## **Training Certification**University of Delaware Bloodborne Pathogen Program

	This is to certify that I, (please print),	have	received
training	in, and understand, all the topics below:		
1.	An accessible copy of the standard and an explanation of its content.		
2.	Exposure control plan and where copies are available.		
3.	General epidemiology and symptoms of bloodborne diseases.		
4.	Modes of transmission of bloodborne diseases.		
5.	Appropriate methods for recognizing tasks that involve exposure.		
6.	Explanation of labels and color-coding.		
7.	Use and limitations of methods to minimize or prevent exposure.		
8.	Basis for selection of personal protective equipment.		
9.	Types, use, location, removal, handling, and disposal of personal protective equipment	nt.	
10.	Guidelines for disposal of contaminated materials.		
11.	Hepatitis B vaccine: efficacy, safety, methods of administration, benefits.		
12.	Procedure to follow concerning clean-up of a body fluid spill.		
13.	Procedure to follow if exposure occurs- method of reporting and medical follow-up.		
Employ	ree signature Date		
Departn	ment Job title		_
Instructe	or's name		

Instructor's signature \_\_\_\_\_

Send to: EHS, 132 General Service Building