



Policy 810

Subject

BLOODBORNE PATHOGENS AND HUMAN BITES

Date Published

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Page

1 of 22

By Order of the Police Commissioner

POLICY

It is the policy of the Baltimore Police Department (BPD) to provide a safe and healthy work environment for its employees.

PURPOSE

The purpose of this policy is to minimize occupational exposures to bloodborne pathogens in accordance with the Occupational Safety and Health Administration (OSHA) standard on occupational exposures to bloodborne pathogens located at 29 CFR 1910.1030.

DEFINITIONS

Bloodborne Pathogens — Pathogenic microorganisms, which are present in human and certain other tissues, which might cause disease in humans. These pathogens include, but are not limited to the Hepatitis B Virus (HBV) and Human Immunodeficiency Virus (HIV).

Communicable Disease — An infectious disease, capable of being transmitted from one person to another person, including physical contacts with an individual and/or their infected body fluids.

Exposure — Reasonably anticipated skin, eye, nose, mouth, or percutaneous, via puncture, contact with blood or other potentially infectious materials.

Occupational Exposure — Penetration of the skin, to include being stuck with a hypodermic needle, knife or other sharp object, or through an open wound or a mucous membrane (including eyes, nose, or mouth) that are exposed to the blood, saliva, semen or anybody fluid of a person with Hepatitis B, Hepatitis C, Human Immunodeficiency Virus (HIV) - the virus that causes Acquired Immune Deficiency Syndrome (AIDS) or an infection caused by the HIV/AIDS virus or any other bloodborne pathogen.

NOTE: The Center for Disease Control (CDC) emphasizes that casual contact (such as touching a person's skin, shaking hands, using the bathroom or touching a doorknob) does not transmit Hepatitis B, Hepatitis C, HIV or other potentially infectious material. It is recommended that members frequently wash their hands with soap and water, especially before eating.

REQUIRED ACTION**Universal Precautions, 29CFR 1910.1030(d) (1)**

Universal precautions must be observed in order to prevent contact with blood or other potentially infectious materials. According to the concept of Universal Precautions, all blood or other body materials are considered infectious at all times, regardless of the perceived status of the individual source.

Engineering and Work Practice Controls, 29CFR 1910.1030(d) (2)

Engineering and work practice controls must be used to eliminate or minimize exposures within the agency. When necessary, personal protective equipment (PPE) must be worn in conjunction with these controls.

Member

1. Intact skin is one of the best barriers against bloodborne pathogens.
2. Exercise extreme caution and, whenever possible, wear disposable gloves when:
 - 2.1. Handling items, which may contain contaminated blood or body fluid products, such as hypodermic needles or syringes.

NOTE: Do not reach into concealed areas, such as between car seats, by hand. Use tongs or forceps. Avoid placing fingers in anyone's mouth.

- 2.2. Packing and handling these items as evidence.
- 2.3. Searching people, who have been arrested.
- 2.4. Disinfecting blood, saliva, semen, urine, feces or other secretions, which have contaminated floors, seats or equipment.
- 2.5. After removing disposable gloves:
 - 2.5.1. Use running water and soap.

NOTE: Never decontaminate skin with full strength bleach or a bleach solution, as it might cause severe injury.

- 2.5.2. Wet the hands and lather at least to the wrists.
- 2.5.3. Scrub carefully, making sure to clean between fingers at the web portion of the hand, under nails and along the cuticles.
- 2.5.4. Rinse with water and dry with paper towels.
- 2.5.5. Turn off the faucet, using a paper towel as a barrier between the hands and the faucet handle.

- 2.6. Frequent hand washing can dry the skin. Use a lotion, compatible with disposable gloves to rehydrate the skin.
- 2.7. In the event you are not able to use running water to wash your hands, use 70% isopropyl alcohol, which is kept in marked departmental and Laboratory Section Mobile Unit vehicles. Thoroughly wash hands with water and soap as soon as possible after this procedure.

