

# Toggenburg Ski Patrol

## 2011-2012 Bloodborne/Airborne Pathogen Training

**PRINT Name** \_\_\_\_\_

The following objectives were met:

- How to obtain a copy of the regulatory text and an explanation of it's concerns
- Information on the epidemiology and symptoms of Bloodborne diseases
- Information on the epidemiology and symptoms of Airborne diseases
- Ways in which bloodborne / airborne pathogens are transmitted
- Explanation of the exposure control plan and how to obtain a copy
- Information on how to recognize tasks that might result in occupational exposure
- Explanation of the use and limitations of work practice and engineering controls and personal protective equipment
- Information on the types, selection, proper use, location, removal, handling, decontamination and disposal of personal protective equipment
- Information on Hepatitis B vaccination, such as safety, benefits, efficacy, methods of administration, and availability
- Information on who to contact and what to do in an emergency
- Information on how to report an exposure incident and on the post-exposure evaluation and follow-up
- Information on warning labels and signs, where applicable, and color coding
- Question and answer session on any aspect of the training, and
- Tuberculosis information and skin testing (Purified Protein Derivative- PPD)

By signing this form, the member / employee attests that he / she was in attendance at this Annual Training and had the opportunity to ask questions regarding any of the information that was covered, and understands the above topics.

\_\_\_\_\_  
**Member Signature**

\_\_\_\_\_  
**Date**