

Policy Title: Infectious and Environmental Hazards Student Incident

Policy Number (relate to LCME Element as applicable): UCF COM Policy 12.8.1

Applies to: All medical students at the University of Central Florida College of Medicine (UCF COM).

Date: 5/31/2017

1.0 Purpose:

This policy relates to LCME Element 12.8 which states that: “medical school has policies in place that effectively address medical student exposure to infectious and environmental hazards.”

2.0 Policy Statement:

Any accidents or other incidents involving students (e.g., slip and falls, bloodborne pathogen exposures or needle sticks) will be reported to the Office of Student Affairs of the College of Medicine and to UCF Student Health Services (if applicable). The purpose of this policy is to define the process, guidelines and procedures for student incidents such as slip and falls, exposure to infectious diseases and environmental hazards, bloodborne pathogens, and needle sticks.

1. Policies, Procedures for exposures to infectious diseases and environmental hazards

I. OSHA Bloodborne Pathogen (BBP) Training for Medical Students

Introduction: The Occupational Safety and Health Administration’s (OSHA) Bloodborne Pathogen Standard (29 CFR 1910.1030) applies to persons (students) who, in the normal course of their job, have the potential for exposure to blood or other potentially infectious materials. Personnel who require this training include any persons who, in the normal course of their job, have the potential for exposure to blood, body fluids, body tissues or sharps.

A. Medical Student Training Requirements

Students who require training – All medical students are at risk and must complete the OSHA Bloodborne Pathogen (BBP) training upon enrollment and annually thereafter to meet OSHA BBP training standards.

B. OSHA BBP Training Program

Completing this web-based program meets both the initial and annual training requirements. Students are expected to complete the online course and quiz prior to the start of classes for the academic year. A score of $\geq 80\%$ on the quiz is required for certification. Failure to complete the annual training course could have significant repercussions regarding continued enrollment as a medical student at the University of Central Florida.

II. Exposure Control Plan

A. The Exposure Control Plan describes the rationale, policies and procedures, and the interventions available for College of Medicine M.D. students who have the potential for exposure to blood, other body fluids, or other potentially infectious materials during the normal course of their student activities.

B. The College of Medicine and affiliated clinical education facilities have designated representatives who are charged to be a liaison between the College of Medicine and the Infectious Disease offices of affiliated clinical education facilities.

C. Training on prevention of exposure to infectious diseases and environmental hazards occur at matriculation orientation and at the beginning of each academic year. Medical students will also receive specific training on use of personal protective equipment. Prior to beginning

clinical work in settings with a risk for exposure, students will receive fit testing with respirators (e.g., N95 masks). This generally occurs in the M3 year, although M1 and M2 students with preceptorship or research requirements in hospitals may also be required to be fit tested.

III. Bloodborne Pathogens

Introduction: Policies and procedures concerning bloodborne pathogen exposures and exposures to communicable diseases (e.g., tuberculosis, chicken pox) are in place at each of the major clinical teaching facilities. During orientation programs an overview of procedures is presented. Students should familiarize themselves with the policies and procedures of each clinical facility and carefully comply with all requirements in case they are injured or exposed to communicable disease.

All needle sticks and other exposures to blood or other potentially infectious body fluids should be immediately reported to the student's supervisor and to the designated contact at the facility where the incident occurs.

IV. COVID-19

COVID 19 is transmitted primarily from person-to-person via respiratory droplet transmission. Other modes of transmission include exposure to blood or other body fluids infectious with COVID-19. The prevention of exposure to COVID-19 relies upon careful compliance to frequent hand hygiene practices, proper use of PPE supplies, facemask "source control" by patients and healthcare workers, and the use of PPE in appropriate circumstances. Should accidental exposure to COVID-19 occur, follow guidance from the CDC in "Interim Guidance for Risk Assessment and Public Health Management of Healthcare Personnel with Potential Exposure in a Healthcare Setting to Patients with Coronavirus Disease 2019 (COVID-19)", <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html>. This guidance categorizes the level of risk for COVID-19 exposure as "low", "medium", or "high", depending on the time and type of exposure, the level of source control by the patient, and level of PPE worn by the student. The response to the exposure ranges from "self-monitoring" to "self-monitoring with delegated supervision" to "active monitoring", and specific work restrictions. Healthcare facilities should have a low threshold for evaluating symptoms and testing COM students experiencing potential exposure or symptoms. Timely evaluation following the exposure may be accomplished at the clinical facility or at UCF Student Health Services. COVID-19 testing and an active tracing program should be readily available. The return to direct patient care criteria for the student who is exposed, symptomatic, or tests positive for COVID-19 are found at <https://www.cdc.gov/coronavirus/2019-ncov/hcp/return-to-work.html>.

V. Exposure and Post-Exposure Prophylaxis

Through a waiver of the in-network requirements specified in the United Healthcare Student Health Services contract with UCF Student Health Services, BBP exposures and post-exposure prophylaxis can be obtained from immediately accessible medical facilities (both in-network and out-of-network) by medical students who are undergoing training in the clinical education environment in modules, clerkships, electives and selectives. Follow-up care for exposure must be obtained through arrangements with UCF Student Health Services and their arrangement with in-network providers.

