

BLOODBORNE PATHOGENS EXPOSURE CONTROL PLAN

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The Language Used In This Document Does Not Create An Employment Contract Between The Employee And The Agency. This Document Does Not Create Any Contractual Rights Or Entitlements. The Agency Reserves The Right To Revise The Content Of This Document, In Whole Or In Part. No Promises Or Assurances, Whether Written Or Oral, Which Are Contrary To Or Inconsistent With The Terms Of This Paragraph Create Any Contract Of Employment.

The SC Department of Administration Bloodborne Pathogens Exposure Control Plan (ECP) includes all elements required by the OSHA bloodborne pathogens standard (29 CFR 1910.1030).

The SC Department of Administration is committed to providing a safe and healthful work environment for our entire staff. In pursuit of this goal, this ECP is provided to eliminate or minimize occupational exposure to bloodborne pathogens in accordance with OSHA standard 29 *CFR* 1910.1030, "Occupational Exposure to Bloodborne Pathogens." The ECP is a key document to assist our organization in implementing and ensuring compliance with the standard, thereby protecting our employees.

This ECP includes:

- Determination of employee exposure
- Implementation of various methods of exposure control, including:
 - Universal precautions
 - Engineering and work practice controls
 - Personal protective equipment
 - Housekeeping
 - Hepatitis B vaccination
 - Post-exposure evaluation and follow-up
 - Communication of hazards to employees and training
 - Recordkeeping
 - Procedures for evaluating circumstances surrounding exposure incidents.

Implementation methods for these elements of the standard are discussed in the subsequent pages of this ECP.

PROGRAM ADMINISTRATION

- The Safety and Emergency Services Office is responsible for implementing this ECP. Holly Bockow is the primary Safety staff to maintain, review, and update the ECP at least annually, and whenever necessary to include new or modified tasks and procedures. Contact location/phone number: Holly Bockow, 1200 Senate Street, Wade Hampton Bldg., Suite B-02, Columbia SC 29201; 803-737-2311 (w), 803-513-5354 (cell)
- Those employees who are determined to have occupational exposure to blood or other potentially infectious materials (OPIM) must comply with the procedures and work practices outlined in this ECP.
- Holly Bockow or the appropriate Team Leader will provide and maintain all necessary personal protective equipment (PPE), engineering controls (e.g., sharps containers), labels, and red bags as required by the standard. Holly Bockow or the Team Leader, will ensure that adequate supplies of the aforementioned equipment are available in the appropriate sizes.
- Holly Bockow, Safety Team or the appropriate Team Leader will be responsible for ensuring that all medical actions required by the standard are performed and that appropriate employee health and OSHA records are maintained. Contact location/phone number: Compendium: (877) 709-2667
- Holly Bockow, Safety Team and the appropriate Team Leader will be responsible for training, documentation of training, and making the written ECP available to employees, OSHA, and NIOSH representatives.

EMPLOYEE EXPOSURE DETERMINATION

The following is a list of all job classifications at our establishment in which all employees have occupational exposure:

- Mail Delivery:** Interagency Mail Service - Laurel Street Warehouse Columbia, SC
 - *Delivery of DHEC samples*
- Custodian- Special Crew:** Facilities Management Custodial Team - 921 Main Street Columbia, SC
 - *Possible blood or body fluid clean up in restrooms or Department of Administration facilities*
- Safety Officers:** Department of Administration Safety and Emergency Services Office – 1200 Senate St., Ste. B-02, Columbia SC
 - *Possible blood or body fluid clean up in Department of Administration Facilities*

The following is a list of job classifications in which some employees at our establishment have occupational exposure. Included is a list of tasks and procedures, or groups of closely related tasks and procedures, in which occupational exposure may occur for these individuals:

- Mail Delivery: Interagency Mail Service - Laurel Street Warehouse Columbia, SC**
 - *Delivery of DHEC Samples*

Custodian- Special Crew: Facilities Management Custodial Team - 921 Main Street Columbia, SC

- *Possible blood or body fluid clean up in restrooms or State facilities*

Safety Officers of the Department of Administration Safety and Emergency Services Office, 1200 Senate St., Ste. B-02, Columbia SC

- *Possible blood or body fluid clean up in SC Department of Administration Facilities*

NOTE: Part-time, temporary, contract and per diem employees are covered by the bloodborne pathogens standard and they will be trained from the first day of hire by the contractor by using a video tape prepared by the SC Department of Administration Safety Office.

