

# STUDENT HEALTH POLICIES AND PROCEDURES

Student health forms (physical exam and immunization records) **ARE DUE TO THE** Clinical Director of Health Records by March 1st for those students admitted before January 1st, and no later than May 1st for those admitted after the first of each year.

Forms are to be returned to:

## Clinical Director of Health Records

Liberty University College of Osteopathic Medicine  
306 Liberty View Lane  
Lynchburg, VA 24502

It is important that each student verify that all forms are filled out completely and that they are dated and signed by the physician. Incomplete or unsigned forms will not be accepted. The form will be returned to the student. Such action does not change the due date for the documents and failure to meet the required deadlines **could result in the rescinding of LUCOM acceptance.**

Any requests for extension of the deadline should be addressed to the Clinical Director of Health Records.

**IMPORTANT:** LUCOM does not automatically waive immunizations or student health requirements. LUCOM is not responsible to secure or approve educational opportunities that are not in compliance with immunization policies.

Students will not be allowed any patient care activities until all required immunizations have been administered and proof of immunity is established, including but not limited to early clinical experiences, health care outreach events, international outreach trips, clinical rotations, etc.

Failure to begin clinical experiences as scheduled in the curriculum does not entitle the student to make up the missed experiences, could result in failure of the course, academic probation, or dismissal from the COM.

Regulatory, legislative, institutional, administrative authorities require that LUCOM students demonstrate immunization, immunity, or protection from multiple contagious diseases before being allowed to perform clinical rotations in the institutions utilized by the COM for the education of its students. Required laboratory evaluations and immunizations are subject to review and change annually based on recommendations from the Centers for Disease Control (CDC), the United States Preventive Services Task Force (USPTF) and other public health agencies. Students will be notified of any changes and will be required to comply with any mandated changes upon receipt of notice from LUCOM.

## Health Insurance <sup>1</sup>

All LUCOM students are required to obtain and maintain health insurance coverage while enrolled. A current insurance card and current summary of benefits validating proof of insurance must be submitted for each student annually before registration and before the beginning of class or rotations not less than 30 days before the start of the academic year. Students must provide proof of insurance prior to matriculation. During the student's clinical years, some insurance policies, such as Health Care Share Plans, may be considered as self-pay and may not be accepted by some clinical sites as valid health insurance. For this reason, Health Care Share Plans are not considered as approved health insurance for OMS-I through OMS-IV students. OMS-IV students that serve audition

rotations outside Virginia and who possess Virginia Medicaid insurance will need to see policies accepted in all locales. Failure of the student to maintain health insurance that meets the standards will result in disciplinary action for the student up to and including dismissal from the COM. Any medical costs incurred by students while in training are the sole responsibility of the student and his/her health insurance carrier.

## History and Physical Examination

Each student must have a comprehensive history and physical examination performed by a licensed allopathic or osteopathic physician or their designated Advanced Practice Provider after acceptance and before matriculation into LUCOM. The examination must be completed within the timeline detailed above. This examination must establish and the examining physician must verify that the student health status is adequate to meet the demands of the curriculum; that they are clinically free of contagious disease that would pose a risk to patients and that the student satisfies the health and technical requirements for admission, education, and graduation detailed in the student handbook. A signed copy of immunizations and lab reports demonstrating immunity and titers when applicable must be returned by the physician or APP to LUCOM by the posted deadline.

## Incident/Exposure Policy <sup>2</sup>

### Universal Precautions

Universal precautions is a concept which is common to all clinical settings. It assumes that any body fluids that you may be exposed to are infectious with entities such as HIV, Hepatitis, or other pathogens. It assumes that possible exposures could transmit the host's infection to the health care worker or student. By assuming that all patients have dangerous infections and all body fluids may be able to transmit dangerous infections, we take universal precautions to prevent such transmissions.

Universal precautions shall be practiced in the care of all patients.

Gloves should be worn:

- When touching blood, other body fluids, mucous membranes, or non-intact skin of all patients
- When handling items or surfaces soiled with blood or body fluids to which universal precautions apply
- For performing phlebotomy.
- In situations where the health care worker judges that hand contamination with blood or body fluids or mucous membranes may occur.
- For performing finger and/or heel sticks on infants and children.

Masks and protective eyewear or face shields should be worn by health care workers to prevent exposure of mucous membranes of the mouth, nose, and eyes during procedures that are likely to generate droplets of blood or body fluids requiring universal precautions. Gowns or aprons should be worn during procedures that are likely to generate splashes of blood or body fluids requiring universal precautions.

All health care workers should take precautions to prevent injuries caused by needles, scalpels, and other sharp instruments or devices during procedures; when cleaning used instruments; during disposal of used needles; and when handling sharp instruments after procedures. To prevent needle stick injuries, needles should not be recapped by hand, purposely bent or broken by hand, removed from disposable syringes, or otherwise manipulated by hand. After they are used, disposable syringes

and needles, scalpel blades, and other sharp items should be placed in puncture-resistant containers for disposal. The puncture-resistant containers should be located as close as practical to the use area. All reusable needles should be placed in a puncture-resistant container for transport to the reprocessing area.