Needle Stick, Cut or Contamination of Broken Skin

1. When exposed to a possible communicable disease or bloodborne pathogen or the victim of a human bite incident:
 - 1.1. When water is available:
 - 1.1.1. Wash the area thoroughly with soap and water, and rinse the affected area.
 - 1.1.1.1. Wash carefully, making sure to disinfect between fingers at the web of the hand, under nails and along cuticles.
 - 1.1.1.2. Rinse with water and dry with paper towels.
 - 1.1.1.3. Turn off the faucet, using a paper towel as a barrier between the hands and the faucet.
2. When water is not available, use hand sanitizer.
3. If warranted, call for an Emergency Medical Technician (EMT).
4. Respond to the Public Safety Infirmary (PSI) for treatment.

Splash in Eyes, Nose or Mouth

1. When exposed to a possible contamination:
 - 1.1. Flush the eyes, nose and mouth with copious amounts of water for 20 minutes.
 - 1.2. Respond to PSI for treatment.

After Exposure

1. It is critical to seek medical attention within the first 24 hours of exposure, as preventative medications are most effective when initiated promptly after exposure. Respond to:
 - 1.1. Mercy Medical Center/Public Safety Infirmary (PSI), 323 N. Calvert Street (Pleasant Street Entrance), which is open Monday - Friday, 0700 to 1600 hours.
 - 1.2. All other times, members should respond to the emergency room of Mercy Medical Center, if no serious injury has occurred.

- 1.3. If a serious injury has occurred, respond to the nearest hospital for treatment, then, report to Mercy for an evaluation.

Incident Reporting

1. Immediately notify your supervisor.
2. As soon as possible, complete a detailed Administrative Report, Form 95, concerning any suspected exposures or human bites.
3. As soon as possible, complete an Employee Incident Report (EIR).
4. When possible, positively identify the suspected source and have the source transported to Mercy Medical Center or another medical facility to obtain a blood sample for source testing. A positive identification of the suspected source is vital to research results.
 - 4.1. In accordance with CFR 1910.1020(c) (12), *Access to employee exposure and medical records*, access to these records shall be limited to:
 - 4.1.1. The employee.
 - 4.1.2. A representative of the employee, if that person has sufficient written authorization.
 - 4.1.3. The employer's licensed healthcare provider (PSI).
 - 4.1.4. OSHA, MOSHA and the Baltimore City Department of Finance's, Division of Occupational Safety, Office of Risk Management.

Personal Protective Equipment (PPE) and Work Place Practice Control

NOTE: Mouth pipetting is prohibited.

1. Eating, drinking, applying of cosmetics or lip balm, and the handling of contact lenses are prohibited in areas, where there is a reasonable likelihood of occupational exposure.
2. Food and drink must not be kept in refrigerators, freezers, cabinets, or on shelves, counters and bench tops or other areas where potentially infectious material might be present.
3. Refrigerators and freezers, containing biological specimens/evidence, must be marked with a biohazard label.
4. PPE is provided at no cost to employees and must be used according to the following procedures:
 - 4.1. PPE must be inspected by the individual before each use and replaced as needed by the Property Officer/Safety Officer of the District or Section.
 - 4.2. Garments, penetrated by blood or other potentially infectious material, must be removed as soon as possible.