METHODS OF IMPLEMENTATION AND CONTROL

Universal Precautions

All employees will utilize universal precautions.

Exposure Control Plan

Employees covered by the bloodborne pathogens standard receive an explanation of this ECP during their initial training session. It will also be reviewed in their annual refresher training. All employees can review this plan at any time during their work shifts by contacting Holly Bockow, Safety Officer 803-737-2311. If requested, we will provide an employee with a copy of the ECP free of charge and within 15 days of the request. Holly Bockow is responsible for reviewing and updating the ECP annually or more frequently if necessary to reflect any new or modified tasks and procedures that affect occupational exposure and to reflect new or revised employee positions with occupational exposure.

Engineering Controls and Work Practices

Engineering controls and work practice controls will be used to prevent or minimize exposure to bloodborne pathogens. The specific engineering controls and work practice controls used are listed below:

- Personal Protective equipment provided in First Aid Kits

Although sharps disposal containers are not used in any area of the SC Department of Administration, if at any time we require sharps disposal containers, they will be inspected and maintained or replaced by Holly Bockow whenever necessary to prevent overfilling. This facility identifies the need for changes in engineering controls and work practices through a thorough Review of OSHA records, employee interviews, committee activities, etc. and the Accident Review Process. We evaluate new procedures and new products regularly by Job Safety Analysis, the review of literature, supplier information

and product consideration. Both front-line workers and management officials are involved in this process in the following manner:

Employees' involvement with the Bloodborne Pathogens program is from the first day of hire with the New Employee Safety Training and through subsequent training on the job.

Holly Bockow and the appropriate Team Leader are responsible for ensuring that these recommendations are implemented.

Personal Protective Equipment (PPE)

PPE is provided at no cost to our employees. Training in the use of the appropriate PPE for specific tasks or procedures involving bloodborne pathogens is provided by Holly Bockow or the appropriate Team Leader. The types of PPE available to employees are as follows:

- Gloves, eye protection, etc. are all provided in our standard First Aid Kit which is required to be on site whenever employees are working.

Bloodborne PPE is located with each Team and may be obtained through any Team Leader. Employees will obtain PPE through their direct Supervisor or Team Leader and those individuals are responsible for ensuring that PPE is available.

All employees using PPE must observe the following precautions:

- Wash hands immediately or as soon as feasible after removing gloves or other PPE.
- Remove PPE after it becomes contaminated and before leaving the work area.
- Used PPE may be disposed of in the Red Biohazard Bags which are available at all times in the First Aid Kit. These bags will be disposed of by the Safety Staff.

Employees will:

- Wear appropriate gloves when it is reasonably anticipated that there may be hand contact with blood or OPIM, and when handling or touching contaminated items or surfaces; replace gloves if torn, punctured or contaminated, or if their ability to function as a barrier is compromised.
- Utility gloves may be decontaminated for reuse if their integrity is not compromised; discard utility gloves if they show signs of cracking, peeling, tearing, puncturing, or deterioration.
- Never wash or decontaminate disposable gloves for reuse.
- Wear appropriate face and eye protection when splashes, sprays, spatters, or droplets of blood or OPIM pose a hazard to the eye, nose, or mouth.
- Remove immediately or as soon as feasible any garment contaminated by blood or OPIM, in such a way as to avoid contact with the outer surface. The procedure for handling used PPE is as follows: Used PPE should be thrown away in a Red Biohazard Bag.

Housekeeping

Regulated waste is placed in red biohazard bags (containers) which are closable, constructed to contain all contents and prevent leakage, appropriately labeled or color-coded (see the following section - "Labels"), and closed prior to removal to prevent spillage or protrusion of contents during handling.

The procedure for handling sharps disposal containers is:

Sharps are not reasonably expected in the SC Department of Administration workplace and therefore it is anticipated that the Safety Officers will dispose of any sharps or other unusual materials found in the workplace. Employees are trained to contact their Supervisor or Team Leader or Holly Bockow in case of any emergency.

