MEDICAL SPA SAFETY POLICY AND PROCEDURE MANUAL

LIONHEARTHEALTH

CONTENTS

HEALTH LONGEVITY WELLNESS MEDSPA **FRANCHISE INFORMATION**

LIONHEARTHEALTH

“Aging is inevitable, poor health does not have to be.”

Analysts estimate that the market for delaying human death could be worth $610 billion by 2025.

“Aging gracefully they say. To heck with aging gracefully! I am going to fight aging with everything I have for as long as I can using every tool and help available I can find to help me. Do people take cancer gracefully? Heart failure gracefully? NO they fight it will all that technology has to offer and with all their might and strength. I am going to do that with aging myself and I hope you do as well.” Dr. Amy Killen, Medical Advisor to Lionheart Health, and world renowned speaker on longevity and wellness.

Do you want to help people feel better, look better, be less depressed, work harder, be less addictive, have better memory and cognitive function, suppress risk of cancers, have better sexual health and enjoy a high quality of life for a longer? Lionheart Health, Inc. is here to help you do that! This is something you can be excited to wake up to do every day! More people than ever are engaging actively with technologies, tools and human help to extend their lives in a healthy way. You can be the “go to” destination where people in your region seeking not only a more youthful appearance but also higher energy, vigor and better long term health, including revived sexual health, go to in order to get the advanced cutting edge treatments they highly desire and need.

“It’s clear that the longevity market is on the up and set for explosive growth as the baby boomers age and like no other generation before are taking proactive action in improving their healthspan.”

– Founder Lionheart Health, Inc., Howard J. Leonhardt

Hair and Skin

Lionheart Health offers patented technologies, particularly in bioelectric signaling controlled regenerative and anti-aging protein expressions, that no other MedSpa is able to offer and has a steady stream of new products including one of a kind new inventions coming.

It is our hope that nearly every quarter you will have a new proprietary anti-aging protein expression bioelectric signaling sequence to download as an upgrade to your suite of devices, so you always stay above and ahead of what other MedSpas in your area are able to offer.

Lionheart Health Longevity Wellness MedSpa's goal is to help people take on fighting aging with all that they can with what the best available cutting edge technologies can do. To manage chronic pain especially joint inflammation, accelerate the healing of injuries, restore and enhance athleticism, improve sexual health, restore youthful appearance, energy and vigor, recover from addiction, improvement memory and cognitive function, improve bladder function, improve gut microbiota health, and improve the longevity of health.

Lionheart Health is longevity healthspan focused company with one of a kind patented technologies for rejuvenation not available from any other source.

Over 5000 published studies validate the core technologies of Lionheart Health in establishing a clear link between accelerated aging, and thus all aging related ailments, with protein levels such as klotho, sirtuins, sestrins, follistatin, SDF1, PDGF, COL17A1 and tropoelastin.

Leonhardt Ventures LLC the founding member of Lionheart Health, Inc. has been working on organ regeneration and wellness since the 1980s. No other group in the world has more experience than our core team in applying the convergence of bioelectrics and biologics in fighting aging and in organ regeneration. We collaborated with Dr. Robert O. Becker, author of the landmark book The Body Electric, in 1987 in bioelectric wound healing and limb salvage studies. We made our first muscle cells injections to heal a damaged heart in 1988 working with our long standing research collaborator Dr. Race Kao which was published in The Physiologist in 1989. In 1999 we published in the Journal Circulation of the American Heart Association our first peer reviewed paper on bioelectric based regeneration and healing. In 2001 our core team led a team in The Netherlands that completed the first ever non-surgical muscle stem cell repair of a damaged human heart. Over 600,000 patients have been treated with Leonhardt patented medical device inventions since the 1980s.

Lionheart Health Longevity Wellness MedSpas has proprietary and unique offering in these categories.

- Prevention – prevent damage that causes aging
- Diagnosis – early identification of aging damage
- Treatment – treatment of damage that has occurred
- Rejuvenation – reversal of damage that has occurred
- Beauty – reversal of aging damage to appearance

With specific propriety products in these categories…

1. Skin regeneration.
2. Hair regeneration and hair removal.
3. Sexual health treatments.
4. Body toning and sculpting.
5. Bioelectric breast augmentation.
6. Bioelectric blood pressure management.
7. Bladder function improvement.
8. Gut microbiota treatment.
9. Knee and other arthritis joint treatments.
10. Better breathing and sleep apnea treatments.
11. Testosterone and hormone management.
12. DNA and blood test based customized nutrition.
13. Cardiometabolic management.
14. Augmented exercise with bioelectric stimulation.
15. Multi-modality aging reversal technologies.
16. Vision and hearing recovery.
17. Varicose vein treatments.
18. Wound healing. Diabetic neuropathy treatment.
19. Inflammation management include bowels.
20. Better smiles.
21. Brain health.
22. Addiction treatment.

Franchise Packages and Add Ons

1. Basic Lionheart Health Longevity and Wellness Franchise Package = Skin, Hair, Body Toning.

Add ons…

1. Sexual health.
2. Sports medicine rehabilitation.
3. Breast augmentation.
4. Biologics suite for skin, hair, sexual health, breasts and more.
5. Blood pressure management.
6. Bladder health.
7. Gut microbiota health.
8. Better breathing.
9. Vision and hearing recovery.
10. Depression treatment.
11. Memory and cognitive function improvement.
12. Addiction treatment.
13. Customized nutrition.
14. Exercise augmentation program.

Why You May Want to Start a Lionheart Health Longevity Wellness MedSpa Franchise

Lionheart Health Longevity Wellness MedSpa is a brand for individuals looking to better other people's lives. If you feel the call to serve others, this company offers you the opportunity to help them improve their productivity, renew their youthful vigor, including cognitive function and memory and ease their body pains.

Lionheart Health has patented one of a kind advanced technologies not available from any other source in bioelectric signaling control of key age reversal and organ regeneration promoting protein expressions such as SDF1 and PDGF for stem cell homing, klotho, follistatin, sirtuins, tropoelastin, COL17A1 and more. These protein expressions, backed by more and more accumulating data, are intended to contribute to rejuvenate the human body into an elevated state of wellness.

Having created a new market, bioelectric driven wellness (backed by hundreds of issued U.S. patent claims), that has little competition, Lionheart Health is well-positioned to help YOU as a franchise owner to experience phenomenal success.

Business Model with Some Proven Success Already

Lionheart Health Longevity Wellness Medpas provide franchisees with a proven business model (validated by great previous success in Brazil and in clinical studies) and refined operations that allow you to offer your customers uniquely advanced personal health care. Our proprietary equipment may have no match because we have refined electronics equipped with patented bioelectric signaling sequences and more to help you give your clients ultimate health wellness.

Our OEM private label manufacturing partner in Brazil for MedSpa and Physical Therapy Rehabilitation equipment, founded in 1999, had over $125 million in sales last year primarily just in Brazil. They employ more than 400 people and just acquired land next to the current manufacturing facility and are expanding their manufacturing capacity dramatically to keep up with growing demand. Their R&D innovation team and our R&D innovation team work hand in hand in developing a steady stream of new products.

Our U.S. manufacturing partner for electrical stimulator in Anaheim, California (just a few minutes from our headquarters) has been in the medical device manufacturing business since 1957 and has dozens of FDA market clearances for improving blood circulation, muscle treatments, joint treatments, pain and inflammation management and prevention of blood clotting. They have delivered over over 100,000 devices to customers over the years with an excellent quality record without a single serious adverse event since 1957.

Our OEM manufacturing partner for bioelectric suits and customized health and exercise management software in Europe has provided more than 100,000 treatments to patients in 77 countries including 500 professional exercise trainers.

Growth Will Come from Happy Clients Referring New Customers to You

We believe your business will grow through local referrals as your clients share with their friends, co-workers, family and neighbors how much better they feel after getting the Lionheart Health suite of rejuvenation treatments. Those same friends, co-workers, family and neighbors will see in your clients a more youthful, glowing like, more healthy and toned physical appearance as well. This will cause many of them to come to your franchise location for treatments themselves. Some of your clients will go to social media to post their incredible results they received from your Lionheart Health Longevity Wellness MedSpa location and this will drive many new clients to your door! Your business will go by referrals that cost you less than other marketing methods!

What Might Make Lionheart Health Longevity Wellness MedSpa a Good Choice?

When you sign a franchisee agreement with Lionheart Health Inc., it lasts for one decade and is renewable for reasonable sum. The brand has extensive partnerships with third-party lenders and suppliers that can help you finance startup costs, equipment, inventory, and payroll. We provide access to a full suite of marketing support tools available such as SEO, online marketing, social media, and website development. You will have help from the company and its network of service providers to assist your franchise location in many forms. We are linked to a number of MedSpa focused marketing assistance firms that can help invigorate your local marketing campaign to get more clients to your door.

We also offer you the franchisee extensive training opportunities. We make available dozens of hours of on-the-job training, Zoom video conference training and also session opportunities to have more than 30 hours of classroom training. This training may be at our beautiful modern training facility in Irvine California https://innovation.uci.edu/venues/ or at your location or a nearby location designated for training purposes. We offer help with site selection support, online support, training videos, training workshops, special exhibit booth training sessions, franchisee communication platform, and software tools to help with all aspects of business growth and development. We will hold workshops on a regular basis at many regional and national conferences where you will be able to attend for free or at discounted prices.

Lionheart Health is supported by the Leonhardt Ventures LLC Scientific Advisory Board https://calxstars.com/scientific-advisory-board/comprised of some of the most influential leaders in organ regeneration and longevity healthspan research.

Leonhardt Ventures LLC www.leonhardtventures.com the parent company of Lionheart Health, Inc. sponsors on going research in collaboration with its innovation accelerator subsidiary Leonhardt's Launchpads located at University Lab Partners https://www.universitylabpartners.org/uci-research-park in Irvine, California in a fully staffed laboratory with access to over $4 million in research and development equipment. Every day this R&D team is working on new innovations including new bioelectric controlled protein expressions to help products for organ rejuvenation perform better including designing and testing of new improved organ interfaces.

You can count on a steady stream of new innovations coming your way as a Lionheart Health Longevity Wellness MedpSpa franchisee.

How To Open a Lionheart Health Longevity Wellness MedSpa Franchise

If you are interested in starting a Lionheart Health Longevity Wellness MedSpa franchise, you should make sure you're financially ready for an initial investment made up of a franchise fee and other startup costs. You should also prepare yourself for the existence of ongoing costs that will include advertising, royalty, and renewal fees. Franchisees need to meet the company's set net worth and liquid capital requirements (see below).

We highly recommend for you to engage a financial advisor and an attorney to ensure that you are financially sound enough to own and operate a Lionheart Health Longevity Wellness MedSpa franchise and that you clearly understand all terms of the franchise agreement you are signing.

Once your application and request to begin a franchise are reviewed and approved you will be notified and after signatures on applicable agreements are in place and initial startup fees are paid >>> You will then be a proud franchisee of Lionheart Health Longevity Wellness MedSpa on your way to making a mark on the world of health care!

All of the processing above can be completed within about 3 weeks with a good complete application filing.

Company Overview

About Lionheart Health, Inc. and Lionheart Health Longevity Wellness MedSpa

Industry
Personal-Care Businesses

Related Categories
Miscellaneous Personal-Care Businesses, Health & Wellness

Founded
2021

Parent company Leonhardt Ventures LLC founded in 1982 (HJ Leonhardt & Co.) and became in LLC in 2005. Leonhardt Ventures LLC has brought to market a number of medical device inventions with over $1 billion in annual sales today. Over 600,000 patients have been treated with Leonhardt inventions – TALENT stent graft, StentValve, PolyCath and more.

Leadership
Howard J. Leonhardt, Executive Chairman & CEO
Matt Fendrich, VP of Sales Development

Franchising Overview
Franchising Since
NEW for 2022
Get in on the ground floor!

Where seeking
This company is seeking new franchisees throughout the US.
This company is seeking new franchisees worldwide.

Franchisor Information
Corporate Address
1 Kent Court
Mission Viejo, CA 92694

Information for Franchisees
Here's what you need to know if you're interested in opening a Lionheart Health Longevity Wellness MedSpa franchise.

Financial Requirements & Ongoing Fees
Here's what you can expect to spend to start the business and what ongoing fees the franchisor charges throughout the life of the business.

Initial Franchise Fee
$125,000 for basic package skin, hair, body toning and sculpting

$15K for each add on package i.e.; sexual health, blood pressure management, breast augmentation etc.

Initial Investment
$650,000 – $1,985,000

Net Worth Requirement
$1,000,000

Cash Requirement
$200,000

Veteran Incentives
20% off franchise fee

Royalty Fee
7%
Ad Royalty Fee
2%

Term of Agreement
10 years

Is franchise term renewable?
Yes- $150,000 fee for each 10 year franchise = just $15,000 annually.

Financing Options
Some franchisors offer in-house financing, while others have relationships with third-party financing sources to which they refer qualified franchisees.

