

# Education & Training Bulletin



Related Document(s): The G.O.s entitled: "Communicable Diseases and Infection Control" and "Post-Exposure Procedures"

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Philip J. Cline, Superintendent of Police

Matthew E. Tobias, Assistant Deputy Superintendent

## Communicable Diseases and Infection Control, Part 4: Response and Post-Exposure Procedures

This is the fourth in a series of five training bulletins dealing with the challenges faced by law enforcement officers who may encounter infectious or communicable diseases, blood borne or airborne pathogens and other biohazards in the course of duty.

### Becoming Exposed

Police officers can be exposed to infectious materials in a variety of ways. They can be exposed simply through being in close proximity to persons who have a contagious disease; being around infected persons who are in lockup; entering households containing infected adults and children to investigate a domestic dispute; interacting with recent immigrants who have diseases which are uncommon in this area and to which many of us lack immunity; and contacting contaminated blood or body fluids at a crime scene.

Exposure can also occur as a result of the riskier aspects of the police officer's job. Exposure incidents can result from contact with the infected blood or body fluids through cuts, scrapes, and needle sticks which can occur during searches, injuries from fights and bites while attempting to arrest active resisters, shootings and stabbings, and even the accidental exposure to blood and body fluids resulting from rendering aid to victims of traffic or other accidents, domestic disputes, sexual and other assaults, or exposure to dead bodies. Police officers can also be exposed while assisting with an emergency childbirth.

As first responders to any public emergency, police officers would be at great risk of contracting a communicable disease or illness caused as a result of a biohazard or disease-causing agent spread as a result of a terrorist event.

### Sources of Blood borne Pathogens

Amniotic fluid – Envelopes the fetus

Cerebrospinal fluid – Cushions the brain and spinal cord

Pericardial fluid – Envelopes the heart

Peritoneal fluid – Fills the abdominal cavity

Plural fluid – Fills the sac enveloping the lungs

Semen – May be present following a sexual assault

Synovial fluid – Lubricates the joints

Vaginal secretions – May be present following a sexual assault

Also:

- Any body fluid visibly contaminated with blood
- Saliva containing blood
- All body fluids in situations where it is difficult or impossible to differentiate between body fluids
- Any unfixed (unpreserved) tissue or organ from a human living or dead

Source: 29 CFR 1910.1030  
OSHA Bloodborne Pathogen Standards

EXPOSURE INCIDENT PROCEDURES

**An exposure incident** means a specific contact between the blood or potentially infectious bodily fluids of a source individual and the member's:

- A. Eyes, mouth, or other mucous membranes
- B. Non-intact skin (e.g., cuts, abrasions, acne, dermatitis); or through
- C. Parenteral contact (e.g., piercing skin barrier, especially with a contaminated object)

Exposure may also occur through inhalation of potentially infectious materials.

In the event of an exposure incident:

Notify a supervisor immediately

**The supervisor will:**

- ✓ Investigate and confirm the incident.
- ✓ Take steps to have the source individual's blood tested for HIV and/or HBV. Attempt to identify source individual, if necessary. Assistance from Detective Division personnel may be requested.
- ✓ If the source individual was hospitalized, complete a Hospital Run Sheet (CPD-62.420) per the G.O.
- ✓ If the source individual does not give written informed consent for testing, forward all related reports to the Office of Legal Affairs.
- ✓ Complete a Report of Occupational Exposure to Communicable Disease (CPD-62.418).
- ✓ Complete a separate Injury on Duty Report (CPD 62.375, for sworn members) or City of Chicago Report of Occupational Injury or Illness (DPGS 1460-1, for civilians), if injured.
- ✓ Supervisors will NOT identify the source individual in the injury reports, if injury reports are necessary.
- ✓ Forward all related reports to the Medical Administrator, Medical Services Section.

**Medical Services Section will:**

- ✓ Evaluate the Report of Exposure to Communicable Disease and schedule a medical evaluation for the exposed member if necessary.
- ✓ Counsel the member regarding precautions to take after the exposure incident.
- ✓ Advise the member to be alert for any potential illnesses and/or symptoms and to report these to Medical Services Section.
- ✓ Upon request, provide copies of all relevant reports to the member's personal physician.
- ✓ Provide a written report as to whether the HBV vaccination is needed and any medical conditions resulting from the exposure incident which may require further evaluation and treatment.

Consult the G.O. , "Communicable Diseases and Infection Control"  
and addendum, "Post-Exposure Procedures" for full instructions