

***P.O. 228 Prevention of Bloodborne Pathogens***

Effective From:	7-15-2012	Effective To:	Current
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***BB. P.O. 228 - Prevention of Bloodborne Pathogens***

**1. WORKPLACE CONTROLS AND PERSONAL PROTECTIVE EQUIPMENT**

- i) In order to minimize potential exposure, officers should assume that all persons are potential carriers of HIV and HBV.
- ii) When appropriate, protective equipment is available. No officer shall refuse to arrest or otherwise physically handle any person who may carry the HIV and/or HBV virus.
- iii) Officers shall use protective gear when appropriate and possible, unless the officer can demonstrate that in a specific instance, its use would have prevented the effective delivery of health care or public safety services or would have imposed an increased hazard to his safety or the safety of another officer. All such instances shall be reported by the officer to his immediate supervisor and shall be investigated and appropriately documented. Disposable latex gloves should be worn when handling any persons, clothing or equipment with bodily fluids on them.
- iv) Eye protection devices, such as goggles or glasses with solid side shields or chin-length face shields, should be worn whenever splashes, spray, spatter or droplets of potentially infectious materials may be generated and eye, nose or mouth contamination can be reasonably anticipated.
- v) Gowns, aprons, lab coats, clinic jackets or other outer garments should be worn based on the potential for exposure.
- vi) Plastic mouthpieces or other authorized barrier/resuscitation devices should be used when an officer performs CPR or mouth-to-mouth resuscitation.
- vii) All sharp instruments, such as knives, scalpels and needles, shall be handled with extraordinary care and should be considered contaminated items.
  - a) Leather gloves or their protective equivalent should be worn when searching persons or places or dealing in environments, such as crash scenes, where sharp objects and bodily fluids may reasonably be encountered.
  - b) Searches of automobiles or other places should be conducted using a flashlight, a mirror or other devices where appropriate. Subsequent to a cautious frisk of the outer garments, suspects should be required to empty their pockets or purses and to remove all sharp objects from their person.
  - c) Needles shall be placed in Department provided, puncture-resistant, leak proof containers which are marked as biohazardous when being collected for evidence, disposal or transportation purposes.
  - d) Needles shall not be recapped, bent, broken or removed from a disposable syringe or otherwise manipulated by hand.
- viii) Officers shall not smoke, eat or drink in close proximity to bodily fluid spills.
- ix) Any evidence contaminated with bodily fluids shall be completely dried, double bagged and marked to identify potential or known communicable contamination.

**2. WORKPLACE SAFEGUARDS**

- i) Supervisors are responsible for the maintenance of a clean and sanitary workplace and shall conduct monthly inspections to ensure that these conditions are maintained.
- ii) All equipment and environmental work surfaces must be cleaned and decontaminated after contact with blood or other potentially infectious materials as provided in this policy.
- iii) Any protective coverings used in enforcement operations for covering surfaces or equipment shall be removed or replaced as soon as possible following actual or possible contamination.
- iv) Bins, pails and similar receptacles used to hold actual or potentially contaminated items

- shall be labeled as biohazardous, decontaminated as soon as feasible following contamination, as well as inspected and decontaminated on a regularly scheduled basis.
- v) Broken and potentially contaminated glassware, needles or other sharp instruments shall not be retrieved by hand but by other mechanical means and shall not be stored in a manner which requires that they be retrieved manually.
  - vi) Officers shall remove clothing which has been contaminated with bodily fluids as soon as practicable and with as little handling as possible. Any skin area contacting bodily fluids shall be cleansed in accordance with this policy.
  - vii) Contaminated laundry shall be placed in a plastic bag and taken to a local dry cleaning establishment. Commanders shall contact local dry cleaners in their areas of responsibility and maintain a list of establishments.
  - viii) Personal protective equipment shall be placed in Department approved bags or containers at the location where it is used, but shall not be sorted, rinsed or cleaned at that location.
  - ix) Department personnel working within this agency's crime laboratory shall adhere to the policy and procedures contained herein but shall refer to and also adhere to special safety procedures established for the laboratory workplace.
  - x) According to [LAC 51:27:501, et seq.](#) of the Louisiana State Sanitary Code, small quantities of potentially infectious biomedical waste may be disposed of in ordinary waste without treatment, provided that such waste is packaged to assure no loss of contents, should the integrity of the original package be violated. This shall generally be interpreted to mean placing the original plastic bag or rigid container into a second bag or rigid container. Items such as coats, towels, gloves, etc., may be disposed of in the above manner. Waste water generated from disinfection may be poured down the drain.

