal Protective Equipment, (d)(4) Housekeeping, (e) HIV and HBV Research Laboratories and Production Facilities, (f) Hepatitis B Vaccination and Post-Exposure Evaluation and

Follow-up, and (g) (1) Labels and Signs, shall take effect July 6, 1992.

**Appendix A to Section 1910.1039—Hepatitis B Vaccine Declination (Mandatory)**

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

[FR Doc. 91-28386 Filed 12-2-91; 8:45 am]

BILLING CODE 4510-26-M

column, then the number in the mg/m<sup>3</sup> column is exact. When numerical entries for a substance are in both the ppm and mg/m<sup>3</sup> columns, then the number in the ppm column is exact and the number in the mg/m<sup>3</sup> column may be rounded off."

22. In § 1910.1000 Table Z-3, the footnote superscript "g" is added after the entry "INERT OR NUISANCE DUST" and Footnote "g" is added in alphabetical order to read "All inert or nuisance dusts, whether mineral, inorganic, or organic, not listed specifically by substance name, are covered by the Particulates Not Otherwise Regulated (PNOR) limit in Table Z-1-A."

Signed at Washington, DC, this 25th day of June, 1992.

Dorothy L. Strunk,  
Acting Assistant Secretary of Labor,  
[FR Doc. 92-15364 Filed 6-30-92; 8:45 am]  
BILLING CODE 4510-26-M

## 29 CFR Part 1910

[Docket No. H-370]

### Occupational Exposure to Bloodborne Pathogens; Correction

**AGENCY:** Occupational Safety and Health Administration, Labor.

**ACTION:** Final rule, correction.

**SUMMARY:** The Occupational Safety and Health Administration is correcting errors in the regulatory text of the final rule for Occupational Exposure to Bloodborne Pathogens which appeared in the Federal Register on December 6, 1991 (56 FR 64004).

**EFFECTIVE DATE:** July 1, 1992.

**FOR FURTHER INFORMATION CONTACT:** Mr. James F. Foster, Occupational Safety and Health Administration, Office of Information and Public Affairs, room N-3647, U.S. Department of Labor, 200 Constitution Avenue, NW., Washington, DC 20210, Telephone: (202) 523-8151.

#### SUPPLEMENTARY INFORMATION:

##### Background

OSHA has promulgated a standard to eliminate or minimize occupational exposure to Hepatitis B Virus (HBV), Human Immunodeficiency Virus (HIV) and other bloodborne pathogens (56 FR 64004). In the final rule OSHA determined that employees faced a significant health risk as the result of occupational exposure to blood and other potentially infectious materials because they may contain bloodborne pathogens, including hepatitis B virus which causes Hepatitis B, a serious liver

disease, and human immunodeficiency virus, which causes Acquired Immunodeficiency Syndrome (AIDS).

#### Need for Correction

During the proofreading process of the regulation, technical and typographical errors were discovered. This notice is being published to correct those errors.

#### Correction of Publication

The following corrections are made in the final rule for Occupational Exposure to Bloodborne Pathogens published in the Federal Register on December 6, 1991 (56 FR 64004).

##### § 1910.1030 [Correction]

1. On page 64004, first column, third heading, "29 CFR Part 1910.1030" should be corrected to read "29 CFR part 1910".

2. On page 64176, second column, § 1910.1030(d)(2)(vii)(A) is corrected to read:

"(A) Contaminated needles and other contaminated sharps shall not be bent, recapped or removed unless the employer can demonstrate that no alternative is feasible or that such action is required by a specific medical or dental procedure."

3. On page 64176, second column, § 1910.1030(d)(2)(vii)(B) is corrected to read:

"(B) Such bending, recapping or needle removal must be accomplished through the use of a mechanical device or a one-handed technique."

4.-5. On page 64180, second column, § 1910.1030(g)(1)(i)(B), remove the second "BIOHAZARD" term which appears in this paragraph, immediately above § 1910.1030(g)(1)(i)(C).

6. On page 64180, second column, § 1910.1030(g)(1)(i)(C), third line, is corrected to read "so, with lettering and symbols in a".

7. On page 64180, second column, § 1910.1030(g)(1)(i)(D), is corrected to read:

"(D) Labels shall be affixed as close as feasible to the container by string, wire, adhesive, or other method that prevents their loss or unintentional removal."

8. On page 64180, third column, § 1910.1030(g)(1)(ii)(A), ninth line, remove the second "BIOHAZARD" term which appears in this paragraph.

9. On page 64180, third column, § 1910.1030(g)(1)(ii)(B), third line, is corrected to read "lettering and symbols in a contrasting".

10. On page 64181, first column, § 1910.1030(g)(2)(vii)(A) is corrected to read:

"(A) An accessible copy of the regulatory text of this standard and an explanation of its contents;"

11. On page 64181, third column, § 1910.1030(h)(1)(iii)(B) is corrected to read:

"(B) Not disclosed or reported without the employee's express written consent to any person within or outside the workplace except as required by this section or as may be required by law."

12. On page 64181, third column, § 1910.1030(h)(3)(ii) is corrected to read:

"(ii) Employee training records required by this paragraph shall be provided upon request for examination and copying to employees, to employee representatives, to the Director, and to the Assistant Secretary."

13. On page 64181, third column, § 1910.1030(i)(2) is corrected to read:

"(2) The Exposure Control Plan required by paragraph (c) of this section shall be completed on or before May 5, 1992."

Dated: June 25, 1992.

Dorothy L. Strunk,  
Acting Assistant Secretary of Labor,  
[FR Doc. 92-15363 Filed 6-30-92; 8:45 am]  
BILLING CODE 4510-26-M

## DEPARTMENT OF DEFENSE

### Office of the Secretary

#### 32 CFR Part 169a

[DoD Instruction 4100.33]

#### Commercial Activities Program Procedures

**AGENCY:** Office of the Secretary, DoD.

**ACTION:** Final rule.

**SUMMARY:** The Department of Defense is revising its rules regarding the Commercial Activities Program Procedures to incorporate changes to Part 169a required by Office of Management and Budget (OMB) interim procedural changes to their Circular A-76, "Performance of Commercial Activities," August 3, 1983, and is implementing the DoD policies established in 32 CFR Part 169. This amendment is designed to provide current instructions to the DoD Commercial Activities Program.

**DATE EFFECTIVE:** July 8, 1992.

**FOR FURTHER INFORMATION CONTACT:** Mr. Earl DeHart, telephone 703-756-5641.

**SUPPLEMENTARY INFORMATION:** In FR Doc 91-30348, appearing in the Federal Register (56 FR 15442) on December 27, 1991, the Office of the Secretary of Defense published part 169a as a proposed rule to incorporate substantive changes to part 169a required by OMB