Third Party Financing
Lionheart Health, Inc. has relationships with third-party sources which offer financing to cover the following: franchise fee, startup costs, equipment, inventory, accounts receivable, payroll

Training & Support Offered
Franchisors offer initial training programs and a variety of ongoing support options to help franchisees run their businesses.

On-The-Job at Your Clinic Training from a Lionheart Health Visiting Specialist
30-50 hours

Classroom and Conference WorkshopsTraining
40 hours

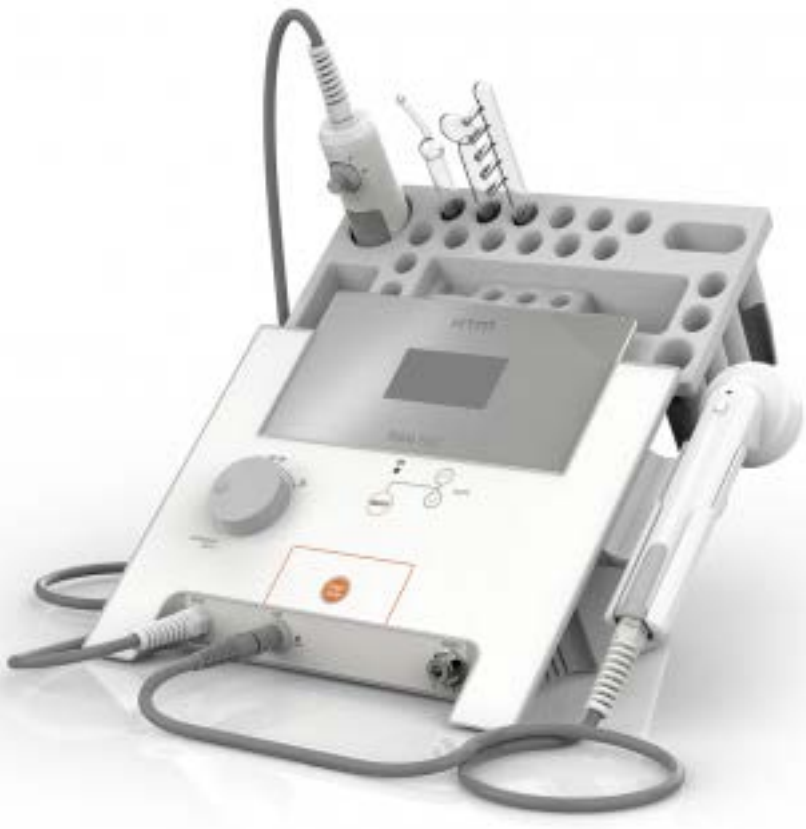
Ongoing Support
- Newsletters
- Meetings & Conventions
- Grand Opening
- Online Support
- Security & Safety Procedures
- Lease Negotiation
- Field Operations
- Site Selection
- Proprietary Software
- Franchisee Intranet Platform
- Marketing Support
- Co-op Advertising
- Ad Templates
- National Media
- Regional Advertising
- Social Media
- SEO

- Website Development
- Email Marketing
- Loyalty Program/App

Operations
Additional details about running this franchise.
Is absentee ownership allowed?
Yes with qualified personnel in place verified.

Can this franchise be run part time?
Yes

Are exclusive territories available?
Yes for an extra $50K franchise



POLICY & PROCEDURE ANNUAL REVIEW

LIONHEARTHEALTH

Policy & Procedure Annual Review

I have reviewed the policies and procedures in this manual. They reflect the current safety standards.

_____ Date_____

Medical Director/Collaborator

_____ Date_____

Allied Healthcare Professional

I have reviewed the policies and procedures in this manual. They reflect the current safety standards.

_____ Date_____

Medical Director/Collaborator

_____ Date_____

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_____ Date_____

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_____ Date_____

Allied Healthcare Professional

I have reviewed the policies and procedures in this manual. They reflect the current safety standards.

_____ Date_____

Medical Director/Collaborator

_____ Date_____

Allied Healthcare Professional

Office Safety and Health Policy Statement

The safety and health of our employees is this company's most important businessconsideration. No employee will be required to do a job that they consider unsafe. The company will comply with all applicable OSHA workplace safety and health requirements and maintain occupational safety and health standards that equal or exceed the best practices in the industry.

The company will establish a safety committee, consisting of management and labor representatives, whose responsibility will be identifying hazards and unsafe work practices, removing obstacles to accident prevention, and helping evaluate the company's effort to achieve an accident-and-injury-free workplace.

The company pledges to do the following:

- Strive to achieve the goal of zero accidents and injuries.
- Provide mechanical and physical safeguards wherever they are necessary.
- Conduct routine safety and health inspections to find and eliminate unsafe working conditions, control health hazards, and comply with all applicable OSHA safety and health requirements.
- Train all employees in safe work practices and procedures.
- Provide employees with necessary personal protective equipment and train them to use and care for it properly.
- Enforce company safety and health rules and require employees to follow the rules as a condition of employment.
- Investigate accidents to determine the cause and prevent similar accidents.

Managers, supervisors, and all other employees share responsibility for a safe and healthful workplace.

- Management is accountable for preventing workplace injuries and illnesses. Management will consider all employee suggestions for achieving a safer, healthier workplace. Management also will keep informed about workplace safety- and-health hazards and regularly review the company's safety and health program.
- Supervisors are responsible for supervising and training workers in safe work practices.
- Supervisors must enforce company rules and ensure that employees follow safe practices during their work.
- Employees are expected to participate in safety and health program activities including, immediately reporting hazards, unsafe work practices, and accidents to supervisors or a safety committee representative, wearing required personal protective equipment, and, participating in and supporting safety committee activities.

Owner's Signature:_____Date: _____

Safety Committee

OSHA doesn't require your safety committee to have bylaws. However, bylaws contribute to a committee's stability as a written record of how the committee conducts its business. Bylaws can be as simple or complex as you want to make them. (Fill in the areas below.)

The name of this safety committee is_____
.

The purpose of this safety committee is to bring all employees together to achieve andmaintain a safe, healthful workplace.

The goal of this safety committee is to eliminate workplace injuries and illnesses by involving employees and managers in identifying hazards and suggesting how to prevent them.

The safety committee has four objectives:

1. Involve employees in achieving a safe, healthful workplace.

2. Promptly review all safety-related incidents, injuries, accidents, illnesses, and deaths.

3. Conduct quarterly workplace inspections, identify hazards, and recommend methods for eliminating or controlling the hazards.

4. Annually evaluate the workplace safety and health program and recommend improvements to management.

The safety committee will have_____voting representatives.

___representatives will represent employees and ___will represent management. Employee representatives can volunteer, or their peers can elect them. Management representatives will be selected bymanagement.

Each representative will serve a continuous term of at least one year. Terms will be staggered so that at least one experienced representative always serves on the committee.

The safety committee will have two officers: chair and vice-chair. One officer will representlabor and one officer will represent management.

Chair and vice-chair each will serve a one-year term.

Duties of the chair

- Schedule regular committee meetings.
- Develop written agendas for conducting meeting.
- Conduct the committee meeting.
- Approve committee correspondence and reports.
- Supervise the preparation of meeting minutes.

Duties of the vice-chair

In the absence of the chair, assume the duties of the chair. Perform other duties as directed by the chair.

The election of a new chair or vice-chair will be held during the monthly committee meeting before the month in which the incumbent's term expires. If the chair or vice-chair leaves office before the term expires, an election will be held during the next scheduled safety committee meeting; the elected officer will serve for the remainder of the term.

New representatives will receive training in safety committee functions, hazard identification, and procedures for investigating accidents. OSHA will provide training through its occupational safety and health workshops and online courses.

Monthly schedule. The safety committee will meet_____ except when the committee conducts quarterly workplace safety inspections.

Attendance and alternates. Each representative will attend regularly scheduled safety committee meetings and participate in quarterly workplace inspections and other committeeactivities. Any representative unable to attend a meeting will appoint an alternate and informthe chair before the meeting. An alternate attending a meeting on behalf of a regular representative will be a voting representative for that meeting.

Agenda

The agenda will state the order in which the safety committee conducts its business.

- The agenda also will include the following when applicable:
- A review of new safety and health concerns
- A status report of employee safety and health concerns under review
- A review of all workplace near misses, accidents, illness, or deaths occurring since the last committee meeting.

Minutes will be recorded at each safety committee meeting and be distributed by _____ _____to all company employees.

The committee will submit a copy of the minutes to administrative office; the office will retain the copy for three years. All reports, evaluations, and recommendations of the committee will be included in the minutes. The minutes also will identify representatives who attended monthly meetings and representatives who were absent.

_____voting representatives constitute a quorum. A majority vote of attending representatives is required to approve all safety-committee decisions. Issues not resolved by majority vote will be forwarded to management for resolution.

The safety committee will encourage employees to identify health and safety hazards in the workplace. Concerns raised by employees will be presented to the committee in writing; the committee will review new concerns at the next regularly scheduled monthlymeeting.

The committee will maintain a log of all employee safety concerns, including the datereceived, recommendations to management, and the date the concern was resolved.

The committee will respond to employee concerns in writing and work with management to resolve them. The committee will present written recommendations for resolving concerns to management. Within 60 days of receiving the written recommendations, management will respond in writing to the committee indicating acceptance, rejection, or modification of the recommendations.

The safety committee will review new safety- or health-related incidents at its next regularly scheduled meeting. Safety-related incidents include work-related near misses,injuries, illnesses, and deaths. When necessary, the committee will provide written recommendations to management for eliminating or controlling hazards.

The safety committee will conduct quarterly workplace inspections of all companyfacilities during the following months:_____

The committee will prepare a written report for management that documents the location of all health or safety hazards found during inspection.The report will recommend options for eliminating or controlling the hazards. Within 60 days of receiving the written report, management will respond in writing to thecommittee, indicating acceptance, rejection, or proposed modification of the recommendations.

The safety committee will evaluate workplace safety and health program annually and provide a written evaluation of the program to management. The committee will also evaluate its own activities at least annually and use the evaluation to develop an action plan for the next calendar year.

Annual Review of Safety Committee Activities

Use this form to summarize the centralized safety committee's annual activities at alllocations.

Date of this annual review: _____

Name of person preparing the review: _____

Required Training for Safety Committee Members

All safety committee members must be trained in hazard identification and the principles of accident and incident investigations.

Training Date	Staff Name	Description of Training Received

Safety and Health Inspections Conducted

The safety committee must have procedures for conducting workplace safety and health inspections, including where the inspections are conducted, who conducts the inspections,and how often.

Inspection date:_____ Inspection location: _____

Persons conducting the inspection: _____

Identified hazards:_____

_____

_____

Date management notified of hazards: _____ Initials:_____

Date all identified hazards corrected: _____ Initials:_____

Inspection date:_____ Inspection location: _____

Persons conducting the inspection: _____

Identified hazards:_____

_____

_____

Date management notified of hazards: _____ Initials:_____

Date all identified hazards corrected: _____ Initials:_____

Inspection date:_____ Inspection location: _____

Persons conducting the inspection: _____

Identified hazards:_____

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Persons conducting the inspection: _____

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_____

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_____

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Inspection date:_____ Inspection location: _____

Persons conducting the inspection: _____

Identified hazards:_____

_____

_____

Date management notified of hazards: _____ Initials:_____

Date all identified hazards corrected: _____ Initials:_____

Inspection date:_____ Inspection location: _____

Persons conducting the inspection: _____

Identified hazards:_____

_____

_____

Date management notified of hazards: _____ Initials:_____

Date all identified hazards corrected: _____ Initials:_____

Accident and Incident Evaluations

The safety committee must evaluate all accident and incident investigations and make recommendations to prevent them from happening again.

Accident date:_____ Accident location: _____

Persons conducting the accident: _____

Identified hazards:_____

_____

_____

Recommendations to prevent reoccurrence:_____

_____

_____

Date management notified of hazards: _____ Initials:_____

Date all identified hazards corrected: _____ Initials:_____

Accident date:_____ Accident location: _____

Persons conducting the accident: _____

Identified hazards:_____

_____

_____

Recommendations to prevent reoccurrence:_____

_____

_____

Date management notified of hazards: _____ Initials:_____

Date all identified hazards corrected: _____ Initials:_____

Meetings and Minutes

The safety committee must make safety committee meeting minutes available for allemployees to review.

Minutes of the Safety Committee Meeting

Date:_____ (Must keep for three years)

Attending: _____ _____

_____ _____ _____

_____ _____ _____

Absent:_____ _____

What are the Issues and Hazards?

Include any safety or health issues that are talked about. Include recent accident investigations and hazards involving tools, equipment, the work environment, and workpractices:

_____

_____

_____

_____

Recommendations for correcting hazards:_____

_____

_____

Reasonable deadline for corrections: _____

Person responsible for coordinating with management to ensure correction:

_____

Meetings and Minutes

The safety committee must make safety committee meeting minutes available for allemployees to review.

