

Visiting Student Handbook

Drexel University College of Medicine

Academic Policies

Attendance

Missed time from Clinical Rotations

Daily attendance during Clinical Rotations is mandatory, and therefore time away from rotations is not permitted, except in the event of illness or emergency. Rarely, there may be a special circumstance that warrants an approved absence from a clinical rotation.

1. Acute illness or Emergency: In the event of acute illness or emergency requiring missed day(s) from clinical rotation, students must contact the Course Director and the patient care team by the start of the workday. If a student misses *two or more days* due to illness, a physician's note may be *required*.
2. Make-up for Excused Absences: All missed time from a clinical rotation will require make up. The Course Director will determine how and when missed clinical time will be made up. Make-up for missed time may include additional days, additional call and/or additional assignments.

Absences for Residency Interviews

Time away from fourth-year rotation assignments for the purpose of interviewing for residencies is permitted under the following conditions:

- A *maximum* of three (3) absences days in any four-week rotation are permitted for residency interviewing.
- The student is responsible for notifying the Course Director and Course Coordinator by email to obtain approval for such absences before they occur. When submitting requests to the Course Director and Course Coordinator, students must include their electronic/emailed interview confirmation in their correspondence.
- A Course Director has the prerogative to require make-up work/time for *any* absences taken from a rotation, including absences for residency interviews.

Guidelines and Expectations for Attire and Deportment

Attire

While in this institution and specifically in patient care areas or health care delivery settings, a student should be dressed professionally in appropriate attire. "Appropriate attire" is determined by societal convention and society's expectation of the medical profession. Students engaged in patient care must keep in mind that they are members of the medical professional community and are therefore obligated to maintain an acceptable professional standard. Good grooming and personal hygiene are essential for medical professionals in the health care setting.

Appearances that may potentially offend or distract patients can negatively impact the physician/patient relationship and ultimately, patient care. Examples of appearances that may potentially offend or distract patients include but are not limited to:

- Easily visible body piercing(s) (e.g., nose, lip, eyebrow, tongue)
- Unusual hair coloring or style
- Casual clothing (e.g., jeans, shoes that are not intact, clothing that is revealing or ill-fitting)
- Unwashed or unkempt appearance
- Word slogans on clothing or accessories other than professional identification (e.g., cause/position buttons, religious jewelry/buttons, etc.)

Depoartment

Students are expected to behave at all times in a manner that is befitting of the medical profession. As with attire, it is easier to say what not to do. It is inappropriate to be rude or disrespectful to *anyone*, including faculty, residents, nurses, staff, students and/or patients. Expectations of students are the same as those of all health care providers; to recognize that everyone is different, to be sensitive to individual differences, and to avoid being condescending to anyone. Except for children, it is generally improper to call patients or their parents by their first names. It is proper to confer respect by use of surname, not first name.

A manner of respect for all individuals, recognizing the rights of patients, is fundamental to a physician's professional conduct. Arrogance, superiority, rudeness and/or disdain for the idiosyncrasies that often appear with illness are manifestations of unprofessional and unacceptable behavior. It is a professional obligation to respect the privacy of patients and the confidentiality of their records. Discussion of patients' problems in a public setting (e.g. the elevator, the shuttle or the cafeteria) constitutes a serious breach of patient rights.

Individual Course Grade Policies

Grades are determined by objective and subjective measures including examination performance, participation, and faculty assessment of the interpersonal and professional skills essential to the practice of medicine.

Evaluation Policies

Students cannot be evaluated in any component of any College of Medicine course by an individual with a potential conflict, including spouses, relatives, and healthcare providers.

Clinical Evaluations

Visiting students must supply an evaluation from their HOME Institution to the Course Director upon starting the clinical rotation. The Course Director will complete the evaluation at the conclusion of the rotation and return it to the Home Institution of the student for incorporation into the student transcript. Students must "meet expectations" in competency areas in order to Satisfactorily pass a course.

Clinical Rotation Policies

Medical Student Clinical Patient Notes

Medical students are required to write clinical notes for educational learning purposes. Medical students should be encouraged to write notes in charts when permitted per the policy of the hospital. Whether in electronic or paper form, any written clinical note by a student will require co-signature from an Attending, Resident or Intern. Any note written by the student that is not to be a permanent part of the patient record must remain on paper and destroyed in the approved manner.

Clinical Workload/Duty Hours

Student work hours are limited to a maximum of 80 hours per week on clinical rotations. Students usually follow their resident's schedule during SubInternships and Clinical Electives.

Clinical Site Policies and Guidelines

All students are expected to read and understand these policies prior to rotating at clinical sites. Failure to abide by these policies may result in the student's removal from the clinical site, withholding of the student's evaluation or final grade, and other academic or disciplinary sanctions.