- 4.2.1. Thoroughly shower, if penetration is to the skin.
- 4.3. All PPE must be removed, after leaving the source of potential contamination.
- 4.4. After removal, disposable PPE must be placed in a designated container, located at all District Stations, Evidence Control Unit, Laboratory Section, Central Booking, Juvenile Detention and departmental vehicles.
- 4.5. Single use gloves must be properly disposed of and replaced as soon as practical, when contaminated or when their ability to function as a barrier is compromised.
- 4.6. Safety glasses or goggles must be worn in conjunction with a face shield, when contamination by splashing is likely.
- 4.7. Use the issued pocket mask, when administering cardiopulmonary resuscitation (CPR).
- 4.8. Wear a disposable gown and shoe booties, if soiling of clothing or shoes by blood and body fluids is likely.
- 4.9. When handling items, which might be contaminated, members are to wear appropriate disposable gloves and/or gowns and/or shoe booties and/or lab coats.
- 4.10. Deposit contaminated non-evidentiary items in the specially marked containers, located at all District Stations, Juvenile Detention, Evidence Control Unit, Laboratory Section, Homicide Section, and any other locations, where these containers are located.
- 4.11. Needles or other sharp objects must never be recapped, clipped, broken, or bent prior to being placed in tubes/disposal containers.
- 4.12. Exercise extreme care, when placing hypodermic needles or other sharp objects in the Sharp Objects Container (tube or box), prior to transporting them. Always hold the Sharp objects Container by the closed end.
- 4.13. Do not force sharp objects into any container. If the sharp objects disposal container is full, use another. It is the responsibility of the designated District/Section's Property/Safety Officer to transport the full container to Evidence Control Unit and obtain a new container.
- 4.14. Specimens/evidence samples must be handled only while wearing appropriate personal protective equipment.
- 4.15. Specimens/evidence samples must be placed in leak proof containers, during collection, handling, processing, and storage, transporting or shipping. These containers must be labeled with a red biohazard warning label. If the primary container develops a leak or the outside of the container becomes contaminated, it must be placed within a leak proof container.

- 4.16. Red biohazard labels will be affixed to containers of regulated waste, and to refrigerators or freezers, used for the storage of any blood or body material, which may be potentially infectious. Red biohazard labels may be obtained from Evidence Control Unit.
- 4.17. Any equipment, which cannot be decontaminated, must be either placed in a red biohazard bag or marked with the appropriate biohazard label to warn others of the potential exposure to infectious material.
- 4.18. Place soiled or contaminated sworn uniform clothing in the red biohazard plastic bag, provided in the exposure control kits, prior to removal of gloves. Contaminated personal clothing will be handled in the same fashion as uniform clothing.
 - 4.18.1. Reimbursement for personal clothing shall be in keeping with Policy 1803, *Reimbursement for Personal Property Lost or Damaged in the Performance of Duty*.
- 4.19. Obtain replacement uniform clothing or temporary scrubs from the Quartermaster Unit, during regular business hours. During non-business hours, respond to Evidence Control Unit.
- 4.20. No contaminated clothing should be washed by employees.
- 4.21. Contaminated cloth lab coats, laboratory employees personal clothing and Mobile Unit uniforms must be placed in the disinfected yellow laundry bags, marked "Infectious Linen", which is placed in the special red collection container, within the Laboratory Section's locker and instrument rooms, and transported to the Quartermaster Unit for laundering by the designated vendor.
- 4.22. Package contaminated evidence in a paper bag. Place the individual paper bag into a larger outermost paper bag. Place the single outermost paper bag into a red biohazard plastic bag, which is a protective cover.

NOTE: Paper or plastic bags containing contaminated evidentiary items, must not be closed with a stapler. Use zip ties, supplied by the Evidence Control Unit, to close the red biohazard protective cover.

- 4.23. When submitting contaminated evidentiary items, follow procedures established by the Evidence Control Unit.
- 4.24. Thoroughly wash hands with water and soap after removing gloves.
- 4.25. The transporter of infectious linen, specimens, and samples must use universal precautions during transport, that is, gloves, hand washing, etc.
- 4.26. Inspect your vehicle at the beginning of every tour of duty to ensure the vehicle is equipped with a Communicable Disease Exposure Control Kit.

NOTE: Any Communicable Disease Exposure Control Kit deficiencies or shortages must be immediately reported to the member's Commanding Officer, via official channels.

