

	STANDARD OPERATING PROCEDURE <small>State Form 39870 (R/S-06)</small>	Reference Number EWS-009
	Subject Communicable Diseases	
	Special Instructions Replaces ENF-003 dated January 1, 2015	Effective Date February 28, 2026

I. PURPOSE

Establish precautionary guidelines against the transmission of communicable diseases to employees from exposure to body fluids and other potentially infectious material of other persons.

II. POLICY

When dealing with persons who are suspected of having a communicable disease, employees shall not evade their responsibilities to protect life, preserve the peace, arrest criminal offenders, or perform general police duties, as required. In these instances, the appropriate preventive measures shall be adhered to.

III. PROCEDURE

A. Protective Measures

1. The appropriate issued personal protective equipment (PPE) shall be used to protect employees from contact with body parts, fluids, or unsanitary, hazardous, or infectious conditions.

a. Issued protective clothing shall be worn to prevent contact with bodily fluids of an individual or when handling or contacting any substance that may have been contaminated. The methods for putting on, taking off, and disposing of protective equipment, as described by the manufacturer, the Center for Disease Control (CDC), the Occupational Health and Safety Administration (OSHA) and/or during training shall be adhered to.

b. The issued resuscitator facemask shall be used when performing Cardiopulmonary Resuscitation (CPR) and/or artificial respiration. Other resuscitator equipment may be used only if the employee has been officially trained and/or authorized.

c. High Efficiency Particulate Air (HEPA) half-mask filtering respirators shall be worn in all suspected infectious disease environments.

d. Employees entering enclosed areas with or transporting individuals/prisoners in closed vehicles who are suspected of having an infectious disease shall:

- (i) Utilize an ambulance or other emergency response vehicle for vehicle transportation. Use of a Department commission should be as a last resort;
- (ii) Wear the issued HEPA half-mask filtering respirator. An additional precaution would be to have the subject wear a HEPA mask during transport;
- (iii) Maintain good ventilation of the vehicle by use of the vent and opening windows, as appropriate, given the weather conditions; and
- (iv) When the transport is complete, the vehicle should be cleaned thoroughly, as described in section B., to ensure evacuation of any remaining infectious material.

e. Employees attending autopsies shall wear issued gloves, mask, gown, foot covers and head/face shields.

f. Employees conducting searches or pat downs shall take every precaution to avoid needle sticks or puncture wounds.

- (i) Gloves shall be worn, when possible; and
- (ii) Avoid placing hands in unseen areas.

g. Employees shall be aware that blood, blood particles, or other bodily fluids may adhere to their shoes when working at crime or crash scenes or when attending autopsies. Issued protective foot covers shall be worn if contamination is possible.

2. Employees shall routinely treat and properly cover cuts, sores, and skin conditions in order to avoid direct contact with suspected infectious conditions. When necessary, full PPE shall be utilized.

B. Clean Up After Possible Contact and/or Contamination

1. Employees shall initiate the following hygienic measures after any potential contact with any bodily fluids of another person. This includes needle sticks, punctures or bite wounds.

2. Wash hands and other exposed areas thoroughly with soap and water. Alcohol preps can be used as an interim preventive cleaning procedure.

3. Use water to flush eyes thoroughly or to rinse the mouth if blood or other bodily fluids have splashed into the employee's face.

4. Standards of practice and routine cleaning of equipment is necessary because equipment such as vehicles and weapons are designated as reusable. They may be a source of environmental contamination unless properly cleaned, disinfected or sterilized.

5. Full decontamination shall be conducted when required by a physician, the department of health, Indiana Department of Homeland Security (IDHS), or the CDC.

6. When cleaning equipment:

- (i) Employees shall use PPE to reduce the potential for contact with potentially contaminated materials with the skin or personal clothing;
- (ii) When cleaning large equipment, stationary or portable, with a germicidal detergent, avoid spatter or dripping. If dripping is reasonably anticipated, place a drop cloth under the equipment;
- (iii) Clean spills from around the equipment immediately;
- (iv) All cleaning materials and PPE shall be disposed of as infectious waste as described in Section D;
- (v) Employees shall wash their hands after removal of PPE; and
- (vi) If the decontamination of equipment or portions of equipment is not feasible, then:

(a) A biohazard label shall be attached to the equipment stating which portions remain contaminated, and it shall be cordoned off to prevent tampering until it is safe or properly removed; and

(b) Information that the piece of equipment may present a risk of occupational exposure to a bloodborne pathogen must be conveyed to all affected employees and the servicing or moving representatives or manufacturers prior to handling, servicing, or shipping.

C. Reporting Possible Contact and/or Contamination

1. Employees who, through direct contact, have been exposed to blood or other bodily fluids shall:

a. Within 72 hours, complete the Injury and Illness Report in RMS; and

b. In cases of increased potential for contamination (e.g. open wounds, bodily fluids contacting the eyes, nose, or mouth, etc.) employees shall also complete the [ISDH Exposure Form](#). Employees should notify their personal physician of potential exposure incidents.

