Department of Health & Human Services
DHHS
NEBRASKA

Nebraska Health and Human Services System
Department of Regulation and Licensure

THIS INFORMATION IS TO BE GIVEN TO A PERSON WHO MAY HAVE INCURRED A

SIGNIFICANT EXPOSURE

Nebraska statute (Neb. Rev. Stat. § 71 - 507 through § 71 - 513) provides protection against infectious diseases for persons that act as "Emergency Services Providers" (ESP) while delivering emergency medical care.

An ESP in Nebraska is a certified out-of-hospital emergency care provider certified pursuant to the EMS act, sheriff, deputy sheriff, police officer, a state highway patrol officer, a funeral director, a paid or volunteer firefighter, and a person rendering emergency care gratuitously/Good Samaritan. (Neb. Rev. Stat. § 71 – 507(4)).

You may have had a "significant exposure" (Neb. Rev. Stat. § 71 – 507 through 71-513) to an infectious disease if you provided emergency medical care to a patient/source person who was sick, injured, wounded, deceased or otherwise helpless or incapacitated and you believe that his/her blood or other body fluids, including airborne pathogens, may have entered your body. The infectious diseases described in Nebraska law and the rules and regulations of the Department of Regulation and Licensure - Nebraska Health and Human Services System include Hepatitis B, Hepatitis C, Meningococcal Meningitis, Active Pulmonary Tuberculosis, Human Immunodeficiency Virus, Diphtheria, Plague, Hemorrhagic Fevers, Rabies and such other diseases as the department may by rule and regulation specify.

FOR NON-AMBULANCE PERSONNEL – **ask** the ambulance service to which facility they are transporting the source person AND **alert** the infection control officer and/or nurse at the receiving medical facility that you may have had a significant exposure. These individuals are critical in aiding you.

FOR AMBULANCE PERSONNEL – **alert** your employer/departmental infection control officer and the infection control officer and/or nurse at the receiving medical facility that you may have had a significant exposure. These individuals are critical in aiding you.

What should be done if you believe you have had a "significant exposure?"

TIME IS OF THE ESSENCE!

IMMEDIATELY AFTER EXPOSURE THE FOLLOWING MUST BE DONE

- Remove clothing contaminated with blood or body fluids.
- Place contaminated articles in a plastic bag or other area to prevent additional exposure.
  - Launder contaminated clothing by itself.
  - Machine dry.
- Wash all body areas that were possibly exposed.
- Contact your physician – Some time sensitive treatments may need to be initiated immediately!
  - It is vital that prompt testing be done to determine your medical status and that of the source person at the time of the exposure. This protects you by assuring that the source person is available for testing. It is difficult to get source persons tested after they are released from a facility. If the source person dies, it is impossible to test for infectious diseases after embalming.

COMPLETE a Significant Exposure Report Form. This form is used to document exposure and to trigger post exposure procedures. The form should be available from the Infection Control Officer of the responding ambulance service. The form may also be obtained from the Nebraska Health and Human Services System – EMS Program at (402) 471-0104 or (800) 422-3460 ext. 29.

REMEMBER you are **capable of infecting others** after a significant exposure and should take the steps necessary to protect you and your family. Your physician should help you with any changes in lifestyle that may be necessary, even temporarily.

PERTINENT PATIENT INFORMATION – Be sure to obtain as much patient information as you can at the scene. Both you and the person you assisted have the right to confidentiality. Once the source person leaves the scene you will not be able to obtain any patient information without the written permission of the patient, or if the patient is deceased or otherwise incapacitated without the written permission of his/her next of kin, legal guardian or personal representative.

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(Previous version 7/01 should be used first)

Give the **white** copy of the form to the receiving health care facility. This alerts them of the potential exposure. Once the health care facility receives the exposure reporting form, **your designated physician shall be notified**:

- If the patient has been diagnosed during the normal course of treatment with an infectious disease or condition, **or**
- If information is received from other sources that the patient has an infectious disease or condition.

Give the **yellow** copy to your personal physician. This is to prompt an immediate medical evaluation for you.

- If the evaluation determines that you have had a significant exposure, your physician should conduct appropriate baseline testing and potential follow-up treatment.
- If your physician determines that a significant exposure has occurred, he/she shall request that the source person's attending physician conduct appropriate testing of the source person.
  - The receiving facility shall report test results, if any, to the patient's attending physician and orally within forty-eight hours to your physician. A written report shall be forwarded to your physician within seventy-two hours.
  - Your physician shall notify you of the exposure and the results of the tests conducted. You shall be informed of the name of the infectious disease or condition. You will not receive any other confidential patient information. You shall hold all information received as confidential.
  - The source person's attending physician shall inform the source person of all the test results.
  - The source person shall be informed that he/she has the right to consent to testing for the presence of infectious disease(s) or condition(s). If the source person refuses testing, the refusal will be communicated to you.
  - If the source person is unconscious or incapable of signing an informed consent, the necessary consent may be obtained from the source person's next of kin or legal guardian.
  - If you have had a significant exposure and this exposure could involve the transmission of Hepatitis B, Hepatitis C or Human Immunodeficiency Virus, the source person's attending physician shall conduct blood tests. (Neb. Rev. Stat. § 71 – 510 (3))

    If the source person or source person's representative refuses to give consent for such tests **and a sample of the source person's blood <u>is available</u>**, the blood shall be tested for Hepatitis B, Hepatitis C or Human Immunodeficiency Virus.

    If the source person, or source person's representative, refuses to grant consent **and a sample of the source person's blood <u>is not available</u>**, the source person's refusal shall be communicated to your physician who shall inform you of the refusal. In cases of refusal you may petition the district court for an order to mandate testing.
  - If the source person is deceased, no consent is required to test for the presence of an infectious disease or condition.

The **pink** copy is given to the supervisor of the transporting ambulance service.
The **gold** copy is for your records.

HOSPITAL DETECTED DISEASES – If the receiving facility diagnoses the source person with an infectious airborne disease the facility will notify, as soon as practical, but not later than forty-eight hours, the local health department or the Nebraska Health and Human Services System – Department of Regulation and Licensure – Communicable Disease Section at (402) 471-2937. The department shall investigate all notifications and notify the required persons as soon as practical. (Neb. Rev. Stat. § 71 – 509 (1))

FINANCIAL RESPONSIBILITY – Nebraska statute (Neb. Rev. Stat. § 71 - 509 (8)) states: "The provider agency shall be responsible for the costs of diagnostic testing required under this section and section 71-510, except that if a person renders emergency care gratuitously as described in section 25-21,186, such person shall be responsible for the costs."

QUESTIONS – If you have any questions regarding this information please contact a local hospital infection control officer or the Nebraska Health and Human Services System – Department of Regulation and Licensure – Emergency Medical Services Program at 800-422-3460 ext. 29 or the Nebraska Health and Human Services System – Department of Regulation and Licensure – Communicable Diseases Section at (402) 471-2937.