The procedure for handling other regulated waste is: Contact the Safety Office if any regulated waste is present in the workplace. If a red biohazard bag is used at the site of an emergency, it should be sent to the hospital with the victim of the accident. If this is not possible, employees should contact Holly Bockow (737-2311).

Contaminated sharps are discarded immediately or as soon as possible in containers that are closable, puncture-resistant, leak proof on sides and bottoms, and appropriately labeled or color coded. Sharps disposal containers are available at - *(Sharps are not reasonably expected in the SC Department of Administration workplace and therefore it is anticipated that the Safety Officers will dispose of any sharps or other unusual materials found in the workplace. Employees are trained to contact their Supervisor or Team Leader or Holly Bockow in case of any emergency.)*

Bins and pails (e.g., wash or emesis basins) are cleaned and decontaminated as soon as feasible after visible contamination. Broken glassware that may be contaminated is only picked up using mechanical means, such as a brush and dustpan.

Laundry

The following contaminated articles will be laundered by this method:

Any clothing or other materials which inadvertently are contaminated as a result of a blood or body fluids accident will be disposed of in a red biohazard bag by Safety Officer Holly Bockow.

Laundering will be performed by: Contact Holly Bockow (737-2311) for removal of any biohazard items which are the result of an emergency/accident in the workplace.

The following laundering requirements must be met:

- Handle contaminated laundry as little as possible, with minimal agitation

- Place wet contaminated laundry in leak-proof, labeled or color coded containers before transport. Use (specify either red bags or bags marked with the biohazard symbol) for this purpose.
- Wear the following PPE when handling and/or sorting contaminated laundry: Gloves, full face shield, full hospital gown, and boot covers.

Labels

The following labeling methods are used in this facility:

Equipment to be Labeled Label Type (size, color): (Specimens, contaminated laundry, etc.)

Holly Bockow is responsible for ensuring that warning labels are affixed or red bags are used as required if regulated waste or contaminated equipment is brought into DOA facilities. Employees are to notify Holly Bockow if they discover regulated waste containers, refrigerators containing blood or OPIM, contaminated equipment, etc., without proper labels.

HEPATITIS B VACCINATION

Holly Bockow will provide training to employees on hepatitis B vaccinations, addressing safety, benefits, efficacy, methods of administration, and availability. The hepatitis B vaccination series is available at no cost after initial employee training and within 10 days of initial assignment to all employees identified in the exposure determination section of this plan. Vaccination is encouraged unless:

- 1) Documentation exists that the employee has previously received the series;
- 2) Antibody testing reveals that the employee is immune; or
- 3) Medical evaluation shows that vaccination is contraindicated.

However, if an employee declines the vaccination, the employee must sign a declination form. Employees who decline may request and obtain the vaccination at a later date at no cost. Documentation of refusal of the vaccination is kept at the Department of Administration Safety and Emergency Services Office. Vaccination will be coordinated by Department of Administration Safety to be provided by a local medical provider. Following the medical evaluation, a copy of the health care professional's written opinion will be obtained and provided to the employee within 15 days of the completion of the evaluation. It will be limited to whether the employee requires the hepatitis vaccine and whether the vaccine was administered.

POST-EXPOSURE EVALUATION AND FOLLOW-UP

Should an exposure incident occur, contact Safety: Holly Bockow, 803-737-2311. An immediately available confidential medical evaluation and follow-up will be conducted from a healthcare provider as coordinated by DOA Safety. Following initial first aid (clean the wound, flush eyes or other mucous membrane, etc.), the following activities will be performed:

- Document the routes of exposure and how the exposure occurred.
- Identify and document the source individual (unless the SC Department of Administration (employer) can establish that identification is infeasible or prohibited by state or local law).
- Obtain consent and make arrangements to have the source individual tested as soon as possible to determine HIV, HCV and HBV infectivity; document that the source individual's test results were conveyed to the employee's health care provider.
- If the source individual is already known to be HIV, HCV and/or HBV positive, new testing need not be performed.
- Assure that the exposed employee is provided with the source individual's test results and with information about applicable disclosure laws and regulations concerning the identity and infectious status of the source individual (e.g., laws protecting confidentiality).
- After obtaining consent, collect exposed employee's blood as soon as feasible after exposure incident, and test blood for HBV and HIV serological status.
- If the employee does not give consent for HIV serological testing during collection of blood for baseline testing, preserve the baseline blood sample for at least 90 days; if the exposed employee elects to have the baseline sample tested during this waiting period, perform testing as soon as feasible.

