# New Jersey Department of Health
## PEOSH Unit

## EMPLOYEE EDUCATION AND TRAINING RECORD

<table>
<thead>
<tr>
<th>Name of Employee (Print)</th>
<th>Date of Hire</th>
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<tbody>
<tr>
<td>Job Title</td>
<td>Date Assigned</td>
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<table>
<thead>
<tr>
<th>INITIAL TRAINING</th>
<th>SUBJECT</th>
<th>DATE</th>
<th>LOCATION</th>
<th>TRAINER</th>
<th>EMPLOYEE SIGNATURE</th>
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<tbody>
<tr>
<td>a. The Standard</td>
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<tr>
<td>b. Epidemiology and Symptoms of Bloodborne Diseases</td>
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<td>c. Modes of Transmission</td>
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<td>d. Exposure Control Plan</td>
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<td>e. Recognizing Potential Exposure</td>
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<td>f. Use and Limitations of Exposure Control Methods</td>
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<td>g. Personal Protective Equipment (PPE)</td>
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<td>h. Selection of PPE</td>
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<td>i. HBV Immunization Program</td>
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<td>j. Emergencies Involving Blood or Potentially Infectious Materials</td>
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<td>k. Exposure Follow-up Procedures</td>
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<td>l. Post Exposure Evaluation and Follow-up</td>
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<td>m. Signs and Labels</td>
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<td>n. Opportunity to Ask Questions</td>
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<th>ADDITIONAL TRAINING</th>
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<th>ANNUAL RETRAINING</th>
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