



SPECIAL ORDER



502.3

SUBJECT Protective Equipment	SERIES 87	NUMBER 37	EFFECTIVE DATE October 10, 1987
	DISTRIBUTION A		
	ORIGINATING UNIT PDD		
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PURPOSE

The purpose of this order is to establish policy and procedures for the wearing of protective equipment in certain circumstances in order to:

- better ensure the safety and welfare of members by further reducing the low risk of contracting communicable diseases and promoting hygienic practices;
- ensure consistency in the use of protective equipment; and
- instill in members a sensitivity to legitimate concerns raised when protective equipment is used as a barrier to direct contact between police officers and citizens.

POLICY

A. Standards for Wearing Protective Equipment.

1. Mandatory Wearing of Protective Equipment.

Members shall wear appropriate protective equipment:

- a. While processing crime scenes or handling situations, such as a traffic accident, where there is a presence of body fluids, especially blood, and/or contaminated materials; and
- b. When they encounter individuals, as well as evidence and personal property associated with them, who:
 - (1) Are bleeding or excreting other body fluids;
 - (2) Have open sores;
 - (3) Have body fluids on their clothing; or
 - (4) Appear to be infected with parasites, such as lice.

2. Optional Wearing of Certain Protective Equipment.

- a. By the nature of police work, members regularly encounter unsanitary, hazardous, and possibly infectious conditions where body fluids may not be readily apparent or even present. For hygienic and safety reasons and to reduce the potential of exposure to blood or other body fluids, members may wear appropriate protective equipment in the following circumstances:
 - (1) To search and process prisoners;
 - (2) To handle individuals who are outwardly unsanitary;
 - (3) When coming into physical contact with individuals, as well as evidence and personal property associated with them, who claim, are reasonably believed, or are known to have a communicable disease, and there is any risk of coming into contact with blood or other body fluids;
 - (4) To process, or assist in the processing of, crime scenes and evidence, and to conduct searches of areas that are hazardous or hidden from view; and
 - (5) To handle a violent altercation or a situation where, by the nature of the assignment or the belligerent behavior of individuals on the scene, the member expects that the event will escalate into an altercation where bleeding may occur.
- b. The wearing of protective equipment in the foregoing circumstances shall be a consistent, non-discriminatory practice. Members shall not base a decision to wear protective equipment on the personal characteristics of an individual, unless the person exhibits violent tendencies.
- c. In the case of a planned police operation, however, the above provisions will be superseded by the decision of the official in charge as to what protective equipment may be worn by members under his/her supervision. (See Section C under "Applicability".)

3. Restrictions on Wearing of Protective Equipment.

- a. The term "appropriate protective equipment" means only those items of equipment that are necessary to protect the particular areas of the body that will likely come into contact with body fluids or with unsanitary, hazardous, or infectious conditions.
- b. The use of particular items of protective equipment must address the risk involved for members according to their functions at a scene or during an operation.

- c. Other than those circumstances described above and unpredictable situations where the use of protective equipment is appropriate and reasonable as a precaution against exposure to body fluids and unsanitary, hazardous, or infectious conditions, members shall not wear protective equipment.

B. Hygiene and Cleaning.

Good personal hygiene, prompt, sanitary cleaning practices, and the proper medical care for and attention to cuts, sores, and skin conditions on one's own body, particularly the hands, are the most important preventive measure for reducing the possibility of contracting a communicable disease through contact with body fluids. The Department therefore advocates that members:

1. Wash their hands or other affected skin thoroughly with soap and water after contact with body fluids. Careful hand washing is probably the most effective method of preventing the spread of infection, and alcohol preps are provided in each department vehicle as an interim preventive cleaning procedure.
2. Properly treat and cover cuts, sores, and skin conditions in order to avoid direct contact with body fluids. Such members shall be particularly careful in evaluating their personal need for protective equipment.
3. Use water to flush the eyes thoroughly or to rise the mouth amply if blood or other body fluids have splashed into the eyes or mouth.
4. Refer to the attached publication by the D.C. Commission of Public Health, entitled "Guidelines for Handling Body Fluids," when questions arise as to cleaning procedures when members come into contact with body fluids (Attachment A).

