


**FLORIDA FISH AND WILDLIFE  
CONSERVATION COMMISSION**

**DIVISION OF LAW ENFORCEMENT  
GENERAL ORDERS**

**COLONEL JULIE JONES**



TITLE	<b>COMMUNICABLE DISEASE CONTROL</b>	EFFECTIVE DATE	<b>March 18, 2009</b>
CHAPTER	<b>GENERAL ORDER 08</b>	RESCINDS/AMENDS	<b>December 5, 2008</b>
APPROVED		PAGES	<b>8</b>

**1  
POLICY**

- A** It is the policy of the FWC Division of Law Enforcement to safeguard, to the highest degree possible, members who come in contact with citizens who have, or are suspected of having, a communicable disease, while continuing to provide essential services to the citizens of the community.
- B** It is the policy of the FWC Division of Law Enforcement to consider and treat all medical information or records (e.g., test results) pertaining to a member or arrestee as confidential. Access to such information is limited to only those persons who have a legal right to know. Disclosure of any information except as required by law must not be made unless the prior written consent of the person is obtained.
- C** It is the policy of the FWC Division of Law Enforcement to adopt a Universal Precautions philosophy, which means that members of treat all human blood and certain human body fluids as if infectious for Human Immunodeficiency Virus (HIV), Hepatitis B Virus (HBV), and other bloodborne pathogens.
- D** Extreme caution should be exercised and all procedures set forth in this General Order shall be used when dealing with blood and blood stained items, other body fluids, and suspected infectious persons.
- E** The precautionary measures found in this General Order are necessary under certain, specified conditions to minimize the risk of infection to the members. Members are reminded, that at this time, there is no medical evidence which indicates that Hepatitis B or HIV/ AIDS can be transmitted by casual contact. The kinds of non-sexual, person-to-person contact that generally occur between a sworn member and an arrestee or victim of a crime do not pose a risk of disease transmission.
- F** The routine handling, transporting, and detention of persons should continue according to present policy and procedure.
- G** This General Order will serve as both the Division's Infectious Disease Exposure Control Plan, and Biomedical Waste Operating Plan, and applies to **all** members who, while performing their normal occupational duties, may anticipate exposure to blood borne pathogens or other contagious diseases. This includes, but is not necessarily limited to, members in the following job classifications:

- (1) All sworn members
- (2) All non-sworn members who serve as evidence custodians
- (3) All non-sworn aviation section members

**H** This General Order will be reviewed annually by the Training Section to ensure its contents remain current and to evaluate and update procedures designed to eliminate or minimize occupational exposure.

## **2 RESPONSIBILITIES**

### **A Division**

- (1) The Division is responsible for providing a voluntary hepatitis vaccination program.
- (2) The Division's Training Section is responsible for continuously maintaining an adequate supply of disease control supplies and for making these supplies available to all sworn members through the Regional Training Lieutenants.

### **B Members**

- (1) Members are always responsible for treating people fairly and humanely.
- (2) When handling or assisting persons with medical afflictions, members bear additional responsibility of being especially sensitive to the person's condition and for treating each person with the same dignity which is reserved for all people with whom they have contact.
- (3) Sworn members should use discretion to limit their exposure to contagious diseases. Direct contact with blood and other body fluids should be avoided whenever possible.

## **3 PROCEDURES**

### **A Exposure Determination to Communicable Diseases**

- (1) An exposure may occur when the blood or body fluid from an infected person is transferred into the blood stream of another. This transmission may occur in five ways:
  - (a) Through needle sticks (e.g., accidental needle stick while searching people or places).
  - (b) Through openings in the skin (cuts, sores, bites, abrasions, etc.) which are exposed to blood or body fluids.
  - (c) Through fluids which are splashed into the eyes, nose, or mouth.
  - (d) Through sexual contact.
  - (e) Through airborne transmission (e.g., tuberculosis, etc.)
- (2) Body fluids known to contain viruses include blood, semen, and vaginal secretions. Viruses have been isolated in other body fluids including tears, vomit, urine, and feces.
- (3) The mere handling of an arrestee during the arrest process or during subsequent detention may or may not constitute an exposure. For an actual exposure to occur, at least one of the above conditions must be met.