## Exposure to Hazardous Body Fluids and Accidental Needle Stick<sup>3</sup>

Occupational exposure to blood borne pathogens may occur during preclinical labs as well as patient care activities. It is critical that LUCOM students understand the actions they need to take to protect themselves if such an exposure happens. To assist students in this process, LUCOM has developed the Incident/Exposure Report Form located on the LUCOM website under Academic Documents. Any student who sustains a needle stick or other potential exposure to blood or body fluids should immediately wash the affected area with soap and water. If the exposure involves the eyes or mucous membranes, they should be immediately flushed with copious amounts of water. Following irrigation of the affected area, the exposure should be immediately reported to the appropriate clinical/faculty supervisor. As supervisory faculty will vary based on the setting, students should refer to the Incident/Exposure Report Form which will provide additional guidance. Finally, all students involved in an occupational exposure must seek medical attention to ensure that appropriate medical care relating to the exposure is provided. This medical follow up is time sensitive and must occur within 2 hours if the exposure involves blood or other body fluids. The LUCOM Incident/Exposure Report Form provides students step-by-step guidance through these processes, including the acceptable medical care follow up for an incident or exposure. Please note that students must complete the Incident/Exposure Report Form and return it to the Office of Clinical Education within one business day of the exposure or incident.

As discussed above and on the LUCOM Incident/Exposure Report Form, timely medical follow up is essential. When reviewing the acceptable medical follow up options on the Incident/Exposure Report Form, it is important for all students to recognize that they are not employees of any hospital, clinic or practice where they are rotating and thus they are not covered under workman's compensation or the policies of the institution if they suffer an accident or injury. All LUCOM students are required to carry medical insurance to cover the expense of such an unlikely event and provide coverage for the laboratory testing and prophylactic medications that may be required. Students are responsible for all costs whether covered by their personal insurance or not. This includes copayments.

Medical care evaluation after an incident or exposure must occur in a professional setting as described in the Incident/Exposure Report Form and involves the establishment of a formal doctor-patient relationship and generation of a medical record that can be utilized by the student and their physician in any subsequent or follow up care that is required. This is protected health information and should not be submitted or reported to LUCOM.

Students are reminded that they are individually responsible for any charges that may occur as a result of evaluation and treatment. Some institutions will provide initial screening and treatment for students that are exposed on their campuses. In addition, institutional policy at hospitals and medical clinics may provide for testing of source patient blood to include rapid HIV and Hepatitis C testing. However, regardless of whether an institution provides this source testing, students are still required to obtain medical care consultation within the time frame described in the Incident/Exposure Report Form. Students are reminded

that HIV drug prophylaxis, when indicated, is time sensitive in a high-risk exposure.

Students must follow the policies and procedures for exposure to infections and environmental hazards and procedures for care and treatment after such exposures as outlined by the COM. Students receive education on these matters and general safety practices within the clinical environment through modules on topics such as, but not limited to, OSHA and Bloodborne Pathogens.

## Other Health Care Related Exposures or Injuries

In the course of clinical education, students are sometimes exposed to infectious diseases that require evaluation and/or treatment. An example of this is Pertussis, but there are others. If the exposure happens to an employee of the institution, Employee Health handles these situations. As students are not employees but visiting students, the local employee health office will not be able to assist in most cases. If a student becomes aware that they have been exposed to an infectious disease requiring further evaluation or treatment, they are required to fill out the Incident/Exposure Report Form. In so doing, they are required to immediately inform their clinical/faculty supervisor. They must contact the Office of Clinical Education and submit the Incident/Exposure Report Form within one business day. Students are required to seek timely medical care. If it is an emergency, they must be seen at the emergency department. If it is not an emergency, the student may be seen at the LU Student Health Clinic, by their personal physician, an urgent care center, or a walk-in clinic within 24 hours of becoming aware of the potential exposure. Occupational Health or Employee Health at a local clinical site can also be a potential resource. In the course of clinical education, students occasionally are injured. This may be the result of an accident or of workplace violence. If a student is injured, they are required to fill out the Incident/Exposure Report Form. In so doing, they are required to immediately inform their clinical/faculty supervisor. They must contact the Office of Clinical Education and submit the Incident/Exposure Report Form within one business day. They are also required to seek timely medical care. If it is an emergency, they must be seen at the emergency department. If it is not an emergency, the student may be seen by their personal physician, an urgent care center, or a walk in clinic within 24 hours. If the injury is the result of workplace violence, the student is strongly encouraged to be seen in the emergency department. The student is also to follow the direction of officials from the hosting institution.

Students are reminded that they are individually responsible for any charges that may occur as a result of evaluation and treatment.

<sup>1</sup> 9.11 Health Insurance

<sup>2</sup> 4.2 Security and Public Safety, 5.3 Safety, Health, and Wellness

<sup>3</sup> 9.11 Health Insurance