Minutes of the Safety Committee Meeting

Date:_____ (Must keep for three years)

Attending: _____ _____

_____ _____ _____

_____ _____ _____

Absent:_____ _____

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_____ _____ _____

_____ _____ _____

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_____

_____

_____

_____

Recommendations for correcting hazards:_____

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_____ _____ _____

_____ _____ _____

Absent:_____ _____

What are the Issues and Hazards?

Include any safety or health issues that are talked about. Include recent accident investigations and hazards involving tools, equipment, the work environment, and workpractices:

_____

_____

_____

_____

Recommendations for correcting hazards:_____

_____

_____

Reasonable deadline for corrections: _____

Person responsible for coordinating with management to ensure correction:

_____

WRITTEN HAZARD COMMUNICATION PLAN

LIONHEARTHEALTH

Written Hazard Communication Plan

Management is committed to preventing accidents and ensuring the safety and health of our employees. We will comply with all applicable federal and state health and safety rules and provide a safe, healthful environment for all our employees. This written hazard communication plan is available at the following location for review by all employees:
_____.

A list is attached to this plan that identifies all hazardous chemicals with a potential for employee exposure at this workplace. Detailed information about the physical, health, andother hazards of each chemical is included in a Safety Data Sheet (SDS); the product identifier for each chemical on the list matches and can be easily cross-referenced with theproduct identifier on its label and on its Safety Data Sheet.

All hazardous chemical containers used at this workplace will either have the original manufacturer's label --that includes a product identifier, an appropriate signal word, hazard statement(s), pictogram(s), precautionary statement(s) and the name, address, and telephone number of the chemical manufacturer, importer, or other responsible party -- OR a label with the appropriate label elements just described; OR workplace labeling that includes the product identifier and words, pictures, symbols, or combination that provide atleast general information regarding the hazards of the chemicals.

_____will ensure that all containers are appropriately labeled. No container will be released for use until this information is verified. Workplace labels must be legible and in English.

Keeping Safety Data Sheets (previously known as Material Safety Data Sheets) Safety Data Sheets are readily available to all employees during their work shifts. Employees can review Safety Data Sheets for all hazardous chemicals used at thisworkplace. They are located.
The Safety Data Sheets are updated and managed by_____
.

If a Safety Data Sheet is not immediately available for a hazardous chemical, employees can obtain the required information by contacting_____
.

Before the start of a job or exposure to new hazardous chemicals, employees must attend a hazard communication training that covers the following topics:

- An overview of the requirements in OSHA's hazard communication rules.
- Hazardous chemicals present in their workplace.
- Any operations in their work area where hazardous chemicals are used.
- The location of the written hazard communication plan and where it may be reviewed.
- How to understand and use the information on labels and in Safety Data Sheets.
- Physical and health hazards of the chemicals in their work areas.
- Methods used to detect the presence or release of hazardous chemicals in the work area.
- Steps taken to prevent or reduce exposure to these chemicals.
- How employees can protect themselves from exposure to these hazardous chemicals through use of engineering controls/work practices and personal protective equipment.
- An explanation of any special labeling present in the workplace.
- Emergency procedures to follow if an employee is exposed to these chemicals.

_____is responsible to ensure that employees receive this training. After attending the training, employees will sign a formverifying that they understand the above topics and how the topics are related to our hazard communication plan.

Informing employees who do special tasks

Before employees perform special (non-routine) tasks that may expose them to hazardous chemicals, their supervisors will inform them about the chemicals' hazards. Their supervisors also will inform them about how to control exposure and what to do in an emergency. The employer will evaluate the hazards of these tasks and provide appropriate controls including Personal Protective Equipment all additional training as required.

Examples of special tasks that may expose employees to hazardous chemicals include the following:

_____

_____

Informing employees about hazardous chemicals in pipes

This workplace follows the labeling requirements in OAR 437-002-0378 concerning the labeling of pipes. Before working in areas where hazardous chemicals are transferred through unlabeled pipes or where pipes are insulated with asbestos-containing material, employees will contact_____for the following information:

- The chemicals in the pipes
- The physical or health hazards of the chemicals present

Informing Contractors and Other Employers About Our Hazardous Chemicals

If employees of other employer(s) may be exposed to hazardous chemicals at our workplace (for example, employees of a construction contractor working on-site). It is the responsibility of _____to provide contractors and their employees with the following information:

- The identity of the chemicals, how to review our Safety Data Sheets, and anexplanation of the container and pipe labeling system.

- Safe work practices to prevent exposure. _____ will also obtain a Safety Data Sheet for any hazardous chemical a contractor brings intothe workplace.

Hazard or Safety Concern Report

To the Employee: Complete the section below and return to a Safety Committee representative.

Employee name (optional):_____Date: _____

Describe the hazard or your concern. (Be specific):_____

_____

_____

Safety Committee Follow-up Action Taken:_____

_____

_____

Concern Resolved Date:_____

Accident Description Form

Use this form to document information about an accident or incident. Fill out an investigation report as soon as possible. Note: this form is for use within your company. It is not intended to replace DCBS Form 801: Worker's and Employer's Report of Occupational Injury or Disease.

Employee(s) name(s): _____

Time & date of accident/incident: _____

Job title(s) and department(s): _____

Supervisor or lead person: _____

Witnesses: _____

Brief description of the accident or incident: _____

_____

Body part affected: _____

Did the injured employee(s) see a doctor? ( ) Yes ( ) No

If yes, did you file an employer's portion of a worker's compensation form? ( ) Yes ( ) No

Did the injured employee(s) go home during their work shift? ( ) Yes ( ) No

If yes, list the date and time injured employee(s) left job(s): _____

Supervisor's Comments: _____

What could have been done to prevent this accident/incident? _____

_____

Have the unsafe conditions been corrected? ( ) Yes ( ) No

Employer or Supervisor's signature: _____

Date: _____

Additional comments/notes: _____

Accident Investigation Form

Use this form to help you investigate workplace accidents or incidents. Note: this form is for use within your company. It is not intended to replace DCBS Form 801: Worker's and Employer's Report of Occupational Injury or Disease.

Investigator: _____

Name of accident victim:_____Victim's job title: _____

How long has accident victim been with this company?_____How long on this job? _____

Witnesses: (Attach this information for each additional person injured.)

Name:_____

Name: _____

Name:_____

Name: _____

When did the accident occur? Date:_____Time:_____

Where did the accident occur? _____

What happened? (Describe sequence of events and extent of injury. Attach separate page if necessary.) _____

_____

_____

Has a similar accident ever occurred? ( ) Yes ( ) No If yes, when?_____

List all causes and contributing factors, which might include lack of supervision, inadequate training, poor equipment maintenance, and inadequate policy._____

_____

List each corrective action to be taken. Who will do it and when will it be done?_____

_____

Attach photographs, sketches of the scene, or other relevant information.

Prepared by:_____Date:_____

Training on Hazardous Chemicals Acknowledgement

Use this form to document that an employee has been trained about hazardous chemicals used in the workplace as required by OSHA hazard-communication rules.

I have been informed about the hazardous chemicals that I may be exposed to during my work and I have received training on the following topics:

- An overview of the requirements in OSHA's hazard communication rules.
- Hazardous chemicals present in the workplace.
- The written hazard-communication plan.
- Physical and health effects of the hazardous chemicals.
- Methods to determine the presence or release of hazardous chemicals in the work area.
- How to reduce or prevent exposure to these hazardous chemicals through use of exposure controls/work practices and personal protective equipment.
- Steps taken to reduce or prevent exposure to these chemicals.
- Emergency procedures to follow if exposed to these chemicals.
- How to read labels and review safety data sheets.

Note to employee: This form becomes part of your personnel file; read and understand it before signing.

Employee:_____Date:_____

Trainer:_____Date:_____

Overexertion Injury Report

Use this form to record, report, and track symptoms of overexertion injuries. (It's intended for use within your company, and not to be used for reporting to OSHA.)

Employee_____

Date:_____

Job title:_____

Supervisor: _____

Length of service in present position:

( ) > 6 months ( ) 6 months-1 year ( ) 1-2 years ( ) 2-3 years ( ) 3-5 years ( ) < 5 years

Location of task: _____

Check activities that led to symptom:

( ) Driving ( ) Keyboarding ( ) Lifting ( ) Carrying ( ) Pushing/pulling ( ) Climbing
( ) Reaching ( ) Handling ( ) Bending ( ) Twisting ( ) Other

Task(s) causing symptom: _____

Total time spent at task in one work day:

( ) Less than 2 hours ( ) 2-4 hours ( ) 4-6 hours ( ) 6-8 hours ( ) 8-10 hours

Continuous time spent at task without rest:

( ) Less than 1 hour ( ) 1-2 hours ( ) 2-3 hours ( ) More than 3 hours

PPE Hazard Assessment and Certification

Use this form to identify hazards and to certify, by documenting in writing, that you completed thisassessment form. Keep it on file in your workplace.

Survey your workplace as often as possible to identify safety and health hazards that require Personal Protective Equipment.

Name of Department Being Assessed:_____

Jobs Included in the Assessment:_____

Person Performing the Assessment:_____Date_____

PPE From the Attached Assessment Worksheet:

Fall Protection	( ) Yes	( ) No
Torso Protection	( ) Yes	( ) No
Eye & Face Protection	( ) Yes	( ) No
Head Protection	( ) Yes	( ) No
Foot Protection	( ) Yes	( ) No
Leg Protection	( ) Yes	( ) No
Hand Protection	( ) Yes	( ) No
Hearing Protection	( ) Yes	( ) No
Respiratory Protection	( ) Yes	( ) No

Fall Protection

All employees must be protected from fall hazards when working on unguarded surfacesmore than 10 feet above a lower level or at any height above dangerous equipment.

Fall protection systems must be provided, installed, and used according to the criteria in 1926.502(d) and 437-003-0502 in Division 3/M, Construction/Fall Protection.

Name of Department Being Assessed: _____

Jobs Included in the Assessment_____

Person Performing the Assessment:_____Date_____

Potential Hazards
( ) Yes ( ) No

Unguarded surfaces more than 10 feet above a lower level or any height above dangerous equipment.
( ) Yes ( ) No

Likelihood of Injury without PPE
( ) High ( ) Medium ( ) Low

Severity of a Potential Injury Without PPE
( ) Minor first aid ( ) Serious, not life threatening ( ) Life threatening

PPE Required
( ) Personal Fall Arrest System ( ) Personal Fall Restraint System ( ) None Required

Torso Protection

Clothing must be worn which is appropriate to the work performed and conditionsencountered.

Appropriate high temperature protective clothing must be worn by workers wo are exposed to molten metals or other substances that can cause burns.

Loose sleeves, ties, lapels, cuffs or other loose clothing must not be worn near movingmachinery. Clothing saturated or impregnated with flammable liquids, corrosive or toxic substances, irritants, or oxidizing agents must be removed immediately and not worn again until properlycleaned.

Rings, watches, earrings, bracelets and other jewelry which might contact power drivenmachinery or electric circuitry must not be worn.

Name of Department Being Assessed:_____

Jobs Included in the Assessment:_____

Person Performing the Assessment:_____Date:_____

Potential Hazards

( ) Yes ( ) No Extreme temperatures ( ) Yes ( ) No Hazardous chemicals
( ) Yes ( ) No Hot splashes from molten metal and other hot liquids
( ) Yes ( ) No Impacts from tools, machinery, and materials
( ) Yes ( ) No Ionizing radiation
( ) Yes ( ) No Likelihood of Injury without PPE ( ) High ( ) Medium ( ) Low

Severity of a Potential Injury Without PPE

( ) Minor first aid ( ) Serious, not life threatening ( ) Life threatening

PPE Required

( ) Chemical resistant coveralls ( ) Cut resistant sleeves, wristlets
( ) Flame resistant jacket/pants ( ) High visibility garment ( ) Insulated jacket or hood
( ) Lab coat, apron, sleeves ( ) Static control coats, coveralls ( ) None required

Eye and Face Protection

Employees must use appropriate eye or face protection when exposed to flying particles,molten metal, liquid chemicals, acids or caustic liquids, chemical gases or vapors, or potentially injurious light radiation.

Eye protection must have side protection when there is a hazard from flying objects.Detachable side protectors are acceptable.

Employees who wear prescription lenses must wear eye protection that fits over the lenses without disturbing the proper position of the prescription lenses, or ANSI approved prescription lenses with side shields.

Employees who are exposed to potentially injurious light radiation must use filter lenses that have a shade number appropriate for the work being performed.

Employees whose work exposes them to laser beams must wear safety goggles that protectfor the wavelength of the laser.

