

## IC-6 – First Responder or Funeral Service Worker Exposure to Infectious Disease(s)

### Policy & Procedure

1. Any first responder<sup>1</sup> or funeral services worker<sup>2</sup> here forth referred to as “exposed” who believes he/she has suffered a significant exposure<sup>3</sup> through contact with a patient<sup>4</sup> may submit a written request to be notified of the presence of a contagious or infectious disease in the source patient and/or results of any test performed on the patient that determines the presence of a contagious or infectious disease<sup>5</sup> NOTE: this policy applies to First Responder Departments under UH Med control as listed in Attachment E
2. As required by Ohio Revised Code §3701.248, any UH system hospital is to respond to the exposed’s requests for information regarding the presence of contagious or infectious disease in a patient received by UH; or the results of any test performed on the patient to determine the presence of a contagious or infections disease.
3. A request for notification does not obligate a UH system hospital to conduct testing for a contagious or infectious disease.
4. Infection Control or designee notifies any first responder or funeral services worker who has been identified as having been exposed to a contagious or infectious disease during an exposure investigation, based on testing performed on the patient received by a UH system hospital.
5. Testing Process:
  1. For exposures occurring during the course of in the field treatment by first responders, where the source patient is transported to a UH Emergency Department, the initial evaluation and treatment of the exposed, if indicated is performed by Emergency Department staff and documented in the EMR. Source patient blood specimens is drawn at that time.
  2. The exposed is instructed to follow up with Occupational Health the next business day
6. Request Process:
  1. Complete the “First Responder or Funeral Services Worker Request for Information” (see Attachment C). The form is obtained as determined by the system entity: from the Emergency Department, Infection Control, Employee Health or Nursing Supervisor.

**6.2. Fax the completed form to Occupational Health at the respective hospital or other location, as determined by the system entity.**

**7. Response/Notification:**

- 1. Any notification to the exposed does not contain the name of the source patient.**
- 2. The request for notification is valid for 10 business days after it is made. If necessary, the request is renewed in accordance with the same procedures and requirements of the original request.**
- 3. Occupational Health will notify the exposed following determination of the presence of a contagious or infectious disease in the source patient, or after a confirmed positive test result, (see Attachment D- "Response to First Responder or Funeral Service Worker Request" .)**
  - 1. Within two business days give verbal notification of this finding to the exposed and his/her supervisor.**
  - 2. Within three business days provide written notification to the exposed and his/her supervisor.**
- 4. The verbal notification and written response contains the following:**
  - 1. Name of the disease.**
  - 2. Its signs and symptoms.**
  - 3. Date of the exposure.**
  - 4. Incubation period.**
  - 5. Mode of transmission.**
  - 6. Medical precautions necessary to prevent transmission to other persons.**
  - 7. Appropriate prophylaxis, treatment for, and counseling about the disease.**
- 5. If the entity is unable to provide the requested information because the source patient has been transferred to another healthcare facility or has been discharged, as determined by the system entity, Infection Control, Nursing supervisor or EMS liaison assists the exposed in locating the patient and securing the requested information from the health care facility that treated or is treating the patient**
- 6. If the source patient has died, as determined by the system entity, Infection Control, Nursing supervisor or EMS liaison provides the exposed with the name and address of the coroner who received the patient.**
- 7. If at the end of the 10-day request period no test has been performed to determine the presence of a contagious or infectious disease, no diagnosis has been made, or the result of the test is negative, as determined by the system entity, Occupational Health, Infection Control, Nursing supervisor or EMS liaison notifies the exposed accordingly.**

**8. Renewal of Request:**

- 1. The exposed individual who believes he/she has sustained a significant exposure through contact with a source patient may renew his/her request for notification by submitting another Employee/Emergency Medical or Funeral Services Worker Request for Information.**

**8.2. On receipt of a second "First Responder or Funeral Services Worker Request for Information", as determined by the system entity, Occupational Health, Infection Control Nursing supervisor or EMS liaison implements the above procedure.**

