

"PROGRESS THROUGH UNITY"



KANSAS STATE COUNCIL OF FIRE FIGHTERS



Affiliated With

INTERNATIONAL ASSOCIATION OF FIRE FIGHTERS • KANSAS AFL-CIO • CENTRAL LABOR BODIES

Before the Committee on Judiciary

Testimony of Robert S. Wing

Re: Senate Bill 320



My name is Robert S. Wing. I am a retired Captain in the Fire Department of the Unified Government of Wyandotte County and Kansas City, Kansas. I was a fire fighter for 42 years. I am also President of the Kansas State Council of Fire Fighters and the retired Business Manager of the International Association of Fire Fighters, Local 64. I appear here today to speak in favor of Senate Bill No. 320.


I am here today to speak in favor of SB 320. This bill proposes to expand language of what is considered an infectious disease. These changes also apply to required testing of individuals who may have an infectious disease and have exposed others. The current language only addresses testing of HIV/AIDS and Hepatitis B. The proposed changes would allow the Secretary of Health and Environment to make changes quickly to the list of testable infectious diseases in Kansas. Today new diseases are found and spread very quickly, as evidenced by the current 2019-nCoV or “coronavirus” outbreak. Changing this language into a more “living document” allows the healthcare workers and first responders of this State to keep up-to-date on emerging diseases rather than waiting on legislation to approve testing.

Rapid exposure testing of individuals—especially the source patient—is extremely important to the safety and well-being of our first responders. Every day Fire, EMS, Police Officers and Healthcare workers are placed into volatile situations. When an exposure occurs, it is of utmost importance to secure any available rapid test from the source patient. Testing of the source patient is **THE** most efficient method to rule out any further testing. Requiring these source patients to be tested allows quicker results and can usually have great benefits to the responders’ health and mental well-being.

Imagine if you were exposed to a patient's bodily fluids in the course of your work as a first responder and the patient told you they may have an infectious disease. The amount of personal stress is overwhelming. One would start to ask themselves these questions: "Am I going to live with this disease for the rest of my life?" "Is my family going to be safe?" "Will my personal and/or work relationships change?" All of these questions can be answered more quickly with rapid testing of the source patient. If the source patient tests negative, no further testing of any patient is required under most circumstances. A rapid positive test of the source patient would give exposed personnel more time to start prophylactic treatment in some cases, giving them a better chance of **NOT** contracting the disease.

In closing, without the clarifications of SB 320, rapid testing of new diseases that emerge would be delayed through the legislative process for months or even years, allowing continued exposures and spread of diseases not only throughout the general public, but also to our front-line first responders and healthcare workers. Please vote in favor of these changes to not only help protect the public, but to also help protect those first responders who work selflessly and diligently daily and take personal risk to protect our community every day.

Respectfully submitted



Robert S. Wing

President, Kansas State Council of Fire fighters