

Standard Operating Procedure	PEORIA FIRE-MEDICAL DEPARTMENT
INFECTION CONTROL PROGRAM - HEALTH MAINTENANCE	EMS
	400.24F
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PURPOSE

The Peoria Fire-Medical Department recognizes that prevention and health maintenance is the first line of defense against infectious diseases. The Peoria Fire-Medical Department will take a proactive approach to the prevention and spread of infectious diseases.

POLICY

This policy applies to all suppression/EMS members of the Peoria Fire-Medical Department

Physicals

No members will be assigned to emergency response duties until an entrance physical assessment has been performed by the Department Physician or his/her designee, and the member has been certified as fit for duty.

All members will receive annual health evaluations.

If there has been an exposure incident, the member is entitled to a confidential medical evaluation and follow-up. Members must report exposure incidents to their supervisor immediately.

Immunizations

The Department Physician may initiate work restrictions for reasons of infection control. These may be temporary or permanent. As an example, members with extensive dermatitis or open skin lesions on exposed areas may be restricted from providing patient care or handling and/or decontamination of patient care equipment.

All members will be offered immunization against hepatitis B, influenza, measles, mumps, rubella, poliomyelitis (polio), tetanus, and diphtheria at no cost to the member. The risks and benefits of immunization will be explained to all members, and informed consent obtained prior to immunization.

A member may request serological testing prior to receiving the hepatitis B immunization to determine if previous immunity exists.

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Members may refuse immunizations, or may submit proof of previous immunization.

Members who refuse immunization will be counseled on the occupational risks of communicable disease, and required to sign a refusal of immunization form.

Members who initially refuse immunization may later receive immunization upon request.

Tuberculosis Screening

To provide the highest level of protection to our patients, our members and their families, the Peoria Fire-Medical Department has adopted the Centers for Disease Control Guidelines and the OSHA Proposed Standard on TB Testing.

All members will be offered initial and annual testing for tuberculosis exposure at no cost.

Members that do not complete their annual TB Skin test will not be permitted to continue with patient care until they receive their TB Test.

Members not completing their annual TB Skin test will be placed on unpaid leave until the testing is completed and the results have been recorded.

Only those members that have a previous documented positive TB Skin test are exempt from the annual TB Skin testing.

Those members that have tested positive in the past will:

Receive a chest x-ray as determined by the Phoenix Fire Department Health Center.

Be counseled about the symptoms of TB and the need for prompt evaluation of any pulmonary symptoms suggestive of TB.

Medical Records

The Department Infection Control Officer and Physician will maintain records in accordance with OSHA's CFR 20, Part 1910.1030.

Medical records will be maintained for the period of employment plus 30 years.

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Medical records are confidential.

Member participation in the Infection Control program will be documented, including:

- Name and SSN of member.
- Immunization records.
- Circumstances of exposure to communicable diseases.
- Post-exposure medical evaluation, treatment, and follow-up.

Infection Control records will become a part of the member's personal health file and will be maintained for the duration of employment plus thirty (30) years.

Medical records are strictly confidential.

Medical records will be maintained in the office of the Department Physician, and will not be kept with personnel records.

Medical records shall not be released without the signed written consent of the member.

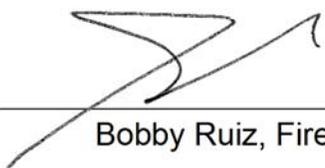
Members may examine their own medical records, and may request copies be sent to their personal physician. Release of medical records to another physician will be made only with the signed written consent of the member.

Abstracts of medical records without personal identifiers may be made for quality assurance, compliance monitoring, or program evaluation purposes, as long as the identity of individual members cannot be determined from the abstract.

Communications between medical and personnel sections will focus on fitness to work or recommended restrictions, rather than upon specified diagnoses.

To preserve member confidentiality, the EMS Medical Director will not conduct health assessments on department members.

Approved:



 Bobby Ruiz, Fire Chief

09/28/2015

_____ Date