



TITLE OF POLICY

Student Exposure Policy

PURPOSE AND SCOPE

The purpose of this policy is to outline the policy and procedures to address medical student exposure to infectious and environmental hazards and to describe the mechanisms and resources for determining the effects of infectious and environmental disease or disability on medical student learning activities.

RESPONSIBLE PARTY AND REVIEW CYCLE

The Office of Student Affairs and Campus Health will review the policy on an as-needed basis and the Education Committee will approve it.

LCME REFERENCE(S)

LCME 12.4: Student Access to Health Care Services

LCME 12.5: Non-Involvement of Providers of Student Health Services in Student Assessment

LCME 12.7: Immunization Requirements and Monitoring

LCME 12.8: Student Exposure Policy/Procedures

HISTORY OF APPROVALS AND UPDATES

Approved by Education Committee on December 16, 2019

DEFINITION(S)

For the purpose of this policy, environmental diseases refer to noninfectious acute disorders associated with environmental exposures such as chemical or thermal burns or physical injuries such as falls.

POLICY

Methods of Prevention

The SOM carries out the following measures of prevention:

- **Immunizations:** In order to reduce the risk of medical students of being exposed to infectious diseases, medical students are required to have immunizations as required by the Centers for Disease Control and Prevention, the North Carolina Department of Health and Human Services, North Carolina law, and UNC Health.
- **N95 Fit Testing Training:** Medical students are also required to be fit tested for an N95 mask respirator during the first semester of medical school. Students who are not in compliance with these requirements, have stops placed on their accounts and are pulled from courses and/or activities that would place them at risk.
- **Training:** The UNC CH Office of Environment, Health and Safety, and the SOM require medical students, to complete training in infection prevention, bloodborne pathogens, tuberculosis awareness, emergency preparedness, hazard communication and safety, and fire safety.



- **Transition to Application Phase Course (the first week of the third year):** All students receive a lecture about infection control issues, which educates medical students about preventing exposure to infectious and environmental hazards. Students assigned to the Central, Asheville, Charlotte, and Wilmington Campuses are given instructions on handling exposure to infectious and environmental hazards during orientation and are given laminated cards with specific information.
- **Annual Reminders and Publication of Procedures:** Medical students receive annual email reminders about each campus's needle stick procedures and blood borne pathogen exposure procedures. Additionally, policies and procedures are posted in each course's learning management system site and on the SOM's website. Students in Individualization Phase complete a required orientation module, which reviews these policies.

Procedures for Care and Treatment after Exposure

Campus Health (CH) functions as the occupational health care provider for medical students at Central Campus and the Mission Hospital, Atrium Health's Carolinas Medical Center, and the New Hanover Regional Medical Center occupational health offices function as the occupational health care providers for students at the Asheville, Charlotte, and Wilmington branch campuses, respectively.

The components of care and treatment after exposure can be subdivided into three major areas:

- Blood borne pathogen exposures,
- Other communicable disease exposures, and
- Conditions requiring special consideration like pregnancy or immunosuppressive conditions.

For detailed information about the protocols used for these exposures, please see Section III, Appendices 23A-F.

- **Blood borne pathogen exposures:** Students who have tested positive for a bloodborne pathogen, such as HIV, HBV, or HCV, follow the policy outlined in "Environment, Health and Safety Manual – Chapter 06.07: Clinical Safety - Healthcare Personnel Who Are Infected With Hepatitis B Virus, Hepatitis C Virus, and/or Human Immunodeficiency Virus. This policy describes the effect on the medical student's learning activities of testing positive for HBV, HCV, or HIV (<https://unc.policystat.com/policy/5928484/latest/>).
- **TB exposure:** All UNC SOM medical students are required upon matriculation to have either a 2-step tuberculin skin test (TST) or an interferon-gamma release assay (IGRA) blood test prior to their first clinical week. In addition, students are required to have a either a TST or IGRA on an annual basis. Students who have tested positive for TB are evaluated at either Campus Health, if they are rotating in a Central Campus site (Chapel Hill, Greensboro, or Raleigh), UNC Asheville's Health and Counseling Center, UNC Charlotte's Student Health Center or UNC Wilmington's Student Health Services, depending on the student's location, to determine whether the student has latent TB or active TB

