

Policy Name: 12.08.1 Exposure to Infectious Disease Policy and Procedure**Scope:**

The spread of certain bloodborne pathogens and highly infectious diseases is a health hazard for patients and caregivers. This requires processes to protect patients and students from the spread of these diseases. The purpose of this policy is to educate, avoid infection, and respond to exposures or infection to protect the rights and health of both students and patients.

Policy:*Education and Evaluation:*

All University of Texas at Tyler (UT Tyler) SOM students and students visiting UT Tyler SOM shall receive prevention education. Those with an occupational exposure to a bloodborne pathogen shall have the exposure evaluated and documented by a healthcare provider following the applicable post-exposure protocol. See bloodborne pathogen exposure control plan at UT Tyler (Appendix E).

Infection Control:

Medical students, like all healthcare workers, bear a responsibility to prevent the spread of infection. Pursuant to that responsibility, medical students will always follow universal precautions including the appropriate use of PPE.

Occupational exposures to bloodborne pathogens requiring immediate assessment and the possible initiation of prophylactic medical treatment are defined as: percutaneous injury (e.g. needlestick, laceration with a sharp object); contact of mucous membranes or ocular membranes; and contact of non-intact skin (e.g. skin that is chapped, abraded) with blood or other potentially infectious fluid (e.g. semen; vaginal secretions; and cerebrospinal, synovial, pleural, peritoneal, pericardial and amniotic fluids; bloody body fluids and unfixed tissue). Occupational exposures requiring monitoring include the three types above requiring prophylaxis and contact with intact skin that is prolonged or involves an extensive area with blood or other potentially infectious fluid (semen; vaginal secretions; and cerebrospinal, synovial, pleural, peritoneal, pericardial, and amniotic fluids; bloody body fluids and unfixed tissue). All exposures within those categories must report to the designated care location, or Emergency Department if applicable, within 2 hours of the exposure.

A student exposed to infectious or communicable illness (considered by the CDC as an occupational risk for healthcare workers) are required to follow the steps outlined in this policy.

Medical students with active communicable diseases are required to adhere to the occupational health policies and guidance at their clinical site. The student and the clerkship coordinator will notify the clinical faculty of any absences and the anticipated return to service date. Students are not required to disclose the reason for the absence but may be required to provide a physician's note documenting a return-to-school date to the clerkship coordinator and Phase and Clerkship Director. The Clerkship Director will notify the clinical faculty if there are any restrictions or precautions the student must follow when they return to service.

In addition, students in such circumstances with communicable diseases or conditions should consult with the infection control office at the institution wherein the exposure occurred or where they are enrolled in a clinical course or a clinical clerkship about the advisability of working with patients and to be sure they are following the local regulations. If students are at a site that does not house an infection control office,

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they should discuss it with the Phase 2 Director. All students are required to adhere to infection control precautions set forth by infection control at the local site for patients with designated communicable diseases. This includes wearing specified PPE, including masks, as directed.

Prior to the start of any clinical experiences, students with self-disclosed infectious or communicable illness are required to seek medical consultation by a physician to determine his/her ability to perform the duties required of the clinical rotation. If the recommendations for either an exposed or self-disclosed infectious or communicable illness limits the student's ability to meet curricular requirements, the Phase Director will attempt to accommodate if possible and consult with the Associate Dean of Undergraduate Medical Education and Associate Dean for Student Affairs, as needed. Students should seek advising regarding implications for specialty training from Specialty Specific Advisor(s) in the field(s) of interest.

Should UTTSOM determine any clinic site to be unsafe for learners, learner involvement at that site shall be prohibited until such time as the health risk is further assessed and resolved. See UT Tyler communicable disease policy for additional information.

Procedures for student exposure to infectious disease:

Prevention and Education Protocol:

All students will receive training in Universal Precautions as part of the EMT Training program and Teaching Outstanding Physician Skills (TOPS) course prior to seeing patients. This training shall meet the minimum requirements for students as outlined in The UT Tyler Bloodborne Pathogens Exposure Control Plan (Appendix E).