C. Education.

1. Since members regularly come into contact with unsanitary, infectious, and other hazardous situations, it is imperative that they know the dangers they face and how to reduce the risks involved in these hazards.
2. In that light, the Department espouses the concept that the education of its personnel is the most effective means of dispelling misconceptions and fears, and commits itself to providing information that will enable members to carry out their responsibilities confidently, safely, and effectively.
3. The Department will therefore pursue a course of education and information dissemination on communicable diseases in cooperation with the Commission of Public Health and through the periodic issuance of publications to the force.

APPLICABILITY

A. To Members Who Process Crime Scenes.

With regard to processing crime scenes, the policy shall specifically apply to members assigned to:

1. The Crime Scene Examination Section, Identification and Records Division;
2. The Police Districts' Crime Scene Search Sections;
3. Homicide Branch, Criminal Investigations Division (CID);
4. Sex Offense Branch, CID; and
5. Any other unit that has occasion to be involved in the processing of scenes or handling situations where body fluids and/or contaminated materials are present.

B. To Situations and Persons.

1. Members should balance precaution with reasonableness when handling situations where body fluids are present and when exercising their option to wear protective equipment.
 - a. I am primarily concerned that our members are properly and reasonably protected from infections brought on by communicable diseases and unsanitary conditions. To this end, protections have been provided, and I believe they meet the needs of our members. I am also concerned, however, that we meet our responsibilities to the public by consistently providing a professional, measured response to problems that confront law enforcement, in general, and the Metropolitan Police Department, in particular. To this end, the standards established in this order focus on reasonably addressing the problems encountered in dealing with communicable disease and unsanitary conditions, and preventing abuses that tend to feed misconceptions and fears.
 - b. Members should be aware that the risk of contracting a communicable disease during the performance of duty is highly unlikely. This is evidenced by the fact that transmission of a communicable disease from an occupational exposure is very rare among law enforcement, fire and rescue, and emergency medical personnel.
 - c. Members should also understand that the wearing of protective equipment conjures up certain negative connotations. The decision to wear particular items of equipment must be based on the standards established in this order, as well as a consideration of its spirit and intent, as stated in the purpose. Unreasonable applications of the broader standards set forth in the order will not be tolerated. The wearing of equipment that is excessive and not likely to address a particular risk will similarly not be tolerated.

2. Members, especially field personnel, will approach many situations not knowing what they will encounter and therefore will on occasion not be protected with suitable protective equipment when they begin dealing with persons who are bleeding or excreting other body fluids. In the face of this kind of dilemma, however, members shall:
 - a. Not shirk their responsibilities to protect life, preserve the peace, arrest criminal offenders, and perform their police duties generally; and
 - b. If contact with body fluids has been made, be alert to the need for the prompt cleaning of affected body areas, once the member can be temporarily relieved of the assignment. Officials should take notice of a member who has been involved in blood or other body fluids and provide for his/her temporary relief as soon as possible to effect such cleaning.

C. To Planned Operations.

In planned operations, such as demonstrations, raids, or the service of warrants generally, the official in charge of the operation shall:

1. Consider the type of situation, and the conditions that are likely to exist in the particular situation, in determining what, if any, protective equipment should be utilized;
2. In determining the necessity for wearing or having available specific items for the operation, ensure that the selected items of equipment are consistent with the standards that are contained in this order for wearing such equipment; and
3. Be prepared to justify the reason why the selected equipment was chosen.