ADMINISTRATION OF POST-EXPOSURE EVALUATION AND FOLLOW-UP

Holly Bockow ensures that the health care professional(s) responsible for employee's hepatitis B vaccination and post-exposure evaluation and follow-up are given a copy of OSHA's bloodborne pathogens standard. Holly Bockow ensures that the health care professional evaluating an employee after an exposure incident receives the following:

- a description of the employee's job duties relevant to the exposure incident
 - route(s) of exposure
 - circumstances of exposure
 - if possible, results of the source individual's blood test
 - relevant employee medical records, including vaccination status
- Holly Bockow provides the employee with a copy of the evaluating health care professional's written opinion within 15 days after completion of the evaluation.

PROCEDURES FOR EVALUATING THE CIRCUMSTANCES SURROUNDING AN EXPOSURE INCIDENT

Holly Bockow will review the circumstances of all exposure incidents to determine:

- Engineering controls in use at the time
- Work practices followed
- A description of the device being used (including type and brand)
- Protective equipment or clothing that was used at the time of the exposure incident (gloves, eye shields, etc.)
- Location of the incident (O.R., E.R., patient room, etc.)
- Procedure being performed when the incident occurred

- Employee's training

Holly Bockow will record all percutaneous injuries from contaminated sharps in a Sharps Injury Log.

If revisions to this ECP are necessary Holly Bockow will ensure that appropriate changes are made. (Changes may include an evaluation of safer devices, adding employees to the exposure determination list, etc.)

EMPLOYEE TRAINING

All employees who have occupational exposure to bloodborne pathogens receive initial and annual training conducted by Holly Bockow. Ms. Bockow has been trained by the American Red Cross as a Bloodborne Pathogens First Aid Instructor, a Community First Aid Instructor and as an American Heart Association First Aid / CPR / AED Instructor. All employees who have occupational exposure to bloodborne pathogens receive training on the epidemiology, symptoms, and transmission of bloodborne pathogen diseases. In addition, the training program covers, at a minimum, the following elements:

- A copy and explanation of the OSHA bloodborne pathogen standard
- An explanation of our ECP and how to obtain a copy
- An explanation of methods to recognize tasks and other activities that may involve exposure to blood and OPIM, including what constitutes an exposure incident
- An explanation of the use and limitations of engineering controls, work practices, and PPE
- An explanation of the types, uses, location, removal, handling, decontamination, and disposal of PPE
- An explanation of the basis for PPE selection
- Information on the hepatitis B vaccine, including information on its efficacy, safety, method of administration, the benefits of being vaccinated, and that the vaccine will be offered free of charge
- Information on the appropriate actions to take and persons to contact in an emergency involving blood or OPIM
- An explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that will be made available
- Information on the post-exposure evaluation and follow-up that the employer is required to provide for the employee following an exposure incident
- An explanation of the signs and labels and/or color coding required by the standard and used at this facility
- An opportunity for interactive questions and answers with the person conducting the training session. Training materials for this facility are available at the Department of Administration Safety Office

RECORDKEEPING

Training Records

Training records are completed for each employee upon completion of training. These documents will be kept for at least three years at the SC DOA Safety Office .

The training records include:

- The dates of the training sessions
- The contents or a summary of the training sessions
- The names and qualifications of persons conducting the training
- The names and job titles of all persons attending the training sessions

Employee training records are provided upon request to the employee or the employee's authorized representative within 15 working days. Such requests should be addressed to Holly Bockow of the DOA Safety Office.

Medical Records

Medical records are maintained for each employee with occupational exposure in accordance with 29 *CFR* 1910.1020, "Access to Employee Exposure and Medical Records." The DOA Safety Office is responsible for maintenance of the required medical records. These confidential records are kept for at least the duration of employment plus 30 years. Employee medical records are provided upon request of the employee or to anyone having written consent of the employee within 15 working days. Such requests should be sent to Holly Bockow of the DOA Safety Office.

