

641—11.46 (139B,141) Definitions. For the purpose of rules 641—11.45(139B,141) to 641—11.53(139B,141) the following definitions shall apply:

“*AIDS*” means acquired immunodeficiency syndrome.

“*Contagious or infectious disease*” means blood-borne viral hepatitis, meningococcal disease, tuberculosis, and any other disease with the exception of AIDS or HIV infection as defined in Iowa Code section 141.21, determined to be life-threatening to a person exposed to the disease as established by the department based upon a determination by the state epidemiologist and in accordance with guidelines of the Centers for Disease Control of the U.S. Department of Health and Human Services.

“*Department*” means the Iowa department of public health.

“*Designated officer*” means a person who is designated by a department, agency, division, or service organization to act as an infection control liaison officer.

“*Emergency care provider*” means a person who renders direct emergency aid without compensation or a person who is trained and authorized by federal or state law to provide emergency medical assistance or treatment, for compensation or in a voluntary capacity including, but not limited to, all of the following:

1. A basic emergency medical care provider as defined in Iowa Code section 147.1.
2. An advanced emergency medical care provider as defined in Iowa Code section 147A.1.
3. A health care provider as defined in this rule.
4. A firefighter.
5. A peace officer.
6. Any other person who is not part of an emergency care provider service who renders direct emergency aid without compensation.

“*Exposure*” means the risk of contracting disease.

“*Health care provider*” means a person licensed or certified under Iowa Code chapter 148, 148C, 150, 150A, 152, or 153 to provide professional health care services to a person during the person’s medical care, treatment or confinement.

“*HIV infection*” means human immunodeficiency virus infection as defined in Iowa Code section 141.21.

“*Infectious body fluids*” means body fluids capable of transmitting HIV infection as listed in “Guidelines for Prevention of Transmission of Human Immunodeficiency Virus and Hepatitis B Virus to Health-Care and Public-Safety Workers,” found in Morbidity and Mortality Weekly Report, dated June 23, 1989, Volume 38, Number S-6, published by the U.S. Department of Health and Human Services, Public Health Service, Centers for Disease Control, Atlanta, Georgia 30333, or subsequent Centers for Disease Control statements on this topic. To prevent HIV and blood-borne viral hepatitis B disease transmission, this reference indicates that universal precautions should be followed for exposure to the following infectious body fluids: blood, amniotic fluid, pericardial fluid, peritoneal fluid, pleural fluid, synovial fluid, cerebrospinal fluid, semen, vaginal secretions, and saliva contaminated with blood. HIV and hepatitis B disease transmission has not occurred from feces, nasal secretions, sputum, sweat, tears, urine, vomitus, and saliva when it is not contaminated with blood.

“Report of exposure to infectious disease” means the report form provided by the department and is the only form authorized for the reporting of an exposure to blood-borne hepatitis B or the reporting of a significant exposure to HIV. The report form may be incorporated into the Iowa prehospital care report, the Iowa prehospital advanced care report, or a similar report used by an ambulance, rescue, or first responder service or law enforcement agency.

“Significant exposure” means the risk of contracting HIV infection by means of exposure to a person’s infectious body fluids in a manner capable of transmitting HIV infection as determined by the Centers for Disease Control of the U.S. Department of Health and Human Services. Exposure includes contact with blood or other infectious body fluids to which universal precautions apply through percutaneous inoculation or contact with an open wound, nonintact skin, or mucous membranes during the performance of normal job duties. Significant exposures for HIV reportable to the hospital, or to the office or clinic of a health care provider to initiate the notification procedure regarding an exposure to an infectious body fluid are:

1. Transmission of blood or bloody fluids of the patient onto a mucous membrane (mouth, nose, or eyes) of the emergency care provider.
2. Transmission of blood or bloody fluids onto an open wound or lesion with significant breakdown in the skin barrier, including a needle puncture with a needle contaminated with blood.