

Falmouth Fire-EMS Operating Guideline

Infectious Control

Objective:

To provide guidelines for personnel when they have an exposure or potential exposure to a potentially infectious material. This SOG is to give personnel the information needed and the actions to be taken when a potential exposure occurs.

General Information:

The Falmouth Fire Department is diligent in assuring the safety of all personnel. It is expected that all personnel will be familiar with and know the location of the department's infectious control plan.

The EMS Captain will serve as the Infectious Control Officer (ICO). The ICO will review the plan at least once each year and make necessary changes to the plan. The ICO will ensure all department personnel are trained on the plan and are up to date with any changes. The ICO will also ensure that all equipment and supplies needed to carry out the plan are available and will serve as the primary contact for personnel if an exposure occurs.

Guidelines:

- A. Personnel Responsibilities: Personnel are to make themselves familiar with the location of the written plan and components of the plan which include, but are not limited to, the following:
 - a. Scope and Purpose
 - b. Definitions
 - c. Universal Precautions
 - d. Engineering Controls
 - e. Workplace Controls
 - f. Personal Protective Equipment
 - g. House Keeping
 - h. Vaccinations
 - i. Exposure Incident Procedures
 - j. Exposure Incident Forms
 - k. Training
 - l. Record Keeping
 - m. Communication of Hazard
- B. Infectious Control Officer Responsibilities: Infectious Control Officer (ICO) is responsible for:
 - a. Serving as the primary contact for personnel if an exposure occurs.
 - b. Reviewing the plan at least annually.
 - c. Making necessary updates to the plan and disseminating the changes.

- d. Annual mandatory training of all Falmouth Fire-EMS Personnel.
 - e. Maintaining equipment and supplies needed to carry out the plan
- C. Location of Plans: The Infectious Control plans are located at each Falmouth Fire-EMS Station in the following locations:
- a. Station 1 – On desk downstairs in bays
 - b. Station 2 (Central) – In dayroom on bookshelf above desk
 - c. Station 4 – In downstairs office on bookshelf
 - d. Administration – In the EMS Captain's office on bookshelf
- D. If a Potential Exposure Occurs:
- a. The member shall immediately clean the exposed area.
 - b. The member should then be evaluated by a Health Care Professional at the earliest opportunity.
 - i. If during normal business hours the Town's Occupational Health Care Provider should be used.
 - ii. If after hours the member should go to Maine Medical Center for evaluation.
 - iii. If the potential exposure occurs at a hospital the member should be treated at that hospital.
 - iv. Any further treatments shall be done at the Town's Occupational Health Care Provider.
 - c. The EMS Captain (ICO) shall be notified as soon as possible.
 - d. The source individual's blood shall be tested as soon as feasible and after his/her consent is obtained to determine Hepatitis B (HBV) or Human Immunodeficiency Virus (HIV) infection. In the event consent is not obtained, the Physician or designee will establish and document that legal consent could not be obtained.
 - i. When the source individual is already known to be infected with HBV or HIV, testing need not be repeated.
 - ii. Results of the source individual's testing will be made available to the exposed person, and the person shall be informed of applicable state laws that regulate the disclosure of the source individual's identity and infection status.
 - e. The exposed person's blood shall be collected and tested as soon as feasible after consent is obtained.
 - i. If the person consents to baseline blood collection, but does not give consent at that time for FTV serologic testing, the samples shall be preserved for at least 90 days. If within 90 days of the exposure incident, the person elects to have the baseline sample tested, such testing shall be done as soon as feasible.
 - ii. Post-exposure counseling and evaluation of reported illnesses shall be made available as medically indicated.

- f. The EMS Captain will provide the following information to the Health Care Professional:
 - i. A copy of 29CFR 1910.1030
 - ii. Description of the exposed person's duties as they relate to the exposure incident.
 - iii. Documentation of the route(s) of exposure and circumstances under which the exposure occurred.
 - iv. Results of the source individual's blood testing, if available.
 - v. All medical records relevant to the appropriate treatment of the person including vaccination status.
- g. The Health Care Professional shall:
 - i. Provide a written opinion within 15 days of the completion of the evaluation.
 - ii. The written opinion shall be limited to:
 - 1. Documentation that the person has been informed of the results of the evaluation.
 - 2. That the person has been told about any medical conditions resulting from exposure to blood or other potentially infectious materials which require further evaluation or treatment.
 - 3. All other findings are to remain confidential.
- h. The EMS Captain (ICO) will fill out the Falmouth Fire-EMS Unprotected Exposure Form
- i. The EMS Captain (ICO) will perform a post-exposure investigation
 - i. The ICO will investigate the exposure to determine cause and any appropriate corrective action.
 - ii. The ICO will document the route(s) of exposure, and the circumstances under which the exposure incident occurred.
 - iii. The ICO will document the source individual, unless the identification is not feasible.
 - iv. The ICO will document the degree to which Work Practice and PPE controls were utilized.

These guidelines may be changed or altered by the Fire Chief at any time.