Financial Responsibility for Care and Treatment



- **Central Campus:** The costs of the initial evaluation and management of a blood borne pathogen exposure at UNCH is covered by UNCH for the source patient and the SOM for the student. A visiting student's private insurance will be filed for labs drawn on the visiting student. UNC SOM students should use the pharmacy benefit of their health insurance plan to pay for medications but may be reimbursed for the cost of the medication with documentation.
- **Branch Campuses:** Medical students who are on rotation at a site greater than one hour away from the Chapel Hill campus will be managed per the occupational health system in place at that institution (see Section III, Appendix 19). Students are given information regarding the management of blood borne pathogen exposure during their orientation to the site. The costs of the initial evaluation and management of a blood borne pathogen exposure at the Asheville, Charlotte, and Wilmington campuses is typically covered by their respective occupational health offices for the source patient, and the SOM for the student. In some circumstances, the source patient's insurance may pay for source patient testing. All costs associated with medications used for post exposure prophylaxis are typically filed using the pharmacy benefit of the student's health insurance plan, but UNC SOM students may be reimbursed for the cost of medications with documentation. In all cases, the exposure should be reported to the UNC-Chapel Hill CHS for tracking purposes and when needed, to assist in the case.

Effects of Infectious and/or Environmental Disease or Disability on Educational Activities

- **Infectious Diseases:**
 - **Blood borne pathogens:** Students with HIV, hepatitis B, or other blood borne infections will be evaluated according to the University of North Carolina Policy on HIV-Infected and HBV-Infected Employees and Students Who are Engaged in University Patient-Care Activities policy which can be found at http://www.unc.edu/campus/policies/hiv_hbv.html
 - **TB:** Students with latent TB may participate in patient care activities without restriction but may wish to consult with a health care professional regarding treatment as studies have shown that treatment can reduce the incidence of disease progression. Students with active TB should be treated and placed in isolation and will not be allowed to participate in clinical activities until they are determined to no longer be infectious. The student may be referred to an infectious disease specialist, and if so, the physician will be required to comply with *Non-Involvement of Providers of Student Health Services in Student Assessment* if they are involved in medical student teaching and/or evaluation.
- **Environmental Disease:** Students with environmental diseases are evaluated at either Campus Health (CH), if they are rotating in a Central Campus site (Chapel Hill, Greensboro, or Raleigh), UNC Asheville's Health and Counseling Center, UNC Charlotte's Student Health Center or UNC Wilmington's Student Health Services, depending on the student's location, to determine the impact, if any, on their learning activities. Depending on the nature of the student's environmental disease, they may wish to consult with a specialist, and if so, the physician will be required to comply with *Non-Involvement of Providers of Student Health Services in Student Assessment*, if the health care provider is involved in medical student teaching and/or evaluation. Required limitations in learning activities will be communicated to the Associate



Dean of Student Affairs and every effort will be made to minimize disruption of the student's progress through the curriculum.

- **Disabilities:** Students with disabilities should contact the UNC CH Accessibility Resources & Services (ARS) Office regarding accommodations, if applicable. The Office of Student Affairs will work with the student and the ARS to determine, the impact, if any, on the student's learning activities.

- **Phase Specific Information:**
 - **Foundation Phase:**
 - Preclinical students with infectious and/or environmental diseases may request an administrative excuse for any required activity, such as a small group session or assessment, from the Office of Student Affairs. The administrative excuse allows the students to make up missed work without penalty.
 - If the student needs to miss a significant amount of time, the student may receive a temporary grade of Incomplete for the course and a plan is worked out with the course director, the student's advisor, and either the educational resources coordinator or the associate dean for student affairs.
 - Application and Individualization Phases:
 - Clinical students with infectious and/or environmental diseases may also request administrative excuses from the Office of Student Affairs.
 - In addition, clinical students who are unsure as to whether or not their condition should excuse them from a clinical setting for patient safety reasons may be screened by CHS according to the UNCH Infection Control Manual (See Section III, Appendix 25A and 25B) and they may be charged for this screening
 - In general, students who are afebrile may continue to work in clinical settings, but students who are febrile will be given an administrative excuse and be allowed to make up missed work when they are well.

PROCEDURE(S)

<https://ars.unc.edu/>

<https://unc.policystat.com/policy/5928484/latest/>