



POLICY ON INFECTIOUS DISEASE AND BIOHAZARD EXPOSURE IN THE EMERGENCY DEPARTMENT

1. PURPOSE AND SCOPE

- 1.1 The emergence of new infectious diseases and the treat of bio-terrorism place Emergency Department staff, patients and visitors at serious risk of exposure to infectious disease. Density and transit of large numbers of people heightens this risk.
- 1.2 Emergency Departments must have processes in place to protect staff and others from the spread of infectious disease.
- 1.3 This document is a policy of the Australasian College for Emergency Medicine and relates to the minimisation of risk for staff, patients and visitors from exposure to infectious disease in the Emergency Department.
- 1.4 The policy is applicable to Emergency Departments in general.

2 POLICY

- 2.1 All Emergency Departments should have baseline procedures in place which address staff compliance with of universal precautions, hand washing and personal protective equipment (PPE) use.
- 2.2 Strict adherence to “universal precautions” is the single most important measure to prevent the transmission of infections in Emergency Departments.
- 2.3 All Emergency Departments should possess appropriate isolation and decontamination facilities.

3. PROCEDURE AND ACTIONS

- 3.1 Emergency Department staff should maintain appropriate immunisation status.
- 3.2 Emergency Department staff should be offered immunisation against predictable infectious risks.
- 3.3 PPE should be readily available to all staff members. In addition higher level of PPE should be available to protect staff against high risk exposures from potentially fatal infectious diseases.
- 3.4 Emergency Departments should ensure there is regular staff education on infectious diseases in the community they serve, training in using higher levels of PPE and procedures for dealing with patients suspected of having highly infectious diseases.
- 3.5 Emergency Departments should have processes for compliance with local public Health authorities requirements for notification of reportable infectious diseases. Local hospital infection control units may also be involved in this process.