

1.02-18

**DAYTON POLICE DEPARTMENT
GENERAL ORDER
INFECTIOUS DISEASES/BIOHAZARDS**



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REV. 8/19

POLICY STATEMENT

Many law enforcement activities involve contact with persons who may have an Infectious Disease (i.e., AIDS, Hepatitis B, etc.). Police officers encounter a range of assaultive and disruptive behavior through which they may become infected, such as biting, spitting, and throwing urine or feces. Such behaviors may occur in a range of law enforcement situations including arrests, routine interrogations, domestic disputes and lockup operations. The purpose of this policy is to furnish basic information about the two most widely pronounced diseases, AIDS and Hepatitis B, and guidelines for protecting officers against possible contamination from biohazard materials.

I. HEPATITIS B

- A. Hepatitis B is the most common of at least three hepatitis viruses that cause a systemic infection, with a major abnormality of the liver.
- B. Transmission of Hepatitis B virus is usually via the blood or blood products, however, it has also been found in tears, saliva, breast milk, urine, semen and vaginal secretions.
- C. The incubation period for Hepatitis B is between six weeks and six months.
- D. Hepatitis B virus is capable of surviving for days on surfaces/objects exposed to body fluids containing Hepatitis B virus.
- E. Infection may occur when Hepatitis B virus, transmitted by infected body fluids, is implanted via mucous surfaces through the skin as a result of accidental or deliberate breaks in the skin.

II. HIV/AIDS

- A. AIDS is a blood-borne disease caused by a virus known as Human Immunodeficiency Virus (HIV). HIV infects and destroys certain white blood cells, thereby undermining that part of the body's immune system, which normally combats infections and malignancies.
 - 1. During the period of infection, these cells are unable to grow normally.
 - 2. One can be infected with HIV for years, even indefinitely, without ever developing symptoms.
 - 3. Infected persons with or without symptoms may transmit the infection to others.
- B. AIDS is not a single disease: rather there is a spectrum of possible reactions to HIV infection.
 - 1. Being HIV positive does not mean that you will end up with full-blown AIDS.
 - 2. AIDS is almost always fatal.
 - 3. An infected person may show no symptoms whatsoever for an extended period following infection.
 - 4. Symptoms include fever, diarrhea, sarcoma and persistently swollen lymph nodes, pneumonia, etc.
- C. The incubation period of HIV can be up to 10 years or more.
- D. The HIV virus is transmitted through exposure to contaminated blood, semen or vaginal secretions.
 - 1. This can occur through sexual intercourse and needle sharing activities.

2. There is a remote chance of HIV infection in saliva.
 3. There is no evidence of transmission through casual social contact.
- E. HIV virus in the dried state can survive between three and seven days in dried body fluid stains and at least fifteen days in liquid blood kept at room temperature.
- F. 9:1 water to bleach solution will kill HIV virus and disinfect contaminated surfaces and equipment.

III. TUBERCULOSIS and MENINGITIS

- A. Tuberculosis (TB) is a common, life-threatening infection that primarily affects the lungs.
1. Tuberculosis spreads through airborne droplets when a person with the infection coughs, talks or sneezes. In general, you need prolonged exposure to an infected person before becoming infected yourself. Even then, you may not develop symptoms of the disease. Or, symptoms may not show up until many years later.
 2. TB mainly affects your lungs (pulmonary tuberculosis), and coughing is often the only indication of infection initially.
 3. Signs and symptoms of active pulmonary TB include: A cough lasting three or more weeks that may produce discolored or bloody sputum, unintended weight loss, fatigue, slight fever, night sweats, chills, loss of appetite and pain with breathing or coughing (pleurisy).
- B. Meningitis is inflammation of the protective membranes covering the brain and spinal cord.
1. Most cases of meningitis are caused by microorganisms, such as viruses, bacteria, fungi, or parasites that spread into the blood and into the cerebrospinal fluid.
 2. Signs and symptoms of meningitis are high fever, headache, and stiff neck. These symptoms can develop over several hours, or they may take 1 to 2 days. Other symptoms may include nausea, vomiting, discomfort looking into bright lights, confusion, and sleepiness.

IV. SPECIAL EQUIPMENT

- A. Disposable gloves, anti-microbial hand cleaner and red biohazard plastic bags are available in each marked patrol cruiser as part of the officer's first aid kit.
- B. Field supervisors, in addition to the equipment listed above will carry additional protective equipment in the event a situation warrants the added protection. This equipment will include:
1. Disposable coveralls
 2. Disposable shoe coverings
 3. Disposable cap
 4. Disposable gloves (extra box)
 5. Protective eyewear
 6. Disposable writing utensils
 7. Disposable masks
- C. These items will also be required for use by specialized units that frequently come into direct contact with blood, body fluids and locations where suspected drugs and/or drug abusers may be located. These units include but are not limited to:
1. Homicide Investigators
 2. Crime Scene Investigators
 3. Special Traffic Investigators
 4. Special Investigation Division Investigators

5. Property and Evidence Storage Personnel
 6. Internal Affairs Investigators
- D. Division Commanders will determine which specialized units under their command will be required to use the special equipment listed in section (III. B.). these requirements will be in accordance with this policy and OSHA guidelines.

V. REQUIREMENTS

A. Fights, Assaults and Traffic Accidents

Whenever the possibility for exposure to blood or blood-contaminated body fluid exists, the appropriate protection must be worn, if feasible under the circumstances. In all cases, extreme caution must be used in dealing with an injured accident victim or a suspect or prisoner if there is any indication of assaultive or combative behavior. When blood is present and a suspect is combative or threatening, gloves should be worn as soon as conditions permit. In case of blood contamination of clothing, an extra change of clothing should be available.

