Admissions, Enrollment Management and Student Affairs
Operating Policy and Procedure

SON OP 60.095 – Blood Borne Pathogen Infection Policy for Nursing Students

PURPOSE
The purpose of this School of Nursing (SON) Policy and Procedure is to promote patient safety while providing risk management and practice guidance to blood borne pathogen infected nursing students.

REVIEW
The OP shall be reviewed by the Associate Dean of Admissions, Enrollment Management and Student Affairs by October 1st of each even numbered year (ENY), with recommendation for revision forwarded to the Dean of the School of Nursing. Final approval of the OP is provided by the Dean.

POLICY/PROCEDURE

1. General. This policy complies with the most current evidence contained within the SHEA (Society for Healthcare Epidemiology of America) and Centers for Disease Control (CDC) guidelines and recommendations for management of health care providers and student infected with Hepatitis B Virus, Hepatitis C Virus, and/or Human Immunodeficiency Virus.

2. Definitions.
   a. Blood borne disease: a disease caused by a microbial agent capable of being transmitted via contact with the blood of an infected individual. Most notably, this includes the human immunodeficiency virus (HIV), hepatitis B virus (HBV), and hepatitis C virus (HCV).
   b. Exposure prone procedures (EPP): Invasive procedures where there is the potential for direct contact between the skin (usually a finger or thumb) of the student and sharp instruments, needle tips, or sharp tissues (spicules of bone) in body cavities, wounds, or in poorly visualized, confined anatomical sites.
   c. Non-exposure prone procedures (NEPP): Routine infection prevention using Standard Precautions are adhered to at all times, procedures where hands and fingers of the student are visible and outside of the body at all times and procedures or internal examinations that do not involve possible injury to the health-care person’s hand by sharp instruments and/or tissues are considered NEEP. Example of such NEPPS:
      • Drawing blood.
      • Setting up and maintaining intravenous lines or central lines provided there has been no skin tunneling and the procedure is performed in a non-exposure prone manner.
      • Routine oral, vaginal or rectal examinations.
      • Minor suturing on surface of body.
      • Incision of external abscesses or similar lesions.

3. Expectations of Students.
   a. Students are required to comply with TTUHSC OP 75.11 TTUHSC Health Surveillance Program for TTUHSC Institutional Health and Infection Control Panel.
   b. Students are expected to be aware they will be required to participate in the care of patients with various communicable and infectious diseases including Hepatitis, HIV and AIDS.
   c. Students are ethically responsible to know their serological status with respect to blood borne pathogens and must report a positive test to the Associate Dean for Admissions, Enrollment Management and Student Affairs, who will inform appropriate SON and TTUHSC personnel based on a “need to know” basis, and as outlined in this policy.
• Confidentiality regarding a student’s health status will be maintained to the greatest extent possible.
• Disclosure of student’s health status to pertinent personnel may be necessary if there is reason to believe the infected student has declined or failed to follow the provisions of this policy with respect to notification of appropriate personnel or otherwise fails to respond within a reasonable amount of time to a SON recommendation in accordance with this policy.

d. Students are expected to be in a state of health such that they may competently fulfill SON curricular requirements, including patient care duties, without posing a risk to themselves or others.

e. Students are obligated to comply with Hepatitis B immunization policies and other immunization requirements as outlined by the TTUHSC Office of Institutional Health.

Students are required to receive the Hepatitis B vaccine series and test positive on subsequent quantitative serology titer. Further testing will be provided for students who do not respond to a second series of the vaccine.

f. Students are required to comply with any Hepatitis B, Hepatitis C and/or HIV testing reasonably requested by the TTUHSC Office of Institutional Health.

g. Students are required to use Standard Precautions (and additional precautions as appropriate) when engaging in the clinical care of patients.

h. Students are required to disclose any instance in which they are potentially exposed to a blood borne pathogen in a clinical setting and provide a blood specimen if indicated.

4. Expectations of the School of Nursing

a. The SON will provide education and training to all students regarding appropriate methods to prevent the transmission of communicable diseases, including blood borne pathogens, consistent with the Centers of Disease Control guidelines for standard precautions. Additional precaution procedures will be reviewed with individual students by the Office of Institutional Health on an as needed and case by case basis.

b. The SON will maintain confidentiality to the greatest extent possible regarding information disclosed by students concerning their serological status and disclose relevant student specific information only with appropriate consent or as otherwise outlined in this policy.

c. The SON will provide all students, upon admission, an **Exposure Control Badge**. This badge will provide information in regards to protocol for students in the event of an exposure. (Attachment A). This is to worn by each student along with the mandatory TTUHSC ID badge.

