

Southern Illinois Regional EMS System

B-2 INFECTIOUS DISEASE DISINFECTION PROCEDURE

ALS/ILS/BLS

The application of aseptic practices in the field will assist in preventing additional complications in the compromised patient as well as protect you and those you treat later. It is imperative that EMS personnel abide by the policy and become familiar with the signs and symptoms of reportable infectious disease and the procedures in handling them.

Signs/Symptoms of Reportable Diseases:

- HIV / AIDS:
 - Fever, night sweats, weight loss, enlarged lymph nodes, chronic diarrhea, malaise.
- HEPATITIS:
 - Fever, malaise, nausea and vomiting, loss of appetite dark urine-light stools, jaundice, joint pain, rash.
- TUBERCULOSIS (TB):
 - Weight loss, persistent and productive cough, fever, night sweats, and hemoptysis.
- MENINGITIS (Neisseria meningitidis):
 - Fever, vomiting, headache, stiff neck-not common in children, altered consciousness, confusion.
- SYPHILIS:
 - Signs and symptoms of primary infection:
 - Ulcer or chancre at site of infection.
 - In general, beware of draining open sores and bodily discharges (vomitus. fecal matter, urine, blood).

Reportable Diseases Procedure:

- EMS personnel are to inform the receiving facility of suspected infectious disease, as listed above, upon arrival.
- Any patient having an infectious disease, bodily discharges or suspected of having an infectious disease will be handled as follows:
 - Personnel will use a minimum of personal protective equipment (PPE):
 - Mask, gown, cap, latex gloves, eye shields.
 - Open sores (i.e. staph infection) will be covered both proximal and distal to the site and taped down with gauze pads.
 - PPE will be worn for any invasive procedure.
- Following transport of a patient who might have a communicable disease additional measures should include:
 - Strip and place all disposables in a red biohazard plastic bag and dispose of the bag per hospital policy.
 - Place all linens in the yellow biohazard plastic bag and dispose per hospital policy.
 - Air the vehicle with all doors and windows open for five (5) minutes if unit was used for transport.
 - Wipe down all areas of patient contact with bleach/water solution of 1:10.
 - Equipment should be disinfected after use according to manufacturer's recommendations.

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B-2 INFECTIOUS DISEASE DISINFECTION PROCEDURE (continued)

- Needle Punctures/Exposure to Blood/Body Fluids
 - Classification of exposure:
 - Insignificant - exposure to blood/body fluids on a closed skin surface
 - Significant - exposure by needle stick where the skin is broken or exposure of blood/body fluids on an open skin area or body part (open sores, eyes, mouth).
 - Personnel who encounter any type of exposure must report the exposure to their employer and inform the facility if the patient is transported.
 - Personnel who are punctured by a contaminated needle, whether the patient has a contagious disease or not, should notify the employee's immediate supervisor/employer.
 - A needle should be considered contaminated if it came in contact with a patient.
 - Personnel shall complete the employer's report form.
 - The employer/risk manager/infection control person will contact the receiving facility to report the incident to the infection control nurse.
 - State legislation requires hospitals to notify health care personnel if they were exposed to an infectious disease.
 - Personnel shall follow their employer's protocol for initial treatment/follow-up care.