**Attachments**

**A., Contagious or Infectious Diseases Likely to be transmitted by Air or Blood.**

**B., Definition of HIV Exposure.**

**C. Request for Information.**

**D Response to First Responder or Funeral Service Worker Request**

**E. Departments Under UH Medical Control**

**F. Workflow for First Responder or Funeral Service Worker Exposure Treatment**

- 1 "Emergency medical service": means any of the services described in sections [4765.35](#), [4765.37](#), [4765.38](#), and [4765.39](#) of the Ohio Revised Code that are performed by first responders, emergency medical technicians-basic, emergency medical technicians-intermediate, and paramedics
- 2 "Funeral services worker": person licensed as funeral director or embalmer under Ohio Revised Code Chapter 4714 or an individual responsible for the direct final disposition of a deceased person
- 3 "Significant exposure":
  - A. Exposure to a contagious or infectious disease as listed in Attachment A.
  - B. A percutaneous or mucous membrane exposure to blood, semen, vaginal secretions; or spinal, synovial, pleural, peritoneal, pericardial, or amniotic fluid of another person.
- 4 "Patient": A person, whether dead or alive, who has been treated, handled, or transported for medical care by an emergency medical services worker or a deceased person whose body is handled by a funeral services worker
- 5 "Contagious or infectious diseases": Diseases specified by the Ohio Administrative Code. See Attachment A.

Electronically approved by  
Tom Zenty, President and Chief Executive Officer of UH – November 16, 2017  
William L. Annable, Chief Quality Officer – November 15, 2017

## ATTACHMENT A

(OAC 3701-3-022) Contagious or Infectious Diseases Likely to be Transmitted by Air or Blood During the

Normal Course of a First Responder's Duties:

- (1) Crimean-Congo hemorrhagic fever;
- (2) Diphtheria;
- (3) Ebola hemorrhagic fever;
- (4) Fifth disease (human parvovirus infection);
- (5) Hansen disease (leprosy);
- (6) Acute or chronic infection with hepatitis B virus;
- (7) Acute or chronic infection with hepatitis C virus;
- (8) Infection with hepatitis D virus (delta hepatitis);
- (9) Human immunodeficiency virus (HIV) infection, including acquired immunodeficiency syndrome (AIDS) ;
- (10) Infection with human t-lymphotropic virus (HTLV-1 and HTLV-2);
- (11) Lassa fever;
- (12) Leishmaniasis, visceral (Kala-Azar);
- (13) Leptospirosis;
- (14) Marburg hemorrhagic fever;
- (15) Measles (rubeola);
- (16) Meningococcal disease ( Neisseria meningitidis);
- (17) Mumps (infectious parotitis);
- (18) Pertussis (whooping cough);
- (19) Pneumonic plague ( Yersinia pestis);
- (20) Rabies;
- (21) Rubella (German measles);
- (22) Severe acute respiratory syndrome (SARS)
- (23) Tuberculosis; and
- (24) Varicella (herpes zoster) infection, including chickenpox and shingles.

In addition to the above, the Ryan White HIV/AIDS Treatment Extension Act 2009, Section 2695 of Part G (adapted from National Institute for Occupational Safety and Health) also includes the following contagious or infectious diseases those exposed must be notified of:

- (1) Anthrax, cutaneous (Bacillus anthracis)
- (2) Disseminated zoster
- (3) Novel Influenza A viruses
- (4) Vaccinia

**Please be aware that you will not normally know that the patient has one of the above diseases. Once the hospital becomes aware that a patient has a disease listed above, they will contact everyone involved in the patient's care.**

# Please review what is a potential exposure

## ATTACHMENT B

### Definition of Exposure

“Updated U.S. Public Health Service Guidelines for the Management of Occupational Exposures to HIV and Recommendations for Post-Exposure Prophylaxis: Kuhar, et al 2013

- A. HIV post exposure prophylaxis is recommended for emergency medical or funeral service workers exposed to source person with known HIV or for those whom there is a reasonable suspicion of HIV infection.
  
- B. Exposures that may put emergency medical or funeral service workers at risk for HIV infection are:
  - 1. Percutaneous injury:
    - a) Needle stick
    - b) Cut with contaminated sharp object
  
  - 2. Contact of mucous membrane or non-intact skin with blood, tissue or other body fluids that are potentially infectious.
    - a) Non-intact skin is exposed skin that is:
      - 1. Chapped
      - 2. Abraded
      - 3. Afflicted with dermatitis
  
    - b) Potentially infectious body fluids:
      - 1. Blood
      - 2. Semen
      - 3. Vaginal secretions
      - 4. CSF
      - 5. Synovial fluid
      - 6. Pleural fluid
      - 7. Peritoneal fluid
      - 8. Pericardial fluid
      - 9. Amniotic fluid
  
    - c) Feces, nasal secretions, saliva, sputum, sweat, tears, urine and vomitus are NOT CONSIDERED potentially infectious UNLESS THEY ARE VISIBLY BLOODY.
  