- 4.27. When necessary, decontaminate your vehicle with a bleach solution of one part bleach to nine parts water, which has been prepared for 30 minutes prior to use. After applying to the surface, let it stand for an additional 10 minutes. Then, completely rinse the vehicle.
- 4.28. Decontaminate handcuffs in 70% isopropyl alcohol solution for a minimum of 5 minutes or 3% hydrogen peroxide for a minimum of 30 minutes, when they are exposed to bio-contaminants, such as the blood of a prisoner. Items need to be totally submerged to be effective.
- 4.29. A one part sodium hypochlorite (bleach), with nine parts of water must be utilized for disinfecting contaminated areas. A 10% freshly prepared bleach solution of household chlorine bleach is only effective for 24 hours at room temperature. It degrades more quickly at higher temperatures. Allow the solution to stand for 30 minutes, prior to use. After application, wait another 10 minutes and then rinse the area.
- 4.30. Direct citizen inquires, concerning AIDS, to the following agencies:
 - 4.30.1. The Baltimore City Health Department AIDS Program at 410- 396-1408.
 - 4.30.2. The State AIDS Hotline at 1-800-638-6252.
 - 4.30.3. People's Community Health Center at 410-685-1180.
 - 4.30.4. National Hotline for AIDS at 1-800-232-4638.

Supervisor

1. Inspect your patrol vehicle at the beginning of every tour of duty to ensure it is equipped with two complete Communicable Disease Exposure Control Kits and Sharp objects Containers for the recovery of needles and other sharp objects.
2. Ensure there is an adequate supply of bleach, 3% hydrogen peroxide, 70% isopropyl alcohol, or an Environmental Protection Agency (EPA) approved disinfectant, which will kill HBV and HIV, available for decontamination.
3. Notify the Communications Unit, if a member's injury and/or exposure require immediate medical attention.
4. Notify PSI immediately or as soon as practical whenever:
 - 4.1. A member is transported to any hospital for a possible communicable disease exposure, as the result of a serious injury.
 - 4.2. An arrestee, responsible for an exposure, must obtain medical treatment, as the result of a serious injury.
 - 4.3. A member is the subject of a possible percutaneous exposure.
 - 4.4. An exposed member is transported to the Mercy Medical Center or PSI.

5. Ensure treatment is obtained in keeping with PSI's recommendations.
6. If an injured member is transported to a hospital, other than Mercy Medical Center or PSI, ensure a telephone number at which the injured member can be reached is placed only on the copy of the reports sent to PSI.

NOTE: Ensure the suspected carrier has been positively identified and a blood sample is obtained from the suspected carrier at Mercy Medical Center or another medical facility within 24 hours.

7. Complete a Consent for the Submission of Blood, Form 105 (Appendix A), in duplicate whenever the suspected carrier voluntarily submits to blood testing.
8. Ensure the original Consent for the Submission of Blood Form is delivered to PSI and a copy of the consent form is presented to the hospital, where the blood testing is being conducted.
9. If the suspected carrier refuses to submit to a blood testing, obtain the blood sample by providing for the completion and judicial authorization of the required three forms: Motion to Compel Blood, Form 326 (Appendix B), Order to Compel Blood Sample, Form 327 (Appendix C) and the Affidavit in Support of Motion to Compel Blood Sample, Form 328 (Appendix D).
10. If the suspected carrier has been transported to Central Booking and a blood sample is needed, provide for the completion and judicial authorization of the Habeas Corpus Ad Subjiciendum or Writ, Form 329 (Appendix E).
11. If the suspected carrier is unable to offer consent or is not in police custody/detainment, a Search and Seizure Warrant must be completed to obtain the blood sample.
12. If needed, contact the Legal Affairs Section for assistance, Monday through Friday, 0830-1630 hours.
13. Ensure all pertinent reports, including the EIR, are completed and forwarded to the injured member's Commanding Officer.
14. Utilize the services of the Critical Incident Stress Team, if members are having difficulty dealing with any emotional issues, relating to an exposure.

Shift Commander

1. Whenever any member, under your Command, is the subject of a possible hazardous exposure from a suspected carrier, either by exposure to a body fluids or a human bite, ensure the suspected carrier submits to a blood test.
2. When a person with a possible communicable disease is released from a detention area, or interview room, or has been transported in a departmental vehicle:
 - 2.1. Ensure the detention area, interview room, or departmental vehicle is placed out of service, until disinfected. A "Closed for Sanitary-Biohazard Reason" sign must

be placed in the area or on the vehicle driver's side door, until it is properly disinfected.

