

# **Missouri Valley Fire & Rescue Department**

223 E. Erie St. Missouri Valley, IA 51555 **Phone712-642-2945 Emergency 911** 

# STANDARD OPERATING GUIDELINE

### STANDARD OPERATING GUIDELINE 207

<u>Chronological History</u> Effective: January 1, 2010

#### **BLOOD BOURNE PATHOGEN PROGRAM**

#### Standard

The purpose of this plan is to provide all members of the Missouri Valley Fire Department with the information necessary to prevent the spread of infectious disease. This information includes, but is not limited to, principles of infection control, the infectious disease process and the use of personal protective equipment and supplies as they relate to the prevention of occupationally acquired infectious disease.

## Exposure Control Plan

- 1. Groups. An increased risk of the transmission of infectious diseases exists when personnel have contact with the following groups:
  - 1. Bleeding accident victims.
  - 2. Alcohol abusers.
  - 3. Illegal drug users.
  - 4. Sexually promiscuous individuals.
  - 5. Hemophiliacs.
  - 6. Persons with open or infected wounds.
  - 7. Persons who state they have Hepatitis B, HIV, or AIDS.
- 2. Situations. Members may encounter situations where there is an increased risk of transmission of infectious disease. These situations are:
  - 1. Any time body fluids are present.
  - 2. Homes with unsanitary conditions.
  - 3. Death scenes, especially those situations where body fluids may be oozing from the corpse.
  - 4. Trauma situations, especially where bleeding occurs.
  - 5. Extrication at auto accidents or other situations where sharp objects may exist.
  - 6. Other. Members must judge the level of risk for groups and situations not listed above.
- 3. Methods of Compliance

- Universal Precautions. Universal precautions will be observed when employees are exposed
  to blood or other potentially infectious materials. Documented exposures to infectious diseases
  have not resulted from feces, nasal secretions, sputum, sweat, tears, urine or vomitus. Since
  any body fluid may transmit infectious diseases if it contains traces of blood, employees are
  directed to treat all blood and body fluids as infectious substances.
- 2. Hand Washing. Hands and other skin surfaces must be washed thoroughly as soon as possible if contaminated with blood or other potentially infectious materials to which universal precautions apply.
  - Hands should always be washed after gloves are removed even if the gloves appear intact. Hand washing should be completed using appropriate facilities such as utility or rest room sinks. Hands must not be washed in sinks where food preparation occurs.
  - 2. Hand washing should be done with soap and warm water. The application of hand lotion after hands are dried is advisable.
- 3. Protective Clothing. Employees at risk will be provided disposable gloves, goggles, or face shields. Disposable gowns and impervious shoe coverings will be available for unusual cases where great volumes of blood or other potentially infectious materials may be present, such as the scenes of major trauma accidents.
  - 1. Disposable gloves must be worn when employees can anticipate hand contact with blood or other potentially infectious materials (e.g. when involved with emergency patient care). Where multiple patients are present, the member shall change gloves, if possible, after caring for one patient and beginning care on the next.
  - Eye protection must be worn in cases where splashing of blood or other potentially infectious materials may be anticipated and may come in contact with eyes, nose or mouth.
  - 3. Firefighting turnout gear (including structural firefighting gloves, boots, head and face protection) must be worn when working in areas of containing sharp glass or other debris which can puncture or lacerate the skin.
  - 4. The member must use personal protective equipment except in rare and extraordinary circumstances. Such circumstances occur when, in the member's judgment, the use of personal protective equipment would have prevented the delivery of health care or public safety services, or would have posed an increased hazard to the safety of the member or other associates.
  - 5. When the member makes this judgment, the circumstances shall be investigated and documented in order to determine whether changes can be instituted to prevent such occurrences in the future.
  - 6. Contaminated disposable items must be discarded in a leak proof plastic bag that is red in color or marked with the international bio-hazard symbol.
- 4. Needles and Sharp Objects. Members shall take precautions to prevent injuries caused by needles, knives, broken glass, razor blades or other sharp instruments or devices or debris which can puncture or lacerate the skin.

- 5. Laundering of Clothing and Cleaning of Equipment.
  - Street clothing worn by members is not considered protective clothing. Contaminated
    items should be handled by members wearing gloves, bagged in a leak proof plastic
    bag that is red in color or marked with the international bio-hazard symbol. Soiled
    items may be decontaminated by laundering according to the manufacturer's
    instructions.
  - Boots and leather items may be scrub brushed with soap and hot water to remove contamination.
  - 3. Members whose clothing is soiled by blood or other potentially infectious materials shall change from the contaminated clothing to a clean clothing as soon as possible.
  - 4. Members are directed to avoid handling personal items, such as combs and pens, while wearing contaminated gloves. Contaminated gloves should be removed as soon as possible and discarded in a leak proof plastic bag that is red in color or marked with the international bio-hazard symbol.

## Significant Exposure

- 1. A significant exposure occurs when blood or other potentially infectious materials come into direct contact with eyes, nose, mouth or into an open cut or by needle puncture injury.
- 2. If a member experiences a significant exposure to blood or other potentially infectious materials, or experiences a situation where a significant exposure is likely to have occurred, the employee will:
  - a. Report the incident to the Incident Commander as soon as possible.
  - b. The member will complete a short form describing the incident completely. The report will document specifically the method of potential transmission of infectious disease.
- 3. The Incident Commander, or his designee, will complete the required notice of injury forms.
- 4. The firefighter will then follow the established procedure outlined in the Magnolia Fire Department's Standard Operating Procedure.

### Training.

The Department shall provide infectious disease training to all personnel with the potential for occupational exposure. This training will be provided on an annual basis.

### Responsibility.

## 1. Members:

It is the responsibility of the member to be aware of the types of infectious diseases
that can be transmitted by blood or body fluid. The member is responsible for
participating in training provided by the Department and for using protective
equipment provided by the Department as necessary.

## 2. Officers:

1. It is the Incident Commander's, or his designee's, responsibility to monitor the activity of members determined to be at risk to be certain that the provisions of this policy are obeyed.

## 3. Training Officer:

- 1. The Training Officer will ensure that training to all members with occupational exposure is completed annually.
- 2. The Training Officer will be responsible for maintaining all training records in the required manner.

By Authority of: Fire Chief

Eugene Shaeffer