### **B Significant Exposure Treatment**

- (1) A member who has been exposed to a communicable disease shall:
  - (a) Immediately and thoroughly wash the contact area with soap and water. Eyes should be flushed out with cool water for at least twenty (20) seconds.

- (b) The member shall proceed to the nearest emergency room and if appropriate their personal physician should be contacted.
- (2) With concurrence of the attending physician it is highly recommended that within two hours of probable exposure to the HIV virus the member be started on a post exposure prophylaxis (PEP).

### **C Reporting Process**

- (1) Document the incident and gather information about the person involved, keeping in mind confidentiality.
- (2) Information collected by the member shall include name, address, and date of birth, any medical information legally available and where the person is presently located. Additionally, any high risk factors should be included.
- (3) If a member is exposed to a communicable disease, they shall report the injury/ exposure to their supervisor immediately. The supervisor will report the injury to the State Workers' Compensation Program at **1-877-518-2583**. Reporting of injuries shall be done in accordance with General Order 31, *Light Duty and Reporting of Injuries*.
- (4) Should a member undergo AIDS/Hepatitis testing, Workers' Compensation will be responsible for any costs incurred.
- (5) If a sworn member is off duty and acts in the line of duty, the same procedures apply.
- (6) To maintain compliance with the Ryan White HIV/AIDS Treatment Modernization Act, the names of persons exposed to a possible infection shall remain confidential except to those immediately involved.

### **D Human Bites**

- (1) While the risk of some types of infection through a human bite is very low, the following measures should be undertaken should a sworn member be bitten by a human:
  - (a) Conduct "back bleeding" by applying pressure and "milking" the wound.
  - (b) Follow the procedures given under **Section 3 Procedures, Subsection C Reporting Process** above.

### **E Blood Tests**

- (1) A sworn member who has been exposed to another person's body fluid in the line of duty shall request the suspect carrier to submit to a blood test as outlined in section 384.287, Florida Statutes. The test shall be administered at a hospital emergency room.
- (2) In the event that the person refuses to consent to a blood test, the Commission's Legal Office shall be contacted to initiate legal proceedings for a court-ordered blood test.

### **F General/Universal Precautions**

- (1) In performing their responsibilities, a sworn member should undertake the following preventive measures:
  - (a) Use a one-way resuscitator mask when performing mouth-to-mouth resuscitation or CPR.
  - (b) Wear latex disposable gloves when handling blood or other body fluids, regardless of whether such fluids are wet or dry. When possible, sworn members shall wear latex gloves when handcuffing subjects. Sworn members are required to have latex gloves readily accessible while on duty.
  - (c) Members should be aware that rings, jewelry or long fingernails may compromise the structural integrity of latex disposable gloves. Members should make certain the gloves are not torn before they put them on.

- (d) Members should wear disposable shoe coverings if considerable blood or body fluid contamination is encountered.
- (e) Wash hands thoroughly and immediately with soap and water following contact with blood or other body fluids even if gloves have been worn.
- (f) Bandage open wounds or cuts on hands to avoid direct contact with contaminated blood or body fluids even if gloves are worn. Bandages should be changed if they become wet or soiled.
- (g) Use extraordinary care when conducting searches of suspects or vehicles. Whenever possible and practical, suspects should be directed to empty their own pockets. Never blindly place hands in areas where there may be sharp objects that could puncture the skin. Although they cannot protect against direct punctures, gloves should be worn.
- (h) Members shall not eat, drink, or smoke at crime scenes where blood or body fluids are present or other contagious factors exist.
- (i) Members should be aware that certain prescribed medications, such as steroids and asthma medications, suppress their immune systems and make them more susceptible to infectious disease.
- (j) Pregnant members should report to their physician any direct contacts with body fluids in the line of duty. Infectious viruses can cause severe problems in newborns.
- (k) Sworn members who have been diagnosed as having leukemia or other forms of cancer, or who are taking medicine which suppresses the immune system, should not knowingly enter areas where there is blood or body fluids present or knowingly have contact with persons with a communicable disease.