5. Nursing student exposed to a blood borne pathogens

a. Nursing students who are potentially exposed to a blood borne pathogen (potentially exposed nursing students) are required to seek nursing attention as soon as possible after the event as per TTUHSC OP 75.11 TTUHSC Health Surveillance Program for TTUHSC Institutional Health and Infection Control Program.

b. Potentially exposed nursing students are required to report and document the potential exposure event as per TTUHSC OP 75.11.

c. Potentially exposed nursing students are required to follow post exposure testing and treatment. This information, including testing of the source patient, is outlined in TTUHSC OP 75.11 and reviewed annually with students.

d. Each student is to follow the protocol as provided on the mandatory **Exposure Control Badge**. (Attachment A)
6. Nursing students infected with blood borne pathogens

a. Nursing students infected with a blood borne pathogen (infected nursing students) are professionally and ethically obligated to inform the Associate Dean of any blood borne infection.
b. Infected nursing students may pursue their studies only as long as their continued involvement in the curriculum does not pose a health or safety hazard to themselves or others.
c. Infected nursing students will have their condition reviewed and monitored by the Associate Dean in consultation with TTUHSC Institutional Health.
d. Infected nursing students may have their clinical duties or clinical exposure modified, limited, or abbreviated based on recommendations from TTUHSC Institutional Health and as outlined by current CDC guidelines, particularly as clinical duties may relate to the performance of exposure prone procedures and/or based on the status of the student’s blood borne infection (i.e. viral loads, etc.).
e. Infected nursing students are required to immediately disclose if he/she exposes a patient to their blood borne pathogen in a clinical setting. Pre-notification to patients is not required.
f. Infected nursing students have the right to appeal recommendations made by the Associate Dean by submitting, in writing, a proposed amendment to the recommendations and the rationale(s) supporting such amendment(s). The student may submit additional documentation from his/her personal physician or other healthcare provider(s) in support of their appeal.

1. Appeals must be submitted to the Office of the Dean within ten (10) business days of the student receiving written notification of the Associate Dean recommendations. A response to an appeal will be forwarded to the student within fifteen (15) business days of receipt of the written appeal.

   ▪ The Dean will review the student’s written appeal, the recommendation(s) of the Associate Dean, and all supporting documentation.
   ▪ The Dean will either issue a decision alone, or appoint an Appeals Committee comprised of three tenured faculty members to determine the outcome of the appeal, within ten (10) business days of receipt of the written appeal.
   ▪ The Associate Dean (or designee) will serve as an ex-officio member of the Appeals Committee.
   ▪ The Appeals Committee will be convened by the Associate Dean within ten (10) business days after appointment to consider the student’s appeal. This Committee shall base its decision upon the documentation submitted. The student may not appear in person individually, or by representative.
   ▪ The Chair of the Appeals Committee will provide the Dean with the Committee’s recommendation within ten (10) business days after the Committee convenes to consider the appeal.
   ▪ The Dean will review the recommendation of the Appeals Committee and issue a final decision within ten (10) business after receipt of the Appeals Committee’s recommendation.
   ▪ The decision of the Dean shall be final.

7. General guidelines for nursing students infected with blood borne pathogens

a. Students should not be prohibited from participating in patient care activities solely on the basis of their blood borne pathogen infection. Viral load burden may determine if a student should be restricted from performing certain exposure prone procedures in accordance with CDC guidelines.

b. Using Standard Precautions, an infected nursing student may perform routine physical assessments provided there is no evidence of open or healing wounds, or eczema on the student’s hands.

Resources:
1. CDC recommendations for the Management of Hepatitis B Virus Infected Providers and Students. MMWR / Vol. 61 / No. 3 July 6. 2012
3. SHEA Guideline for Management of Healthcare Workers Who are Infected with Hepatitis B Virus, Hepatitis C Virus and/or HIV Virus. Infection Control and Hospital Epidemiology. Vol. 31 / No. 3 / 203-232 March 2010


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ATTACHMENT A

EXPOSURE CONTROL
STOP ● WASH ● REPORT

Report incident to
Clinical Supervisor and Clinical Faculty

If incident occurs 8-5 Mon-Fri, notify
TTUHSC Office of Institutional
Health at: 743-3019
or Cell # 368-2647 ASAP.

If incident occurs after hours, week ends
or holidays notify the house supervisor of facility
where incident occurred ASAP and notify
TTUHSC Office of Institutional Health 24/7
806-368-2647

Make sure to obtain source patient’s blood
for
HIV, BSAG, and HepC
If source patient’s blood cannot be obtained,
you will be treated as an unknown and your
blood
will have to be drawn for HIV, BSAB, and
HepC

TTUHSC Office of Institutional Health will
perform all follow-up protocol and procedures
for exposures.