- 2.2. Ensure the detention area, or interview room, or departmental vehicle is thoroughly disinfected, immediately following the person's release and prior to confining any other person in the same detention area, or interview room, or departmental vehicle.
 - 2.3. Any areas contaminated by blood, and other body fluids, must be disinfected.
 - 2.4. Ensure custodial personnel are notified of the situation/hazard. Ensure the detention area or departmental vehicle and all other contaminated areas are thoroughly disinfected with the disinfecting solution, provided by the Supply Unit. Sterilization is not required.
 - 2.5. Ensure members disinfect their assigned vehicles in order to return the vehicle to service.
3. Ensure at least one Communicable Disease Exposure Control Kit is maintained in each patrol vehicle and two kits are maintained in each supervisor's vehicle. Additional kits may be stored in a secure location, for example, the Shift Commander's office.

Commanding Officer

1. Ensure the containers for the disposal of contaminated material are emptied as needed, in keeping with established procedures.
2. Ensure hypodermic needle stick injuries are entered in the OSHA Form 300 as "Privacy Case," and in the Privacy Log, as well as, the Sharp objects Injury Log.
3. Ensure employees have access to this policy.
4. Immediately post updated materials in the Exposure Control Plan, as provided by the Departmental Safety Coordinator.

Shift Commander, Communications Unit

1. Notify the Legal Affairs Section and PSI or their designees, when requested.
2. Complete an Incident Reporting Sheet, when notified that a member has received an exposure or a human bite.

Legal Affairs Section

1. When notified of an exposure, take appropriate action immediately.
2. Provide assistance, as necessary.

Police Training Academy (PTA)

Information and Training, 29 CFR.1910.1030 (g) (2)

1. Training is provided during annual In-Service Training, conducted by PTA or the Laboratory Section.
2. In-Service Training is provided at no cost to the employee, during working hours on an annual basis.
3. Civilian members with an exposure possibility in the Laboratory Section and Evidence Control Unit are provided training at the time of their assignment and annually thereafter at no cost to the employee by the Laboratory Section.
4. Sworn Evidence Control Unit members are provided initial training and annual follow-up by PTA.
5. Training records are maintained at PTA and/or the Laboratory Section for three years from the date of the training.

NOTE: Employee training records are provided, upon request, to the employee or the employee's authorized representative within 15 working days. Requests must be made to the Director, PTA or the Crime Lab Quality Officer, Laboratory Section.

Mercy Medical Center/Public Safety Infirmmary (PSI)

1. Provide Hepatitis B vaccinations at no cost to all employees, who have occupational exposure. See (Appendix F), Exposure Determination.
 - 1.1. The vaccination will be offered and given to the employee after receiving training and before initial assignment.
 - 1.2. Any employee, who declines the Hepatitis B vaccine, will be required to sign a waiver to that effect. Those who decline, but request it later, will have the vaccine made available to them free of charge.
2. Coordinate any necessary post-exposure medical testing of suspected carriers of a contagious disease and any necessary testing/treatment of exposed members.
3. Provide members the necessary vaccines and treatments to prevent infection from bloodborne pathogens.
4. Provide for a post-exposure follow-up.
5. A confidential medical examination is made available to any employee, following an exposure incident. The circumstances of the incident and route of exposure must be documented. The identity of the source individual must be documented, if feasible. The source individual's blood will be tested for HBV and HIV, as soon as possible. The exposed employee will be informed of the laws and regulations, concerning the disclosure of the source individual's identity and infection status. The exposed employee's blood will be collected as soon as practical and tested after consent is obtained.