  - 3. Direct contact (without barrier protection) to concentrated HIV virus in a research laboratory
  
  - 4. Human bites

Please make sure that this form is filled out by the ED that HAS the patient.

ATTACHMENT C

EMPLOYEE/ FIRST RESPONDER/FUNERAL SERVICES WORKER

Request for Information

I. First Responder or Funeral Services Worker Information

Name: \_\_\_\_\_ Home phone: \_\_\_\_\_

Home Address: \_\_\_\_\_

Employer Name: \_\_\_\_\_ Work Number \_\_\_\_\_

Supervisor of injured worker: \_\_\_\_\_

II. Exposure Information

Exposure Date: \_\_\_\_\_ Exposure Time: \_\_\_\_\_ Exposure Location: \_\_\_\_\_

Manner of Exposure: \_\_\_\_\_

III. Source Patient Information:

Name of Patient: \_\_\_\_\_ MR Number: \_\_\_\_\_

Home address (for Pre-Hospital providers): \_\_\_\_\_

Patient's DOB: \_\_\_\_\_

Signature \_\_\_\_\_  
Employee/First Responder/Funeral Service Worker

IV. Injury Assessment: To Be Completed By ED Nurse:

Describe location of exposure and any physical findings:

\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

UH ED Nurse

FAX THIS FORM TO OCCUPATIONAL HEALTH @ specific hospital:

Occupational Health locations:

Ashland: 2212 Mifflin, Suite 215; Ashland	Fax: 419-281-4244
Elyria: 39000 Center Ridge Rd; North Ridgeville	Fax: 440-329-7492
Geauga: 13221 Ravenna Rd, Suite 10; Chardon	Fax: 440-285-6212
Geneva: 870 West Main Street; Geneva	Fax: 216-201-4012
Parma: 6115 Powers Blvd, Suite 200; Parma	Fax: 440-743-4940
Portage: 3957 Loomis Parkway, Ravenna	Fax: 330-297-8561

UH CMC Occupational Health Fax # is 216-844-3990

IC-6 – Emergency Medical or Funeral Services Worker Exposure to Infectious Disease(s)

Owner: Infection Control

Reviewed: September, 2017

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Uncontrolled document – printed version only reliable for 24 hours

Prehospital provider will be contacted via phone - written notification will be sent at a later date

ATTACHMENT D

RESPONSE TO FIRST RESPONDER OR FUNERAL SERVICE WORKERS REQUEST FOR NOTIFICATION

VERBAL NOTIFICATION GIVEN:

To: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

By Whom: \_\_\_\_\_

(Signature/Title)

WRITTEN NOTIFICATION SENT:

To: \_\_\_\_\_ and \_\_\_\_\_  
(Name of Exposed) (Name of Supervisor)

