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Appendix A – Aerosol Transmissible Diseases/Pathogens

This appendix contains a list of diseases and pathogens which are to be considered aerosol transmissible pathogens for the purpose of Section 5199. Employers are required to provide the protections required by Section 5199 regarding airborne infectious diseases or pathogens for those pathogens and diseases listed below under "Airborne Infectious Diseases/Pathogens"

Airborne Infectious Diseases/Pathogens

Aerosolizable spore-containing powder or other substance that is capable of causing serious human disease, e.g. Anthrax/*Bacillus anthracis*
Avian influenza/Avian influenza A viruses (strains capable of causing serious disease in humans)
Varicella disease (chickenpox, shingles)/Varicella zoster and Herpes zoster viruses, disseminated disease in any patient. Localized disease in immunocompromised patient until disseminated infection ruled out
Measles (rubeola)/Measles virus
Monkeypox/Monkeypox virus
Novel or unknown pathogens
Severe acute respiratory syndrome (SARS)/SARS-associated coronavirus (SARS-CoV)
Smallpox (variola)/Varioloa virus (see vaccinia for management of vaccinated persons)
Tuberculosis (TB)/*Mycobacterium tuberculosis* -- Extrapulmonary, draining lesion; Pulmonary or laryngeal disease, confirmed; Pulmonary or laryngeal disease, suspected
Any other disease for which the CDC or CDPH recommends airborne infection isolation

Droplet Precautions

Diphtheria/*Corynebacterium diphtheriae* – pharyngeal
Epiglottitis, due to *Haemophilus influenzae* type b
Group A Streptococcal (GAS) disease (strep throat, necrotizing fasciitis, impetigo)/Group A streptococcus
Haemophilus influenzae Serotype b (Hib) disease/*Haemophilus influenzae* serotype b -- Infants and children
Influenza, human (typical seasonal variations)/influenza viruses
Meningitis
Haemophilus influenzae, type b known or suspected
Neisseria meningitidis (meningococcal) known or suspected
Meningococcal disease/*Neisseria meningitidis*: sepsis, pneumonia (see also meningitis)
Mumps (infectious parotitis)/Mumps virus
Mycoplasmal pneumonia/*Mycoplasma pneumoniae*
Parvovirus B19 infection (erythema infectiosum, fifth disease)/Parvovirus B19

Pertussis (whooping cough)/*Bordetella pertussis*
Pharyngitis in infants and young children/Adenovirus, Orthomyxoviridae, Epstein-Barr virus, Herpes simplex virus,
Pneumonia
Adenovirus
Chlamydia pneumoniae
Mycoplasma pneumoniae
Neisseria meningitidis
Streptococcus pneumoniae
Pneumonic plague/*Yersinia pestis*
Rubella virus infection (German measles) (also see congenital rubella)/Rubella virus
Scarlet fever in infants and young children/Group A streptococcus, Serious invasive disease
Viral hemorrhagic fevers due to Lassa, Ebola, Marburg, Crimean-Congo fever viruses, and Hantaviruses

Any other disease for which the CDC or CDPH recommends droplet precautions

§5199. Appendix C1 - Vaccination Declination Statement (Mandatory)

The employer shall ensure that employees who decline to accept a recommended vaccination offered by the employer sign and date the following statement as required by subsection (h)(5)(E):

I understand that due to my occupational exposure to aerosol transmissible diseases, I may be at risk of acquiring infection with _____ (name of disease or pathogen). I have been given the opportunity to be vaccinated against this disease or pathogen at no charge to me. However, I decline this vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring _____, a serious disease. If in the future I continue to have occupational exposure to aerosol transmissible diseases and want to be vaccinated, I can receive the vaccination at no charge to me.

_____ _____
Employee Signature Date

§5199. Appendix C2 - Seasonal Influenza Vaccination Declination Statement (Mandatory)

The employer shall ensure that employees who decline to accept the seasonal influenza vaccination offered by the employer sign and date the following statement as required by subsection (h)(10):

I understand that due to my occupational exposure to aerosol transmissible diseases, I may be at risk of acquiring seasonal influenza. I have been given the opportunity to be vaccinated against this infection at no charge to me. However, I decline this vaccination at this time. I understand that by declining this vaccine, I continue to be at increased risk of acquiring influenza. If, during the season for which the CDC recommends administration of the influenza vaccine, I continue to have occupational exposure to aerosol transmissible diseases and want to be vaccinated, I can receive the vaccination at no charge to me.

_____ _____

Employee Signature Date

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§5199. Appendix D: Aerosol Transmissible Pathogens - Laboratory (Mandatory)

This appendix contains a list of agents that, when reasonably anticipated to be a laboratory to comply with Section 5199 for laboratory operations by performing a risk present, require assessment and establishing a biosafety plan that includes appropriate control measures as identified in the standard.