### 3. DISINFECTION

- i) Any unprotected skin surfaces contacted by bodily fluids shall be thoroughly washed as soon as possible with hot running water and soap for at least fifteen (15) seconds before rinsing and drying.
- ii) Alcohol or antiseptic towelettes with 70% isopropyl alcohol may be used where soap and water are unavailable.
- iii) Disposable gloves should be rinsed before removal and hands and forearms should then be washed.
- iv) Skin surfaces should be washed and mucous membranes flushed as soon as feasible following the removal of personal protective equipment.
- v) Hand lotion should be applied after disinfection to prevent chapping and to seal cracks and cuts on the skin.
- vi) All open cuts and abrasions should be covered with waterproof bandages before reporting to duty.
- vii) Disinfection procedures shall be initiated when individuals with bodily fluids on his/her person are transported in a Department vehicle.
  - a) A supervisor shall be notified and the vehicle taken to the troop garage as soon as possible.
  - b) Affected vehicles shall be immediately designated with a sign indicating "Infectious Disease Contamination" upon arrival at the Troop garage and while awaiting disinfection. Should the contamination occur during hours where service personnel are unavailable, the vehicle should be placed out-of-service and designated with the posting of an "Infectious Disease Contamination" sign. The officer should be assigned a pool vehicle until the contaminated unit is disinfected.
  - c) Troop/Section Commanders, or their designee, shall direct service personnel to remove any excess bodily fluids from the vehicle with an absorbent cloth, paying special attention to any cracks, crevices or seams which may contain fragment fluids. Commanders shall ensure that service personnel wear all necessary protective

clothing and dispose of waste generated from decontamination in accordance with this memorandum.

- e) The affected areas should be disinfected using hot water and bleach or alcohol, and allowed to dry.
- f) All Department vehicles taken to troop garages for scheduled washing and routine maintenance shall have the interior cleaned with an approved disinfectant.
- g) Non-disposable equipment and areas upon which bodily fluids have been spilled shall be disinfected as follows:
  - 1) Any excess bodily fluids should first be wiped up with approved disposable absorbent materials.
  - 2) A freshly prepared solution of one part bleach to 9 parts water or fungicidal/mycobactericidal
  - 3) Disinfectant shall be used to clean the area or equipment.
  - 4) Boots and leather goods if contaminated shall be brush-scrubbed with soap and hot water and allowed to air dry.

#### 4. RECORD KEEPING

- i) The Department's Infectious Disease Prevention Coordinator shall be the Department of Public Safety and Corrections Safety Program Coordinator, and as such, subject to the authority of the Deputy Secretary.
- ii) The Department's Infectious Disease Prevention Coordinator shall maintain an accurate record for each employee with occupational exposure to bloodborne pathogens which includes information on vaccination status; the results of all examinations, tests and follow-up procedures; the health care professional's written opinion; and any other relevant information provided by the health care professional.
- iii) These health care records shall be retained in the Internal Affairs Unit with access limited to the Department's Infectious Disease Prevention Coordinator for the duration of the infected officer's employment plus an additional thirty (30) years. These health records may not be disclosed or reported, absent proper judicial order, or without the express written consent of the officer.
- iv) When an officer reasonably believes he has been exposed to contaminated material, he shall immediately notify his supervisor. The incident shall be thoroughly investigated and appropriately documented by the officer's supervisor utilizing, Employer's First Report of Injury ([DPSMF 1390](#)). During the investigation, if circumstances warrant, the officer shall report to a medical facility for an examination and/or treatment. A final report shall be prepared and sent to the Troop/Section Commander for final review. The finished report shall then be forwarded to the Department of Public Safety and Corrections Safety Program Coordinator, Infectious Disease Prevention Coordinator.

#### 5. TRAINING

- i) The Training Academy Commander, or his designee, shall ensure that all officers with potential occupational exposure are provided a complete course of instruction on prevention of bloodborne diseases prior to their initial assignment or as soon thereafter as practical.
- ii) All affected employees shall receive annual refresher training or additional training when job tasks or procedures are modified in a manner which may alter their risk of exposure.
- iii) Employees with potential occupational exposure shall have access to applicable federal and state regulations pertaining to the regulation of bloodborne pathogens which shall be kept and maintained by the Personnel Unit.
- iv) The Training Academy Commander shall ensure that complete records are maintained on officer training including information on the dates and content of training sessions, names and qualifications of persons conducting the training and names and job titles of all persons attending the training. This information shall be included in each officer's training record at the Training Academy.