Name of Department Being Assessed:_____

Jobs Included in the Assessment:_____

Person Performing the Assessment:_____Date_____

Potential Hazards

( ) Yes ( ) No Dust, Dirt, Metal, Wood Chips from Chipping, Grinding, Sawing, Hammering, and Power Tools

( ) Yes ( ) No Chemical Splashes From Corrosive Substances, Hot Liquids, and Solvents

( ) Yes ( ) No Objects Such as Tree Limbs, Chains, Tools and Ropes That May SwingInto the Face or Eyes

( ) Yes ( ) No Radiant Energy From Welding and Harmful Rays From Lasers or Other Radiant Light

( ) Yes ( ) No Likelihood of Injury without PPE ( ) High ( ) Medium ( ) Low

Severity of a Potential Injury Without PPE

( ) Minor first aid ( ) Serious, not life threatening ( ) Life threatening

PPE Required

( ) Chemical Goggles/Face Shield ( ) Chemical Splash Goggles

( ) Glasses/Goggles w/Face Shield ( ) Impact Goggles ( ) Leather Welding Hood

( ) Safety Goggles w/Side Shields ( ) Welding Helmet/Goggles ( ) None required

Head Protection

Employees must wear hard hats when they work where there is a potential for head injuries from falling or flying objects.

Employees must use hard hats designed to reduce electrical shock hazards when they're working near exposed electrical conductors that could contact their heads.

Employees who are exposed to power driven machinery or to sources of ignition must wear caps or other head covering that completely covers the hair.

Name of Department Being Assessed:_____

Jobs Included in the Assessment_____

Person Performing the Assessment:_____Date_____

Potential Hazards

( ) Yes ( ) No Overhead objects could fall
( ) Yes ( ) No Exposed pipes or beams less than 6.5 feet overhead
( ) Yes ( ) No Energized electrical equipment
( ) Yes ( ) No Likelihood of Injury without PPE ( ) High ( ) Medium ( ) Low

Severity of a Potential Injury Without PPE

( ) Minor first aid ( ) Serious, not life threatening ( ) Life threatening

PPE Required

( ) Head Protection That Meets ANSI Z89.1 Requirements ( ) Impact Type 1
( ) Impact Type 2 ( ) Electrical Class G (General) ( ) Electrical Class E (Electrical)
( ) Electrical Class C (Conductive) ( ) None required

Foot Protection

Employees must wear protective footwear when they work where there is a danger of foot injuries due to falling or rolling objects, or objects piercing the sole or other electrical hazards.

Name of Department Being Assessed:_____

Jobs Included in the Assessment_____

Person Performing the Assessment:_____Date_____

Potential Hazards

( ) Yes ( ) No Heavy Objects Such as Barrels or Tools That May Fall on Workers' Feet
( ) Yes ( ) No Sharp Objects Such as Nails or Spikes That Could Pierce the Soles or Uppers of Ordinary Shoes
( ) Yes ( ) No Hot, Wet, or Slippery Surfaces
( ) Yes ( ) No Energized Electrical Equipment ( ) Yes ( ) No Molten metal
( ) Yes ( ) No Likelihood of injury without PPE ( ) High ( ) Medium ( ) Low

Severity of a Potential Injury Without PPE

( ) Minor first aid ( ) Serious, not life threatening ( ) Life threatening

PPE Required

( ) Steel toed safety shoes ( ) Slip resistant shoes ( ) Puncture resistant shoes
( ) Chemical resistant boots/covers ( ) Rubber boots/closed toe shoes
( ) Insulated boots or shoes ( ) Leather boots or safety shoes with metatarsal guards
( ) None required

Leg Protection

Workers exposed to hot substances or dangerous chemical spills must wear leggings or high boots made of leather, rubber, or other suitable material.

Workers who use chain saws must wear chaps or leg protectors that cover the leg from the upper thigh to mid-calf. Leg protectors must be made from material that resists cuts from thechain saw.

Name of Department Being Assessed:_____

Jobs Included in the Assessment_____

Person Performing the Assessment:_____Date_____

Potential Hazards

( ) Yes ( ) No Hot substances
( ) Yes ( ) No Dangerous chemicals ( ) Yes ( ) No Cuts from chainsaws
( ) Yes ( ) No Likelihood of injury without PPE ( ) High ( ) Medium ( ) Low

Severity of a Potential Injury Without PPE

( ) Minor first aid ( ) Serious, not life threatening ( ) Life threatening

PPE Required

( ) Leggings or boots penetration resistant ( ) Leggings or Boots, Chemical Resistant
( ) Leggings or Boots, Molten Metal Resistant
( ) Chaps or leg protectors resists cuts from chain saws ( ) None required

Hand Protection

Employees must use appropriate hand protection when their hands are exposed to harmful substances, severe cuts or lacerations, abrasions, punctures, chemical burns, thermal burns, and extreme temperatures.

Employers must base the selection of the appropriate hand protection on an evaluation of the performance characteristics of the hand protection relative to the task, conditions present, duration of use, and the hazards identified.

Employees must not wear gloves when their hands could be caught in moving parts.

Name of Department Being Assessed:_____

Jobs Included in the Assessment_____

Person Performing the Assessment:_____Date_____

Potential Hazards

( ) Yes ( ) No Harmful or Hazardous Temperatures
( ) Yes ( ) No Chemicals That Can Be Absorbed Into the Skin or Cause Burns
( ) Yes ( ) No Energized Electrical Equipment
( ) Yes ( ) No Mechanical Equipment That Can Cause Bruises, Abrasions, Cuts, Punctures, Fractures, or Amputations
( ) Yes ( ) No Likelihood of injury without PPE ( ) High ( ) Medium ( ) Low

Severity of a Potential Injury Without PPE

( ) Minor first aid ( ) Serious, not life threatening ( ) Life threatening

PPE Required

( ) Leather/cut resistant gloves
( ) General purpose work gloves ( ) Chemical resistant gloves
( ) Heat/flame resistant gloves ( ) Latex or nitrile gloves
( ) Electrician's insulated rubber gloves
( ) Cotton, leather, or anti-vibration gloves
( ) None required

Hearing Protection

Hearing protectors (plugs or ear muffs) must be worn by workers exposed to an 8 hour time weighted average of 85 decibels or greater and workers who have experienced a threshold shift.

Name of Department Being Assessed:_____

Jobs Included in the Assessment_____

Person Performing the Assessment:_____Date_____

( ) Yes Hours of Exposure 8 - 90 dBA
( ) Yes Hours of Exposure 6 - 92 dBA
( ) Yes Hours of Exposure 4 - 95 dBA
( ) Yes Hours of Exposure 3 - 97 dBA
( ) Yes Hours of Exposure 2 - 100 dBA
( ) Yes Hours of Exposure 1.5 - 102 dBA
( ) Yes Hours of Exposure 1 - 105 dBA
( ) Yes Hours of Exposure 0.5 - 110 dBA
( ) Yes Hours of Exposure 0.25 - 115 dBA

( ) Yes ( ) No Likelihood of injury without PPE ( ) High ( ) Medium ( ) Low

Severity of a Potential Injury Without PPE

( ) Minor first aid ( ) Serious, not life threatening ( ) Life threatening

PPE Required

( ) Leather/cut resistant gloves
( ) Ear plugs
( ) Earmuffs
( ) None required

Respiratory Protection

Appropriate respirators are required when workers are exposed above permissible exposure limits (PEL) for specific air contaminates, listed in 437-002-0382. See also 1910.134, Respiratory Protection.

Name of Department Being Assessed:_____

Jobs Included in the Assessment_____

Person Performing the Assessment:_____Date_____

Potential Hazards

( ) Yes ( ) No Nuisance/Dust Mist
( ) Yes ( ) No Welding Fumers
( ) Yes ( ) No Asbestos
( ) Yes ( ) No Pesticides
( ) Yes ( ) No Acid gases
( ) Yes ( ) No Isocyanates
( ) Yes ( ) No Paint Spray
( ) Yes ( ) No Organic Vapors
( ) Yes ( ) No Oxygen Deficient/Toxic or IDLH Atmosphere
( ) Yes ( ) No Likelihood of injury without PPE ( ) High ( ) Medium ( ) Low

Severity of a Potential Injury Without PPE

( ) Minor first aid ( ) Serious, not life threatening ( ) Life threatening

PPE Required

( ) Air purifying respirators ( ) Filtering face piece (Dust mask)
( ) Particulate removing respirator ( ) Gas and vapor removing respirator
( ) Powered air purifying respirator
( ) Combination aerosol filter/gas or vapor removing respirator
( ) Atnosphrere supplying respirator ( ) Self contained breathing apparatus (SCBA)
( ) Combination Air Purifying and Atmosphere Supplying Respirators ( ) None required

LASER SAFETY POLICY

LIONHEARTHEALTH

Laser Safety Policy

Many laser procedures are safe and appropriate for an office setting. High standards of practice, similarto those in an institutional setting should be maintained to ensure quality of care for the clients who undergo laser procedures in an office setting.

LASER PRIVILEGES

The mere acquisition of a skill is not the only criterion to measure qualifications. The office settings should provide an opportunity for practice of inadequately trained staff. Office staff must meet accepted standards of training and experience per state regulations. All staff must be appropriately trained and their skills assessed.

CLIENT AND PROCEDURE SELECTION

Prudent selection of both procedures and clients appropriate for office-based laser treatments is critical. Procedures that have intrinsic risk or require technology not available in the office should be performed in an institutional setting.

In order to determine and apply proper indications for a procedure and to select the appropriate clientsfor applications of the technology, comprehensive knowledge of the disease process and experience inmanaging clients with the disease is essential. Prompt recognition and management of complications can be achieved when the practitioner and team is full qualified.

CLIENT SAFETY

Clients should receive clear pre-procedure instructions. Confirmation of important compliance issues should be documented. The laser procedure should not be compromised by lack of equipment to perform the proposedprocedure.

All clients must be sufficiently recovered from the procedure prior to leaving the office. If topical anesthesia is required, application should be performed within the facility. The quantity applied shouldbe less than the amount capable of leading to systemic toxicity.

Preventive maintenance should be done by qualified personnel. Standard protocols for infection control must be rigorously observed.

RECORDS AND QUALITY ASSURANCE

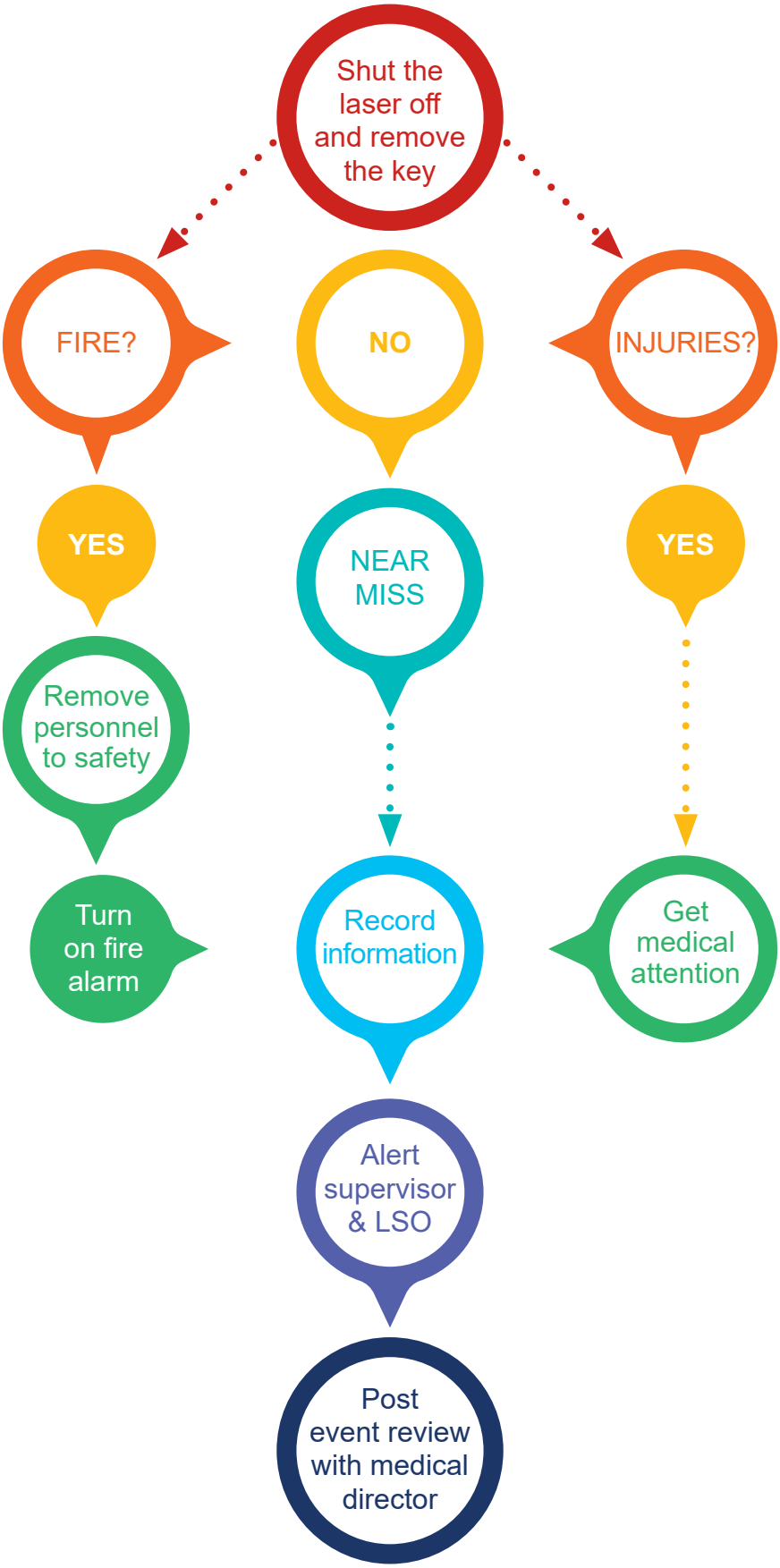
Each client will complete an intake form that includes medical history and allergies. The record will contain a physical exam and evaluation of the treatment area, justification for the procedure, description of the treatment and the client's condition at completion of the treatment. Informed consent will be obtained for all treatments.