- **ORC 2921.38B** – Harassment with a bodily substance - “*No person, with intent to harass, annoy, threaten, or alarm a law enforcement officer, shall cause or attempt to cause the law enforcement officer to come into contact with blood, semen, urine, feces, or another bodily substance by throwing the bodily substance at the law enforcement officer, by expelling the bodily substance upon the law enforcement officer, or in any other manner.*” A violation of this section can be a Felony, 5th degree.

B. Crime Scenes

1. Once a crime scene is stabilized, use available precautionary measures to avoid possible contamination. Avoid touching anything unless absolutely necessary.
2. Thoroughly wash hands with warm water and soap after removing the gloves. If soap and water are not readily available, use the anti-microbial gel, which has been provided.
3. Place the used gloves in the red plastic bag labeled biohazard waste. This bag is then to be placed in the appropriate biohazard container located at each district, bureau or office.
4. Do not eat, smoke or drink at crime scenes, especially where body fluids are present or other contagious factors exist.
5. Pregnant officers should report any direct contacts with body fluids to their personal physician. Infectious viruses can cause severe problems for newborns.

C. Searches

1. Use extreme caution when searching vehicles, suspects, prisoners, structures, etc. NEVER blindly place your hands in areas where sharp objects may be present.
2. Protective gloves should be worn if exposure to blood is likely.

D. Cardiopulmonary Resuscitation (CPR)

1. Officers are strongly encouraged to use the resuscitation device (facemask) which is contained in the first aid kit.
2. This device has a special one-way valve to prevent saliva and vomit from entering the mouth of the person giving CPR.

VI. ON-DUTY EXPOSURE TO INFECTIOUS DISEASE OR CONTAMINATED MATERIALS

- A. Any employee receiving any type of puncture wound from a needle stick, laceration or human bite from a known/suspected carrier of an infectious disease should report to the emergency room of the nearest hospital for treatment of said injuries. If in the opinion of the examining physician, preventive testing and treatment is necessary, it will be provided at that time.
1. When tested at the medical institution, the initial results should be negative; if positive, you may encounter difficulties later with Worker's Compensation. An employee with an initial positive test may be perceived as having "placed themselves at risk" prior to the incident in question.
 2. After the initial test, the employee should receive follow-up tests in a manner specified by the examining physician.
- B. Examples of "High-Risk Exposure" are:
1. Blood or body fluid contacting a scratch or cut.
 2. Direct mouth-to-mouth resuscitation.
 3. Needle stick
 4. Blood or body fluid contact with mucous membranes.
- C. An Employee Injury Report will be completed and hospital treatment obtained whenever employees believe they have had exposure to infectious disease or biohazard materials during on-duty activity.

VII. SUPERVISOR'S RESPONSIBILITY

- A. Thoroughly investigate all incidents wherein an employee receives exposure to infectious disease or biohazard materials.
- B. Ensure treatment is obtained from a local hospital (Concentra can test for TB exposure), Human Resources maintains a separate fund for employees exposed to hazardous materials.
- C. Ensure that the suspect or prisoner suspected of being a carrier of infectious disease be requested to submit to a blood test.
- If consent is given, have the person sign an institution waiver form and request that a copy be sent to the City of Dayton's Safety/Risk Coordinator.
- D. Ensure an Employee Injury Report is completed as well as any other reports required by the particular incident.

VIII. DISPOSING OF BIOHAZARD MATERIALS

- A. Each division will require all work units to purchase and maintain a supply of "red" biohazard plastic bags. In addition, a "red" biohazard 30-gallon plastic container will be located in each district, Investigations Division, Narcotics Bureau and the Forensic Services Technician's Office. The containers must be lined with a "red" plastic liner. All contaminated gloves, masks, coveralls, etc. are to be disposed of in the can.
- DO NOT PLACE SHARPS (NEEDLES) OR ITEMS HAVING SHARP CORNERS IN THE BAGS OR OVERLOAD THE CONTAINERS.
- B. When the "red" liners are full, they are to be sealed and the container is to be transported to the property room by district or division personnel after contacting the Property Room supervisor. The container will be exchanged for a new one. The drop-off and exchange will be made between 9:00 A.M. and 4:00 P.M. at the property room. Under no circumstances will the container be left during any other hours or left in the night storage locker area.

VIX. CONTAMINATED EQUIPMENT

- A. Equipment contaminated with blood or other body fluids will be cleaned with soap and water, detergent or a 9:1 solution of water and bleach.
 - B. Vehicles ([General Order 3.02-4, Section VIII, C.](#))
 - 1. Any quarantined vehicle due to a biohazard (e.g. contaminated by occupants with TB, HIV, AIDS, Influenza, or other communicable disease by contact with Blood, Urine or other bodily fluids) will be taken out of service and TOWED to the City Garage.
 - 2. The officer having the vehicle towed will document the area and type of contamination and the key will be left with the Ottawa Yard Security Officer. A biohazard placard or tape will be affixed to the vehicle in a prominent location so that all persons approaching the car will be aware of the contamination.
 - 3. Turn off all electrical equipment, roll up all windows, and lock all doors, if leaving a vehicle at the City Garage when it is closed. **REMOVE THE SHOTGUN FROM THE TRUNK! SHOTGUNS Will NEVER REMAIN IN A VEHICLE AT THE GARAGE!** The officer will complete a report to be sent to the MVC indicating the circumstances of the contamination so that the vehicle can be cleaned and decontaminated.
 - 4. Radio Information Officer's Responsibility
 - a. Record the information given by the vehicle driver and dispatch a tow truck.
 - b. Log the towing information in the CITY VEHICLE TOW LOG. This will assist the MVC in expediting vehicle repairs.
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