



PATROL GUIDE

Section: Personnel Matters		Procedure No: 205-10	
EXPOSURE OF MEMBERS OF THE SERVICE TO INFECTIOUS DISEASES OR HAZARDOUS MATERIALS			
DATE ISSUED: 08/19/13	DATE EFFECTIVE: 08/19/13	REVISION NUMBER:	PAGE: 1 of 4

PURPOSE

To provide instructions and minimize risk to members of the service (uniformed and civilian) or auxiliary police officers who have contact with or handle an animal or person who may have an infectious disease, or who have contact with or handle hazardous materials.

DEFINITIONS

INFECTIOUS DISEASE - as used in this procedure, includes diseases capable of being transmitted by contact with an infected animal’s saliva or central nervous system tissue, or with an infected individual’s blood or body fluids.

HAZARDOUS MATERIAL - as used in this procedure, includes any chemical, biological, or radiological substance which is a health hazard. Chemical health hazards include carcinogens, toxic agents, irritants, corrosives, or agents which damage the lungs, skin, eyes, or mucous membranes, etc. Chemical physical hazards include flammable or combustible liquids, compressed gas, or explosive or reactive substances, etc.

EXPOSURE TO AN INFECTIOUS DISEASE - as used in this procedure, includes those situations where a member of the service is exposed by airborne transmission or direct contact to an individual suspected of having a disease, or where a member comes in contact with the blood or body fluids of an individual suspected of having an infectious disease, or, where a member of the service is injured as the result of a human or animal bite, or hypodermic needle puncture, or other contaminated sharp instrument, or where a member of the service is exposed to an animal suspected of having an infectious disease, or where a member comes in contact with the saliva or central nervous system tissue of an animal suspected of having an infectious disease.

EXPOSURE TO A HAZARDOUS MATERIAL - as used in this procedure, includes those situations where a member of the service is exposed to a hazardous material whether through inhalation, ingestion, skin contact, or parenteral contact.

UNIVERSAL PRECAUTIONS - as used in this procedure, is an approach to infection control. According to this approach, all human blood and certain body fluids are to be treated as if they are known to be infectious for human immunodeficiency virus (HIV), hepatitis B virus (HBV), or other bloodborne pathogens; and in addition, all animal saliva and central nervous system tissue are to be treated as if they are known to be infectious for rabies. All efforts to avoid contact with these potentially infectious materials should be taken as well as utilizing whatever protective equipment is available.

PATROL GUIDE

PROCEDURE NUMBER:	DATE EFFECTIVE:	REVISION NUMBER:	PAGE:
205-10	08/19/13		2 of 4

**DEFINITION
(continued)**

DESIGNATED OFFICER - an individual designated under 42 U.S.C. 300ff-86 by the Public Health Officer of the State involved (42 U.S.C. 300ff-76) to execute provisions of Section 411 of the Ryan White Comprehensive AIDS Resources Emergency Act regarding emergency response employees who request a determination whether they were exposed to an infectious disease.

NOTE

To avoid unnecessary exposure, control of the aided/collision victim, or prisoner will be assigned to an officer at the scene who has already had contact with a person suspected of having an infectious disease. The assigned officer will be responsible for completing the processing of the individual. If there are numerous individuals involved, the patrol supervisor at the scene will be responsible for the coordination of information and documenting the name, etc., of the members of the service involved. This Department is offering certain members of the service the opportunity to receive, free of charge, pre-exposure, a series of three inoculations of the vaccine against Hepatitis B; and free of charge, post-exposure inoculation. This Department is offering certain members of the service the opportunity to receive, free of charge, pre-exposure, a routine annual or biannual, Mantoux (PPD) skin test against tuberculosis (based on a determination of a significant occupational exposure); and, free of charge, post-exposure, a Mantoux (PPD) skin test against tuberculosis (based on a determination of a significant exposure).

PROCEDURE

Upon being exposed to an infectious disease, hazardous material, or suffering a human or animal bite, or hypodermic needle puncture wound:

**MEMBER OF
THE SERVICE**

1. Comply with the guidelines listed in “ADDITIONAL DATA” statement of this procedure, when possible.
2. Notify desk officer, precinct of occurrence.

NOTE

When exposure involves an actual injury, the member of the service concerned will be transported to the hospital for treatment and P.G. 205-05, “Line Of Duty Injury Or Death Occurring Within The City”, or 205-06, “Line Of Duty Injury Or Death Outside City In Residence Counties,” will be complied with as appropriate. When exposure does not involve an actual injury and the exposure is related to tuberculosis, the member of the service concerned should consider this Department’s offer of Mantoux (PPD) skin testing which is free of charge. When tested and the results are positive, notify Unit Safety Officer to initiate entry on State of New York - Department of Labor Log and Summary of Occupational Injuries and Illnesses (DOSH 900). Tuberculosis infection and tuberculosis disease are both recordable on DOSH 900 logs. A code (e.g., maiden name pseudonym) may be used to substitute for the description of injury or illness (column [F]).

DESK OFFICER

3. Notify Medical Division, Sick Desk and obtain exposure report number.
4. Make Command Log entry of information
 - a. Include Exposure Report number in Log entry.
5. Notify designated Department surgeon of the facts involved.