Records will be maintained so complications and problems can be identified and resolved.

ASLMS Educational Recommendations for Laser Use by Non-Physicians

- Individuals should be licensed professionals and carry liability insurance.
- Individuals should be trained appropriately on laser physics, tissue interactions, laser safety, clinical applications and pre and post care of the laser client
- Prior to the initiation of any client care activity, the individual should have read and signed the faclities' policies and procedures regarding the safe use of lasers.
- Continuing education of all licensed practitioners should be mandatory and be made available at reasonable frequency to help insure adequate performance. Specific credit hour requirements have been determined by each state.
- A minimum of ten procedures of precepted training should be required for each laser procedure and laser type to assess competency. Participation in all training programs, acquisition of new skills and number of hours of training should be well documented.

In the Event of a Laser Incident, do the following IMMEDIATELY



Laser Safety Operational Guidelines

POLICY: Laser will be operated in a safe manner to protect both the operator and the client.

- A laser warning sign will be prominently displayed outside the entrance to the room in which the laser is being used. The sign will conform to the OSHA/ANSI requirements.

- All window to the laser room will be protected against transmission of laser light for all lasers/ IPL devices. It may be achieved by the placement of flame retardant opaque materials over the windows, such as tpaing of towels, blinds orother opaque cutouts for the windows.

- Appropriate eyewear is required for all persons in the Nominal Hazard Zone during laser use. The Laser Safety Officer has designated the entire room as the Nominal Hazard Zone so protective eyewear is required for all persons in the room. These glasses shall be made available at the entrance to the room.

- Safety glasses shall be worn at all times when the laser is in operation. The safety glasses will be specific to the wavelength of the laser being used. Protective eyewear shall be labeled according to the optical density and laser wavelength.

- No safety glasses offer eye protection against a direct close range impact through the safety material into the eye. Laser operators will not point the laser directly into any person's face. The laser will always be handled as a 'loaded gun' and pointed in a safe direction in the event of an accidental firing.

- Eyewear should be without defect. Frames should not be broken or separated from the lens. Sideshields should be in place and no scratches should be on the front lens. The LSO will make periodic inspections for these defects.

- The client will be provided protective eyewear. In the event the treatment will be taking place on the face around the eyes. The eyes will be protected by placing opaque eye covers completely around the eyes so no light shines through or fitted with eye covered or commercial eye shields that provide similar protection. In the event the laser will be used on the eyelid or within the bony orbit of the eye, appropriate laser safety eye shields, corneal shields, will be placed between the lid and he eye to provide protection.

- The laser will be operated only by those who have had training in laser theory, techniques of control and operation of the laser or IPL device.

- A program for laser safety training will be made availabel to ALL personnel working around the laser. The LSO shall have discretion, according to ANSI standards, in delineating which personnel are required to undergo which levels of training. All training will be documented and kept on file.

- A safety audit of the safety program shall be conducted at least once a year, under the supervision of the LSO. It shall include a review of the safety policies and procedures, facility and equipment, personnel training, documentation, and compliance with ANSI Z136.3 standards for the safe use of lasers in healthcare.

- Keys to the laser will be stored in an area accessible only to properly trained individuals. The key will not be left in the laser.

- Laser equipment and accessories will be kept in a safe and protected area.

- The practitioner is responsible to determine the appropriate settings, such as power, spot sizes, power density, operating modes, pulse times and accessory operations during each procedure. The laser will be checked for proper operation and test fired prior to each procedure.

- The laser will be placed in standby mode whenever it is not being fired to prevent accidental firing into the field, prevent accidental fires, and preclude accidents that could occur if the laser and other foot pedals are confused.

- The laser foot pedal should be situated from other foot pedals for any other equipment in the room. The laser operator and no other person should control the laser foot pedal or handswitch.

- The Laser Safety Officer assumes the responsibility of assuring that all safety policies and procedures are followed, that appropriate training of personnel has occurred and that the safety program is reviewed annually. This may be done directly or through delegation of responsibility to trained personnel.

- A written record will be kept of maintenance, including documentation of calibration.

- If a medical director is required for laser operation, the medical director may delegate operation of the laser to a trained and licensed professional who is legally allowed to operate the laser.

- The laser manufacturer's recommendations for operation of the laser will be followed by the laser operator.

- Appropriate precautions will be taken when necessary, such as the use of moistened towels, to protect the hair line.

- Staff will know the location of fire extinguishers.

- Any incidents putting the clients or staff at risk of injury will be immediately reported to the Laser Safety Officer and an Adverse Event report completed. Medical attention will be given, if needed and the incident will be evaluated and corrective action will be taken.

Inspected by:	Date:
Facility:	**Practitioners:**
☐ There is a current facility license posted.	☐ All staff have current, required licensure and it is posted, if required.
☐ The business name and address on the license is correct	☐ All licenses have not been altered in any way.
NOTES:	☐ Skin care professionals have documentation of training on each chemical, product and device used in performing services.
☐ Inspected all googles for proper labeling and condition.	
☐ Verified manual and maintenance records are presented.	
☐ Verified recent treatment records for accurate charting.	

Facility Safety/Sanitation/Infection Control
☐ All implements, tools, and single use items are properly disinfected, stored or discarded.
☐ All chemical waste is disposed of in a closed container at the end of each service and disposed of in a fire retardant container at the end of each day.
☐ All waste is disposed of in a covered container.
☐ All outer surfaces of waste containers are kept clean.
☐ All waste VIlhich has blood or other body fluids is disposed of inside a disposable glove or a plastic bag and then disposed ofin a covered container that has a liner immediately following the service .
☐ Sealable plastic bags and sealable rigid containers are available for use.
☐ Adequate disinfection is through use of autoclave or immersible disinfectant.
☐ Autoclave records show verification of disinfection.
☐ Immersable high level and low level disinfectant is on hand. High-level disinfectant means a chemical agent, VIlhich has demonstrated tuberculocidal activity and is registered with the EPA. Low level disinfectant means a chemical agent, which has demonstrated bactericidal, germicidal, fungicidal, and limited virucidal activity and is registered with the EPA. (817-010-ooos(20)(22) (817-
☐ Work station surfaces and equipment are clean and made of non-absorbable material.
☐ All drawers, cabinets, and storaqe areas are clean.
☐ Walls, ceilinqs and floors are clean.
☐ There is hot and cold running water.

☐ Chemicals and products are properly stored and labeled.

☐ New, disinfected and cleaned tools and implements for treatment are stored separate_ly

☐ No frayed cords or other electrical fire hazards.

☐ Restrooms are maintained and clean.

☐ No smoking in the facility.

☐ No pets in the facility.

Treatment Protocols and Procedures

☐ All devices and equipment used meets governmental product registration requirements.

☐ Documentation is available for any device classified by the FDA, including lasers, IPL, radio frequency [FCC Part 18], ultrasound, plasma, electrical (micro dermabrasion, hiqh frequency, microcurrent, qalvanic, etc)

☐ Handwashing or alternative handwashing such as gel, aerosol spray, foam or other hand sanitizers are used prior to and immediately after each treatment.

☐ Single use disposable gloves are used when there is a possible exposure to infectious material.

☐ Goggles or eye shields available if spattering possible to occur during a treatment.

☐ Evidence of practitioners washinq hands between clients with the use of soap and water, hand sanitizer.

Treatment Records

☐ Treatment records include name, address, phone, type of service, date of service.

☐ Treatment records include name of technician providing service, technician's certificate number, medical history including bleedinq disorders allerqies, possible conditions which may influence treatment results.

☐ Records are held for a minimum of two years.

☐ Hair removal records include prior methods of controlling hair, condition of skin prior to treatment, pattern and structure of hair growth, evidence of consultation, informed consent, treatment area, energy setting used, skin reaction.

☐ Documentation includes evidence of clients receiving information about laser hair removal process, including hair growth cycles, possible adverse reactions and post treatment care.

Laser Safety Inspection: Treatment Room	Treatment Room #1	Treatment Room #2	Treatment Room #3	Treatment Room #4
☐ Proper laser warning sign displayed outside entrance tothe room where laser is used. (ANSI Z136.3-4.7.1)				
☐ All windows are protected against transmission of laser light. (ANSI Z136.3-4.4.2(4)				
☐ Keys to the laser will be stored in an area accessi-ble only to properly trained individuals. (ANSI Z136.3 Appendix H)				
☐ Laser equipment and accessories will be kept safe and protected. (ANSI Z136.3Aooendix H)				
☐ Safety goggles labeled with the appropriate wave-length and optical density will be available at the entrance to the room where each door sign is posted.				
☐ Appropriate laser eyewear, with side shields is available to prevent ocular injury at the laser wavelength in use.				
☐ Position plume evacu-ator whenever plume is anticipated.(ANSI Z 136.3.7.4)				
☐ Laser fibers are intact, without damage ordeficiency.				
☐ Laser is calibrated inaccordance with manufacturer.				

Laser Safety Inspection: Operators	**Operator**	**Operator**	**Operator**	**Operator**
☐ All safety procedures willbe followed during service.				
☐ No one is allowed into the laser room unless properly authorized and protected.				
☐ The laser should not be activated when it is necessary to open the door.				
☐ The laser must be in stand-by mode when movedaway from the target.				
☐ Alcohol is never used in the area where the laser is tobe used.				
☐ The operator is aware ofpolicies and procedures				
☐ The operator has attended an equipment inservice provided by the LSO.				
☐ The operator follows safety precautions while setting up the room and the eauioment.				
☐ The operator knows how to assemble the system and accessory equipment.				
☐ The operator can performregular maintenance procedures.				
☐ The operator can operate the control panel properly, adjusting the power settings, stand-by and ready modes, em ergency shut-off via the handswitch or footswitch.				
☐ The operator completes documentation aoorooriatelv.				
☐ The operator demonstrates methods for cleanina and storina.				

☐ The operator demonstrates the ability to monitor room safety.				

NOTES:

CORRECTIONS TO BE MADE:

Laser Safety Officer Date

Facility Representative Date

_____ Operator Skills Validation

Name

CHECKLIST

DATE	✓	REQUIREMENT	LSO INITIALS
	☐	Has read policies and procedures	
	☐	Has attended equipment inservice	
	☐	Knows security procedure about keys	
	☐	Can change hand pieces appropriately	
	☐	Uses safety protocols in treatment room	
	☐	Can perform device maintenance; water	
	☐	Can operate control panel settings	
	☐	Can place device in Standby and Ready	
	☐	Can use Emergency Shut-off	
	☐	Can operate footswitch and/or handswitch	
	☐	Can operate smoke evacuator	
	☐	Selects appropriate eyewear for laser	
	☐	Documents appropriately	
	☐	Demonstrates handpiece cleaning	
	☐	Monitors safety of room during treatment	

LASER SAFETY TRAINING

LSO_____DATE_____

Staff Name	Signature

LASER SAFETY TRAINING CHECKLIST

DATE	✓	REQUIREMENT	LSO INITIALS
	☐	Review physics and laser effects on skin	
	☐	Reviews beam parameters	
	☐	Reviews components of the laser	
	☐	Reviews clinical applications for device	
	☐	Reviews role of the Laser Safety Officer	
	☐	Reviews policies and procedures	
	☐	Reviews Documentation methods	
	☐	Reviews state regulations	
	☐	Reviews eye protection	
	☐	Reviews reflection hazards	
	☐	Reviews flammability hazards	
	☐	Reviews plume management	
	☐	Reviews who can be in the treatment room	

QUALITY ASSURANCE PLAN

LIONHEARTHEALTH

Quality Assurance Plan

A quality assurance program shall be maintained to ensure the safety and reliability of the services that are provided. Our office will demonstrate that the staff are conscientious and competent.

Licensed Allied Health Professionals: Only Licensed Allied Health Professionals will be laser service providers. Copies of licenses will be kept on file. All laser providers will attend a minimum of _____ continuing education event(s) per year.
Number

Proof of attendance will be kept on file. The licensed providers provide laser services upon completion of a client assessment and completion of client medical history form and appropriate consent.

