

Bowie State University Police Department General Order

Subject: Communicable Diseases	Number: 29
Effective Date: January 1, 1996	Rescinds: Arts. 6.18 and 6.19
Approved: Capt. B. S. Biscoe	

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29.1 Policy

29.1.1 To ensure that members of the department are able to perform their duties in a safe and effective manner, it is the policy of this department to continuously provide them with current safety procedures and communicable disease information that will assist in minimizing potential exposure, while increasing their understanding of the nature and potential risks of communicable diseases. The following are guidelines for members in preventing the contraction of communicable diseases.

29.2 Definitions

29.2.1 Communicable Disease.

An infectious illness that is transmitted through contact with the body fluids of an infected individual. Some examples of a communicable disease are:

- a. **Tuberculosis (T.B.):** A communicable disease caused by infection with the tubercle bacillus characterized by the formation of tubercles within some organ or tissue. A tubercle is a small nodule or swelling formed within an organ.
- b. Acquired Immune Deficiency Syndrome (AIDS): A virus identified as Human Immunodeficiency Virus (HIV) which damages the body's natural immune system thus the person's ability to fight disease becomes severely weakened.

c. **Hepatitis B:** A viral infection which may cause acute clinical disease but which most often causes sub-clinical alterations of the liver. A chronic carrier state may exist in individuals for life, thereby enabling such persons have the capability to transmit the viral infection throughout their life.

29.2.2 Body Fluids.

Liquid secretions including blood, semen, and vaginal or other secretions that might contain these fluids such as saliva, vomit, urine, or feces.

29.3 Emergency Protection Kit

- **29.3.1** Because of the high risk factor in contagious diseases, an Emergency Protection Kit shall be in each patrol vehicle.
- **29.3.2** The kit is designed to assist the officer in rendering emergency care (CPR in particular) and reducing the risk of contracting a communicable disease.
- **29.3.3** The kit shall consist of:
 - a. Protective eye goggles;
 - b. Two (2) pairs of gloves: one (l) pair of heavy-duty Playtex, and one pair of heavy-duty surgical gloves;
 - c. One red plastic hazardous material bag for evidence, clothing and contaminated equipment; and
 - d. A manual disposable resuscitator.
- **29.3.4** Officers assigned patrol vehicles shall inspect the Emergency Protection Kit at the beginning of his/her tour-of-duty.
 - a. After inspecting the kit, the officer shall indicate the inspection on the Vehicle Inspection Sheet.
 - b. When a kit is utilized, a Miscellaneous Incident and/or Crime Against Person Report shall be filed justifying use of the kit.
- **29.3.5** Shift Commanders shall ensure that the emergency kits remain intact unless opened for emergency use.

- a. If an emergency kit is used, the Shift Commander shall ensure that the kit is replaced as soon as possible.
- b. Shift Commanders shall ensure that an Emergency Protection Kit is maintained in the Shift Commander's Operation Center for use by administrative personnel when needed.

29.4 Preventive Procedures

- **29.4.1** When an officer receives a call for service and, upon his/her arrival on the scene, determines there is a high risk contagious factor present, such as body fluid(s) evident, he/she shall:
 - a. Advise the Police Communications Officer of the situation and request ambulance, if needed;
 - b. Utilize rubber gloves;
 - c. Utilize coveralls, when applicable; and
 - d. Utilize protective eye goggles.
- **29.4.2** If the subject is not breathing and CPR is indicated after checking the carotid artery for a pulse, the disposable resuscitator shall be utilized. Although emergency equipment is being utilized, it does not release the police officer and/or the Police Communications Officer from contacting the Prince George's County Fire Department Paramedics. This equipment shall be utilized in emergency situations only, as follows:
 - a. The member shall place the face mask over the nose and mouth of the victim ensuring a proper seal around the perimeter of mask;
 - b. The member shall place the flat tube end of the mask assembly in his/her mouth and administer two (2) short breaths into the tube.
 - (1) When administering the air flow, the member shall monitor the rising or swelling of chest indicating that the air supply is being properly received by the lungs.
 - (2) If the abdomen swells, the member is breathing too hard into the tube.
 - (3) Members are reminded that the ratio of chest compressions to breaths is fifteen (15) chest compressions to two (2) breaths;
 - c. When performing chest compressions for CPR, the member shall:

- (1) Keep the flat end of tube clamped between his/her teeth;
- (2) Remove the face mask from victim: and then
- (3) Complete the chest compressions; and
- d. If air/oxygen is still required, the member shall replace the face mask over the nose and mouth of he victim, ensuring a proper seal around the perimeter of the mask.
- **29.4.3** When a member responds to a patient care area, he/she shall check with the nursing staff for isolation techniques utilized for each individual situation in the particular area he/she is in. The member shall:
 - a. Avoid the patient's direct breath as much as possible;
 - b. If the patient is coughing with expectoration, use a gauze mask;
 - c. Wash his/her hands thoroughly before and after "hands on" contact with the patient (*Refer to Section 29.6.1 for instructions.*);
 - d. If assisting a patient in a manner which may cause blood or other body fluids to be on the member's hands, use disposable gloves (unless exigent circumstances dictate otherwise).
 - (1) In order to avoid unnecessary contact with the skin, use gloves when they are available.
 - (2) This, however, does not supersede the value of good hand washing; and
 - e. Report such contacts to the Campus Health Department.
 - (1) The reporting member shall report to Campus Health on the next clinic business day for consultation with a Campus Health Physician.
 - (2) The Shift Commander shall prepare an Accident/Illness document prior to sending the affected member to the Campus Health Physician.
- **29.4.4** All sharp instruments such as knives, scalpels and needles shall be handled with extraordinary care, and shall be considered contaminated items.
 - a. Heavy-duty/leather gloves shall be worn when searching for and handling sharp instruments.
 - b. Members shall not place their hands in areas where sharp instruments might

be hidden.

- (1) An initial visual search of the area shall be conducted, using a flashlight where necessary.
- (2) The suspect shall also be asked to remove such objects from his/her person.
- c. Needles shall not be recapped, bent, broken, removed from a disposable syringe, or otherwise manipulated by hand.
- d. Needles shall be placed in a red plastic hazardous material bag when being collected for evidentiary or disposal purposes.
- 29.4.5 Members shall not smoke, eat, drink, or apply makeup around body fluid spills.
- **29.4.6** Any evidence contaminated with body fluids shall be dried, double bagged in plastic bags and marked to identify potential or known communicable disease contamination.

29.5 Transport and Custody

- **29.5.1** Where appropriate protective equipment is available, no member shall refuse to arrest or otherwise physically handle any person who may have a communicable disease.
- 29.5.2 Members shall not put their fingers in or near any person's mouth
- **29.5.3** Individuals with body fluids on their persons shall be transported in separate vehicles from other individuals. The individual may be required to wear a suitable protective covering, if he/she is bleeding or otherwise emitting body fluids.
- **29.5.4** Members have an obligation to notify relevant support personnel during a transfer of custody when the suspect has body fluids present on his/her person, or has stated that he/she has a communicable disease.
- **29.5.5** Suspects taken into custody with body fluids on their persons shall be directly placed in designated holding area for processing.
- **29.5.6** Members shall document on the appropriate arrest or incident form when a suspect taken into custody has body fluids on his/her person, or has stated that he/she has a communicable disease.

29.6 Disinfection

- **29.6.1** Any unprotected skin surfaces that come into contact with body fluids shall be immediately and thoroughly washed with hot running water and soap for 15 seconds before rinsing and drying.
 - a. Alcohol or antiseptic towelettes may be used where soap and water are unavailable.
 - b. Disposable gloves should be rinsed before removal. The hands and forearms should then be washed.
 - c. Hand lotion should be applied after disinfection to prevent chapping and to seal cracks and cuts on the skin.
 - d. All open cuts and abrasions shall be covered with waterproof bandages before reporting for duty.
- **29.6.2** Members shall remove clothing that has been contaminated with body fluids as soon as practical.
 - a. Any contacted skin area shall then be cleansed in the prescribed fashion.
 - b. Contaminated clothing shall be handled carefully and laundered in the normal fashion.
- **29.6.3** Disinfection procedures shall be initiated whenever body fluids are spilled, or an individual with body fluids on his/her person is transported in a BSUPD vehicle.
 - a. The Shift Commander shall be notified and the vehicle taken to the service center as soon as possible.
 - b. Affected vehicles shall be immediately designated by the posting of an "Infectious Disease Contamination" sign upon arrival at the service center and while awaiting disinfection.
 - c. Service personnel shall remove any excess body fluids from the vehicle with an absorbent cloth, paying special attention to any cracks, crevices or seams that may be holding excess fluid.
 - d. The affected area shall be disinfected using hot water and detergent or alcohol, and allowed to air dry.
 - e. All police vehicles taken to a service center for scheduled washing and lubrication shall routinely be cleaned in the interior with an approved disinfectant.

29.6.4 Non-disposable equipment and areas upon which body fluids have been spilled shall be

disinfected as follows:

- a. Any excess body fluids shall first be wiped up with approved disposable absorbent materials.
- b. A freshly prepared solution of one part bleach to 10 parts water or a fungicidal/mycobactericidal disinfectant shall be used to clean the area or equipment.
- **29.6.5** All disposable equipment, cleaning materials, or evidence contaminated with body fluids shall be bagged and disposed of in compliance with State law for disposal of biologically hazardous waste material.