Adenovirus (in clinical specimens and in cultures or other materials derived from clinical specimens)

Arboviruses, unless identified individually elsewhere in this list (large quantities or high concentrations* of arboviruses for which CDC recommends BSL-2, e.g., dengue virus; potentially infectious clinical materials, infected tissue cultures, animals, or arthropods involving arboviruses for which CDC recommends BSL-3 or higher, e.g., Japanese encephalitis, West Nile virus, Yellow Fever)

Arenaviruses (large quantities or high concentrations of arenaviruses for which CDC recommends BSL-2, e.g., Pichinde virus; potentially infectious clinical materials, infected tissue cultures, animals, or arthropods involving arenaviruses for which CDC recommends BSL-3 or higher, e.g., Flexal virus)

Bacillus anthracis (activities with high potential for aerosol production**, large quantities or high concentrations, screening environmental samples fromb. anthracis - contaminated locations)

Blastomyces dermatitidis (sporulating mold-form cultures, processing environmental materials known or likely to contain infectious conidia)
Bordetella pertussis (aerosol generation, or large quantities or high concentrations)

Brucella abortus, B. canis, B. "maris", B. melitensis, B. suis (cultures, experimental animal studies, products of conception containing or believed to contain pathogenic Brucella spp.)

Burkholderia mallei, B. pseudomallei (potential for aerosol or droplet exposure, handling infected animals, large quantities or high concentrations)

Cercopithecine herpesvirus (see Herpesvirus simiae)

Chlamydia pneumoniae (activities with high potential for droplet or aerosol production, large quantities or high concentrations)

Chlamydia psittaci (activities with high potential for droplet or aerosol production, large quantities or high concentrations, non-avian strains, infected caged birds, necropsy of infected birds and diagnostic examination of tissues or cultures known to contain or be potentially infected withC. psittacistrains of avian origin)

Chlamydia trachomatis (activities with high potential for droplet or aerosol production, large quantities or high concentrations, cultures of lymphogranuloma venereum (LGV) serovars, specimens known or likely to containC. trachomatis)

Clostridium botulinum (activities with high potential for aerosol or droplet production, large quantities or high concentrations)

Coccidioides immitis, C. posadasii (sporulating cultures, processing environmental materials known or likely to contain infectious arthroconidia, experimental animal studies involving exposure by the intranasal or pulmonary route)

Corynebacterium diphtheriae

Coxiella burnetti (inoculation, incubation, and harvesting of embryonated eggs or cell cultures; experimental animal studies, animal studies with infected arthropods, necropsy of infected animals, handling infected tissues)

Crimean-Congo haemorrhagic fever virus

Cytomegalovirus, human (viral production, purification, or concentration)

Eastern equine encephalomyelitis virus (EEEV) (clinical materials, infectious cultures, infected animals or arthropods)

Ebola virus

Epstein-Barr virus (viral production, purification, or concentration)

Escherichia coli,shiga toxin-producing only (aerosol generation or high splash potential)

Flexal virus

Francisella tularensis (suspect cultures -including preparatory work for automated identification systems, experimental animal studies, necropsy of infected animals, high concentrations of reduced-virulence strains)

Guanarito virus

Haemophilus influenzae,type b

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Hantaviruses (serum or tissue from potentially infected rodents, potentially infected tissues, large quantities or high concentrations, cell cultures, experimental rodent studies)

Helicobacter pylori(homogenizing or vortexing gastric specimens)

Hemorrhagic fever - specimens from cases thought to be due to dengue or yellow fever viruses or which originate from areas in which communicable hemorrhagic fever are reasonably anticipated to be present

Hendra virus

Hepatitis B, C, and D viruses (activities with high potential for droplet or aerosol generation, large quantities or high concentrations of infectious materials)

Herpes simplex virus 1 and 2

Herpesvirus simiae (B-virus) (consider for any material suspected to contain virus, mandatory for any material known to contain virus, propagation for diagnosis, cultures)

Histoplasma capsulatum (sporulating mold-form cultures, propagating environmental materials known or likely to contain infectious conidia)

Human herpesviruses 6A, 6B, 7, and 8 (viral production, purification, or concentration)

Influenza virus, non-contemporary human (H2N2) strains, 1918 influenza strain, highly pathogenic avian influenza (HPAI) (large animals infected with 1918 strain and animals infected with HPAI strains in ABSL-3 facilities, loose-housed animals infected with HPAI strains in BSL-3-Ag facilities)

Influenza virus, H5N1 - human, avian

Junin virus

Kyasanur forest disease virus

Lassa fever virus

Legionella pneumophila, other legionella-like agents (aerosol generation, large quantities or high concentrations)

Lymphocytic choriomeningitis virus (LCMV) (field isolates and clinical materials from human cases, activities with high potential for aerosol generation, large quantities or high concentrations, strains lethal to nonhuman primates, infected transplantable tumors, infected hamsters)

Machupo virus

Marburg virus

Measles virus

Monkeypox virus (experimentally or naturally infected animals)

Mumps virus

Mycobacterium tuberculosis complex (M. africanum, M. bovis, M. caprae, M. microti, M. pinnipedii, M. tuberculosis(aerosol-generating activities with clinical specimens, cultures, experimental animal studies with infected nonhuman primates)