Selection Criteria: Clients will complete a Medical History form. Conditions and/or medications contraindicated for laser services are listed on the form. If those conditions and/or medications are selected by the client, the laser technician will note it and make appropriate determinations about the scope of the laser service to be performed.

Methods of Operation:

_____ uses the _____
Name of Office Names of Lasers in Use

Identification of devices:

Name of device:_____Serial Number_____

Name of device:_____Serial Number_____

Name of device:_____Serial Number_____

Name of device:_____Serial Number_____

All laser services will be documented in the client treatment record. All adverse reactions will be documented in an additional marked binder, which will be reviewed with the medicalcollaborator and the Laser Safety Officer.

BLOODBORNE PATHOGENS POLICY

LIONHEARTHEALTH

OSHA® FactSheet

OSHA's Bloodborne Pathogens Standard

Bloodborne pathogens are infectious microorganisms present in blood that can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV), hepatitis C virus (HCV), and human immunodeficiency virus (HIV), the virus that causes AIDS. Workers exposed to bloodborne pathogens are at risk for serious or life-threatening illnesses.

Protections Provided by OSHA's Bloodborne Pathogens Standard

All of the requirements of OSHA's Bloodborne Pathogens standard can be found in Title 29 of the Code of Federal Regulations at 29 CFR 1910.1030. The standard's requirements state what employers must do to protect workers who are occupationally exposed to blood or other potentially infectious materials (OPIM), as defined in the standard. That is, the standard protects workers who can reasonably be anticipated to come into contact with blood or OPIM as a result of doing their job duties.

In general, the standard requires employers to:

- **Establish an exposure control plan.** This is a written plan to eliminate or minimize occupational exposures. The employer must prepare an exposure determination that contains a list of job classifications in which all workers have occupational exposure and a list of job classifications in which some workers have occupational exposure, along with a list of the tasks and procedures performed by those workers that result in their exposure.
- **Employers must update the plan annually** to reflect changes in tasks, procedures, and positions that affect occupational exposure, and also technological changes that eliminate or reduce occupational exposure. In addition, employers must annually document in the plan that they have considered and begun using appropriate, commercially-available effective safer medical devices designed to eliminate or minimize occupational exposure. Employers must also document that they have solicited input from frontline workers in identifying, evaluating, and selecting effective engineering and work practice controls.
- **Implement the use of universal precautions** (treating all human blood and OPIM as if known to be infectious for bloodborne pathogens).
- **Identify and use engineering controls.** These are devices that isolate or remove the bloodborne pathogens hazard from the workplace. They include sharps disposal containers, self-sheathing needles, and safer medical devices, such as sharps with engineered sharps-injury protection and needleless systems.
- **Identify and ensure the use of work practice controls.** These are practices that reduce the possibility of exposure by changing the way a task is performed, such as appropriate practices for handling and disposing of contaminated sharps, handling specimens, handling laundry, and cleaning contaminated surfaces and items.
- **Provide personal protective equipment (PPE), such as gloves, gowns, eye protection, and masks.** Employers must clean, repair, and replace this equipment as needed. Provision, maintenance, repair and replacement are at no cost to the worker.
- **Make available hepatitis B vaccinations to all workers with occupational exposure.** This vaccination must be offered after the worker has received the required bloodborne pathogens training and within 10 days of initial assignment to a job with occupational exposure.
- **Make available post-exposure evaluation and follow-up to any occupationally exposed worker who experiences an exposure incident.** An exposure incident is a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or OPIM. This evaluation and follow-up must be at no cost to the worker and includes documenting the route(s) of exposure and the circumstances

under which the exposure incident occurred; identifying and testing the source individual for HBV and HIV infectivity, if the source individual consents or the law does not require consent; collecting and testing the exposed worker's blood, if the worker consents; offering post-exposure prophylaxis; offering counseling; and evaluating reported illnesses. The healthcare professional will provide a limited written opinion to the employer and all diagnoses must remain confidential.

- **Use labels and signs to communicate hazards.** Warning labels must be affixed to containers of regulated waste; containers of contaminated reusable sharps; refrigerators and freezers containing blood or OPIM; other containers used to store, transport, or ship blood or OPIM; contaminated equipment that is being shipped or serviced; and bags or containers of contaminated laundry, except as provided in the standard. Facilities may use red bags or red containers instead of labels. In HIV and HBV research laboratories and production facilities, signs must be posted at all access doors when OPIM or infected animals are present in the work area or containment module.
- **Provide information and training to workers.** Employers must ensure that their workers receive regular training that covers all elements of the standard including, but not limited to: information on bloodborne pathogens and diseases, methods used to control occupational exposure, hepatitis B vaccine, and medical evaluation and post-exposure follow-up procedures. Employers must offer this training on initial assignment, at least annually thereafter, and when new or modified tasks or procedures affect a worker's occupational exposure. Also, HIV and HBV laboratory and production facility workers must receive specialized initial training, in addition to the training provided to all workers with occupational exposure. Workers must have the opportunity to ask the trainer questions. Also, training must be presented at an educational level and in a language that workers understand.
- **Maintain worker medical and training records.** The employer also must maintain a sharps injury log, unless it is exempt under Part 1904 -- Recording and Reporting Occupational Injuries and Illnesses, in Title 29 of the Code of Federal Regulations.

Additional Information

For more information, go to OSHA's Bloodborne Pathogens and Needlestick Prevention Safety and Health Topics web page at: https://www.osha.gov/SLTC/bloodbornepathogens/index.html.

To file a complaint by phone, report an emergency, or get OSHA advice, assistance, or products, contact your nearest OSHA office under the "U.S. Department of Labor" listing in your phone book, or call us toll-free at **(800) 321-OSHA (6742)**.

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control and Prevention
National Institute for Occupational Safety and Health
4676 Columbia Parkway
Cincinnati, OH 45226-1998

To receive documents or other information about occupational safety and health topics, contact NIOSH at

Telephone: 1-800-CDC-INFO (1-800-232-4636)
TTY: 1-888-232-6348
E-mail: cdcinfo@cdc.gov

or visit the NIOSH Web site at **www.cdc.gov/niosh**.

For a monthly update on news at NIOSH, subscribe to NIOSH eNews by visiting **www.cdc.gov/niosh/eNews**.

DHHS (NIOSH) Publication No. 2009-111
March 2009

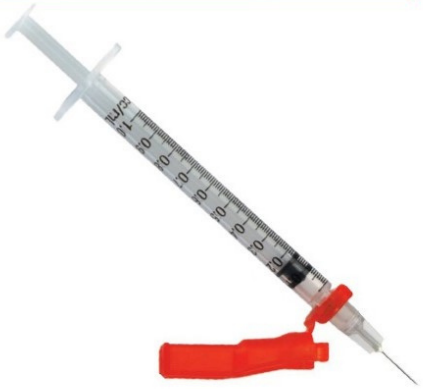
SAFER • HEALTHIER • PEOPLE™

Information for Employers

Complying with OSHA's Bloodborne Pathogens Standard

The Bloodborne Pathogens Standard applies to employees who have ***occupational exposure*** (reasonably anticipated job-related contact with blood or other potentially infectious materials).

The three most common bloodborne pathogens (BBPs) are human immunodeficiency virus (HIV), hepatitis B virus (HBV), and hepatitis C virus (HCV).



Resources for Employers

This flyer is being sent to employers as an aid to understanding and complying with the Occupational Safety and Health Administration (OSHA) Bloodborne Pathogens Standard. This standard seeks to prevent serious occupational infections among employees.

OSHA

Bloodborne Pathogens and Needlestick Prevention
www.osha.gov/SLTC/bloodbornepathogens/index.html

OSHA Federal and State Plans Offices
www.osha.gov/html/oshdir.html
www.osha.gov/dcsp/osp/index.html

CDC

NIOSH Bloodborne Pathogens Topic Page
www.cdc.gov/niosh/topics/bbp

Protecting Healthcare Workers from Bloodborne Pathogens
www.cdc.gov/ncidod/dhqp/wrkrProtect_bp.html

Publications/Web Documents

Sharps Safety Workbook (2004)
www.cdc.gov/sharpssafety

Model Plans and Programs for the OSHA Bloodborne Pathogens and Hazard Communications Standards (2003)
OSHA Publication No. 3186
www.osha.gov/Publications/osha3186.pdf

Medical & Dental Offices: A Guide to Compliance with OSHA Standards (2003)
OSHA Publication No. 3187
www.osha.gov/Publications/osha3187.pdf

NIOSH Alert: Preventing Needlestick Injuries in Health Care Settings (1999)
DHHS (NIOSH) Publication No. 2000-108
www.cdc.gov/niosh/2000-108.html

Safety Device Information and Device Evaluation Tools

University of Virginia International Healthcare Worker Safety Center
www.healthsystem.virginia.edu/internet/epinet/safetydevice.cfm

ECRI Institute
www.ecri.org

Needle-Free Injection Technology
www.cdc.gov/vaccinesafety/vaxtech/nfit

International Sharps Injury Prevention Society
www.isips.org/safety_products.html

Association of Needle-Free Injection Manufacturers
www.anfim.com

Premier, Inc. Sharps Injury Prevention
www.premierinc.com/needlestick

TDICT Project
www.tdict.org/performance.html
www.tdict.org/evaluation2.html

Resources for Employers

OSHA's Free On-Site Consultation Service

If you need help, OSHA offers a free, on-site safety and health consultation service.

The On-site Consultation Program is a broad network of occupational safety and health services funded primarily by federal OSHA but implemented by state governments using highly qualified occupational safety and health professionals.

The On-site Consultation Program is completely separate from OSHA enforcement operations.

A consultant does not issue citations or impose penalties.

Consultation is a confidential service. For more information on the On-site Consultation Program, visit: www.osha.gov/dcsp/smallbusiness/consult.html.

The consultant can:

- Help you recognize hazards in your workplace.
- Suggest approaches or options for solving a safety or health problem.
- Identify sources for further help.
- Provide a written report that summarizes their findings.
- Assist you in developing or maintaining an effective safety and health program.
- Offer training for you and your employees.

Request this service by calling or writing the On-site Consultation Program in your state. For contact information, visit: www.osha.gov/dcsp/smallbusiness/consult_directory.html.

Under OSHA's Bloodborne Pathogens (BBP) Standard, Employers Must:

Exposure Control Plan

Identify job classifications, tasks, and procedures where there is *occupational exposure*.

Establish a written Exposure Control Plan and make it available to employees. Review and update it annually.

Safety Devices

Evaluate medical devices with engineered sharps injury protections (safety devices).

Use appropriate, effective, and commercially available safety devices.

Involve front-line employees in the evaluation and selection process.

Document the evaluation and selection of safety devices annually.

Hepatitis B Vaccination

Offer free hepatitis B vaccinations to all employees with *occupational exposure* to blood or other potentially infectious materials (OPIM).

Other Controls

Ensure that employees comply with Universal Precautions.

Use engineering and work practice controls to eliminate or minimize employee exposure.

Provide and ensure the use of appropriate personal protective equipment, such as gloves, gowns, lab coats, face shields or masks and eye protection, and mouthpieces, resuscitation bags, pocket masks, or other ventilation devices.

Ensure that contaminated sharps are disposed of in proper sharps disposal containers.

Post-Exposure Incident Procedures

Establish a procedure for post-exposure evaluation and follow-up.

Document the route of exposure and other circumstances. Identify the source individual where feasible.

Offer post-exposure medical evaluation by a healthcare professional at no cost to employees.

Test the source individual's blood for BBPs where possible, and test the exposed employee's blood after consent is obtained.

Ensure the provision of post-exposure medication when medically indicated and as recommended by the Department of Health & Human Services.

Training

Train *occupationally exposed* employees at initial assignment and at least annually by a knowledgeable person.

Training must include a number of elements, such as:

- An accessible copy of the BBP standard (29 CFR 1910.1030).
- Information on the epidemiology and symptoms of bloodborne diseases.
- Information on modes of transmission of BBPs.
- Description of employer's Exposure Control Plan and how to get a copy.
- How to recognize tasks that may involve exposure to blood or OPIM.
- Use and limitations of methods to reduce exposure, including engineering controls, work practices, and personal protective equipment.
- Information on the hepatitis B vaccine.
- What to do and whom to contact after an exposure.
- Information on post-exposure evaluation and follow-up.
- An opportunity for interactive questions and answers.

This is not a complete list or description of employers' responsibilities. For more information, see www.osha.gov/SLTC/bloodbornepathogens/index.html.

Bloodborne Pathogens Exposure Control Plan

Use this document to help you develop your company's exposure control plan. Edit the document to meet your company's needs.

_____has made a commitment to the prevention of incidents or accidents that can result in employee injury or illness. This exposure control plan is an element of our safety and health program and complies with OR-OSHA's Bloodborne Pathogens, 1910.1030, requirements.

_____has the authority and responsibility to ensure that all elements of the exposure plan are in place. Employees can read the plan _____.