#### **G Hepatitis B Vaccination Series Program**

- (1) The Division provides a voluntary hepatitis vaccination program. Vaccinations will be made available at the Division's expense at a reasonable time and place after receipt of infectious diseases training and within ten working days of initial assignment. If any sworn member declines the vaccination, it is mandatory that they sign a Hepatitis B vaccine declination form. However, if at a later date the sworn member decides to be vaccinated, they may receive the inoculations and post-test at the Division's expense. Vaccinations will be administered by a licensed medical professional. Vaccination records shall be secured in the member's official personnel file at GHQ.
  - (a) A pre-test for Hepatitis B (optional).
  - (b) Vaccination offered during recruit school.
  - (c) Vaccination offered to all rehired sworn members.
  - (d) Vaccination offered again after "significant exposure" as defined by section 381.004 (2)(c), Florida Statutes.
  - (e) Three inoculations:
    1. The initial injection.
    2. The second injection 30 days later.
    3. The final injection in 6 months.
  - (f) A post-test to determine if immunization has occurred.
  - (g) All three injections, and the post test, must be administered in order for the vaccine to be effective and immunity verified.

#### **H Supplies**

- (1) Regional Training Lieutenants or designees will be responsible for continuously maintaining

an adequate supply of disease control supplies. This includes, but is not limited to, ensuring that:

- (a) Personal protection equipment in appropriate sizes, quantities and locations are available.
  - (b) Alternative materials will be provided to those that are allergic to materials normally provided.
  - (c) First aid supplies and disinfecting materials are readily available at all times.
- (2) For protection, sworn members should carry with them, or have readily accessible, a personal protection kit, which at a minimum shall include the following supplies:
- (a) Protective gown
  - (b) Protective disposable gloves
  - (c) Red plastic biohazard waste bags and sealing ties, or sealable plastic bags as outlined in section 64E-16.004 (2)(c), Florida Administrative Code;
  - (d) Anti-microbial hand wipes or gels
  - (e) Mouth and eye protection
- (3) The above-listed supplies will be stocked and issued through the appropriate regional field office.
- (4) Sworn members are responsible for ensuring that their supervisors are aware of replacement needs when expended.

#### **I Custody Procedures**

- (1) Persons with a communicable disease (or persons who claim to have a communicable disease) but do not appear to need emergency care should generally be treated with caution and transported as any other suspect.
- (2) Persons in obvious need of medical attention will be transported to the nearest medical care facility according to current Division procedures.
- (3) Persons of high-risk groups should be treated with caution. Where violence or an altercation is likely, protective disposable gloves should be worn. Extreme caution should be used during the search of suspected drug users or dealers to prevent accidental skin punctures by needles. Whenever practical, the suspects should empty their own pockets. Extreme caution must also be used when reaching into areas that are not visible (e.g. underneath car seats, etc.).
- (4) After a search where protective disposable gloves may have been contaminated they should be removed with caution, placed in a plastic bag and disposed of as a "Bio-Hazard". Hands should be washed after this task is completed.
- (5) Subjects with blood or body fluids present on their person should be transported separately from other subjects when possible. Sworn members will inform communications when a subject should be transported alone. Communications personnel will notify the responding car or ambulance when solo transportation is recommended.
- (6) Sworn members have an obligation to inform other responding personnel (firefighters, paramedics, deputies, correctional employees, detox personnel, etc.) whenever change or transfer of custody occurs and the subject has blood or body fluids present on his person, or if the subject has made a voluntary statement that he has a contagious disease.
- (7) Information in records (e.g.; test results) regarding a member or arrestee with HIV/AIDS or other communicable disease is confidential. Access to such information is limited to staff who have a legal need to know. Disclosure of any information, except as required by law, must not be made unless the expressed written consent of the member/arrestee is obtained.