Mycobacteria spp. other than those in the M. tuberculosis complex and M. leprae (aerosol generation)
Mycoplasma pneumoniae

Neisseria gonorrhoeae (large quantities or high concentrations, consider for aerosol or droplet generation)

Neisseria meningitidis (activities with high potential for droplet or aerosol production, large quantities or high concentrations)

Nipah virus

Omsk hemorrhagic fever virus

Parvovirus B19

Prions (bovine spongiform encephalopathy prions, only when supported by a risk assessment)

Rabies virus, and related lyssaviruses (activities with high potential for droplet or aerosol production, large quantities or high concentrations)

Retroviruses, including Human and Simian Immunodeficiency viruses (HIV and SIV) (activities with high potential for aerosol or droplet production, large quantities or high concentrations)

Rickettsia prowazekii, Orientia (Rickettsia) tsutsuagmushi, R. typhi (R. mooseri),Spotted Fever Group agents(R. akari, R. australis, R. conorii, R. japonicum, R. rickettsii,andR. siberica)(known or potentially infectious materials; inoculation, incubation, and harvesting of embryonated eggs or cell cultures; experimental animal studies with infected arthropods)

Rift valley fever virus (RVFV)

Rubella virus

Sabia virus

Salmonella spp. other than S. typhi (aerosol generation or high splash potential)

Salmonella typhi (activities with significant potential for aerosol generation, large quantities)

SARS coronavirus (untreated specimens, cell cultures, experimental animal studies)

Shigella spp. (aerosol generation or high splash potential)

Streptococcus spp., group A

Tick-borne encephalitis viruses (Central European tick-borne encephalitis, Far Eastern tick-borne encephalitis, Russian spring and summer encephalitis)

Vaccinia virus

Varicella zoster virus

Variola major virus (Smallpox virus)

Variola minor virus (Alastrim)

Venezuelan equine encephalitis virus (VEEV) (clinical materials, infectious cultures, infected animals or arthropods)

West Nile virus (WNV) (dissection of field-collected dead birds, cultures, experimental animal and vector studies)

Western equine encephalitis virus (WEEV) (clinical materials, infectious cultures, infected animals or arthropods)

Yersinia pestis (antibiotic resistant strains, activities with high potential for droplet or aerosol production, large quantities or high concentrations, infected arthropods, potentially infected animals)

* 'Large quantities or a high concentration' refers to volumes or concentrations considerably in excess of those typically used for identification and typing activities. A risk assessment must be performed to determine if the quantity or concentration to be used carries an increased risk, and would therefore require aerosol control.

** 'activities with high potential for aerosol generation' include centrifugation

§5199. Appendix E: Aerosol Transmissible Disease Vaccination Recommendations for Susceptible Health Care Workers (Mandatory)

Vaccine	Schedule
Influenza	One dose annually
Measles	Two doses
Mumps	Two doses
Rubella	One dose
Tetanus, Diptheria, and Acellular Pertussis (Tdap)	One dose, booster as recommended
Varicella-zoster (VZV)	Two doses

Source: California Department of Public Health, Immunization Branch
Immunity should be determined in consultation with Epidemiology and Prevention of Vaccine-Preventable Diseases.

§5199. Appendix G: Information for Respirator Fit-Test Screening (Mandatory if employer does not provide annual fit-test)

Respirators are an important means of reducing your exposure to infectious aerosols. Air purifying respirators provide a barrier to prevent health care workers from inhaling Mycobacterium tuberculosis and other pathogens. The level of protection a respirator provides is determined by the efficiency of the filter material and how well the face piece fits or seals to your face.

Cal/OSHA regulations require that you be provided with a fit-test at the time of initial fitting, whenever a different size, make, model or style of respirator is used, and whenever you report a change in physical characteristics that may affect fit, such as major dental work, facial surgery or injury, or a change in weight.

Fit tests must also be repeated periodically, because people are not always aware of facial changes that may have affected the fit of the respirator. Generally, Cal/OSHA regulations require that fit-tests be repeated annually. The aerosol transmissible disease regulation permits employers to lengthen this interval to every two years for employees who are not exposed to high hazard procedures, such as bronchoscopies. However, if you believe that you need another fit-test to ensure that the respirator is fitting you correctly, you may request an additional fit-test, and your employer will provide it.

A respirator will not protect you if it does not fit, and if it is not worn properly. In addition to fit-testing, it is important for you to be aware of the size, make, model and style of respirator that fits you, and to understand and practice how to put the respirator on and take it off. It is particularly important to properly place the straps, and in some models, to adjust the straps and adjust the nose piece, so that it forms a snug seal on your face. During your annual training, you will be shown how to use a respirator.

Screening Questions (Answer Yes/No)

Have you had recent major dental work, facial injury or facial surgery since your last fit-test?

Have you had a significant weight gain or loss since your last fit-test?

Do you want to be provided with an additional fit-test for your current respirator?

Name _____

Date _____

Employee ID number _____

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Date of fit-test (if provided) _____