

**STATEMENT 4.0.3 – POTENTIAL HEALTH RISKS**  
**Undergraduate Medical Education**

Approved by: Curriculum Committee  
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Related Statements: Statement on Immunization

**I. PURPOSE**

Health care personnel are at risk of exposure to communicable diseases because of their contact with patients or exposure to body fluids from patients, with infections, both diagnosed and undiagnosed. It is therefore most important that our students ensure that their immunization status is current. Conversely, up-to-date immunization also protects vulnerable patients from becoming infected by health care workers.

To comply with the Health Protection and Promotion Act and the Occupational Health and Safety Act in this regard, the teaching hospitals affiliated with Western University have established immunization and TB testing requirements which you **MUST** comply with to have access to the teaching programs conducted in these institutions.

Failure to provide the School with proof of compliance in a timely fashion will result in your being barred by the hospitals and Schulich School of Medicine & Dentistry from the clinical programs that are course requirements for your degree.

Reading the following requirements carefully is therefore important for you. You are expected to take responsibility for meeting these regulations.

**II. STATEMENT**

- a. Applicants to the Undergraduate Medical Education Program
- i. The Schulich School of Medicine & Dentistry will inform applicants that:
    1. They will be required to take part in the care of patients with various communicable diseases including but not limited to hepatitis, TB, and HIV/AIDS, during their studies.
    2. They will be trained in methods of preventing the spread of communicable diseases (including body substance precautions).
    3. There is a risk that they may contract a communicable disease during the course of their studies.
    4. They have a responsibility to prevent the spread of communicable diseases to others.
    5. They will be required to comply with Schulich School of Medicine & Dentistry immunization requirements.
    6. Students with a communicable disease may pursue their studies only as long as their continued involvement does not pose a health or safety hazard to themselves or to others.
    7. Students will be required to comply with provincial communicable disease surveillance protocols developed under the *Public Hospitals Act Regulation 965*.

8. Students may be required to give body fluid specimens if they are exposed to, or contract certain diseases while working in health care facilities.
  - ii. Applicants with active tuberculosis are required, upon acceptance into the medical program, to inform the Assistant Dean, Learner Equity & Wellness. Applicants who know that they test positive for Hepatitis B and HIV are strongly advised to inform the Assistant Dean, Learner Equity & Wellness (Undergraduate) of this. Students will be counselled re: the disease and its impact on their education and career. Strict confidentiality concerning the applicant's state of health will be maintained.
- b. Registered Students in the Undergraduate Medical Education Program
- i. Student Health and the Protection of Patients
    1. At the time of Admission and throughout their medical program all students are expected to be in a state of health such that they may participate in the academic program, including patient care, without posing a risk to themselves or to others. Any compromise to health that might be deemed to affect this should be reported to the Assistant Dean, Learner Equity & Wellness (Undergraduate). In particular, note the following:
      - a. Students with a communicable disease or other health problem may pursue their studies only as long as their continued involvement does not pose a health or safety hazard to themselves or others. Such a health or safety hazard, if protracted, may preclude them from participation in clinical work essential to the satisfactory completion of their program of study. Therefore, all illnesses requiring more than a few days absence from class should be reported to the Assistant Dean, Learner Equity & Wellness (Undergraduate).
      - b. Students known to be infected with active tuberculosis must notify the Assistant Dean, Learner Equity & Wellness (Undergraduate) for counsel in regard to their medical program (see paragraph at the end of this section on counselling for special programs). In addition, they are immediately subject to the TB policies that prevail in the affiliated institution in which they are functioning.
      - c. Students who test positive for Hepatitis B, Hepatitis C, or HIV are strongly advised to consult with the Assistant Dean, Learner Equity & Wellness (Undergraduate) for counsel in regard to their educational experiences and future career planning.
      - d. Students who have or develop a workplace-significant allergy such as latex sensitivity and latex allergy are strongly advised to report this and get counselling from the Assistant Dean, Learner Equity & Wellness (Undergraduate).
      - e. The health status of those students reporting shall remain confidential.
    - ii. Expectations for student participation in care of patients with communicable diseases:
      1. Students are required to participate in the care of all patients assigned to them, including patients with communicable diseases. Such participation is necessary for the satisfactory completion of academic requirements.
      2. All students are expected to know and adhere to the infection control policies of the institutions in which they are working. This includes the principles of body substance precautions (Universal Precautions).
      3. Students are responsible for conducting themselves in a manner which is consistent with the health and safety of themselves and others and shall be given appropriate training to do so.
    - iii. Tuberculosis
      1. If you have been tested in the past and have a negative TB skin test:
      2. You must have documentation of a two-step TB skin test *just before the start of medical school*.