D. By Examples.

Below are some examples of situations and how they should be addressed:

1. In picking up a blood-stained knife from the ground as evidence, an officer should wear only the regular disposable gloves since only the hands should come into contact with the knife. In this case only the hands need to be protected. Most passive situations involving crime scenes and individuals in which body fluids are present will require the wearing of regular disposable gloves only.
2. When processing a scene where a large quantity of blood is present, it may be necessary for a crime scene search officer to wear rubber gloves and a jumpsuit in order to avoid general contact with the blood. If there is a reasonable possibility that blood may splash during the processing of a scene, then it is advisable for the processing officer to wear a mask and goggles in order to prevent the blood from splashing into the mucous membranes of the member's eyes and mouth.

3. The handling of a combative prisoner who is bleeding or has open sores may require the wearing of rubber gloves and a jumpsuit in order to avoid contact with the blood or other body fluid.
4. Evidence technicians should wear masks and goggles when there is danger of inhaling chemicals, powders, or other particulate matter, or of any of these substances entering the eyes.
5. Members maintaining security over a crime scene which contains foul odors may wear a mask to repel the odors.
6. In searching a vehicle, members should use extra precaution when reaching with their hands into areas hidden from view. Rubber gloves should be worn, and a flashlight should serve as a guide for dark areas.
7. Upon receipt of a radio call for a large fight in progress, members may put on rubber gloves when they expect that they may become involved in altercations on the scene. The purpose of the gloves is to prevent blood from a subject involved in an altercation from coming into contact with abrasions on the member's hands, which might be caused during the altercation. In an incident of this kind it must be emphasized that the risk of acquiring a serious communicable disease through such contact is extraordinary low.
8. In executing search warrants in drug-related cases where contact with dangerous chemicals or paraphernalia may occur, members should wear rubber gloves to avoid burns and reduce the risk of cuts or punctures.
9. At the scene of a serious traffic accident where there are large amounts of blood and other hazards, such as glass and debris, members should wear rubber gloves and a jumpsuit if there is going to be significant and involved contact with bleeding victims.
10. Searching prisoners with regular disposable gloves is a long established practice that will remain an option for members. However, because of the hazards involved in drug-related cases, such as needle sticks, special care should be taken in searching such prisoners. If a member believes that a prisoner has a syringe on his person, he/she should carefully search with rubber gloves first. Then, after removing the syringe or being assured that the subject does not possess one, the member should follow this search with one using regular disposable gloves, since the rubber gloves do not have the same tactile qualities as the regular disposable gloves and the member cannot be assured that a thorough search has been performed.

PROTECTIVE EQUIPMENT

A. Protective Equipment Kit.

1. Protective Equipment Kits shall consist of:

a. A mask.

The main purposes of the mask are:

- (1) To protect a member from inhaling or ingesting chemicals, powders, or other particulate matter, and from being splashed with blood or other body fluids; and
- (2) To repel foul odors.

b. An apron.

The main purpose of the apron is to prevent a member's clothing from becoming soiled or splashed with blood or body fluids.

c. A jumpsuit.

The main purpose of the jumpsuit is to prevent a member from coming into general contact with large amounts of blood or body fluids, or in having to handle a combative prisoner who is significantly bleeding or covered with blood or other body fluids, or has numerous open sores on his/her person.

d. Two types of gloves:

(1) Regular disposable gloves.

The main purpose of the regular disposable gloves is to prevent the member from coming into contact, with his hands, with blood and other body fluids, and unsanitary, hazardous, and possibly infectious conditions.

(2) Rubber gloves.

The main purposes of the rubber gloves are:

- (a) To prevent contact with significant quantities of blood or other body fluids; and
- (b) To prevent abrasions and reduce the risk of punctures, in cases where an altercation is likely, as previously described, or when dealing with hazardous situations, such as searching in areas hidden from view.

e. Alcohol preps.

The main purpose of the alcohol preps is to provide members with an immediately available cleaning agent when contact is made with blood or other body fluids or unsanitary conditions. However, affected areas should be properly washed with soap and water as soon as possible after the contact has been made.

f. Goggles.

The main purpose of the goggles is to prevent blood or other body fluids and chemicals, powder, or other particulate matter from getting into the eyes.

g. A sealable five-gallon container.

This container houses all the items in the kit.

