



County of Santa Cruz

HEALTH SERVICES AGENCY

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EMERGENCY MEDICAL
SERVICES PROGRAM

Protocol No. 4010
December 1, 2014

Emergency Medical Services Program

Approved

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Medical Director

Subject: EMS PERSONNEL INFECTIOUS DISEASE PRECAUTIONS AND EXPOSURE MANAGEMENT

I. AUTHORITY

Division 2.5, California Health and Safety Code, Sections 1797.186, 1797.188, 1797.189. www.leginfo.ca.gov
Bloodborne pathogens - 1910.1030, U.S. Department of Labor. www.osha.gov/SLTC/bloodbornepathogens/

II. PURPOSE

To provide guidelines and procedures for EMS prehospital personnel, to reduce risk of infectious disease exposure to themselves and patients, and to evaluate and report suspected exposures to the Santa Cruz County Public Health Division's Communicable Disease Unit.

- A. Although the presence of disease-causing agents may or may not be known, these agents may be present in body fluids and substances. Even apparently healthy persons may carry and be capable of transmitting disease.
- B. Precautions identified in this policy are intended to provide prehospital personnel with information to safely care for all patients, regardless of disease status.

III. EXPOSURE RISK REDUCTION

- A. Prehospital Personnel. Prehospital personnel shall:
 - 1. Follow employer's policies/procedures for infection control to protect both patients and themselves. When employer's policies differ from these policies then the most stringent policy shall apply.
 - 2. Use standard precautions for all patient contacts. Additional barrier precautions are to be used based on the potential for exposure to body fluids and substances.
 - 3. Wash hands, prior to and following patient contact at a minimum, regardless of the use of gloves or other barrier precautions. Thorough hand washing with soap and water is the most effective infection control activity for prehospital personnel. Waterless hand sanitizers are an option if soap and water are not available.

- B. Provider Agency.** Each EMS provider agency shall:
1. Comply with all federal, state, and local regulations regarding infectious disease precautions.
 2. Establish and maintain a written exposure control plan designed to eliminate or minimize employee exposure. This plan shall include a procedure to be used if an employee is possibly exposed to a communicable disease and this plan shall be made easily accessible.
 3. Designate an infection control officer to evaluate and respond to possible infectious disease exposure of provider agency's prehospital personnel.
 4. Make available equipment, supplies and training necessary for prehospital personnel to reasonably protect themselves and their patients against infectious disease exposure.
- C. Receiving Facility.** Receiving hospitals should have staff procedures for:
1. Assisting possibly exposed prehospital personnel in assessing the significance of the exposure, and the need for and provision of prophylaxis.
 2. Obtaining the appropriate testing to determine whether or not the source patient is infected with a communicable disease.

IV. EXPOSURE DEFINITION

A significant communicable disease exposure is defined by criteria set by the Centers for Disease Control (CDC) and the Local Public Health Department and may include:

- A. Contact with patient's blood, bodily tissue, or other body fluids containing visible blood on non-intact skin (e.g. open wound; exposed skin that is chapped, abraded, affected with a rash) and/or mucous membranes (e.g., eye, mouth).
- B. Contaminated (used) needle stick injury.
- C. Unprotected mouth-to-mouth resuscitation.
- D. Face-to-face contact in areas with restricted ventilation with patients who have airborne and or droplet transmissible diseases (e.g. Influenza, Measles, Chickenpox, Pertussis, Tuberculosis or Meningitis). See <http://www.cdc.gov/hicpac/pdf/isolation/Isolation2007.pdf>
- E. If extent of exposure is in question contact Santa Cruz County Public Health Department for additional guidance. (831) 454-4114 (weekdays), (831) 471-1170 (afterhours/weekends/holidays)

V. CENTER FOR DISEASE CONTROL RECOMMENDATIONS

CDC recommendations should be used for post-exposure prophylaxis following significant exposures. Provider agencies, designated officers, occupational injury treatment centers, and emergency department staffs are expected to coordinate efforts to ensure prompt treatment for affected prehospital personnel.

VI. RESPONSIBILITIES IN A CASE OF SUSPECTED EXPOSURE

- A. Individual that may have been exposed shall:
 1. Contact his or her employer's Infection Control Officer/Designated Officer as soon as possible to determine the extent of the exposure and if follow-up recommendations including prophylaxis are required.

2. Refer to employer's internal notification requirements and internal policy for direction and advice on reporting, evaluation and treatment.
- B. EMS Provider Agency of the individual who may have been exposed should:
1. Assess the potential exposure to determine if the exposure meets the definition as defined above.
 2. Assure the individual with a suspected exposure is instructed to report immediately to emergency department, or other health treatment facilities for risk assessment and determination of need for prophylactic treatment.

VII. RECEIVING HOSPITAL RESPONSIBILITIES – SOURCE PATIENT

- A. Evaluate source patient for any history, signs or symptoms of a communicable disease.
- B. Obtain consent to, and collect appropriate specimens (e.g. blood, sputum) from the source patient necessary to determine potential risk to the exposed person.
- C. Expedite the testing process (select the tests with rapid turnaround in mind), to the extent possible, in consideration of the exposed individual's concerns and the need for continued prophylactic care.
- D. Complete a CONFIDENTIAL MORBIDITY REPORT form and promptly report any reportable communicable diseases found in the source patient to the Public Health Division's Communicable Disease Unit in accordance with the CONFIDENTIAL MORBIDITY REPORT form instructions as required by law.

VIII. RECEIVING HOSPITAL RESPONSIBILITIES – EXPOSED INDIVIDUAL

- A. Receiving hospitals must assist prehospital personnel who have had significant exposures.
- B. Receiving hospital emergency department staff shall:
 1. Actively assist exposed prehospital personnel in evaluating risk and recommending and/or providing appropriate prophylactic care when indicated.
 2. Obtain blood and necessary tests from the exposed prehospital person necessary to determine base-line status.
- C. Emergency departments are expected to follow CDC guidelines when managing prehospital exposure to potentially infectious substances. Go to <http://www.cdc.gov/> for the latest information.

IX. SANTA CRUZ COUNTY PUBLIC HEALTH DIVISION RESPONSIBILITIES

Upon notification, the Public Health Division will:

- A. Verify the exposure is significant and contact the receiving hospital(s) and the prehospital employer's designated officer for infection control.
- B. Dependent on the disease, notify the exposed person of any recommended disease prevention/prophylaxis.
- C. If exposed individuals or her employer's Infection Control Officer/Designated Officer have immediate concerns about possible exposures, or if the exposures are significant, they should contact the Public Health Division's Communicable Disease Unit using the contact phone numbers on the CONFIDENTIAL MORBIDITY REPORT form.