OSHA Recordkeeping

An exposure incident is evaluated to determine if the case meets OSHA's Recordkeeping Requirements (29 *CFR* 1904). This determination and the recording activities is done by Holly Bockow of the DOA Safety Office.

Sharps Injury Log

In addition to the 1904 Recordkeeping Requirements, all percutaneous injuries from contaminated sharps are also recorded in a Sharps Injury Log. All incidences must include at least:

- Date of the injury
- Type and brand of the device involved (syringe, suture needle)
- Department or work area where the incident occurred
- Explanation of how the incident occurred.

This log is reviewed as part of the annual program evaluation and maintained for at least five years following the end of the calendar year covered. If a copy is requested by anyone, it must have any personal identifiers removed from the report.

APPENDIX A
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.

Signed: (Employee Name) _____ Date: _____

Employee Training and Information

The DOA Safety Office is responsible for the Hazard Communication Program and will ensure that all program elements are carried out. Everyone who works with or is potentially exposed to hazardous chemicals will receive initial training on the hazard communication standard and this plan before starting work. Each new employee will attend a health and safety orientation that includes the following information and training:

- An overview of the OSHA hazard communication standard
 - The hazardous chemicals present at his/her work area
 - The physical and health risks of the hazardous chemicals
 - Symptoms of overexposure
 - How to determine the presence or release of hazardous chemicals in the work area
 - How to reduce or prevent exposure to hazardous chemicals through use of control procedures, work practices and personal protective equipment
 - Steps the company has taken to reduce or prevent exposure to hazardous chemicals
 - Procedures to follow if employees are overexposed to hazardous chemicals
 - How to read labels and material safety data sheets (MSDS) to obtain hazard information
 - Location of the MSDS file and written Hazard Communication Program
- Prior to introducing a new chemical hazard into any section of this company, each employee in that section will be given information and training as outlined above for the new chemical hazard.

The training format will be as follows:

Hazardous Non-routine Tasks

Periodically, employees are required to perform non-routine tasks that are hazardous. Examples of non-routine tasks are: confined space entry, tank cleaning, and painting reactor vessels. Prior to starting work on such projects, each affected employee will be given information by Holly Bockow about the hazardous chemicals he or she may encounter during such activity. This information will include specific chemical hazards, protective and safety measures the employee should use, and steps the company is taking to reduce the hazards, including ventilation, respirators, the presence of another employee (buddy systems), and emergency procedures.

Examples of non-routine tasks performed by employees of this agency are: **None**

Informing Other Employers/Contractors

It is the responsibility of the Safety Office or the appropriate Team Leader to provide other employers and contractors with information about hazardous chemicals that their employees may be exposed to on a job site and suggested precautions for employees. It is the responsibility of the Team Leader responsible for the project to obtain information

about hazardous chemicals used by other employers to which employees of this company may be exposed.

In addition to providing a copy of an SDS to other employers, other employers will be informed of necessary precautionary measures to protect employees exposed to operations performed by this company. Also, other employers will be informed of the hazard labels used by the company. If symbolic or numerical labeling systems are used, the other employees will be provided with information to understand the labels used for hazardous chemicals for which their employees may have exposure.

List of Hazardous Chemicals

A list of all known hazardous chemicals used by our employees is available at Sitehawk.com. This list includes the name of the chemical and the manufacturer. Further information on each chemical may be obtained from the SDSs, located in the web site at Sitehawk.com. When new chemicals are received, this list is updated (including date the chemicals were introduced) within 30 days. The hazardous chemical inventory is compiled and maintained by Holly Bockow.

APPENDIX B

EXPOSURE INCIDENT INVESTIGATION REPORT

Employee's Name: _____ Organization: _____

Date of Incident: _____ Time of Accident: _____

Location of Accident: _____

Potentially Infectious Materials Involved:

Type: _____ Source: _____

Circumstances (Work being performed, etc.): _____

How incident was caused (accident, equipment malfunction, etc.): _____

Personal protective equipment used: _____

Action taken (decontamination, clean – up, reporting, etc.):

Was exposure avoidable? _____

If not, recommendations for avoiding repetition:

(Form is to be completed by the employee's immediate supervisor after an exposure incident. Upon completion, the form should be forwarded to the Department of Administration Safety and Emergency Services Office at 1200 Senate Street, Wade Hampton Bldg., Suite B-02, Columbia, SC 29201.)

