

# Health Occupations Education

Reset Form

## Potentially Applicable Checklists



### Program Name

Dental Assistant  
 Dental Laboratory Technician  
 Emergency Medical Technician  
 Health Aide  
 Health Careers  
 Health Occupations  
 Health Unit Coordinator/Ward Clerk  
 Home Health Aide  
 Medical Assistant

Medical Office Management  
 Medical Records Technician  
 Medical Transcriber  
 Nursing Assistant  
 Nursing Assistant/Dental Assistant  
 Nursing Assistant/Home Health Aide  
 Nursing Assistant/Unit Secretary  
 Practical Nursing

Program Information				
Checklist	Need?	Priority	Date Given	Date Returned
<a href="#">Accident Prevention Signs and Tags</a>	Yes			
<a href="#">Personal Protective Equipment</a>	Yes			
<a href="#">Bloodborne Pathogens</a> (for programs that have the potential for exposure to bloodborne pathogens and other potentially infectious materials)				
<a href="#">Compressed Gases</a> (for programs that use compressed gas cylinders)				
<a href="#">Flammable and Combustible Liquids</a> (for programs which use flammable and combustible liquids)				
<a href="#">Hazardous Waste</a> (for programs that might generate hazardous waste)				

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U.S. Centers for Disease Control and Prevention  
 National Institute for Occupational Safety and Health

Safety Checklist Program for Schools  
 DHHS (NIOSH) Publication Number 2004-101  
 October 2003

Program Information				
Checklist	Need?	Priority	Date Given	Date Returned
<a href="#">Regulated Medical Waste</a> (for programs that generate waste and sharps contaminated with blood or other infectious agents)				
<a href="#">Respiratory Protection</a> (for programs that use respirators to protect against inhaling harmful atmospheres)				
<a href="#">Toxic and Hazardous Substance Exposure</a> (for programs where there may be excessive airborne exposure)				