Individual Clinical Site Policies

Students are expected to comply with all applicable rules, regulations, policies and procedures of the clinical site. Failure to do so may result in the student's removal from the clinical site or other academic or disciplinary sanctions.

Acceptable Use of Network and Information Technology Resources

Students at each clinical site may be granted access to the hospital network at that site. Such access, both within the hospital itself and in student housing and other areas, is subject to the same Acceptable Use provisions that apply to use of the Drexel and DrexelMed networks (<http://drexel.edu/it/about/policies/policies/01-Acceptable-Use/>). In addition, each clinical site may have additional policies governing the use of their network and other information technology resources. Clinical site policies may impose additional restrictions on the use of their network, including limitations on access to various internal and external sites. Using or accessing the clinical site's network in violation of any clinical site's policy or without proper authorization or attempting to access restricted sites is strictly prohibited and may result in disciplinary action or loss of network privileges.

Issued/Borrowed Items

Students are responsible for all items that are issued to them or borrowed from the institution. The student is responsible for the replacement value of any item not returned at the end of the rotation. This includes, but is not limited to items such as beepers, keys, identification cards, and textbooks. The student's evaluation may be withheld until all items are returned.

Behavioral and Professionalism Standards

Students are expected to meet the following behavioral and professionalism standards:

1. Trustworthiness

- a. Act at all times in an ethical, responsible, and dependable manner
- b. Conduct oneself in accordance with the Drexel University College of Medicine Honor Code
- c. Maintain an honest approach to all activities

2. Reliability and Responsibility

- a. Complete all assigned tasks in a timely and responsible manner
- b. Arrive on time for scheduled activities and notify appropriate individual for missed activities
- c. Attend classes and other academic activities for their full duration and prepare appropriately for them
- d. Respond promptly to faculty or administration when contacted personally or electronically
- e. Admit errors and accept responsibility for one's own actions
- f. Respond appropriately to others' unprofessional or unethical behaviors
- g. Demonstrate self-motivation and accountability for one's own learning

3. Self-Awareness

- a. Demonstrate ability to identify and address areas of deficiency in one's own learning performance
- b. Accept supportive and constructive feedback and modify behavior accordingly
- c. Project a professional image through manner, dress, and communication (including electronic)
- d. Maintain composure during difficult interactions
- e. Monitor and compensate for personal biases that may interfere with professional duties
- f. Request help from appropriate support resources when needed
- g. Attend to one's own well being

4. Team-Building and Communication

- a. Support communication, trust and accountability among team members
- b. Acknowledge the value of other members of the health care team in providing patient-centered care
- c. Treat fellow students, co-workers, faculty, administrators and staff with respect and sensitivity
- d. Provide supportive and constructive feedback to peers when appropriate
- e. Manage conflicts in a collegial manner

5. Patient-Centered Care

- a. Meet all clinical responsibilities
- b. Demonstrate respect, integrity, compassion and responsibility toward patients, even under difficult circumstances
- c. Refer to patients in a respectful and non-judgmental manner
- d. Maintain confidentiality of patient information
- e. Acknowledge limits of personal knowledge and skills within clinical setting
- f. Take on extra work when appropriate for the benefit of the patient
- g. Ensure that coverage for patients is provided for patients when unable to fulfill

responsibilities

The process of medical education includes instruction in the knowledge, skills, and attitudes necessary to perform as competent physicians. While factual information and clinical skills are evaluated by examinations, and observations in the clinical setting, evaluation of behaviors, attitudes and professional development are less systematic and generally based on observed encounters, compliance with assignments, timeliness, and other less structured methods of evaluation. The professional development of medical students is an essential component of a complete medical school experience. Students and faculty have a responsibility to acknowledge incidents of exceptional professionalism as well as lapses in professionalism. It is important to recognize that in acknowledging such incidents that the actions and not the individual are being observed and noted.

University Policies

Building Access

All University buildings and residences are the private property of Drexel University. The University reserves the right to restrict access to University students, faculty, employees, and other persons authorized to enter University building or property.

Entrance to all buildings requires valid University issued student or employee photo identification badges to enter at all times. Security Officers are posted near entrances of all buildings to check identification badges and direct visitors. Security reserves the right to request identification of all persons entering the property.

The University reserves the right to change the hours of operation and building access with notification to students and staff. Questions concerning building access should be directed to the Security Liaison office, at Queen Lane, 215-991-8132.

Weapons Policy

Students at the College of Medicine are required to abide by the University's weapons policy, which can be found at <http://drexel.edu/publicsafety/police/policing/#WP>.

Alcohol and Drug Policy

The possession and/or use of narcotics or drugs, other than those medically prescribed, properly used, and in the original container is prohibited.

Providing a space for the consumption of narcotics or drugs is prohibited. The distribution and/or sale of narcotics or drugs is prohibited. Off-campus possession, use, distribution, or sale of narcotics or drugs is inconsistent with the University's policies and goals, and is therefore prohibited.