3. If you have been skin-tested in the past and have a positive TB skin test:
    - a. You must have documentation of a chest X-Ray within 12 months prior to registration into medicine which indicates no active TB.
  4. If you have been in contact with an active case of TB while in the clinical setting, you must report to the Occupational Health and Safety (OHS) office of the institution where the exposure occurred so that appropriate follow-up can be instituted. It will likely be OHS that informs you of the contact so you should have no trouble contacting them. If you are unsure, any nurse employed by the hospital should be able to direct you.
- iv. Immunization Policy (to be adhered to by all *FIRST-TIME* students in the Medical Program)
1. Diphtheria, Tetanus, Pertussis, and Polio: You must have documentation of having completed a primary series of diphtheria, tetanus, pertussis, and polio as a child.
    - a. You also must have had a tetanus booster in the last 10 years. (If you have had your primary series but no booster it is available as TD Absorbed.)
  2. Hepatitis B: You must have documentation of receiving the full immunization series (3 vaccines) for Hepatitis B by the time of registration.
    - a. You must also have documentation of having had an antibody titre done following Hepatitis immunization which confirms your immunity to Hepatitis B.
    - b. If you have a history of Hepatitis B and are e-antigen positive, you must consult the Assistant Dean, Learner Equity & Wellness (Undergraduate).
    - c. Cost of Hepatitis B immunization is the responsibility of the student.
    - d. If you have not completed your immunization series for Hepatitis B you may wish to wait until September. Students enrolled at the London Campus may visit Western's Student Health Services. They are able to provide the Hepatitis B immunization series to our incoming medical students at no charge (at the time of this writing). Students enrolled at the Windsor Campus may contact Student Health at the University of Windsor for administration of these immunizations. The Student Health Plan will cover 80% of the cost of the Hepatitis B vaccine. Please remember to provide the Learner Equity & Wellness Office with titre documentation at the completion of your Hepatitis B vaccination shots.
  3. Measles, Mumps, and Rubella:
    - a. Measles: Medical students must demonstrate proof of immunity in the following form:
      - i. Documentation of 2 valid doses of live measles vaccine on or after the first birthday; or
      - ii. Laboratory evidence of immunity (measles antibody titre must be provided).
    - b. Mumps: You must have documentation of 2 valid doses of live mumps virus vaccine on or after the first birthday.
      - i. If you do not, you must have documentation of having had antibody titres done which indicates immunity.
      - ii. You must provide us with documentation of your titre to be excused from the need to provide proof of vaccination.
    - c. Rubella: You must have documentation of one valid dose of live rubella vaccine on or after the first birthday.
      - i. If you do not, please indicate that you have documentation of having had a rubella antibody titre done which indicates immunity.
      - ii. If your titre shows no evidence of immunity, immunization is strongly advised but not mandatory. Individuals without immunity

could be excluded from clinical activities if an outbreak occurs.  
Students in this situation would be responsible for missed time.