6. If the employee does not consent to HIV testing, the blood sample will be retained for 90 days in the event the employee reconsiders.
7. The exposed employee will be provided post-exposure prophylaxis, when medically indicated according to guidelines. Counseling for exposed employees will be provided. A written opinion from a healthcare professional will be obtained and provided to the exposed employee within 15 days.
8. Subsequent illness of exposed employees will be evaluated.
9. Medical records will be maintained for the duration of employment plus thirty years. The records include:
 - 9.1. Copy of the employee's Hepatitis B vaccination status, including the dates of all Hepatitis vaccinations and any records, relative to the employee's ability to receive vaccinations.
 - 9.2. Copy of all results of examinations, medical testing, and follow-up procedures.
 - 9.3. The employee's copy of the healthcare professional's written opinion.
 - 9.4. Copy of all information, provided to the healthcare professional in reference to the exposure incident.

Supervisor, Quartermaster Unit/Evidence Control Unit

1. Ensure an adequate supply of Communicable Disease Exposure Control Kits and pocket masks are made available to Property/Safety Officers for distribution, as needed.
2. Ensure an adequate supply of OSHA approved disinfecting solution and replacement garments are available for distribution, upon request.
3. Ensure a sufficient supply of uniforms is provided, where uniforms are considered an individual's PPE, for example, Laboratory Mobile Unit employees.
4. Ensure laundry services are provided for uniforms and laboratory coats, which are provided as PPE. Contaminated personal clothing will be handled in the same fashion as uniform clothing.
5. Distribute PPE and supplies, as needed.

NOTE: When the Quartermaster Unit is closed, the Evidence Control Unit will distribute PPE and supplies: hand sanitizer, bleach, alcohol, hydrogen peroxide and throw-away replacement garments, and restock as needed.

District/Section Property/Safety Officers

1. Maintain and issue PPE within their Districts/Sections, where exposure is likely, for example, Laboratory Section and Evidence Control Unit. Equipment must be provided, appropriate to the individual and type of potential hazard.
 - 1.1. Ensure exposure kits are maintained in the trunk of every marked police vehicle and in all Laboratory Section Mobile Unit vehicles.

- 1.2. Provide hypoallergenic gloves to those members, who need them.
 - 1.3. Attend safety meetings with the Departmental Safety Officer, as called.
 - 1.4. Monitor the biohazard container on a daily basis and transport any full container to Evidence Control Unit's Bio-Hazard Room on the mezzanine level next to the ECU counter. It is the responsibility of District/Section Property/Safety Officer and non-laboratory personnel to obtain a replacement.
 - 1.5. Laboratory Section personnel will transport full biohazard containers to the Laboratory Section Trace Analysis Unit.
2. Collect, review, and record incidents, required of the OSHA 300 log, which occurred in your District / Section within 7 days of occurrence.

Departmental Safety Officer

All contaminated or potentially contaminated waste must be disposed of in a biohazard waste container, located at all District Stations, Evidence Control Unit, Laboratory Section, Central Booking and Juvenile Detention. All other non-biohazardous waste must be placed in regular trash receptacles and disposed of by contractual housekeeping personnel.

1. Ensure specially marked containers are located at all District Stations, Juvenile Detention, Evidence Control Unit, Laboratory Section, Central Booking, Homicide Section and any other area necessary for the deposit of contaminated items, such as gloves, masks and gowns. These containers must be clearly marked and properly disposed of whenever necessary.
2. Ensure the Department's Exposure Control Plan is reviewed annually and has the revision date changed each year, even if no content changes are warranted.
3. Ensure employees have access to this policy. Immediately post updated materials in the Exposure Control Plan, as provided by the Department Safety Coordinator.
 - 3.1. Any notification or update will be provided electronically to all employees. This can be found on Novell Applications.
4. Conduct annual random safety inspections at all agency facilities.
5. Chair monthly meetings with District/Section Property/Safety Officers.
6. Respond to operational incidents and training exercises, to include any serious accident, injury, or occupational illness situation to assess/investigate the root cause of this event.
 - 6.1. Report fatalities immediately to Baltimore City Department of Finance, Office of Risk Management, Division of Occupational Safety, via the City Hall Operator (410-396-3100). This is a 24-hour/7-day working phone number.
7. Be responsible for inspection of all facilities and areas within the control of the Baltimore Police

Department for compliance with both Maryland Occupational Safety and Health Administration (MOSHA) and federal Occupational Safety and Health Administration (OSHA) mandates.

