

University of Illinois at Urbana-Champaign (UIUC)
Council on Teacher Education (CTE)
Bloodborne Pathogens School/Agency-Specific Questionnaire

The completion of the following questionnaire is a requirement for all student teachers/interns. Since Exposure Control Plans vary from school to school, it is important that you obtain school/agency-specific information about protecting yourself and your students against bloodborne pathogens. Obtain the needed information from your cooperating teacher/agency supervisor and then return this completed form to the appropriate person in your program.

Name _____

School/Agency you are participating in _____

Dealing with Injuries

1. Where do I send an injured student?

2. Who do I contact if a student is injured?

Personal Protective Equipment

3. What personal protective equipment is available?

4. Where is the personal protective equipment stored?

Cleaning Up

5. Who is responsible for cleaning up potentially infectious material (blood, vomit)?

6. How do I contact that person?

Exposure

7. Who do I contact if I am exposed to potentially infectious material at school?

8. What forms do I fill out if I am exposed to potentially infectious material at school?