- d. Varicella: You must have documentation of age-appropriate dose of varicella vaccine: 1 dose if the age of initial vaccination was 1-12 years; 2 doses if the initial vaccination age was 13 or older.
  - i. If you do not have documentation, please indicate that you have documentation of having had VZV antibody titres done which indicates immunity.
- e. Hepatitis C: Those who know that they test Hepatitis C antigen positive are expected to report to the Assistant Dean, Learner Equity & Wellness (Undergraduate) for counselling regarding:
  - i. patient-related procedures which will be prohibited or modified during training
  - ii. future career planning in Medicine.
- f. HIV
  - i. Students who know that they are HIV positive should inform themselves of the Western University Policy on AIDS RE: Health Sciences Faculties (see excerpts below) and consult with the Assistant Dean, Learner Equity & Wellness (Undergraduate) regarding:
    - 1. patient-related procedures which will be prohibited or modified during training
    - 2. future career planning in Medicine
- g. Counselling guidelines for students with positive HIV and Hepatitis Serology
  - i. Students known to be positive for HIV or Hepatitis E antigen or Hepatitis C antigen will have their clinical learning experiences modified to avoid exposure-prone procedures in order to protect the health of the patients for whom they are caring. Letters going to clinical supervisors advising of the need for modified rotations will be read and signed by the students to indicate agreement with the intent of the modifications and an independent student advisor (as stipulated in the University's policies) will be involved.
  - ii. Affected students known to be infectious with blood-borne pathogens will first and foremost adhere to universal precaution guidelines. They will be allowed to perform procedures where their hands are visible (arterial blood gases, L.P.s, thoracenteses, venipunctures, etc.). They will not be allowed to do any surgery where the hands are not visible. The latter could limit their participation as assistants at surgery and at deliveries. The degree of involvement will be determined on a case-by-case basis by their supervisors.
- c. Procedures to be Followed in the Event of a Workplace Injury
  - i. What to do in the event of injury involving patient body substances, fluids (e.g. needlestick or laceration injury) in the clinical setting.
    - 1. It is expected that medical students will exercise universal precautions when dealing with patients; we know that occasionally accidents happen and you could be exposed to bodily fluids inadvertently.
      - a. Pre-Clinical Years (Year 1 and Year 2)
        - i. Tell your immediate supervisor about the incident as soon as it occurs.
        - ii. First Aid Treatment should be administered immediately.
          - 1. For Percutaneous/Puncture Wound injuries

- a. Remove gloves
    - b. Encourage bleeding from the wound
    - c. Wash the site with copious amounts of running water
  2. For Fluid Exposures to Mucous Membranes (eye, nose, mouth)
    - a. Flush well with water
    - b. Eye exposure must be flushed at an eye wash station
  3. Clinical supervisors, responsible for the student, will work with the student in gathering as much information regarding the patient involved with the needlestick injury to determine evidence of blood-borne infection. Each hospital will have its own protocol for this.
- iii. If at the London Campus Site:
  1. Go immediately to Health Services-Workplace Health, Room 25, University Community Centre (located within Student Health Services) for injuries that occur between 8:30 am and 4:00 pm and provide a copy of the Accident/Incident Reporting Form completed by your supervisor at the site of the injury.
  2. The student should identify him/herself to the Workplace Health receptionist as a medical or dental student with a percutaneous injury. The receptionist will immediately arrange for consultation with one of the nurses.
  3. The nurse will determine, in collaboration with the Occupational Health Physician and student, an appropriate course of management and will arrange for the collection of a blood sample and provision of post-exposure drug therapy as indicated. Medical history and accident particulars will be collected by the nurse during counseling.
  4. Follow up medical appointments will be arranged by the nurse and the injured student.
  5. For injuries that occur after 4:00 pm, the student must be directed to the Emergency Department at the London Health Sciences Centre. The Learner Equity & Wellness Office can provide the student with the following information:
    - a. Letter from the Dean of Schulich Medicine addressed to the Emergency Department, LHSC to identify him/herself as receiving a percutaneous injury in an offsite clinical setting.
    - b. Instructions for student to follow-up with Health Services-Workplace Health on the next business day
  6. Please inform the Assistant Dean, Learner Equity & Wellness (Undergraduate) or Manager of Learner Equity & Wellness for support through the process.
- iv. If at the Windsor Campus Site:
  1. If you are at WRH: Ouelette, report to the *Emergency Department* to have laboratory work done. Inform the

