

THE KUESEL GROUP	<i>Bloodborne Pathogens Exposure Control Plan – Appendix A: Exposure Report</i>	Procedure No.: SP-21 Revision No.: Date: Nov. 2018 Page: 151 of 480
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Employee Providing Assistance (Having Exposure): _____

Description of Exposure: _____

Job Site: _____

Incident Date: _____ Time: _____

Incident Location: _____

Injured Employee/Person: _____

Brief Description of Injury: _____

Project Manager/Job Site Supervisor: _____

Signature _____ Date _____