

Purpose: To establish a process of managing exposures to potentially infectious diseases in emergency services providers whose jobs place them at high risk for such exposures and who are not employees of the hospital. This group includes but is not limited to the following: Emergency Medical Technicians, Law Enforcement Officer, Firefighter, and First Responder.

Policy: The Emergency Medical Services Bureau, Montana Department of Health and Human Services requires that each hospital have in place a policy to report exposures of emergency service providers.

Procedure(s):

1. An emergency services provider, who has sustained an exposure should request that the designated officer of the emergency services organization with which he/she was officially responding when the exposure occurred, file a *Report of Exposure Form* with the health care facility to which the source patient was taken.
2. If the exposure occurred in a manner that may allow infection by HIV, then submission of the *Report of Exposure Form* to the health care facility constitutes a request to the source patient's physician to perform an HIV diagnostic test pursuant to MCA 50-16-1014 (informing the source patient orally or in writing).
3. Upon receipt of the report of exposure from a designated officer of the emergency services organization, BHH shall notify the designated officer in writing whether or not a determination has been made that the patient has or does not have an infectious disease (human immunodeficiency virus infection, hepatitis B, hepatitis C, hepatitis D, communicable pulmonary tuberculosis, meningococcal meningitis). If a determination has been made and the patient has been found:
 - a. to have an infectious disease, BHH will:
 - 1) ensure that the physician/provider informs the Infection Control & Employee Health staff of the determination within 24 hours after the determination is made;
 - 2) provide notification orally within 48 hours after the time of diagnosis and in writing within 72 hours after diagnosis to the designated officer of the emergency services organization.
 - b. to not have an infectious disease, the date on which the patient was transported to BHH will be provided to the designated officer of the emergency services organization.
4. If after receiving a transported patient BHH determines that the patient has an infectious disease, the physician/provider shall inform the Infection Control & Employee Health staff of the determination within 24 hours after the determination is made. Within 48 hours after the determination was made, BHH will notify:
 - a. the designated officer of each emergency services organization known to the health care facility to have provided emergency services to the patient prior to or during transportation to the health care facility.
 - b. the local health department. The notice to the local health department must include the

name(s) of the emergency services organization(s) that transported the patient to the health care facility. The notification must also state the disease to which the emergency services provider(s) was/were exposed, the appropriate medical precautions and treatment that the exposed person needs to take, the date on which the patient was transported to the health care facility, and the time that the patient arrived at the facility.

5. The completed *Report of Exposure Form* should be sent in a confidential envelope to the Employee Health Nurse or Infection Preventionist. The Employee Health Nurse or Infection Preventionist will send a copy of the *Form* to the exposed emergency services provider within one week of receiving the *Form*.
6. The *Report of Exposure Forms* are kept in the Public Health File drawer located in the emergency room nurse's station.
7. Because these emergency service providers are not employees of Barrett Hospital & HealthCare and therefore not covered under Barrett Hospital Workers' Compensation Policy, they or their agency will be responsible for payment of any costs arising from post-exposure laboratory testing, treatment and/or follow-up (this may include source testing). Should testing or treatment be required, these workers will be registered as Out Patients and bills will be processed accordingly.