PATROL GUIDE

PROCEDURE NUMBER:	DATE EFFECTIVE:	REVISION NUMBER:	PAGE:
205-10	08/19/13		3 of 4

DEPARTMENT SURGEON 6. Contact member of the service involved and advise of necessary treatment.

MEMBER OF THE SERVICE 7. Comply with directions of Department surgeon.

NOTE *By telephoning this Department's designated officer at the Medical Division, Hazmat Unit, emergency response employees, such as a law enforcement officer or auxiliary police officer, may submit a request for a determination whether they were exposed to a specific infectious disease when a victim of an emergency who was aided by the emergency response employee was transported to a medical facility. If it is determined that the emergency response employee may have been exposed to an infectious disease, a signed written request, along with the facts collected, must be sent by the designated officer to the medical facility to which the victim (or patient), i.e., aided or prisoner, was transported. After receiving a notification from the medical facility, to the extent practicable, the designated officer must immediately notify the member or members concerned. Whenever the designated officer discloses information related to Human Immunodeficiency Virus (HIV) to an emergency response employee, redisclosure by the emergency response employee is prohibited when not in conformance with state law.*

8. Make **ACTIVITY LOG (PD 112-145)** entry of facts involved.
a. Include Exposure Report number.

ADDITIONAL DATA

EXPOSURE TO INFECTIOUS DISEASES GUIDELINES

- a. Confer with Emergency Medical Service personnel, the individual's family, friends, neighbors, doctor, or appropriate agency as to the source individual's medical conditions, when circumstances permit.
- b. Wear disposable gloves if contact with individual's blood or body fluids is a possibility; and if a member who is routinely engaged in the capture or seizure of suspected rabid animals, wear heavy duty disposable rubber gloves if contact with animal's saliva or central nervous system tissue is a possibility.
- c. Wash hands with soap and water (disinfectant soap, if possible), after removing disposable gloves. Glove kits containing antiseptic wipes, gloves, and disposable bag should be used when hand-washing facilities are not available.
- d. Immediately and thoroughly wash hands or other unprotected body parts if they come in contact with individual's blood or body fluids, or if bitten, scratched, abraded, by an animal, or if there is contact between the member and the animal's saliva or nervous system tissue. Use disinfectant soap, if possible.
- e. Remove and machine wash (hot cycle), or have dry cleaned, as soon as possible, any part of uniform/civilian clothes that come in contact with an individual's blood or body fluids and promptly clean any equipment other than that made of fabric.
- f. Use extraordinary care to avoid accidental puncture wounds from needles which may be contaminated with potentially infectious material.
- g. Affix Biohazard Label to any property, evidence, or waste which may be contaminated.

PATROL GUIDE

PROCEDURE NUMBER:	DATE EFFECTIVE:	REVISION NUMBER:	PAGE:
205-10	08/19/13		4 of 4

**ADDITIONAL
DATA
(continued)**

ACCIDENTAL SPILLS OF BLOOD OR BODY FLUIDS.

A supply of household bleach will be maintained at all precinct/psa/district commands, emergency service units, borough court section facilities, and other appropriate sites. Accidental spills of blood or body fluids on floors, cells, RMP's or on other surfaces, other than clothing, or fabric may be cleaned by applying a FRESHLY MIXED solution of one part household bleach with ten parts water. It is imperative that the preceding mixture be carefully followed. Household bleach is not to be mixed with any solution other than water and it must be freshly mixed for each use.

Members of the service (uniformed and civilian) are reminded that this mixture of bleach and water will cause damage if used to clean uniforms. Uniform items soiled with blood or body fluids can be effectively cleaned by routine laundering or dry cleaning procedures. Bleach should not be used to cleanse hands. In addition, bleach mixed with any substance other than water may cause a toxic gas. Therefore, disposal of bleach or bleach dilutions should be performed only in a sink (not a urinal or toilet since they sometimes contain chemical deodorizers). When preparing a bleach dilution, the container used for the diluted solution must be cleaned with water and free of any other solution.

To prevent injury/infection when handling or forwarding hypodermic needles/syringes to the Property Clerk, members of the service will place such items in a hypodermic needle/syringe container by utilizing a one-handed "scoop" technique which uses the needle itself to pick up the hypodermic needle/syringe container. (By using one hand to hold the hypodermic syringe while moving the hypodermic needle toward the hypodermic needle/syringe container, the member of the service is moving the needle away from himself/herself. Members should not hold the container and move their hand toward the needle). The container will be capped, if possible. However, if the syringe extends beyond the container, it will be secured with tape. UNDER NO CIRCUMSTANCES SHOULD A MEMBER OF THE SERVICE ATTEMPT TO REMOVE, DISLODGE, OR BEND A NEEDLE FROM A HYPODERMIC SYRINGE.

**RELATED
PROCEDURES**

*Aided Cases - General (P.G. 216-01)
Animal Bites (P.G. 216-09)
Communicable Disease (P.G. 216-11)
Prisoners Requiring Medical/Psychiatric Treatment (P.G. 210-04)
Care and Disposition of Animals (P.G. 214-33)
Line of Duty Injury or Death Occurring Within City (P.G. 205-05)
Use of Patrol Kits (P.G. 219-17)*

**FORMS AND
REPORTS**

ACTIVITY LOG (PD 112-145)