2. All the items in the Protective Equipment Kit, except the rubber gloves and goggles, are disposable.
3. All items of protective equipment shall be issued by the Department and are the only items which may be carried or used by members.

B. Protective Equipment Required In Vehicles and Issued to Members.

1. Protective Equipment Kits shall be required equipment in all vehicles assigned to:
 - a. The Crime Scene Examination Section;
 - b. The Crime Scene Search Sections;
 - c. The Homicide Branch;
 - d. The Sex Offense Branch; and
 - e. Lieutenants and Sergeants in the Field Operations Bureau and the Morals Division.
2. All other police vehicles shall be equipped with:
 - a. A box of regular disposable gloves; and
 - b. A box of alcohol preps.

3. Each member assigned to a patrol district, the Special Operations Division, and the Morals Division, and who routinely performs field duties, shall be issued a pair of rubber gloves for his/her use.
 - a. These rubber gloves are not disposable.
 - b. They should be cleaned according to the instructions provided in Attachment A, and kept for reuse.
 - c. They may only be discarded if they tear or become excessively discolored.

C. Protective Equipment Required In Stations.

All stations that have booking facilities and the units within the Identification and Records Division that process prisoners and evidence shall maintain, in a location readily available for immediate use at any time of day:

1. Three (3) protective equipment kits;
2. A supply of individual protective equipment items necessary for handling situations where body fluids are present; and
3. A container of bleach.

D. Protective Equipment Required in Special Circumstances.

1. In special circumstances, such as a planned police operation, the official in charge of the operation shall ensure that an adequate supply of appropriate protective equipment items are obtained for use in the operation.
2. In special circumstances, when the availability or wearing of protective equipment is determined to be appropriate, the official in charge of the operation is authorized to equip involved members and vehicles with appropriate protective equipment.

E. Issuance of Protective Equipment Kits and Separate Items.

1. Protective Equipment Kits and individual items shall be ordered through normal supply channels.
2. In the event that the Property Division is closed and there is an immediate need for certain protective equipment items, a request for the items may be made directly to the Crime Scene Examination Section.

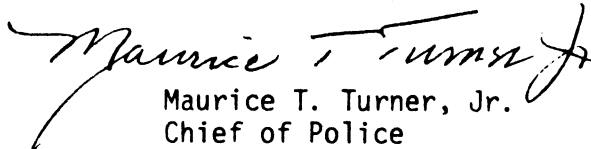
F. Disposing of Protective Equipment.

1. When disposable protective equipment items are used, they shall be discarded in a plastic bag which shall be sealed.
2. The sealed bag shall then be placed in a second plastic bag which shall also be sealed.
3. The sealed, double bag shall then be disposed of routinely.

G. Review of Protective Equipment by the Uniform and Equipment Board.

The Uniform and Equipment Board shall:

1. Maintain a continuing review of protective equipment to ensure that the items the Department utilizes adequately protect our members and are cost-effective.
2. Be responsible for recommending to the Chief of Police any changes in the items which compose the Protective Equipment Kit.


Maurice T. Turner, Jr.
Chief of Police

Attachment

MTT:DMS:jtr

D.C. DEPARTMENT OF HUMAN SERVICES
COMMISSION OF PUBLIC HEALTH

GUIDELINES FOR HANDLING BODY FLUIDS**

Recent concern about persons with AIDS has raised several questions regarding exposure of other persons to potentially infectious body fluids from persons with communicable diseases in various settings.

1. Does contact with body fluids present a risk of infection?
2. What should be done to avoid contact with potentially infected body fluids?
3. What should be done if direct contact with body fluids is made?
4. How should such fluids when spilled be removed from the environment?

The following guidelines are meant to provide simple and effective precautions against transmission of disease for all persons, including pregnant women, potentially exposed to the blood or body fluids of any person. No distinction is made between body fluids from persons with a known disease or those from persons without symptoms or with an undiagnosed disease.

DOES CONTACT WITH BODY FLUIDS PRESENT A RISK?

