

#### **Occupational Safety and Health Administration**

# Measles

#### **Measles Menu**

#### **Workers' Rights**

# **Standards**

This section highlights OSHA standards and directives (instructions for compliance officers) and other related information that may apply to worker exposures to measles.

There is no specific OSHA standard covering measles. However, some OSHA requirements may apply to preventing occupational exposure to measles. Among the most relevant are:

- OSHA's Personal Protective Equipment (PPE) standards (in general industry, <u>29 CFR 1910 Subpart I</u> and, in construction, <u>29 CFR 1926 Subpart E</u>), which require using gloves, eye and face protection, and respiratory protection.
- OSHA's Bloodborne Pathogens (BBP) standard 29 CFR 1910.1030), which applies to occupational exposure to human blood and other potentially infectious materials, including saliva in dental procedures. The BBP standard applies to occupational exposure to some human body fluids, including saliva in dental procedures, which can transmit measles. The BBP standard also describes measures that could serve as a framework to control non-bloodborne exposures that can transmit measles, including exposures to body fluids (e.g., sputum, respiratory and nasal secretions, and saliva outside of dental procedures) to which the standard does not apply.
- The General Duty Clause, <u>Section 5(a)(1)</u> of the <u>Occupational Safety and Health (OSH) Act of 1970</u>, 29 USC 654(a)(1), which requires employers to furnish to each worker "employment and a place of employment, which are free from recognized hazards that are causing or are likely to cause death or serious physical harm."

Employers must also protect their workers from exposure to chemicals used for cleaning and disinfection. Employers should be aware that common sanitizers and sterilizers could contain hazardous chemicals. Where workers are exposed to hazardous chemicals, employers must comply with OSHA's Hazard Communication standards (in general industry, 29 CFR 1910.1200)

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and, in construction, <u>29 CFR 1926.59</u>) and other applicable OSHA chemical standards. OSHA provides information about hazardous chemicals used in hospitals in the <u>Housekeeping</u> <u>section</u> of its <u>Hospital eTool</u>.

Depending on the specific work task, setting, and exposure to other biological or chemical agents, additional OSHA standards that may apply include:

# **OSHA Standards**

Recordkeeping and Reporting Occupational Injuries and Illness (29 CFR 1904)		Related Information
<u>1904</u>		Related Information

General Industry (29 CFR 1910)		Related Information
1910 Subpart I - Personal Protective Equipment	1910.132, General requirements.	Related Information
	1910.133, Eye and face protection.	Related Information
	1910.134, Respiratory protection.	Related Information
	1910.138, Hand Protection.	Related Information
1910 Subpart J - General Environmental Controls	<u>1910.141</u> , Sanitation.	Related Information
1910 Subpart Z - Toxic and Hazardous Substances	1910.1020, Access to employee exposure and medical records.	Related Information
	1910.1030, Bloodborne pathogens.	Related Information
	1910.1200, Hazard Communication.	Related Information

Construction (29 CFR 1926)	Related Information
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Construction (29 CFR 1926)		Related Information
1926 Subpart C - General Safety and Health Provisions	1926.33, Access to employee exposure and medical records.	Related Information
1926 Subpart D - Occupational Health and Environmental Controls	<u>1926.51</u> , Sanitation.	Related Information
1926 Subpart E - Personal Protective and Life Saving Equipment	1926.95, Criteria for personal protective equipment.	Related Information
	1926.102, Eye and face protection.	Related Information
	1926.103, Respiratory protection.	Related Information

Federal Agencies (29 CFR 1960)		Related Information
<u>1960</u>		Related Information

### **State Plan Standards**

There are 29 <u>OSHA-approved State Plans</u> operating state-wide occupational safety and health programs. State Plans are required to have standards and enforcement programs that are at least as effective as OSHA's and may have different or more stringent requirements.

### **Additional Directives**

Note: The directives in this list provide additional information that is not necessarily connected to a specific OSHA standard highlighted on this Safety and Health Topics page.

- <u>Inspection Procedures for the Hazard Communication Standard (HCS 2012)</u>. CPL 02-02-079, (July 09, 2015).
- 29 CFR Part 1910, Subpart I, Enforcement Guidance for Personal Protective Equipment in General Industry. CPL 02-01-050, (February 10, 2011).
- Rules of agency practice and procedure concerning OSHA access to employee medical records. CPL 02-02-072, (August 22, 2007).

• <u>Enforcement Procedures for the Occupational Exposure to Bloodborne Pathogens.</u> CPL 02-02-069, (November 27, 2001).

See also <u>Most Frequently Asked Questions Concerning the Bloodborne Pathogens Standard</u>, <u>29 CFR 1910.1030</u>. Provides answers to the most commonly asked questions related to the BBP standard.

## **Additional Letters of Interpretation**

Note: The letters in this list provide additional information that is not necessarily connected to a specific OSHA standard highlighted on this Safety and Health Topics page.

- <u>Employees (daycare workers) required to provide first aid are covered by 1910.1030</u> (October 21, 1999).
- <u>Paragraph 11(c)</u> of the OSH Act, 29 USC 660(c), prohibits employers from retaliating against workers for raising concerns about safety and health conditions. OSHA encourages workers who suffer such discrimination to <u>submit a complaint to OSHA</u>. Workers must file their complaints within 30 days after such violation occurs.
- Workers in specific industries, such as the airline, maritime, trucking, railroad, public
  transit, or food preparation industries, may have additional whistleblower protections
  that have longer opportunities to report a complaint of retaliation for raising concerns
  about measles or cleaning chemicals; such workers should contact OSHA if they believe
  they have experienced retaliation even if it has been more than 30 days since the
  retaliation occurred.

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