Note: Students will be responsible for deductibles specified in the United Healthcare Student Health policy, or as specified in their health insurance policy (if other than United Healthcare Student Health)

3.0 Definitions:

Standard (Universal) Precautions: is an approach to infection control. According to the concept of Universal Precautions, all human blood and certain human body fluids are treated as if known to be infectious for human immunodeficiency virus (HIV), hepatitis B virus (HBV), and other bloodborne pathogens.

Bloodborne Pathogens (BBP): pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, HBV and HIV.

Other potentially infectious materials: (1) The following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids; (2) Any unfixed tissue or organ (other than intact skin) from a human (living or dead); and (3) HIV-containing cell or tissue cultures, organ cultures, and HIV- or HBV-containing culture medium or other solutions; and blood, organs, or other tissues from experimental animals infected with HIV or HBV.

Taken from http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=standards&p_id=10051

4.0 Responsibilities:

Students and clinical instructors are to report all incidents to the College of Medicine Office of Student Affairs.

5.0 Monitoring/Procedures:

The incident, including the names of all contact points, will be documented by the Office of Student Affairs. The associate or assistant deans for students will provide assistance should students encounter difficulties and, when applicable, will inform and coordinate follow-up care with UCF Student Health Services.

The student's clinical instructor and the student will report the incident to the College of Medicine Office of Student Affairs. For bloodborne exposures, students are asked to complete the Student Incident Report Form. Depending on the nature of the incident, emergency services (911) may be called to assess the student.

1. Immediate procedure:

- Remove bloodborne pathogen.
- Sharps exposure – wash with soap and water. Students SHOULD NOT squeeze the affected area.
- Mucous membrane exposure – flush with copious amounts of water.
- Report exposure to immediate supervisor.
- Report within 1-2 hours of exposure to the appropriate individual or office, based on clinical setting as below:
- The evaluating physician shall determine the risk of transmission, prophylaxis recommendations and indicated follow-up.

Prophylaxis for Hepatitis B:

May be indicated, dependent on the status of the patient, the exposure and immunity of the student. When an exposed student is known to be immune to Hepatitis B, no prophylaxis or testing of the patient is needed. If a student is unsure of his or her status, laboratory testing can be performed to assess both the patient and student's status. If the student is not immune and

the patient is positive for Hepatitis B, then the student should receive immune globulin and Hepatitis B vaccine series. Follow-up testing should be performed at six months to verify the student's Hepatitis B status.

- When HIV post-exposure prophylaxis is indicated, the most current antiretroviral medication(s) as outlined by the CDC will be employed. Students who opt to use antiretroviral therapy will be followed at UCF Student Health Services for the appropriate duration of therapy. Follow-up HIV studies will be recommended at 6 weeks, 12 weeks, 6 months and 12 months.
- Source patients should also be tested for Hepatitis C. Exposed students should receive follow-up testing for this virus as outlined by the CDC.

2. General Procedures

I. Hospital setting during regular business hours

- Contact clerkship, module, elective or selective director.
- Inform resident or attending physician.
- Report to Occupational Health in the hospital. Designations and follow up of exposures may be handled by different departments in affiliated facilities. In some cases, emergency room physicians may handle exposures. The director of nursing services or nursing supervisor on duty may be the first line of contact.

II. Hospital setting during non-regular hours and holidays

- Report exposure to resident and attending physician-follow their advice on obtaining treatment.
- Seek assistance from clinic or facility emergency room physicians if resident and attending physician are not immediately available.
- The director of nursing services on duty may be the first line of contact during non-regular hours.

III. Other setting during regular and non-regular business hours and holidays

- If HIV status of source is unknown, whenever possible rapid HIV testing will be performed on source.
- If exposure occurs during UCF Student Health Services hours of operation and source HIV status is unknown, student will call UCF Student Health Services at 407-823-3850 to speak with the medical director or his or her designee.
- If exposure occurs after Health Service hours of operation, or source is known HIV positive, student will proceed to nearest hospital emergency department for evaluation and treatment as deemed necessary.
- The student's clinical instructor and the student will report the exposure to the College of Medicine Office of Student Affairs.
- The incident, including the names of all contact points, will be documented by the Office of Student Affairs.

6.0 Related Policies:

UCF COM Policy: 12.8.2 Hepatitis B Infected Medical Student Policy and Procedure

7.0 Key Search Words:

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| OSHA | Incident | Needlestick |
| Bloodborne Pathogens | Hazardous | Exposure |

8.0 Revision History:

| Version | Date Approved | Modifications |
|----------------|----------------------|----------------------|
| V1 | 2009 | Original |
| V2 | 6/30/2017 | Minor edits |
| V3 | 5/25/2020 | Minor edits |

9.0 References:

N/A

Responsible Office: Clinical site and the Office of Student Affairs

Policy Contact: Associate Dean for Students, Director of Student Services and Service Learning

Supersedes: Version 1