8. Coordinate the OSHA or MOSHA inspections of department facilities.
9. Collect, review, and correct OSHA 300 forms from District/Section Property/Safety Officers.
10. Work with Baltimore City's Department of Finance, Office of Risk Management, Division of Occupation Safety, to insure compliance with the City of Baltimore Safety Program.

APPENDICES

- A. Consent for the Submission of Blood (Form 105)
- B. Motion to Compel Blood (Form 326)
- C. Order to Compel Blood Sample (Form 327)
- D. Affidavit in Support of Motion to Compel Blood Sample (Form 328)
- E. Habercus Corpus Ad Subjiciendum or Writ (Form 329)
- F. Exposure Determination

RESCISSION

Remove and destroy/recycle Policy 810, *Exposure Control Plan for Communicable Diseases, Bloodborne Pathogens and Human Bites*, dated 2 April 2014.

COMMUNICATION OF POLICY

This policy is effective on the date listed herein. Each employee is responsible for complying with the contents of this policy.

APPENDIX A

Consent for the Submission of Blood (Form 105)

**Consent For The Submission Of Blood Form
For The Purpose Of Testing For
Hepatitis B, Hepatitis C And The HIV Virus**

I, _____
hereby consent to the taking of my blood for testing to detect
Hepatitis B, Hepatitis C and the HIV Virus; and I authorize
the results of such testing to be released to the Medical
Director of the Baltimore Police Department. Further, this
consent is being given freely and voluntarily on my part
without coercion of any type by any member of the Baltimore
Police Department. Finally, I fully understand this consent,
and I am able to read and write.

Signature_____
Date_____
Name Printed_____
Witness Signature_____
Date_____
Witness Name Printed

Form 105/03

APPENDIX B

Motion to Compel Blood (Form 326)

STATE OF MARYLAND

v.

(Name of Subject)

* IN THE CIRCUIT COURT FOR

* BALTIMORE CITY or

* IN THE DISTRICT COURT OF

* MARYLAND FOR BALTIMORE CITY

* CASE NO. _____

MOTION TO COMPEL BLOODThe Baltimore Police Department, by _____,
(Name of Affiant and Unit)moves this Honorable Court to compel the taking of a blood sample for the testing of
communicable diseases from the above _____,
(Name of Subject)

based upon the facts set forth in the attached affidavit.

Officer/Rank Sequence Number**CERTIFICATE OF SERVICE**I HEREBY CERTIFY that on this _____ day of _____,
(Date) (Month) (Year)a copy of the foregoing Motion to Compel Sample, and proposed Order was hand
delivered to _____, of the _____.
(Name of Subject) (Location)_____
Officer/Rank Sequence Number

APPENDIX C

Order to Compel Blood Sample (Form 327)

STATE OF MARYLAND

V.

(Name of Subject)

* IN THE CIRCUIT COURT FOR

* BALTIMORE CITY or

* IN THE DISTRICT COURT OF

* MARYLAND FOR BALTIMORE CITY

* CASE NO. _____

ORDER TO COMPEL BLOOD SAMPLE

It is hereby ordered and adjudged this _____ day of _____, _____,
(Day) (Month) (Year)
that _____, currently held at the _____ submit
(Name of Subject) (Location)
to the taking of blood samples for the testing of possible Hepatitis and HIV (ARC).

It is further ordered this day that a medically qualified professional take the appropriate blood samples necessary for the indicated analysis, and is authorized to use whatever restraints are necessary on the patient to accomplish the sampling. The results of said testing shall be released to the Medical Director of the Baltimore Police Department and then otherwise held confidential.

JUDGE

APPENDIX D

Affidavit in Support of Motion to Compel Blood Sample (Form 328)

STATE OF MARYLAND

* IN THE CIRCUIT COURT FOR

v.