- (8) Persons who die while in the custody of the Division shall be examined by the Medical Examiner for the presence of infectious diseases if any of the following conditions exist:
  - (a) A sworn member was exposed to the person's body fluids.
  - (b) Information indicates the person was a disease carrier.
  - (c) The person was a high risk carrier.
- (9) The supervisor on duty shall ensure that a specific request be made to the Medical Examiner for communicable disease testing in the above cases.

#### **J General Disinfection Procedures**

- (1) Protective disposable gloves will be worn during all phases of disinfection. Members should be aware that rings, jewelry, or long fingernails may compromise the structural integrity of the gloves. They should make certain the gloves are not torn before they attempt to begin any phase of the disinfection process.
- (2) Any excess of blood or body fluids should first be wiped up with disposable absorbent material. Afterwards, the absorbent materials should be immediately placed in a plastic bag and placed in a designated "BIO-HAZARD" waste container.
- (3) Prepare a fresh disinfecting solution of one part household bleach and 10 parts water or use a commercially available disinfecting cleaning solution.
- (4) The affected area shall be cleansed with the solution and allowed to air dry.
- (5) All disposable contaminated cleaning items shall be placed in plastic bags and placed in a designated "BIO-HAZARD" waste container.
- (6) Members shall be careful not to contaminate themselves during this cleaning regimen or when taking off their disposable protective gloves. As always, hands should be immediately washed.

#### **K Personal Contamination**

- (1) Wash hands immediately and thoroughly with water. Proper hand washing requires soap, running water and at least twenty seconds of rubbing soap under nails and between fingers. Hand washing is your best protection against infectious diseases.

#### **L Building Contamination**

- (1) Disinfection procedures shall be initiated after blood and/or other body fluids are discharged in any area of a Division building.
- (2) A supervisor shall be notified and will ensure the area is cleaned and disinfected.

#### **M Vehicle Contamination**

- (1) When blood or other body fluids contaminate a vehicle, vessel or aircraft, the member shall decontaminate and disinfect the vehicle, vessel or aircraft in accordance with Section 3 (Procedures), Subsection J, *General Disinfection Procedures* of this General Order.
- (2) If the member is unable to safely decontaminate the vehicle, vessel or aircraft, the member shall notify their supervisor, and a "BIO-HAZARD" label shall be immediately placed visibly on the driver's window. The date and time will be written on the label and the vehicle will be placed out of service for a minimum of forty-eight hours.
- (3) After a minimum of forty-eight hours, a designated vendor shall be contacted to complete disinfection and decontamination.

#### **N Crime Scene Evidence and Property Handling**

- (1) Evidence, property or other materials coming into the custody of the Division and suspected of being contaminated should be treated with extraordinary care.
- (2) All evidence, property or other materials contaminated with blood or other body fluids, whether

wet or dry, should be handled with disposable gloves.