2. Additionally, employees who through direct contact, have been exposed to blood or other bodily fluids, while providing emergency medical care to a person shall personally notify the medical care facility receiving that person.

a. Notification must be made in writing within 24 hours after the patient has been admitted by completing and forwarding the [ISDH Exposure Form](#) to the medical director of the emergency medical services provider's employer; the medical director of the emergency department; the Health Management Specialist of the Training Section.

b. Exposed employees shall complete Section 4: Exposure Follow-up Notification of the [ISDH Exposure Form](#) to facilitate follow-up notification to their personal physician. Employees should inform their personal physician of potential exposure incidents.

3. Except as provided in subsections a. and b. above, a person may not disclose or be compelled to disclose medical or epidemiological information.

a. A person responsible for recording, reporting, or maintaining information who recklessly, knowingly or intentionally discloses or fails to protect medical or epidemiological information, classified as confidential under this section, commits a Class A misdemeanor.

b. In addition to any legal penalty, an employee who violates this section is subject to other disciplinary action.

4. A physician, designated by the medical service facility, shall notify the employee or the employee's family physician within 48 hours after the patient was admitted or treated if information is obtained from the patient's records or a diagnosis reveals the patient has a communicable disease that is potentially transmittable. There is no legal requirement for a hospital to test for dangerous communicable diseases. However, medical care facility policy may permit a physician to order HIV testing provided that one of the following conditions exists:

a. A health care consent, or an implied consent under emergency circumstances, has been obtained from the individual to be tested; or

b. A court order has been issued permitting the test.

- (i) Indiana Code governs examination of persons for all other communicable diseases and also requires written informed consent or a court order for testing; and
- (ii) Personnel are directed not to order such testing or procure such testing without strict compliance to the specific Indiana Code provisions.

5. Communicable Diseases include, but are not limited to:

Malaria	Hemorrhagic fevers	Hepatitis (B) (Viral C) (HCV)
Babesiosis	Gonorrhea	Syphilis (primary and secondary)
Herpes	Leptospirosis	Human Immunodeficiency Virus (HIV)
Tuberculosis	Kaposi's Sarcoma	Arthropod-borne viral diseases
Rabies	Rat-bite fever	Acquired Immune Deficiency Syndrome (AIDS)
Relaps	Burkett's Lymphoma	Creutzfeldt-Jakob diseases
Y. Pestis	Ebola	

6. The Department's OSHA Safety Coordinator and the Health Management Specialist shall review all submitted I&I Reports and may require an employee to complete the [ISDH exposure form](#).

D. Disposal of Contaminated Clothing and Articles

1. All contaminated materials shall be placed in appropriate containers before leaving the scene of an incident and placed in a biohazard collection container, as soon as possible.

2. Contaminated issued equipment and uniform items (e.g. such as shirts and pants) shall:

a. Be taken out of service as soon as possible and properly stored to prevent secondary contamination and/or decontaminated in accordance with methods specified in the Department's Bloodborne Pathogens Exposure Control Program;

b. Require a Report of Automobile Crash or Equipment Loss form (PD 49) in RMS to be completed for issued items contaminated and turned in for disposal. A complete description of the circumstances shall be reported to include explanation of protective equipment in use at the time, how the exposure resulted, and if protective gear failed or was not being used at the time. A comprehensive explanation is necessary if issued protective equipment was not used. Reimbursement for reissue shall be ordered if proper precautions were not used; and

c. Items shall be placed in the district or facilities' biohazard bin for disposal.

(i) The biohazard bin shall be equipped with a biohazard bag; and

(ii) When biowaste pickup is needed, the district Lieutenant, or designee, shall contact the Department's biowaste disposal contractor.*

*NOTE – Through Fiscal year 2027, the biowaste contractor is Stericycle. Stericycle can be contacted at 866-783-7422 or customer-relations@stericycle.com.

3. Items taken as evidence shall be properly packaged (such as needles) in puncture proof containers and clearly marked to include labeling as suspected body fluid contamination, if necessary.

E. Training and Record Keeping

1. The Training Section shall provide biennial training to each employee having duties that may require an employee to have direct contact with blood or bodily fluids and utilization of the HEPA filtering face mask when transporting a subject suspected of having an infectious disease.

a. The training must be provided before the individual is given an assignment where contact with blood or bodily fluids is likely.

b. The training must include the universal precautions and other infection control measures adopted by the Indiana State Department of Health.

c. An attendance record must be kept of an employee's participation in this training, which shall be available for inspection by the Indiana Occupational Safety and Health Administration and the Indiana State Department of Health.

F. This procedure is to be used in conjunction with all relevant Department regulations, rules, policies, and procedures.