APPENDIX C

POST EXPOSURE EVALUATION AND FOLLOW – UP CHECKLIST
SC Department of Administration, Safety and Emergency Services Office

The following steps must be taken, and information transmitted in case of an employee’s exposure to Bloodborne Pathogens:

Exposure time: _____ Date: _____
Requirement _____ Time / Completion Date

Contacted Holly Bockow, 803-737-2311, Safety (Emergency number 803-513-5354 or 803-513-5352)

Appointment arranged for employee with healthcare professional _____

(Professional’s Name: _____)

The following documentation must be forwarded to the healthcare professional:

- _____ Copy of Bloodborne Pathogens Standard (29 CFR 1910.1030)
- _____ Description of exposed employee’s duties.
- _____ Description of exposure incident, including routes of exposure.
- _____ Employee’s medical records.

Exposed employee’s blood collected and tested. _____

HBV Vaccine offered or declined (within 24 hours) _____

Source individual identified. YES / NO

(Source individual) _____

Source individual requested to voluntarily give blood sample. YES / NO

_____ Consent cannot be obtained.

_____ Result of source individual’s blood testing.

Source individual’s blood tested and results given to exposed employee. YES / NO

Employee furnished with investigation report and healthcare professional’s written opinion regarding exposure incident within 15 days. YES / NO

(Form to be completed by the employee’s immediate supervisor. Upon completion, the form should be forwarded to the DOA Safety and Emergency Services Office at 1200 Senate Street, Wade Hampton Bldg., Suite B-02, Columbia, SC 29201)

APPENDIX D

FIRST AID / CPR PROGRAM

(Ref.: OSHA Std. CFR 1910.151)

I. The South Carolina Department of Administration has an on-going First Aid / CPR / AED Program to aid employees who are injured or become ill while on-the-job. The DOA Safety Office uses the American Heart Association's Heartsaver First Aid Course for First Aid/CPR/AED instruction. (OSHA accepts both the American Red Cross Program and the American Heart Association curriculum.)

II. Each work unit is required to have as a minimum the following trained first aid personnel available:

Work Unit

FM State House Maintenance Team	All team members
FM Environmental/ Energy Team	All team members, except Supervisor
FM Building Maintenance Teams	All Plumbers, Plumber's Helpers and the Supervisor in charge of these positions. Individuals who do Electrical or Mechanical work

III. For employees to be certified in CPR / First Aid / AED they must meet the knowledge and performance requirements as described by the AHA Heartsaver First Aid course with CPR / AED. AHA requires re-certification every two (2) years.

Employees will be registered automatically and taught by DOA Safety.

APPENDIX E

First Aid Kits (Ref.: OSHA Std. CFR 1910.151)

1. First Aid kits are required to be on job sites when employees are present.
2. First Aid kits must be easily accessible.
3. First Aid kits shall be checked regularly for expended items.
4. SC Department of Administration first aid kits shall contain the items listed below.

Quantity	Item	Stock Number
1-	CPR Microshield, one-way valve mask	GO48052
2-	4" compress bandages (1 per package)	GO48005
2-	2" compress bandages (4 per package)	GO48004
1-	Adhesive compress (16- 1" Band – Aids)	GO48050
2-	Adhesive compress (5 fingertip and 4 knuckle bandages per package)	GO48050
1-	Povidone iodine swabs (10 per package)	GO48039
1-	Sterile gelled water for burns (1 per package)	GO48054
1-	Ammonia inhalants (10 per package)	GO48003
2-	40" Triangular bandages (1 per package)	GO48017
1-	4" x 6 yard gauze bandage (1 per package)	GO48011
1-	Eye dressing packet (4 per package)	GO48006
1-	Soap, antiseptic, towelette (10 per package)	GO48035
1-	Insect sting swab (10 pr package)	GO48020
1-	Personal Protective Equipment (PPE) kit (2 pair gloves – sz large - & sz ex large, 1 gown, 1 face mask, 2 shoe covers, 2 antiseptic wipes, biohazard bag & blood clean up wipe)	GO48056
	Complete First Aid Kit	GO47001