- triage nurse that you have been involved in a needlestick incident.
2. If you are at WRH- Met Campus, report to *Occupational Health* to have laboratory work done. If the injury occurs outside of their office hours, go to the Emergency Department.
  3. Provide the name and location of the patient who was involved in the needlestick so that blood work can also be ordered on this patient.
  4. Complete the incident report which will be given to you. You must provide a copy of the paperwork to the school for further follow up.
  5. Contact Learner Equity & Wellness Officer regarding follow up. Arrangements have been made with Student Health Services at the university for follow-up appointments for students.
  6. If the exposure happens outside of the hospital system (e.g. on a Family Medicine rotation): Please contact Learner Equity & Wellness immediately; Student Health Services will provide initial care and follow up.
- b. Clinical Years (Year 3 and Year 4)
- i. Tell your immediate supervisor about the incident as soon as it occurs.
  - ii. Clinical supervisors, responsible for the student, will work with the student in gathering as much information regarding the patient involved with the needle stick injury to determine evidence of blood-borne infection. Each hospital will have its own protocol for this.
  - iii. Upon discovery of that this incident has occurred, the student should rinse the area with copious amounts of water (or hand sanitizer if skin to skin).
  - iv. If the incident occurs during a normal working day during a hospital-based rotation at a London Hospital site:
    1. Go immediately to the *Office of Occupational Health and Safety* for the institution in which you are working. The Unit Manager on the unit where you are working also needs to know of the incident since there must be a follow-up paper trail to fulfill hospital policy. Occupational Health will initiate appropriate treatment, however they will not perform any medical follow up that is indicated.
    2. Medical follow-up arrangements have been made through Health Services-Workplace Health. Please contact their office immediately at 519-661-2047. They are located in the University Community Centre, Room 11. Please inform the Assistant Dean, Learner Equity & Wellness (Undergraduate) or Manager of Learner Equity & Wellness for support through the process.
    3. If the exposure happens outside of the hospital system (e.g. on a Family Medicine rotation): Health Services-Workplace Health will provide initial care and follow up (Tel 519-661-2047).

4. If exposure occurs after hours or on the weekend: Go immediately to the Emergency Department of the hospital in which you are working and advise them of what happened. They have a protocol to follow and will treat and advise you accordingly. Follow up care will be provided by Health Services-Workplace Health.
- v. If the incident occurs during a normal working day during a hospital-based rotation at a Windsor Hospital site:
    1. If you are at WRH: Ouellette campus, report to the *Emergency Department* to have laboratory work done. Inform the triage nurse that you have been involved in a needlestick incident.
    2. If you are at WRH: Met Campus, report to *Occupational Health* to have laboratory work done. If the injury occurs outside of their office hours, go to the Emergency Department.
    3. Provide the name and location of the patient who was involved in the needlestick so that blood work can also be ordered on this patient.
    4. Complete the incident report which will be given to you. You must provide a copy of the paperwork to the school for further follow up.
    5. Contact Learner Equity & Wellness Officer regarding follow up. Arrangements have been made with Student Health Services at the university for follow-up appointments for students.
    6. If the exposure happens outside of the hospital system (e.g. on a Family Medicine rotation): Please contact Learner Equity & Wellness immediately, Student Health Services will provide initial care and follow up.
- d. Penalty for Failure to Comply with this Policy
- i. Western has entered into agreement with its affiliated institutions to ensure that TB, immunization, and workplace safety policies are enforced. If Western does not have proof of TB and immunization status then hospitals have the right to restrict students from all hospital-based learning situations. This also applies if students fail to comply with other health and safety policies. The student, therefore, will not meet learning objectives and the outcome will be a FAIL in all clinically-based courses. Other academic sanctions may be imposed on a case-by-case basis.
- e. Workplace Safety & Insurance Board Guidelines for Preclinical Placements
- i. The Workplace Safety & Insurance Board may cover students who are injured while completing unpaid work placements required as part of their education. The Ministry of Training, Colleges and Universities has issued the following guidelines to ensure that students are covered:
    1. ALL work-related injuries must be reported immediately to the Undergraduate Medical Education office, 519 661-2111, ext. 86480. This includes exposure to communicable diseases and exposure (i.e. puncture wounds) from the blood or body fluids of patients.
    2. You must complete an "Accident/Incident Investigation Report" at the time of your injury. It must be signed by you and your clinical teacher, providing the injury does not require immediate medical care.
    3. The student must report to affiliated institution's Office of Occupational Health and Safety (or equivalent) or if after hours to the Emergency Department for immediate first aid treatment and advice regarding follow-up with an appropriate physician.

The office of OHS will not itself provide that follow-up. Students must also report their injuries to their immediate supervisor and clinical teacher.