* BALTIMORE CITY or

(Name of Subject)

* IN THE DISTRICT COURT OF

* MARYLAND FOR BALTIMORE CITY

* CASE NO. _____

AFFIDAVIT IN SUPPORT OF MOTION TO COMPEL BLOOD SAMPLE

1. _____
(Provide name of police agency, name and rank of Affiant and Unit, and the incident engaged.)

2. _____

(Date, time and location of incident and a brief description of incident leading to exposure.)

3. _____

(Include affected member(s), name and how he/she became exposed to bodily fluid; for example by human bite or open wound.)

4. _____ would not relinquish a blood sample for testing for the
(Name of Subject)
medical treatment of the Officer. _____ is currently being held at
(Name of Subject)

(Location)

5. That the possibility of infectious diseases transmitted to persons having open wounds is high when bodily fluid comes into contact with the wound.

6. The best medical treatment for the officer cannot be expeditiously prescribed until the screening for possible infectious diseases of _____ is completed.
(Name of Subject)

7. The results of said testing will be kept confidential and will be used only for the purposes listed above. Further, the results of said tests will be provided, upon request, to _____.
(Name of Subject)

(Signature and Rank of Affiant)

APPENDIX E

Habeas Corpus Ad Subjiciendum or Writ (Form 329)

Habeas Corpus Ad Subjiciendum

Indictment No. _____, Docket _____
(If Applicable) (If Applicable)***STATE OF MARYLAND*****TO THE WARDEN OF THE CENTRAL BOOKING AND INTAKE FACILITY**

Greetings:

You are hereby commanded, that you have the body of

(Name of Subject)

DOB: _____, SID# _____,

detained under your custody, as it is said, by whatsoever name he may be called in the

same, before the _____
(Name and Address of Medical Facility to Take Subject)Baltimore, Maryland at _____ on _____, to give blood sample
(Time) (Date)and then there to be present and immediately after the said _____
(Name of Subject)shall have given his blood sample before the said _____
(Name of Medical Facility)

to return him to said prison, and have you then and there this writ.

Witness the hand of the Judge and the seal of the Circuit Court of Baltimore,

this _____ day of _____, A.D., _____.
(Date) (Month) (Year)TO BE TRANSPORTED BY:
BALTIMORE POLICE DEPARTMENT_____
JUDGE

APPENDIX F

Exposure Determination 29CFR910.1030 (c) (1) (ii) (A)

Job classification in which all employees have occupational exposure:

Laboratory Section**DNA Unit**

Criminalis

t III

(DNA)

Criminalist II

Criminalist I

Drug Analysis Unit

Criminalist

Supervisor, Drugs

Criminalist III, Drugs

Criminalist II, Drugs

Criminalist I, Drugs

Firearms Unit

Firearms Examiner,

Supervisor Firearms

Examiner

Firearms Inventory Technician

Quality Office

Laboratory Quality Officer – Quality Assurance Manager

Criminalist II – Deputy Quality Assurance Manager

Latent Print Unit

Latent Print Examiner

Supervisor Latent Print

Examiner

Mobile Unit

Laboratory Technician Supervisor

Laboratory Technician II

Laboratory Technician I

Photography Unit

Laboratory Photography Supervisor

Laboratory Photographer

Trace Analysis Unit

Criminalist Supervisor,

Trace Criminalist III -

Trace Criminalist II

Criminalist I

Evidence

Technician

Serologist

Job classifications in which some employees have occupational exposure:

Firearms Unit

Community Service Officer

Evidence Control Unit

Commanding Officer

Police Sergeant

Police Officer

Crime Reduction Bureau

Police Lieutenants

Police Sergeants

Police

Officers/Agents

Detective

Lieutenants

Detective Sergeants

Detectives

Job classifications in which no employees have occupational exposure:

Polygraph Operator

Compliance, Accountability, & External Affairs Division

Safety Officer

Medical Unit

Police Sergeant

Civilian Office Assistants

Director, Laboratory

Section Office

Supervisor Office

Assistant III

Office

Assistant II

Laboratory

Assistant

Criminalist II,

Codis

Managers Administrative

Assistant Purchasing

Assistant