The body fluids of all persons should be considered to contain potentially infectious agents (germs). The term "body fluids" includes: blood, semen, drainage from scrapes and cuts, feces, urine, vomitus, respiratory secretions (e.g. nasal discharge) and saliva. Contact with body fluids presents a risk of infection with a variety of germs. In general, however, the risk is very low and dependent on a variety of factors including the type of fluid with which contact is made and the type of contact made with it.

Table 1 (page 2) provides examples of particular germs that may occur in body fluids of individuals and the respective transmission concerns. It must be emphasized that with the exception of blood, which is normally sterile, the body fluids with which one may come in contact usually contain many organisms, some of which may cause disease. Furthermore, many germs may be carried by individuals who have no symptoms of illness. These individuals may be at various stages of infection: incubating disease, mildly infected without symptoms, or chronic carriers of certain infectious agents including the AIDS and hepatitis viruses. In fact, transmission of communicable diseases is more likely to occur from contact with infected body fluids of unrecognized carriers than from contact with fluids from recognized individuals because simple precautions are not always carried out.

TABLE 1
TRANSMISSION CONCERNS FOR BODY FLUID
SOURCES OF INFECTIOUS AGENTS

<u>BODY FLUID SOURCE</u>	<u>ORGANISM OF CONCERN</u>	<u>TRANSMISSION CONCERN</u>
Blood - cuts/abrasions - nosebleeds - menses - contaminated needle	Hepatitis B virus AIDS/HIV virus Cytomegalovirus	Bloodstream inoculation through open cuts & abrasions on hands Direct bloodstream inoculation
*Feces - incontinence	Salmonella bacteria Shigella bacteria Rotavirus Hepatitis A virus	Oral inoculation from contaminated hands
*Urine - incontinence	Cytomegalovirus	Bloodstream and oral (?) inoculation from contaminated hands
Respiratory Secretions - saliva - nasal discharge	Mononucleosis virus Common cold virus Influenza virus Hepatitis B virus	Oral inoculation from contaminated hands Bloodstream inoculation may occur through bites.** Bloodstream inoculation through open cuts and abrasions on hands is a theoretical, but remote risk.
*Vomit	Gastrointestinal viruses, e.g., (Norwalk agent Rotavirus)	Oral inoculation from contaminated hands
Semen	Hepatitis B AIDS/HIV virus Gonorrhea	Sexual contact (intercourse)

*Possible transmission of AIDS and Hepatitis B is of little concern from these sources.

** Transmission of Hepatitis B through bites is estimated to be 1-5 per 10,000 bites from the general population and 1-10 per 1000 bites from high risk persons such as intravenous drug users.

WHAT SHOULD BE DONE TO AVOID CONTACT WITH BODY FLUIDS?

When possible, direct skin contact with body fluids should be avoided. Disposable gloves should be available in at least the office of the custodian, nurse, or where appropriate. Gloves are recommended when direct hand contact with body fluids is anticipated (e.g., treating nose bleeds, handling clothers soiled by incontinence, cleaning small spills by hand). If extensive contact is made with body fluids, hands should be washed afterwards. Gloves used for this purpose should be put in a plastic bag or lined trash can, secured, and disposed of daily.

WHAT SHOULD BE DONE IF DIRECT SKIN CONTACT OCCURS?

In many instances, unanticipated skin contact with body fluids may occur in a situation where gloves may be immediately unavailable (e.g., applying pressure to a bleeding injury). In these instances, hands and other affected skin areas of all exposed persons should be routinely washed with soap and water after direct contact had ceased. Clothing and other nondisposable items (e.g., towels used to wipe up body fluid) that are soaked through with body fluids should be rinsed and placed in plastic bags. If presoaking is required to remove stains, (e.g., blood and feces), use gloves to rinse or soak the item in cold water prior to bagging. Clothing should be sent for washing with appropriate direction to those who do the laundry (see page 4). Contaminated disposable items (e.g., tissues, paper towels, diapers) should be handled with disposable gloves.

