

<b>GEORGIA DEPARTMENT OF CORRECTIONS</b> Standard Operating Procedures		
<b>Functional Area:</b> <u>Facilities Operations</u>	<b>Reference Number:</b> IIC05-0002	<b>Revises Previous Effective Date:</b> <u>12/31/00</u>
<b>Subject:</b> Transporting of Inmates with Infectious Diseases		
<b>Authority:</b> <u>Donald/Adams</u>	<b>Effective Date:</b> 3/01/2005	Page 1 of <div style="text-align: center;">3</div>

**I. POLICY:**

Interagency notification shall occur between any federal, state or county institution, municipal or county detention facility, or other facility defined in O.C.G.A. 37-3-1. Notification shall not occur intra-agency (within or between GDC facilities).

**II. APPLICABILITY:**

All incarcerate facilities housing GDC inmates and probationers.

**III. RELATED DIRECTIVES:**

- A. O.C.G.A. 42-1-7 and 37-3-1;
- B. GDC SOPs: IIA06-0001; VH36-0001; and VH36-0002.

**IV. DEFINITIONS:**

- A. Facility: Any state owned or state operated hospital, community mental health center, or other facility utilized for the diagnosis, care, treatment, or hospitalization of persons who are mentally ill; any facility operated or utilized for such purpose by the United States Veterans Administration or other federal agency; and other hospital or facility within the State of Georgia approved for such purpose by the Department.
- B. Infectious Disease: To include infectious hepatitis, suspected or diagnosed active tuberculosis, influenza,

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measles, chicken pox, meningitis, human immunodeficiency virus (HIV) infection, syphilis, gonorrhea, or chancroid.

**V. ATTACHMENTS:**

- Attachment 1 - Notification of an Infectious Disease
- Attachment 2 - Bloodborne Diseases
- Attachment 3 - Supplies to Implement Universal and Airborne Precautions
- Attachment 4 - Standard Procedures for Cleaning Body Fluid Contamination

**VI. PROCEDURE:**

- A. NOTIFYING TRANSPORTING OFFICERS OF OTHER AGENCIES: The following measures shall be taken when an inmate/probationer is to be transported to the custody of another state or local law enforcement agency, or state or federally operated health facility.
1. At such time that the Warden/Superintendent receives notification that an inmate/probationer is to be transported to another local, state or federal law enforcement agency or health facility, the Warden/Superintendent shall notify the institutional health-care authority or designee.
  2. The health care authority or designee shall review the inmates/probationers medical record for the purposes of identifying inmates with certain infectious diseases.
  3. If upon review of the medical record it is determined that the inmate/probationer has been diagnosed as having an infectious disease as defined above, a Notification of Infectious Disease Form (Attachment 1) shall be completed by the health-care staff, or transport coordinator.

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4. In completing Attachment 1, only the state assigned identification number shall be placed on the line for patient identification. The inmate's/probationer's name shall not be placed on the form. The health-care authority reviewing the record shall sign the form (individual issuing notification), and designate the facility and the date. The specific infectious disease is not to be identified on the form or disclosed verbally.
  5. If medical records are to accompany the transporting officer, they shall be sealed in a manila envelope and the notification of infectious disease form attached to the outside of the envelope.
  6. At the time the transporting officer is given custody of the inmate/probationer, the officer shall read and sign the notification of an infectious disease form. A copy shall be retained in the inmates/probationer's facility administrative record or other file established specifically for such purposes at the sending institution.
  7. Notification that an inmate/probationer has an infectious disease shall not take place in the presence of other inmates/probationers.
  8. Medical information released or obtained in carrying out this procedure is privileged and confidential and shall only be released or obtained by the facilities or agencies who are parties to the transportation of the inmate/patient.
- B. NOTIFICATION OF AN INMATE/PROBATIONER WITH AN INFECTIONS DISEASE FROM OTHER AGENCIES: The following measures shall be taken by transporting officers upon receiving custody of an inmate/patient from another local or state law enforcement agency or health facility.
1. The transporting officer accepting custody of the inmate/patient shall read completely the notification of an infectious disease form and acknowledge this by signing and dating the form. A

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copy of the form shall be retained in the inmate's/probationer's facility administrative file.

2. The transportation vehicle shall contain equipment and supplies necessary for implementing universal and airborne precautions. (Attachment 3)
3. Universal precautions to prevent infectious diseases transmissible through blood or other body fluids shall be followed at all times regardless of whether an inmate/probationer has been identified as having a blood-borne disease (Attachment 2).
4. If the inmate/patient identified as having an air-borne disease or is coughing frequently and has not yet been medically evaluated, precautions for air-borne diseases shall be followed.

**VII. RETENTION SCHEDULE:**

Attachment 1: Upon completion, this form is to be placed in the employee personnel file and retained according to the official record Retention Schedule for that file.