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- C. In an effort to protect the health of prehospital personnel and to comply with applicable laws and regulations, the following diseases and conditions will be reported to the prehospital personnel if the patient has been/will be transported:
1. Rubella
  2. Measles
  3. Tuberculosis
  4. Invasive Meningococcal infections (Meningitis or Meningococemia)
  5. Mumps
  6. Chickenpox
  7. Diphtheria
  8. Rabies (Human Rabies)
  9. Anthrax
  10. Cholera
  11. Plague
  12. Poliomyelitis
  13. Hepatitis, viral type B or C
  14. Hepatitis, viral unspecified
  15. Typhus
  16. Small pox
  17. AIDS
  18. HIV Infection
  19. Herpes Simplex
- D. When any of the Infection Control staff at St. John's Hospital become aware of a patient with any of the above diseases or conditions, they shall check the admission sheet for mode of transportation of the patient to the hospital. If the patient was admitted per ambulance, the Infection Control personnel shall notify the EMS Office.
- E. Associate and Participating Hospitals shall follow their procedure for notification of a disease or condition, which includes notification of any prehospital personnel involved. SAMIC EMS System personnel shall follow the blood and body fluid exposure procedures of any hospital outside the SAMIC EMS System.
- F. The EMS Office shall review the prehospital patient care report and notify the agency and/or prehospital personnel of the exposure, disease, and/or condition for patients transported to St. John's Hospital. The notification shall be followed up by written notification within 72 hours of the receipt of results.
- G. The Illinois Hospital Licensing Act reads, "If there is a confirmed diagnosis of AIDS, the hospital shall send the letter of notification only if paramedics or ambulance personnel have indicated on the ambulance run sheet that a reasonable possibility exists that they have had blood or body fluid contact with the patient, or if the hospital personnel providing the notification have reason to know of a possible exposure."
- H. If the prehospital personnel have been in contact with blood and/or body fluid of a patient in a manner significant enough to transmit a potential disease, they are to document this exposure on the prehospital patient care report AND complete a Report or Blood and/or Body Fluid Exposure form at the hospital where the patient is transported. An agency may use their own exposure report form if approved by the SAMIC EMS Office.

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- I. For patient's that are transported to St. John's Hospital, upon completion of the exposure report form, the prehospital personnel must present it to the Emergency Department Charge Nurse. The Charge Nurse will then alert the appropriate Emergency Department Physician of the exposure and he/she shall order the appropriate testing.

EMS, Fire or Police personnel that are exposed will register as a patient under their Workers' Compensation Insurer. If the exposure is deemed high risk by the ED physician using criteria developed by the Centers For Disease Control (CDC) the exposed personnel will be immediately given prophylactic medication. **It is imperative that prophylactic treatment begin within 2 hours of the exposure.**

The form shall then be placed with the prehospital patient care reports for collection by the EMS Office. **IT IS VERY IMPORTANT THAT THE EXPOSURE REPORT BE GIVEN TO THE CHARGE NURSE FOR PROCESSING. LAB TESTS MAY NOT BE DONE IF THE REPORT IS NOT PRESENTED TO THE CHARGE NURSE.**

It must also be realized by pre-hospital personnel that a drop of blood on intact skin in not considered an exposure.

- J. After the test is run, Immunology will: 1) call EMS office with the results; 2) send a copy of the results on the Miscellaneous Requisition form to the EMS Office. Notification will then be made to the agency or prehospital personnel as listed above.
- K. The EMS department personnel shall report the results to the prehospital care personnel involved using the patient's IPCR number and not the patient's name. All aspects of patient confidentiality must be observed. All follow-up reports will be available for EMS Medical Director review.

**For patient's that are being transferred out of a hospital facility to another hospital or extended care facility.**

- A. Notification must be provided to prehospital personnel when a patient with an infectious disease or condition is released from the hospital into their care.
- B. The name of the disease or condition is not released.
- C. Pre-hospital personnel must be informed of appropriate precautions to avoid exposure to that disease or condition.
- D. The hospital employee arranging the transfer to prehospital personnel will provide information regarding appropriate precautions.