HOW SHOULD SPILLED BODY FLUIDS BE REMOVED FROM THE ENVIRONMENT?

Most institutions have standard procedures already in place for removing body fluids (e.g., vomitus). These procedures should be reviewed to determine whether appropriate cleaning and disinfection steps have been included. Many facilities stock sanitary absorbent agents specifically intended for cleaning body fluid spills (e.g., ZGOOP®, Parsen Mfg. Co., Philadelphia, PA). Disposable gloves should be worn when using these agents. The dry material is applied to the area, left for a few minutes to absorb the fluid, and then vacuumed or swept up. The vacuum bag or sweepings should be disposed of in a plastic bag. Broom and dustpan should be rinsed in a disinfectant. No special handling is required for vacuuming equipment.

HANDWASHING PROCEDURES

Proper handwashing requires the use of soap and water and vigorous washing under a stream of running water for approximately 10 seconds. Soap suspends easily removable soil and microorganisms allowing them to be washed off. Running water is necessary to carry away dirt and debris. Rinse under running water. Use paper towels to thoroughly dry hands.

DISINFECTANTS

An intermediate level disinfectant should be used to clean surfaces contaminated with body fluids. Such disinfectants will kill vegetative bacteria, fungi, tubercle bacillus and viruses. The disinfectant should be registered by the U.S. Environmental Protection Agency (EPA) for use as a disinfectant in medical facilities and hospitals.

Various classes of disinfectants are listed below. Hypochlorite solution (bleach) is preferred for objects that may be put in the mouth.

1. Ethyl or isopropyl alcohol (70%)
2. Phenolic germicidal detergent in a 1% aqueous solution (e.g., Lysol®)
3. Sodium Hypochlorite (household bleach) diluted 1 part bleach to 10 parts water needs to be freshly prepared at least daily.
4. Quaternary ammonium germicidal detergent in 2% aqueous solution (e.g., Tri-quat®, Mytar®, or Sage®).
5. Iodophor germicidal detergent with 500 ppm available iodine (e.g., Wescodyne®).

DISINFECTION OF HARD SURFACES AND CARE OF EQUIPMENT

After removing the soil, a disinfectant is applied. Mops should be soaked in the disinfectant after use and rinsed thoroughly or washed in a hot water cycle before rinse. Disposable cleaning equipment and water should be placed in a toilet or plastic bag as appropriate. Nondisposable cleaning equipment (dust pans, buckets) should be thoroughly rinsed in the disinfectant. The disinfectant solution should be promptly disposed down a drain pipe. Remove gloves and discard in appropriate receptacles.

DISINFECTION OF RUGS

Apply sanitary absorbent agent, let dry and vacuum. If necessary, mechanically remove with dust pan and broom, then apply rug shampoo (a germicidal detergent) with a brush and revacuum. Rinse dust pan and broom in disinfectant. If necessary, wash brush with soap and water. Dispose of nonreusable cleaning equipment as noted above.

LAUNDRY INSTRUCTIONS FOR CLOTHING SOILED WITH BODY FLUIDS.

The most important factor in laundering clothing contaminated in any setting is elimination of potentially infectious agents by soap and water. Addition of bleach will further reduce the number of potentially infectious agents. Clothing soaked with body fluids should be washed separately from other items. Presoaking may be required for heavily soiled clothing. Otherwise, wash and dry as usual. If the material is bleachable, add 1/2 cup household bleach to the wash cycle. If material is not colorfast add 1/2 cup non-chlorox bleach (e.g., Clorox II® or Borateem®) to the wash cycle.

® Brand names used only for examples of each type of germicidal solution and should not be considered an endorsement of a specific product.

**These guidelines were adapted with minor modification by the Bureau of Epidemiology and Disease Control and the Bureau of School Health Services, District of Columbia Commission of Public Health in October, 1985, from GUIDELINES FOR HANDLING BODY FLUIDS IN SCHOOLS prepared in December, 1984 by the Connecticut State Departments of Education and Health Services.