Medical Student Exposure to Infectious and Environmental Hazards

1) Methods of Prevention: The policies below outline procedures aimed at preventing exposure to infectious and environmental hazards in a healthcare setting.

Standard Precautions Procedure (Policy #: IC D-02) http://www.upstate.edu/intra/policy/pdf/IC_D-02.pdf

Hand Hygiene Policy/Procedure (Policy #: IC D-01) http://www.upstate.edu/intra/policy/pdf/IC_D-01.pdf

Contact Precautions (Policy #: IC C-03) http://www.upstate.edu/intra/policy/pdf/IC_C-03.pdf

Contact Precautions PLUS (Policy #: IC C-05) http://www.upstate.edu/intra/policy/pdf/IC C-05.pdf

2) Proper Response to Blood and Body Fluid Exposure

Exposures in University Hospital and Other Syracuse Area Facilities

- Immediately wash the affected area with soap and water or for eye involvement, flush with clean water or normal saline
- Call Employee/Student Health (ESH) at 464-4260 on weekdays between 7:30 AM 4 PM
- Report to the University Hospital Emergency Department after hours, weekends and holidays
- An Injury Report (http://www.upstate.edu/intra/forms/pdf/F83120.pdf) must be completed and submitted to Employee/Student Health

Exposures in Facilities Outside of the Syracuse Area

- Immediately wash the affected area with soap and water or for eye involvement, flush with clean water or normal saline.
- Immediately report to the nearest Emergency Department unless the student is familiar with the specific facility procedure for exposures.
- If exposure occurs in an outpatient setting, report to the nearest Emergency Department without delay.
- Call ESH to report the exposure. If after hours, leave a voicemail message and a contact number.
- Follow-up testing is coordinated by ESH

Post-exposure Evaluation and Management

- Notify ESH as soon as possible, regardless of the facility where the exposure occurred
- ESH or the Emergency Department practitioner determines the type and extent of exposure and coordinates assessment and testing of the source patient for HIV, hepatitis B and hepatitis C
- Baseline testing is obtained on the exposed individual for hepatitis B, hepatitis C, and HIV, if indicated
- Testing of source patient is done with appropriate consent
- Counseling is provided by the ESH or Emergency Department practitioner information about the risk of the exposure, risk/benefit of post-exposure prophylaxis (PEP) and follow-up plan
 - o No risk of blood borne infection PEP is not indicated
 - O Source patient is HIV positive or unknown begin PEP (ideally within 1 hour of exposure, but no later than 36 hours)
 - o Source patient is HIV negative PEP is not indicated
- Follow-up testing is arranged by ESH

Needlestick/Body Fluid Exposure General Guidelines (Policy #: IC E-04) http://www.upstate.edu/intra/policy/pdf/IC E-04.pdf

Needlestick/Body Fluid Exposure Follow-up Policy (Policy #: IC E-03) http://www.upstate.edu/intra/policy/pdf/IC_E-03.pdf

3) Effects on Medical Student Learning Activities.

In the event of exposure, medical students should contact Student Health as soon as possible. If learning activities are interrupted, the Director of Student Health, upon verification and understanding of specific scenario, will contact the Dean of Student Affairs. The Dean will communicate and make arrangements with faculty regarding absence, make up of work, and future action plan.

4) Financial Responsibility

Students are responsible for any charges related to post-exposure evaluation, treatment and follow-up. These expenses are not covered by the Student Health fee or by Worker's Compensation, and should be submitted to the student's health insurance for payment.