Employee Exposure Determination Questionnaire

This questionnaire is required by OSHA and is used to assist Nash Rocky Mount Schools in determining exposure potential to human blood, body fluids, or other potentially infectious materials. The results of this questionnaire will be used to plan and conduct additional training and set up precautionary measures to prevent exposure to blood, body fluids, or other potentially infectious materials. Rev. 8/13

Name __________________________________________ SS# _____ _____ _____ Date ____________________

School _________________________________________ Job Title ______________________________________

Directions: Please answer the following questions.

Part I – Job Duties

Does your job require you to do any of the following as a specific condition of employment on a regular, almost daily basis?

(A) Work directly with human blood, blood products, body fluids, or tissue products □ Yes □ No

(B) Give assistance to accident or injury victims where you work on a regular basis □ Yes □ No

(C) Clean up blood, body fluids with visible blood, or other potentially infectious materials, assist individuals prone to frequent bleeding, or perform invasive medical procedures □ Yes □ No

(D) Your everyday job tasks do not cause you to work with or be in direct contact with blood or body fluids, but you may respond to unplanned events, such as helping an injured student or co-worker □ Yes □ No

Part II – Determining Your Exposure Classification

If you answered yes to (A), (B), and/or (C), you are classified by OSHA as having occupational exposure to blood and other potentially infectious materials. You will receive additional training regarding employee protection measures.

If you answered yes to (D), you are not classified as by OSHA for occupational exposure to blood and other potentially infectious materials, although you may have unplanned exposure.

Part III – Listing tasks that may put you at risk for occupational exposure

If you answered yes to (A), (B), and/or (C), please list tasks you do as a requirement of your job that may cause exposure to blood, body fluids, or other potentially infectious materials. Check all types of exposure that apply. If you answered yes to (D), you do not have to complete this section.

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<thead>
<tr>
<th>List tasks</th>
<th>Check type of exposure</th>
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<tbody>
<tr>
<td></td>
<td>□ Blood □ Body Fluid □ Contaminated Material</td>
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