4. It is very important that the appropriate documentation be filed within 24 hours of the injury so that all injuries can be reported to the Ministry of Training, Colleges and Universities.
- f. Illness on Duty
    - i. Students who become ill while on duty in a clinical area should consult with their immediate supervisor about leaving the duty assignment and seeking medical assistance as necessary at the Hospital, Health Services or from their own physician. If the duty area is a general hospital, acute care may be rendered at the Employee Health Services of the hospital or, if after hours or on weekends, in the Emergency Department. Please report absences due illness as per the *Attendance Policy*.
  - g. Return to Work Health Assessments
    - i. Students who have been absent for three days or more because of an illness or injury must produce medical documentation to the Assistant Dean, Learner Equity & Wellness (Undergraduate) of their fitness to return to work. This documentation will be submitted to the affiliated institution's office of Health and Safety as necessary to comply with their policies.
  - h. Pregnancy/Parental Leave Program
    - i. In accordance with an emphasis on progressive services for our students and residents, the Schulich School of Medicine & Dentistry acknowledges the need for individuals to have special arrangements made during their educational program for the purpose of Pregnancy/Parental Leave. The Schulich School of Medicine & Dentistry strongly supports and encourages its students and trainees to take a full year for their Pregnancy/Parental Leave.
  - i. Western University Policy on AIDS Re: Health Sciences Faculties
    - i. Health Science Faculties will not seek to determine the HIV status of any student.
    - ii. In the event of voluntary disclosure of an HIV-positive status by a student, this information will be kept strictly confidential except on a "need-to-know" basis (i.e. information re: the HIV status of a student may need to be disclosed to clinical teachers so course modification might occur). The knowledge and consent of the HIV-infected individual will be obtained prior to the disclosure of such information within the faculty.
    - iii. The Dean of the Faculty concerned will appoint one member to act as Faculty Advisor on behalf of HIV-infected individuals within that Faculty. The name of the Faculty Advisor will be made widely known to staff and students. This Faculty Advisor will maintain confidentiality at all times and be neither required nor obliged to report the names of HIV-infected individuals to the faculty.
    - iv. HIV-positive students or faculty, under ordinary circumstances of clinical practice, will not be obliged to disclose their HIV status to patients or other clinical subjects. The usual standards of practice, (i.e. University Blood and Body Fluid Precautions) should be emphasized.
    - v. Clinical competency of students can be easily monitored. Students failing to meet minimal standards, who may be suspected of having symptoms due to HIV infection or AIDS, will be advised to seek medical attention,
    - vi. A mutually agreeable, knowledgeable physician will monitor the competency of students whose HIV status is known to the Faculty, and/or the Medical Officer of Health. Disclosure of medical information will be confidential between the student and physician, unless the student consents to a wider disclosure. In the event illness compromises that competency, this information may be relayed to the Medical Officer of Health without breach of professional ethics. Students with known HIV infection will also undergo the other types of routine Faculty evaluations of clinical competency.
    - vii. HIV-related health problems may interfere with the ability of graduates to obtain licenses to practice.

- viii. The Faculty will attempt to modify the program of any HIV-infected student who requests such modification. Students will be made aware that because of program modification they may not meet professional licensing standards.
- ix. The Faculty recommends/promotes and encourages the use of gear and equipment necessary for the employment of universal precautions in settings where staff, students or faculty might be exposed to body fluids of patients, experimental subjects, etc.
- x. During their training, students may encounter patients infected by HIV. All students will be required to provide care for such patients.
- xi. Students, staff, and faculty members who are occupationally exposed to infectious HIV in the clinical setting (excluding Western-Affiliated Teaching Hospitals) will be directed to readily accessible sources of medical attention and counselling.
  - 1. Students, staff, or clinical faculty having an occupational exposure to HIV at the Teaching Hospitals or other Western-affiliated health care facilities will be strongly advised to report to the Occupational Health Unit of that institution to obtain medical attention and counselling.
  - 2. Alternate sources of medical help (i.e. personal physicians, Student Health Services, Medical Office of Health) may be contacted in the event of occupational exposure to HIV.
- xii. The Faculty will not require the testing of patients or other clinical subjects for HIV antibodies in the case of accidental exposure of a student, staff, or faculty member to blood or other body fluids of such individuals. Any testing to be carried out on patients must be done with the informed consent of the patient.