

DISPATCH



Ryan White Comprehensive AIDS Resources Emergency (CARE) Act of 1990, Subtitle B - Emergency Response Employee Notification

Summary

The Ryan White CARE Act, Subtitle B contains provisions for the notification of emergency response personnel exposed to infectious diseases while attending, treating, assisting, or transporting a victim. The law provides for emergency response employee notification following a documented exposure to blood or body fluids, verified by the receiving hospital. It also provides for automatic notification of the emergency response employee if the transported patient is found to have infectious tuberculosis. This notification by the medical facility must be made to the designated officer in writing as soon as possible, but within a period not exceeding 48 hours after the receipt of the request by the designated officer. The designated officer will then inform the employee or employees involved of the determination.

The guidelines include the infectious diseases covered and their mode of transmission. These diseases are only those which are life-threatening by carrying a substantial risk of death if acquired by a healthy, susceptible host, and the disease can be transmitted from person to person. The diseases covered by the exposure notification guidelines as listed in Part II are:

- Infectious pulmonary tuberculosis
- Hemorrhagic fevers
- Hepatitis B
- Meningococcal disease
- HIV, including AIDS
- Plague
- Diphtheria
- Rabies

The guidelines detail the manner in which medical facilities must determine whether emergency personnel were exposed to an infectious disease. If an emergency response employee believes he or she was exposed to blood or blood products of a patient during the performance of normal job duties, the designated officer must investigate the incident. If the designated officer determines through investigation an exposure was sustained then a signed written request can be submitted to the receiving hospital for notification of the patient's infectious status. This must be performed within 48 hours.

The designated officer must provide all collected information regarding the exposure to the medical facility. It is ultimately the receiving medical facility's responsibility to verify and establish the possibility of an exposure to the emergency response employee. If the medical facility has found insufficient evidence exists to determine an exposure, they must notify the designated officer in writing within 48 hours. The designated officer may further pursue the determination of an exposure through a request of the public health officer in the community. If warranted, the public health officer may resubmit the request to the medical facility.

This act does not authorize or require a medical facility to test any such victim for any infectious disease, nor can this act be construed to authorize any emergency response employee to fail to respond, or to deny services, to any victim of an emergency.

States that already have notification laws that are at least as comprehensive as the federal notification law must apply for a waiver from the federal government. If the state does not apply for a waiver, the federal notification law will be used in place of the state notification law.

Subtitle B of the Ryan White CARE Act applies to all emergency response employees (fire fighters, paramedics, and EMTs) throughout the United States. The geographic location of an exposed ERE (such as within an OSHA state plan state) does not affect the applicability of this law.

Action Items

- Each employer of emergency response employees in the state must have selected one designated officer responsible for coordinating requests for and responses of notification, investigating exposure incidents to obtain sufficient information, and who is bound to rules of confidentiality regarding the infectious status of the emergency responder and the victim. In other words, each department, as employer, must have a designated officer. The local should take an active role in recommending to the fire department a suitable individual for this position.
- The receiving medical facilities must have in place procedures for responding to written requests from designated officers regarding the determination of exposure to the diseases covered under this Act.
- The receiving medical facilities must have in place procedures for automatically notifying the designated officer of any emergency responders who have transported a victim found to have infectious pulmonary tuberculosis. This notification must be provided within 48 hours of determining the victim's tuberculosis status.
- Your department must have in place procedures by which you, as an emergency response employee, can make requests to the designated officer regarding a suspected exposure incident. In addition, procedures must be in place by which the designated officer can properly handle all such requests regarding exposure.
- Your local public health agency must also have in place procedures for handling requests for exposure incident evaluation from designated officers.
- Your state public health officer should have received the list of potentially life-threatening diseases and the exposure guidelines for such diseases from the Secretary of Health and Human Services.
- Your local is entitled to the list of potentially life-threatening diseases and exposure guidelines.
- Your state or municipality must be aware of the procedures adopted by the Secretary of Health and Human Services for handling allegations of violations of the exposure notification process.