1. All students will receive training in the Post-Exposure Protocol as part of first year orientation, the Transition to Phase 2 orientation, and orientation in surgery, internal medicine, critical care, and emergency medicine clerkships.
2. Visiting Students will receive on-line training in Universal Precautions and attest to having read and understood the policy and protocol as part of onboarding, prior to beginning a rotation.
3. Should UT Tyler SOM determine any clinic site to be unsafe for learners, learner involvement at that site shall be prohibited until such time as the health risk is further assessed and resolved.

Post-Exposure Protocol: Applies to SOM students and Visiting Students:

Immediately post exposure:

1. Clean the area of exposure or injury with soap and water, or flush mucous membranes thoroughly. If necessary, administer first aid wound care, such as pressure to a bleeding wound.
2. Report exposure to your supervising faculty member, and if applicable, the charge nurse.
3. Seek immediate care/treatment (within two hours) per the instructions of your supervisor/site, which may be in the emergency department. Healthcare providers in the designated office/emergency department will recommend and initiate prophylaxis as appropriate. Inform the Emergency Room you are a UT Tyler SOM student.
4. Sign a release of medical information to facilitate follow-up care so results can be sent to the follow-up care provider.
5. Students should also submit a [report](#) to UT Environmental Health and Safety at USC 135 or fax 903-565-5829.
6. Within 24 hours the student should inform the Associate Dean of Student Affairs of the exposure via the [SOM Post Exposure form](#).
7. Students should seek a first follow-up visit within 72 hours after the initial exposure.

Visiting Students: In addition to following the post exposure protocol, visiting students should contact their home institution for further instructions once they have sought initial treatment following the SOM

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protocol. UTTSOM students on an away rotation should check their host institution's policies, procedures, and resources for visiting medical students in need of emergent care, and follow-up with the UHC or whatever other healthcare arrangements have been made between the parent and host institutions.

Financial responsibility: UTTSOM will work directly with students who experience a bloodborne exposure for financial responsibility. For any incident of exposure, the following apply.

1. UTTSOM will reimburse up to \$1000 of medical expenses for counseling and post-exposure treatment for incidents reported within the first three days (72 hours) of exposure that are not covered by the student's health insurance (all SOM students are required to have health insurance). Reimbursement claims must be submitted within 90 days to the Office of Student affairs. Additional expenses beyond \$1000 will be the responsibility of the student.
2. After 72 hours, students will be responsible for any other costs related to the incident.
3. Students will notify the Associate Dean for Student Affairs of any financial issues pertaining to the pathogen exposure.

Accommodation and Advising: Students may pursue their studies if their continued involvement does not pose a health or safety hazard to themselves or others. It is expected that all students can be accommodated as needed with some modification to their program of study to reduce the risks of bloodborne pathogen transmission.

Any student who is not eligible for services from the UT Tyler Student Accessibility and Resources (SAR) Office but needs post-care treatment because of injuries and or medical conditions from pathogen exposure in a clinical setting may be eligible to apply for a temporary, reasonable accommodation to the Associate Dean for Student Affairs. A student, when provided with reasonable accommodations, must be able to perform the routine duties and minimum requirements for each course/clinical assignment and meet the technical standards for enrollment at the SOM.

In the event of a required short-term accommodation adjustment, the student will speak with Associate Dean for Undergraduate Medical Education and Phase Director (who may consult other administrators as necessary) to create and implement a modified learning plan designed to preserve the student's standing until the student is able to fully participate in the regular medical school curricular requirements. Students requiring disability accommodation to complete the curriculum, in line with the technical standards, should contact the UT Tyler SAR Office. Students with chronic infectious disease should discuss specialty training implications with a Specialty Specific Advisor, considering use of current guidelines for this purpose (e.g. Management of Healthcare Workers Who Are Infected with Hepatitis B Virus, Hepatitis C Virus, and/or Human Immunodeficiency Virus; see https://shea-online.org/images/guidelines/BBPathogen_GL.pdf).

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