Date: \_\_\_\_\_

Date and Type of Exposure: \_\_\_\_\_

Name of disease: \_\_\_\_\_

Incubation period: \_\_\_\_\_

Signs and symptoms: \_\_\_\_\_

\_\_\_\_\_

Mode of transmission: \_\_\_\_\_

Precautions necessary to prevent transmission to others: \_\_\_\_\_

\_\_\_\_\_

Prophylaxis and/or treatment (if applicable): \_\_\_\_\_

Other follow-up: \_\_\_\_\_

Signature/Title of person \_\_\_\_\_

Attachment E (IC-6) Departments under UH Medical Control			
<b>Ahuja Medical Center</b>			
Bath Township Fire Department	Macedonia Fire Department	Physician Ambulance	Woodmere Fire Department
Chagrin Falls Fire Department	Menorah Park EMS	Richfield Fire Department	
Granger Township Fire Department	North Randall Fire Department	Sharon Township Fire Department	
Highland Heights Fire Department	Orange Fire Department	Solon Fire Department	
<b>Bedford Medical Center</b>			
Bedford Fire Department	RTA		
Bedford Heights Fire Department	Reminderville Fire Department		
Chagrin SE HazMat	SEALE SWAT		
Cuyahoga Valley National Park EMS	Streetsboro Fire Department		
Northfield Village Fire Department	Twinsburg Fire Department		
Oakwood Fire Department	Valley Fire Department		
<b>Cleveland Medical Center</b>			
Case Western EMS	Heights Area Special Rescue		
Cleveland Heights Fire Department	Shaker Heights Fire Department		
East Cleveland Fire Department	University Heights Fire Department		
<b>Conneaut Medical Center</b>			
Conneaut Fire Department	North Kingsville Fire Department		
Kingsville Fire Department	Pierpont Center Fire Department		
Monroe Fire Department	Sheffield Township Fire Department		
<b>Elyria Medical Center</b>			
Amhurst Fire Department	Elyria Township Fire Department	LeRoy Township Fire Department	
Avon Fire Department	Grafton Village Fire Department	LifeCare Ambulance	
Carlisle Township Fire Department	LaGrange Township Fire Department	Sheffield Township Fire Department	
Elyria Fire Department	Lorain County Community College	Sheffield Village Fire Department	
<b>Geauga Medical Center</b>			
Auburn Fire Department	Cortland Fire Department	Munson Fire Department	
Bazetta Township Fire Department	Farmington Fire Department	Newbury Fire Department	
Bloomfield Fire Department	Fowler Township Ambulance	Parkman Fire Department	
Bristol Fire Department	Green Fire Department	Sebring Fire Department	
Burton Fire Department	Hambden Fire Department	Southington Fire Department	
Champion Fire Department	Johnston Township Fire Department	Thompson Drag Raceway	
Chardon Fire Department	Kinsman Fire Department	Thompson Fire Department	
Chardon Police Department	Mantua-Shalersville Fire Department	Troy Fire Department	
Chester Township Fire Department	Mecca Fire Department	Warren City Fire Department	
Community EMS District	Mesopotamia Fire Department	Warren Township Fire Department	
Community Care Ambulance	Middlefield Fire Department	Windsor Fire Department	
Concord Fire Department	Montville Fire Department		
<b>Geneva Medical Center</b>			
Geneva Fire Department	Northwest Ambulance		
Geneva on the Lake Fire Department	Saybrook Fire Department		
Jefferson Emergency Rescue	Trumbull Township Fire Department		
<b>Parma Medical Center</b>			
Broadview Heights Fire Department	North Royalton Fire Department		
Brooklyn Fire Department	Parma Fire Department		
Brooklyn Heights Fire Department	Parma Heights Fire Department		
Newburg Heights Fire Department	Seven Hills Fire Department		
<b>Portage Medical Center</b>			
Atwater Fire Department	Deerfield Fire Department	N. Georgetown Fire Department	Sebring Fire Department
Beloit Fire Department	Edinburg Fire Department	Palmyra Fire Department	Suffield Fire Department
Braceville Fire Department	Jackson Township Fire Department	Paris Township Fire Department	Windham Fire Department
Briimfield Fire Department	Kent Fire Department	Randolph Fire Department	
Carlestown Fire Department	Lowelville Fire Department	Ravenna City Fire Department	
Craig Beach Fire Department	Marlboro Fire Department	Ravenna Township Fire Department	
Damascus Fire Department	N.E. Ambulance	Rootstown Fire Department	
<b>Richmond Medical Center</b>			
Richmond Heights Fire Department			
Willoughby Hills Fire Department			
Willowick Fire Department			
<b>St. John Medical Center</b>			
Avon Lake Fire Department	Fairview Park Fire Department	Rocky River Fire Department	
Bay Village Fire Department	North Olmsted Fire Department	Sheffield Lake Fire Department	
Eaton Township Fire Department	North Ridgeville Fire Department	Westlake Fire Department	
<b>Ashland Samaritan Medical Center</b>			
Ashland Fire Department	Jeromesville Fire Department	Ruggles-Troy Volunteer Fire	
Ashland County Sheriff	Loudenville Fire Department	Savannah Volunteer Fire	
Fireland's Ambulance	Mifflin Community Volunteer Fire		
Green Perrysville Joint Fire	Orange Township Fire Department		
Hayesville-Vermillion	Polk-Jackson-Perry Fire and EMS		



**ATTACHMENT F:**  
**Workflow for First Responder or Funeral Service Worker Exposure Treatment**

