



## OPERATIONS ORDER

SUBJECT: <b>DOCUMENTING EXPOSURES TO AIRBORNE OR OTHER CONTAMINANTS AND POSSIBLE RESULTING LINE OF DUTY INJURIES AT SITES ASSOCIATED WITH THE ATTACK ON THE WORLD TRADE CENTER</b>	
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1. As a consequence of the attack on the World Trade Center on September 11, 2001, the Department and its members experienced unprecedented demands and engaged in heroic acts of dedicated service. Some of these acts of service placed members in harms way, resulting in injuries and illnesses. Some of these injuries or illnesses were immediately apparent; others have developed over time. The Department was, and is, committed to ensuring our members receive adequate medical care for any and all health consequences as a result of assignments or duties performed in connection with the attack and its aftermath.

2. To clarify the Department's response to the medical needs of members, this Operations Order has been prepared to summarize current policies related to line of duty injuries/illnesses suffered as a consequence of the WTC attack, and to review members' options for obtaining evaluation and/or treatment.

3. Finest message #1621, transmitted on September 20, 2001, outlined the procedure to be followed by members of the service who may have been exposed to airborne contaminants as a result of performing duty at a site associated with the attack on the World Trade Center (e.g., "Ground Zero," Temporary Morgue at 30<sup>th</sup> Street, Fresh Kills Landfill and any other related site). The Finest Message directed Commanding Officers to submit a report to the Medical Division containing the rank, full name, tax number, and social security number of all members of their command, both uniformed and civilian, who had reported an exposure. This procedure was instituted and remains in effect for documenting airborne exposures only; it should not be used to report Line of Duty injuries.

**NOTE**

*The Medical Division will be distributing listings of all members not yet entered into the World Trade Center database. Members who are unsure as to whether they have been included shall first confer with their respective Commanding Officers. Members requesting inclusion in the World Trade Center exposure database should contact the Medical Division Sick Desk at 718-760-7600. This number is operational 24 hours a day, 7 days a week.*

4. Mere exposure to airborne, blood or chemical contamination does not necessarily mean that a member has sustained a line of duty injury. Obtaining an exposure number serves to document that the member had an exposure to a potentially injurious substance, and will also serve to allow the member to receive evaluation and/or treatment through authorizations issued by Medical Division district surgeons, as outlined below. Members do not need to have a **LINE OF DUTY INJURY REPORT (PD 429-154)** or number to obtain evaluation and/or treatment for WTC related exposures.

5. If a member of the service who has had his or her exposure to an airborne contaminant documented, either through the procedure outlined in paragraph 3 or by direct notification to the Occupational Health and Nursing Unit (OHNU), begins to experience difficulty breathing or any other

related respiratory ailment, the member may request an authorization from his or her District Surgeon for pulmonary testing by an outside health care provider. It is not necessary to report sick to request this authorization. Members may choose the health care provider of their choice to obtain evaluation and/or treatment as needed. If requested, the Medical Division will make referrals to providers.

**NOTE**            *The decision to provide the authorization rests solely with the District Surgeon based upon the existence of a causal relationship between the member's physical impairment and exposure to airborne contaminants.*

6.        If the pulmonary function testing indicates that the member has reduced lung capacity or a related respiratory ailment, a **LINE OF DUTY INJURY REPORT (PD 429-154)** should be prepared at the member's command. The date used to document the injury will be the same as the date that the member was diagnosed with an impairment. In addition, a reference should be made to the date and circumstances regarding the initial exposure.

7.        It should be noted that health consequences of other types will be handled as outlined for respiratory ailments. Members who believe they are experiencing any health problems related to assignments at any site in connection with the WTC attack or its' aftermath may request an authorization for required testing.

8.        Members should also be aware that the Department has commenced a study to determine the effects of WTC related airborne contaminants on lung function. This study is designed to help determine the best way to assess and treat any respiratory ailments. Finest Message #14534 dated 3/12/02 solicits members to participate in the study. Members may call the Medical Division at (718) 760-8542 to schedule a screening appointment.

9.        Members are also reminded that at all WTC related sites, on-going environmental and personal sampling for contaminants has been taking place. As part of a comprehensive site safety plan, personal protective equipment, designed to protect members from exposure to chemical contaminants, as well as physical hazards, is being provided. The Department will continue to monitor all operations and ensure that any hazards identified are addressed with proper equipment. Performing health hazard evaluations and ensuring use of appropriate personal protective equipment will help to reduce the likelihood that members will suffer adverse health consequences from these assignments.

10.      Appendix "A" contains an outline of the steps to document exposures and to receive evaluation and/or treatment of potential line of duty injuries, as an illustration of the procedures discussed above.

11.      Commanding Officers will ensure that the contents of this order are brought to the attention of member of their commands.

**BY DIRECTION OF THE POLICE COMMISSIONER**

**DISTRIBUTION**  
**All Commands**

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## APPENDIX "A"

### FLOWCHART - WTC - RELATED RESPIRATORY AILMENTS

1. A member of the service has an exposure documented either through a report submitted by the member's Commanding Officer or through a direct notification to the Occupational Health and Nursing Unit (OHNU).
2. A member subsequently experiences symptoms of a respiratory ailment.

NOTE: In the event of a medical emergency, members should seek treatment from the nearest hospital emergency room.

3. The member contacts his or her Medical District to schedule an appointment with the District Surgeon
4. The District Surgeon will then evaluate the member and determine if there is a causal relationship between the member's ailment and the exposure.

#### **If the District Surgeon determines that there is a causal relationship between the member's ailment and the exposure:**

5. The member obtains authorization for pulmonary function testing from an outside health care provider.
6. If the testing indicates that there is reduced lung capacity or a related respiratory ailment, a **LINE OF DUTY INJURY REPORT (PD 429-154)** will be prepared at the member's command.
7. If the pulmonary function testing indicates that there is no injury, no further action needs to be taken.

#### **If the District Surgeon determines that there is no causal relationship between the member's ailment and the exposure:**

8. No authorization will be provided.