PURPOSE: The purpose of this exposure plan is to eliminate or minimize employee occupational exposure to blood or other potentially infectious materials (OPIM), identify employees occupationally exposed to blood or OPIM in the performance of their regular job duties, provide information and training to employees exposed to blood and OPIM, and comply with OR-OSHA Bloodborne Pathogen standard, 1910.1030.

EXPOSURE RISK: Employees subject to the OR-OSHA bloodborne pathogens standard are those who are reasonably expected to have skin, eye, mucous membrane, or parenteral contact with blood and/or any body fluids that are contaminated with blood resulting from the performance of their assigned job duties. Although Good Samaritan acts are not covered under the bloodborne pathogen standard, it is our policy to provide evaluation and treatment of employees who sustain exposure to blood or OPIM who assist an injured employee but are not required to.

Please list job classifications and associated tasks identifying employees at risk of exposure to blood or other potentially infectious materials. Exposure determinations are made without regard to use of PPE.

Jobs that may be at tisk for Bloodborne Pathogen exposure:

_____

Employees who may be at risk:

_____ _____

_____ _____

_____ _____

Compliance Methods

Universal Precautions

Universal precautions is an approach to infection control in which all human blood and other potentially infectious materials are handled as if they were known to be infectious for bloodborne pathogens. Consider difficult- or impossible-to-identify body fluids as potentially infectious.

Engineering and Work Practices Controls

Use the following controls to eliminate or minimize occupational exposure.

Sharp containers

Place contaminated needles, blood-contaminated test tubes, and other sharp objects in a sharps container. Replace containers routinely and do not allow overfilling. Place reusable sharps in metal trays for decontamination. When moving containers of contaminated sharps from the area of use, close containers to prevent spillage or protrusion of contents.

Safe medical devices

Purchase and use safe medical devices whenever possible. Evaluate devices annually to determine appropriateness of the device and to investigate new and safer options.

Work practices

Clean up blood spills or body fluids as soon as possible. Use disposable absorptive materials, such as paper towels or gauze pads, to soak up the fluids. Clean the area with chemical germicides or a 1:10 solution of liquid bleach. Place absorptive towels, pads, and other material used to mop up spills in plastic bags or designated, labeled containers and treat as biohazardous waste.

Employees must wash their hands upon removal of gloves and other protective gear. In an emergency, if soap and water are not immediately available, use disposable antiseptic towelettes or germicidal gels to clean hands after removing gloves. Employees must wash their hands with soap and water as soon as possible.

Employees may not eat, drink, smoke, apply cosmetics or lip balm, or handle contact lenses where occupational exposure can occur. Do not store food or beverages in refrigerators and freezers and other sites used to store blood or other biohazardous material. Place biohazard labels on refrigerators or freezers used to store biohazardous material.

Personal Protective Equipment (PPE)

PPE is provided at no cost to employees. Employees receive training in its use, maintenance, and disposal annually.

Storage Area

_____is the storage area for bloodborne protective gear. Supplies include disposable gloves; face shields; impervious disposable coveralls and booties; resuscitation devices; large, heavy-duty plastic bags and ties; sharps containers; biohazard signs or labels; absorbent pressure dressings for wounds; antiseptic towelettes; disposable absorptive material for cleaning up spilled blood; rubber gloves; and bleach solutions or germicides.

PPE Use and Disposal

Employees engaging in activities that may involve direct contact with blood, OPIM, contaminated objects, mucous membranes, or open wounds must wear disposable gloves made of vinyl or latex. Use reusable rubber gloves (inspected and free of apparent defects) or disposable gloves to clean up spill areas. Disinfect reusable gloves with diluted liquid bleach or germicides after use.

Wear face shields or goggles with disposable surgical masks whenever splashes, spray, or spatters of blood droplets or OPIM may be generated and eye, nose, or mouth contamination can be reasonably anticipated.

Use laboratory coats or scrubs to prevent contamination of employee street clothing. Wear impermeable disposable coveralls and booties whenever contamination of skin not protected by gloves or face shields is anticipated, such as a traumatic injury with significant blood loss. Use resuscitation devices, which minimize contact with mucous membranes, to perform cardiopulmonary resuscitation.

Remove used personal protective equipment at the exposure location or as soon as feasible to avoid contamination of other work areas. Place in a
biohazard container or in a plastic bag with a biohazard label. PPE must not be taken from the work site.

Housekeeping

Employees who have received bloodborne pathogen training and who have been included under the exposure plan can clean up spills and work surfaces such as bench tops and blood processing areas.

Clean and decontaminate all equipment and working surfaces after completion of procedures in which blood or body fluids contaminated with bloodare handled and immediately, or as soon as feasible, when surfaces are overtlycontaminated with blood and at the end of the work shift if the surface may have been contaminated since the last cleaning. Inspect all biohazardous waste receptacles and decontaminate weekly or immediately upon visible contamination.

Use chemical germicides or solutions of 5.25 percent sodium hypochlorite (liquid bleach) diluted 1:10 with water for cleaning. Chemical germicides approved for use as hospital disinfectants and effective against HIVcan also be used.

Broken glassware or glass items must not be picked up directly with the hands. Use a mechanical means, such as a brush and dust pan, tongs, or forceps. Handle as a biohazardous waste. Decontaminate equipment used to pickup glassware with a 1:10 bleach solution or an approved germicide.

Contaminated Laundry

Handle non-disposable linen, such as laboratory coats or scrubs, or any other clothing visibly contaminated with blood using disposable gloves. Minimize the time spent handling laundry. Bag laundry as close as possible tothe location where it was used. Place laundry in a bag that prevents soak-through and/or leakage of fluids to the exterior; place a biohazard labelon the bag.

Employees cannot wash contaminated items at home. Contaminated items will be cleansed____ _____

Regulated Waste

_____will pick up contaminated waste. Place regulated waste in containers that are closable, constructed to contain all contents and prevent leakage, appropriately labeled or color-coded, and closed prior to removal to prevent spillage or protrusion of contents
during handling.

Labels and Signs

Affix warning labels to laundry bags, containers of regulated waste, refrigerator units and containers used to store, transport, or ship blood orOPIM. Red bags or red containers can be used instead of labels.

Hepatitis B Vaccine

The hepatitis B vaccine is offered, at no cost, to exposed employees within 10 working days of initial assignment. Employees who have potential exposure to bloodborne pathogens but decline to take the vaccination must sign a declination statement. Employees who initially decline can still receive the vaccination should they decide at a later date to accept. Previously vaccinated new hires must provide a vaccination record that includes the vaccination dates. Employees must sign a declination statement if the vaccination record is not available and revaccination is declined or not appropriate.

_____will schedule vaccinations at the facility and willkeep employees' vaccination records in their medical files.

Exposure incident and post-exposure evaluation and follow-up

An exposure incident to bloodborne pathogens is defined as an 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. It is_____ policy to include Good Samaritan actsperformed by an employee at the work site.

Whenever an exposure occurs, wash the contaminated skin immediately with soap and water. Immediately flush contaminated eyes or mucous membranes with copious amounts of water. Medically evaluate exposed employees as soon as possible after the exposure incident in order that post-exposure prophylaxis, if recommended, can be initiated promptly.

The medical evaluation is to include the route(s) of exposure and the exposure incident circumstances; identification and documentation of the source individual, where feasible; exposed employee blood collection and testing of blood for HBV and HIV serological status;post-exposure prophylaxis, where indicated; counseling; and evaluation of reported illnesses. Source test results and identity will be disclosed to the exposed employee according to applicable laws and regulations concerning disclosure and confidentiality.

_____provides hepatitis B vaccinations and medical evaluations and post-exposure follow-up after an exposure incident and has a copy of the Bloodborne Pathogen standard, 1910.1030.

Information Provided to the Health Care Professional

_____is responsible for ensuring that the health care professional who evaluated the employee afteran exposure incident receives the following information:

- A description of the employee's duties as they relate to the exposure incident
- Documentation of the route(s) and circumstances of the exposure
- The results of the source individual's blood testing, if available
- All medical records relevant to the appropriate treatment of the employee, includingvaccination status

Health Care Professional's Written Opinion

_____will provide the employee with a copy of thehealth care professional's written opinion within 15 days after completion of the evaluation. Limit the health care professional's written opinion(s) for the hepatitis B vaccination to whether the vaccination is indicated and whether the employee has received the vaccination.

Limit the health care professional's written opinion for the post-exposure evaluation to the following information:

- Whether the employee was informed of the evaluation results
- Whether the employee was told about any medical conditions resulting from exposure to blood or OPIM that may require further evaluation or treatment.

Training and Training Records

All employees who have occupational exposure to bloodborne pathogens receive training on the epidemiology, symptoms, and mode of transmission of bloodborne pathogen diseases. In addition, the training program will include the following topics:

- An explanation of activities and tasks that may involve exposure to blood and OPIM
- How appropriate engineering controls, work practices, and PPE will prevent or reduce exposure
- The basis for the selection of PPE; the types, use, location, removal, handling, decontamination, and disposal procedures
- Hepatitis B vaccine information including that the vaccine is provided at no cost, the benefits of being vaccinated and methods of administration
- Employer responsibilities for post-exposure evaluation and medical follow-up; how and who to contact should an exposure incident occur
- An explanation of the signs and hazard labels
- How to review or obtain a copy of the exposure control plan and the standard

_____trains employees prior to initial assignment to tasks in which occupational exposure may occur. Training is repeated every 12 months or sooner when there are new tasks or changes to the existing procedures/tasks. Training records are maintained for three years and include the date(s) and content of the training program, name and qualifications of the trainer(s), and names and job titles of the attendees.

Record Keeping

Medical records for employees with occupational exposure to bloodborne pathogens include the employee's name, social security number, and hepatitis B vaccination status, including dates of hepatitis B vaccination and any medical records relative to the employee's ability to receive the vaccination. Medical records are kept for the duration of employment plus 30 years in accordance with OR-OSHA's Access to Employee Exposure and Medical Records standard, 1910.1020. Medical records are confidential. Employees must sign a written consent for disclosure.

In the event of an exposure incident, the following records will be kept in the employee's medical file:

- The results of any examination, medical testing, and follow-up procedures.
- A copy of the treating physician's written opinion to the employer.
- A copy of all information provided by the employer to the health care professional regarding the exposure incident.
- Record every needlestick on the OSHA 300 Log and/or the Sharps Injury Log. Record all other exposure incidents that result in medical treatment , (e.g., amma globulin, hepatitis B immune globulin, hepatitis B vaccine, etc.) on the OSHA 300 Log. Retain these records for five years.

Plan Evaluation and Review

Review the exposure control plan and update it at least annually. _____ is responsible for the annual review. Sign and date this exposure plan when the review has taken place.

Signature:_____
Date:_____

Needlestick Policy

Basic Requirement. You must record all work-related needlestick injuries and cuts from sharp objects that are contaminated with another person's blood or other potentially infectious material (as defined by 29 CFR 1910.1030). You must enter the case on the OSHA 300 Log as an injury. To protect the employee's privacy, you may not enter the employee's name on the OSHA 300 Log (see the requirements for privacy cases in paragraphs 1904.29(b)(6) through 1904.29(b)(9)).

What does "other potentially infectious material" mean? The term "other potentially infectious materials" is defined in the OSHA Bloodborne Pathogens standard at § 1910.1030(b). These materials include:

- Human bodily fluids, tissues and organs
- Other materials infected with the HIV or hepatitis B (HBV) virus such as laboratorycultures or tissues from experimental animals

Does this mean that I must record all cuts, lacerations, punctures, and scratches? No, you need to record cuts, lacerations, punctures, and scratches only if they are work-related and involve contamination with another person's blood or other potentially infectious material. If the cut, laceration, or scratch involves a clean object, or a contaminant other than blood or other potentially infectious material, you need to record the case only if it meets one or more of the recording criteria in § 1904.7.

If I record an injury and the employee is later diagnosed with an infectious bloodborne disease, do I need to update the OSHA 300 Log? Yes, you must update the classificationof the case on the OSHA 300 Log if the case results in death, days away from work, restricted work, or job transfer. You must also update the description to identify the infectious disease and change the classification of the case from an injury to an illness.

What if one of my employees is splashed or exposed to blood or other potentially infectious material without being cut or scratched? Do I need to record this incident? Youneed to record such an incident on the OSHA 300 Log as an illness if:

SHARPS INJURY LOG

Date of injury	Type of Sharp	Where Injury Occurred	How Injury Occurred

The following statement must be signed by every employee who declines the hepatitis vaccine. The statement can only be signed by the employee after he or she has received training about hepatitis B, hepatitis B vaccination, and the method and benefits of vaccination. Employees must be told that the vaccine and vaccination are provided at no charge. The statement is not a waiver; employees can request and receive the hepatitis B vaccination at a later date if they remain occupationally at risk for hepatitis B.

EMPLOYEE'S STATEMENT OF DECLINATION

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.

