

# Solano County Health & Social Services Department

Mental Health Services  
Public Health Services  
Substance Abuse Services  
Older & Disabled Adult Services



Eligibility Services  
Employment Services  
Children's Services  
Administrative Services

Gerald Huber, Director

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## EMERGENCY SERVICES BUREAU

Aaron E. Bair, MD, MS  
EMS Agency Medical Director

275 Beck Avenue MS 5-240  
Fairfield, Ca. 94533  
(707) 784-8155 FAX (707) 421-6682  
[www.solanocounty.com](http://www.solanocounty.com)

Terri Gill, MA  
EMS Agency Administrator

**Date: June 8, 2015**

## POLICY 6170 - ATTACHMENT A

Request for Communicable Disease Follow-Up for Possible Exposure of Emergency Personnel and/or First Responders.

Submission Date: \_\_\_\_\_

Receiving Hospital: \_\_\_\_\_

Name: \_\_\_\_\_

Agency Name: \_\_\_\_\_

Agency Address: \_\_\_\_\_

Agency Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Date of Exposure: \_\_\_\_\_ Incident Dispatch and/or PCR #: \_\_\_\_\_

Type of Exposure (Check all that apply):

- Blood and/or Body Fluids to non-intact skin or mucous membranes
  - Accidental puncture/cut of skin or mucous membranes.
  - Full facial contact to an aerosolized mist (cough)
  - Other (Describe): \_\_\_\_\_
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PATIENT NAME: \_\_\_\_\_ D.O.B. \_\_\_\_\_

MEDICAL RECORD #: \_\_\_\_\_

Agency Designated Officer (DO) Name \_\_\_\_\_ Signature \_\_\_\_\_

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## RECEIVING HOSPITAL FOLLOW-UP

Date received: \_\_\_\_\_

- No reportable active infectious disease was identified. Medical follow-up is unnecessary.
- An active reportable infectious disease was identified. Follow-up is indicated. Follow your agency's infection control policy.

Infectious disease identified: \_\_\_\_\_

Date patient transported: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Designated Officer reported to: \_\_\_\_\_ Date: \_\_\_\_\_

Method: \_\_\_\_\_