- (3) Sharp objects shall be packaged in puncture-resistant containers. To prevent needle stick injuries, needles should not be capped, bent, broken, removed from syringe or otherwise manipulated by hand.
- (4) Packages containing contaminated evidence or other materials suspected of being contaminated shall be clearly labeled. The warning "BIO-HAZARD" shall be prominently written on the outside of the packaging materials in such a fashion that anyone coming in contact with the item will be aware of the risk.
- (5) All clothing with blood or body fluids will be treated as if contaminated.
- (6) Property/Evidence personnel will furnish protective disposable gloves to anyone handling contaminated evidence or property.
- (7) Members working in areas for extended periods of time where blood or other body fluids have been shed should wear bio-hazard protective gear.
- (8) Property/Evidence personnel will adhere to a precise regimen when handling, processing and storing potentially contaminated materials.
- (9) Materials known to be contaminated with suspected HIV/ AIDS, Hepatitis B or other contagious diseases will be placed in a specified area and clearly labeled with a "BIO-HAZARD" label.
- (10) Any clothing known or suspected to be contaminated with any contagious disease, bloody or not, will be handled by Property/Evidence personnel only while wearing protective disposable gloves.
- (11) Evidence containing suspected blood or other body fluids should be handled with gloves. If the stain or sample is dry, it should be placed in a paper bag. A proper evidence tag, an evidence processing request, and a "BIO-HAZARD" label should be affixed to the outside of the package. If the evidence consists of a syringe and needle, the needle portion should be removed in the evidence room with pliers and gloves and returned to the puncture resistant container and placed in a "BIO-HAZARD" waste container. The syringe should be placed in a paper bag with a "BIO-HAZARD" label and the bag should be tagged with an evidence tag and a processing request. Clothing or similar materials with liquid samples on them should be placed in a paper bag with a "BIO-HAZARD" label.
- (12) Property/Evidence personnel shall wash their hands immediately and thoroughly with soap and water after handling any possibly contaminated material even if having worn gloves.
- (13) All property for disposal shall be kept in sealed plastic bags and placed in a "BIO-HAZARD" waste container.

#### **O Uniform/Work Clothes Contamination**

- (1) Medical research has determined that no person has ever contracted an infectious disease, whether it is mumps, measles, smallpox, HIV/ AIDS, or Hepatitis B, through laundered clothing. Consequently, should Commission issued or personal clothing be contaminated by blood or body fluids, the following measures should be undertaken:
  - (a) While wearing protective gloves remove the clothing and place it in a clearly marked BIO-HAZARD plastic bag.
  - (b) Describe the contaminated contents of the bag and forward it to a supervisor for commercial laundering or disposal approval.

#### **P Contaminated Materials Disposal**

- (1) All contaminated materials will be collected and transported to the nearest medical facility or hospital for incineration upon supervisory approval.

#### **Q Records to be Maintained by the Division**

- (1) An accurate medical record will be kept in a confidential file for each member with an occupational exposure. This record will contain all necessary information as required by OSHA Bloodborne Pathogens Standards.
- (2) Medical records will be kept confidential and not disclosed or reported without the member's express written consent to any person within or outside the workplace, except as required by OSHA standards or by law.
- (3) Medical records will be maintained for the duration of employment plus 30 years as required by OSHA standards.
- (4) Medical records will contain appropriate information regarding the sworn member's Hepatitis B vaccination or refusal form.
- (5) Training records will be maintained as required by OSHA standards.

## **R Training**

- (1) All members affected by this plan are required to participate in the blood borne pathogens standard training program. Training will be provided prior to assignment where risk of occupational exposure may occur. Records of this training shall be maintained by the Division in accordance with the General Schedule for State and Local Government Agencies and must include the contents or summary of the training session, names and qualifications of persons conducting the training, and names and job titles of all persons attending. The training outline shall contain, at a minimum, the following elements:
  - (a) Familiarization with this General Order on infectious diseases and the OSHA regulations;
  - (b) Familiarization with the personal protective equipment that is available;
  - (c) Familiarization with the basic epidemiology and symptoms of bloodborne diseases;
  - (d) Familiarization with the modes of transmission of bloodborne diseases;
  - (e) Exposure control procedures;
  - (f) Information about Hepatitis;
  - (g) Recognizing the international bio-hazardous waste symbol;
  - (h) Familiarization with the Division's bio-hazardous waste disposal procedures;
  - (i) An explanation of work methods which will prevent or reduce exposure;
  - (j) An explanation of what procedures to follow if an exposure occurs, including post exposure follow-up; and
  - (k) A question and answer period.

## **4 FORMS**

### FWC Hepatitis B Vaccine Acceptance/ Declination Consent Form