Employee's Signature:_____Date:_____

EMPLOYEE TRAINING RECORD

LIONHEARTHEALTH

EMPLOYEE TRAINING RECORD

Training Date	Hours	Topic	Trainer

SAFETY DATA SHEETS

LIONHEARTHEALTH

The Hazard Communication Standard (HCS) (29 CFR 1910.1200(g)), revised in 2012, requires that the chemical manufacturer, distributor, or importer provide Safety Data Sheets (SDSs) (formerly MSDSs or Material Safety Data Sheets) for each hazardous chemical to downstream users to communicate information on these hazards. The information contained in the SDS is largely the same as the MSDS, except now the SDSs are required to be presented in a consistent user-friendly, 16-section format. This brief provides guidance to help workers who handle hazardous chemicals to become familiar with the format and understand the contents of the SDSs.

The SDS includes information such as the properties of each chemical; the physical, health, and environmental health hazards; protective measures; and safety precautions for handling, storing, and transporting the chemical. The information contained in the SDS must be in English (although it may be in other languages as well). In addition, OSHA requires that SDS preparers provide specific minimum information as detailed in Appendix D of 29 CFR 1910.1200.

The SDS preparers may also include additional information in various section(s).Sections 1 through 8 contain general information about the chemical, identification, hazards, composition, safe handling practices, and emergency control measures (e.g., fire fighting).

This information should be helpful to those that need to get the information quickly. Sections 9 through 11 and 16 contain other technical and scientific information, such as physical and chemical properties, stability and reactivity information, toxicological information, exposure control information, and other information including the date of preparation or last revision.

The SDS must also state that no applicable information was found when the preparer does not find relevant information for any required element.The SDS must also contain Sections 12 through 15, to be consistent with the UN Globally Harmonized System of Classification and Labeling of Chemicals (GHS), but OSHA will not enforce the content of these sections because they concern matters handled by other agencies.A description of all 16 sections of the SDS, along with their contents, is presented in the following pages:

IDENTIFICATION

This section identifies the chemical on the SDS as well as the recommended uses. It also provides the essential contact information of the supplier. The required information consists of: Product identifier used on the label and any other common names or synonyms by which the substance is known. Name, address, phone number of the manufacturer, importer, or other responsible party, and emergency phone number. Recommended use of the chemical (e.g., a brief description of what it actually does, such as flame retardant) and any restrictions on use (including recommendations given by the supplier). 1

HAZARD IDENTIFICATION

This section identifies the hazards of the chemical presented on the SDS and the appropriate warning information associated with those hazards. The required information consists of:The hazard classification of the chemical (e.g., flammable liquid, category1).Signal word.Hazard statement(s).Pictograms (the pictograms or hazard symbols may be presented as graphical reproductions of the symbols in black and white or be a description of the name of the symbol (e.g., skull and crossbones, flame).Precautionary statement(s).Description of any hazards not otherwise classified.For a mixture that contains an ingredient(s) with unknown toxicity, a statement describing how much (percentage) of the mixture consists of ingredient(s) with unknown acute toxicity. Please note that this is a total percentage of the mixture and not tied to the individual ingredient(s).

COMPOSITION/INFORMATION ON INGREDIENTS

This section identifies the ingredient(s) contained in the product indicated on the SDS, including impurities and stabilizing additives. This section includes information on substances, mixtures, and all chemicals where a trade secret is claimed. The required information consists of: Substances Chemical name .Common name and synonyms. Chemical Abstracts Service (CAS) number and other unique identifiers. Impurities and stabilizing additives, which are themselves classified and which contribute to the classification of the chemical. Mixtures Same information required for substances. The chemical name and concentration (i.e., exact percentage) of all ingredients which are classified as health hazards and are: Present above their cut-off/concentration limits or Present a health risk below the cut-off/concentration limits. The concentration (exact percentages) of each ingredient must be specified except concentration ranges may be used in the following situations: A trade secret claim is made, There is batch-to-batch variation, or The SDS is used for a group of substantially similar mixtures. Chemicals where a trade secret is claimed A statement that the specific chemical identity and/or exact percentage (concentration) of composition has been withheld as a trade secret is required.

FIRST AID MEASURES

This section describes the initial care that should be given by untrained responders to an individual who has been exposed to the chemical. The required information consists of: Necessary first-aid instructions by relevant routes of exposure (inhalation, skin and eye contact, and ingestion). Description of the most important symptoms or effects, and any symptoms that are acute or delayed. Recommendations for immediate medical care and special treatment needed, when necessary.

FIRE FIGHTING MEASURES

This section provides recommendations for fighting a fire caused by the chemical. The required information consists of:

- Recommendations of suitable extinguishing equipment, and information about extinguishing equipment that is not appropriate for a particular situation.
- Advice on specific hazards that develop from the chemical during the fire, such as any hazardous combustion products created when the chemical burns.
- Recommendations on special protective equipment or precautions for firefighters

ACCIDENTAL RELEASE MEASURES

This section provides recommendations on the appropriate response to spills, leaks, or releases, including containment and cleanup practices to prevent or minimize exposure to people, properties, or the environment. It may also include recommendations distinguishing between responses for large and small spills where the spill volume has a significant impact on the hazard. The required information may consist of recommendations for: Use of personal precautions (such as removal of ignition sources or providing sufficient ventilation) and protective equipment to prevent the contamination of skin, eyes, and clothing. Emergency procedures, including instructions for evacuations, consulting experts when needed, and appropriate protective clothing. Methods and materials used for containment (e.g., covering the drains and capping procedures).Cleanup procedures (e.g., appropriate techniques for neutralization, decontamination, cleaning or vacuuming; adsorbent materials; and/or equipment required for containment/clean up)

HANDLING AND STORAGE

This section provides guidance on the safe handling practices and conditions for safe storage of chemicals. The required information consists of: Precautions for safe handling, including recommendations for handling incompatible chemicals, minimizing the release of the chemical into the environment, and providing advice on general hygiene practices (e.g., eating, drinking, and smoking in work areas is prohibited).Recommendations on the conditions for safe storage, including any incompatibilities. Provide advice on specific storage requirements (e.g., ventilation requirements).

EXPOSURE CONTROLS AND PERSONAL PROTECTION

This section indicates the exposure limits, engineering controls, and personal protective measures that can be used to minimize worker exposure.

Appropriate engineering controls (e.g., use local exhaust ventilation, or use only in an enclosed system).Recommendations for personal protective measures to prevent illness or injury from exposure to chemicals, such as personal protective equipment (PPE) (e.g., appropriate types of eye, face, skin or respiratory protection needed based on hazards and potential exposure). Any special requirements for PPE, protective clothing or respirators (e.g., type of glove material, such as PVC or nitrile rubber gloves; and breakthrough time of the glove material).

PHYSICAL AND CHEMICAL PROPERTIES

This section identifies physical and chemical properties associated with the substance or mixture. The minimum required information consists of:

- Appearance (physical state, color, etc.)
- Upper/lower flammability or explosive limits
- Odor; Vapor pressure
- Odor threshold
- Vapor density
- pH
- Relative density
- Melting point/freezing point
- Solubility(ies)
- Initial boiling point and boiling range
- Flash point
- Evaporation rate; Flammability (solid, gas)
- Partition coefficient: n-octanol/water
- Auto-ignition temperature
- Decomposition temperature
- Viscosity

The SDS may not contain every item on the above list because information may not be relevant or is not available. When this occurs, a notation to that effect must be made for that chemical property. Manufacturers may also add other relevant properties, such as the dust deflagration index (Kst) for combustible dust, used to evaluate a dust’s explosive potential

STABILITY AND REACTIVITY

This section describes the reactivity hazards of the chemical and the chemical stability information. This section is broken into three parts: reactivity, chemical stability, and other. The required information consists of: Reactivity Description of the specific test data for the chemical(s). This data can be for a class or family of the chemical if such data adequately represent the anticipated hazard of the chemical(s), where available. Chemical stability Indication of whether the chemical is stable or unstable under normal ambient temperature and conditions while in storage and being handled .Description of any stabilizers that may be needed to maintain chemical stability Indication of any safety issues that may arise should the product change in physical appearance. Other Indication of the possibility of hazardous reactions, including a statement whether the chemical will react or polymerize, which could release excess pressure or heat, or create other hazardous conditions. Also, a description of the conditions under which hazardous reactions may occur. List of all conditions that should be avoided (e.g., static discharge, shock, vibrations, or environmentalconditions that may lead to hazardous conditions).List of all classes of incompatible materials (e.g., classes of chemicals or specific substances) with which the chemical could react to produce a hazardous situation. List of any known or anticipated hazardous decomposition products that could be produced because of use, storage, or heating. (Hazardous combustion products should also be included in Section 5 (Fire-Fighting Measures) of the SDS.)

TOXOLOGICAL INFORMATION

This section identifies toxicological and health effects information or indicates that such data are not available. The required information consists of:

- Information on the likely routes of exposure (inhalation, ingestion, skin and eye contact). The SDS should indicate if the information is unknown.

- Description of the delayed, immediate, or chronic effects from short- and long-term exposure. The numerical measures of toxicity (e.g., acute toxicity estimates such as the LD50 (median lethal dose)) - the estimated amount [of a substance] expected to kill 50% of test animals in a single dose. Description of the symptoms. This description includes the symptoms associated with exposure to the chemical including symptoms from the lowest to the most severe exposure. Indication of whether the chemical is listed in the National Toxicology Program (NTP) Report on Carcinogens (latest edition) or has been found to be a potential carcinogen in the International Agency for Research on Cancer (IARC) Monographs (latest editions) or found to be a potential carcinogen by OSHA.

ECOLOGICAL INFORMATION

This section provides information to evaluate the environmental impact of the chemical(s) if it were released to the environment. The information may include:Data from toxicity tests performed on aquatic and/or terrestrial organisms, where available (e.g., acute or chronic aquatic toxicity data for fish, algae, crustaceans, and other plants; toxicity data on birds, bees, plants). Whether there is a potential for the chemical to persist and degrade in the environment either through biodegradation or other processes, such as oxidation or hydrolysis.Results of tests of bioaccumulation potential, making reference to the octanol-water partition coefficient (Kow) and the bioconcentration factor (BCF), where available.The potential for a substance to move from the soil to the groundwater (indicate results from adsorption studies or leaching studies).Other adverse effects (e.g., environmental fate, ozone layer depletion potential, photochemical ozone creation potential, endocrine disrupting potential, and/or global warming potential)g

DISPOSAL CONSIDERATIONS

This section provides guidance on proper disposal practices, recycling or reclamation of the chemical(s) or its container, and safe handling practices. To minimize exposure, this section should also refer the reader to Section 8 (Exposure Controls/Personal Protection) of the SDS. The information may include: Description of appropriate disposal containers to use.

Recommendations of appropriate disposal methods to employ. Description of the physical and chemical properties that may affect disposal activities. Language discouraging sewage disposal .Any special precautions for landfills or incineration activities

TRANSPORT INFORMATION

This section provides guidance on classification information for shipping and transporting of hazardous chemical(s) by road, air, rail, or sea. The information may include:

1. UN number (i.e., four-figure identification number of the substance)
2. UN proper shipping name
3. Transport hazard class(es)
4. Packing group number, if applicable, based on the degreeof hazard
5. Environmental hazards (e.g., identify if it is a marine pollutant according to the International Maritime Dangerous Goods Code (IMDG Code))
6. Guidance on transport in bulk (according to Annex II of MARPOL 73/783 and the International Code for the Construction and Equipment of Ships Carrying Dangerous Chemicals in Bulk (International Bulk Chemical Code (IBC Code))

7. Any special precautions which an employee should be aware of or needs to comply with, in connection with transport or conveyance either within or outside their premises (indicate when information is not available).

REGULATORY INFORMATION

This section identifies the safety, health, and environmental regulations specific for the product that is not indicated anywhere else on the SDS. The information may include: Any national and/or regional regulatory information of the chemical or mixtures (including any OSHA, Department of Transportation, Environmental Protection Agency, or Consumer Product Safety Commission regulations).

OTHER INFORMATION

Employer Responsibilities

Employers must ensure that the SDSs are readily accessible to employees for all hazardous chemicals in their workplace. This may be done in many ways. For example, employers may keep the SDSs in a binder or on computers as long as the employees have immediate access to the information without leaving their work area when needed and a back-up is available for rapid access to the SDS in the case of a power outage or other emergency. Furthermore, employers may want to designate a person(s) responsible for obtaining and maintaining the SDSs. If the employer does not have an SDS, the employer or designated person(s) should contact the manufacturer to obtain one.

References OSHA, 29 CFR 1910.1200(g) and Appendix D. United Nations Globally Harmonized System of Classification and Labelling of Chemicals (GHS), third revised edition, United Nations, 2009. These references and other information related to the revised Hazard Communication Standard can be found on OSHA's Hazard Communication Safety and Health Topics page, located at: http://www.osha.gov/dsg/hazcom/index.html.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