

Dear (Assemblyman, Senator, Governor, etc.),

Occupational exposure to blood or body substances is a traumatic event for a health care or public safety professionals. As you may know, in New York State the ability of an exposed worker to learn if they have been exposed to HIV from such an event is limited when a source patient is unable to consent to testing, such as when the individual is critically ill, unconscious or deceased. In fact, New York is one of only two states that do not have provisions for occupational exposure source testing.

Without the ability to learn if HIV is present, an exposed nurse, police officer, medical student, EMS professional, physician, fire fighter, or other emergency responder generally begins a complex, dangerous and expensive treatment of post- exposure prophylaxis for HIV exposure to reduce the risk of seroconversion, even though there may not be an actual exposure to HIV. Source patient testing legislation would provide the necessary medical information to allow appropriate treatment in incidences of occupational exposure in a manner that protects the privacy of the source patient.

The everyday heroes that our organizations represent need you to ensure this provision becomes law in the next legislative session. Legislation containing such a provision was debated in 2008, but did not become law. Similar legislation was again debated in 2009, and no fewer than four bills have contained these provisions, yet still none become law.

Because this provision is included in each of the different bills, we respectfully ask that you consider cosponsoring a **single stand-alone bill** that would assure our colleagues have protection of source testing now. Please make source patient testing of occupational exposures for health care and public safety professionals a priority in this legislative session.

Further delay in passage of this legislation will mean more persons will need to endure a lengthy course of post-exposure prophylaxis medication, as well as the stress of not knowing if they have been exposed to HIV. In each case, one test could have provided the answer and prevented a potentially unnecessary course of medical treatment. Confidential source patient testing would provide the protection our colleagues deserve.

We thank you for your leadership and stand ready to help. Please contact Dr. Michael Dailey, at 518-262-3773 if we can answer any questions or assist.

Sincerely,