Drexel University's policy regarding alcohol is consistent with the laws of the Commonwealth of Pennsylvania. The consumption, distribution, or service of alcoholic beverages must be in compliance with the Pennsylvania liquor and crime codes, which define the lawful consumption and service of alcohol and prescribe sanctions for violations. The consumption, distribution, or service of alcoholic beverages must also comply with University regulations and policies.

Violations of the University alcohol policy include, but are not limited to:

- Possession, use, or distribution of alcohol by underage persons.
- Disruptive conduct due all or in part to being under the influence of alcohol.

- Providing alcohol to underage persons or providing a space for the consumption of alcohol by underage persons.
- Possession of an open alcohol container in a public area regardless of the individual's age.
- Possession or use of bulk containers on campus including, but not limited to, kegs, beer balls, or any other object that would promote binge drinking.

The College of Medicine expects that all of its students, whether on or off campus, will abide by the University's regulations concerning alcohol and other drug use. In addition, concerns about alcohol or drug use by a student may result in a referral to Pennsylvania's Physicians Health Program (PHP) to determine whether assessment and/or monitoring may be necessary.

Discrimination, Harassment and Sexual Assault

Drexel University College of Medicine is committed to providing an environment for all employees, faculty and students that is free from discrimination and harassment on the basis of race; color; sex (except where sex is a bona fide occupational qualification); sexual orientation; gender identity; religion; creed; national or ethnic origin; citizenship status; age; disability (or association with an individual with a disability); and status as a special disabled, Vietnam era or other eligible veteran. This prohibition applies equally to all faculty, staff and students, to all other persons on the premises subject to College control and to those engaged to further the interests of the College.

Discrimination is defined as unfavorable or unfair treatment of a person or class of persons as compared to others not in the protected class because of a factor, such as, race, color, sex (except where sex is a bona fide occupational qualification), sexual orientation, gender identity, religion, creed, national or ethnic origin, citizenship status, age, disability, veteran status or reprisal for opposition or complaints about discriminatory practices or participation in an investigation.

Harassment is defined as verbal or physical conduct that denigrates or shows hostility or aversion toward an individual on the basis of race, color, sex (except where sex is a bona fide occupational qualification), sexual orientation, gender identity, religion, creed, national or ethnic origin, citizenship status, age, disability, or veteran status and that has the purpose or effect of creating an intimidating, hostile or offensive employment or educational environment; or has the purpose or effect of unreasonably interfering with an individual's employment or academic performance.

Sexual Harassment is a form of sex discrimination recognized under Title VII of the Civil Rights Act of 1964, which prohibits sex discrimination in the terms and conditions of employment and Title IX of the Education Amendments, which prohibits sex discrimination in educational programs and activities. Sexual harassment involves unwelcome sexual advances, requests for sexual favors or verbal or physical conduct of a sexual nature. It is often imposed upon a person in an unequal power relationship through the abuse of authority. Central to this concept is the use of implied reward or threat of deprivation that interferes with the academic or work effectiveness of the victim.

Sex Discrimination and Sexual Harassment

Title IX of the Education Amendments of 1972 ("Title IX") prohibits discrimination on the basis of sex in any federally funded education program or activity. Sexual harassment, which includes sexual violence, is a form of sex discrimination.

Drexel University is committed to providing an environment free from discrimination based upon sex. The University provides supports and resources to students, faculty, and professional staff to address concerns related to sex discrimination and has appointed Michele Rovinsky-Mayer, Associate Vice President, Office of Equality and Diversity, as its Title IX Coordinator. Michelle can be reached at 215-895-1403 or mrovinsky@drexel.edu

Any student who believes that he or she has been discriminated against on the basis of sex, in violation of Title IX, may also file a complaint with the Deputy Title IX Coordinator for DUCOM students, Amy Fuchs, M.D., Senior Associate Dean for Student Affairs. Dr. Fuchs can be reached at 215-991-8221 or Amy.Fuchs@DrexelMed.edu

Sexual Assault

Drexel University seeks to foster a safe and healthy environment built on mutual respect and trust. At the very basis of the University's mission is the recognition of the essential dignity and worth of each member of our community. Sexual assault is a very serious violation of these principles and will not be tolerated in any form. The University encourages all members of its community to be aware of the trauma caused by sexual assault and challenges its members to work together to prevent its occurrence.

Drexel University provides support for victims and urges victims to seek assistance using any appropriate resources. The University handles complaints of sexual assault with due regard to the parties' concern of confidentiality. If occurrences of sexual assault pose a general threat to the University community, Drexel University will take affirmative steps to notify students, faculty and staff of the potential danger.

If you have been sexually assaulted:

- Immediately contact the Department of Public Safety at (215) 895-2222 for assistance. You may also dial 911. The DUCOM Student Deputy Title IX Coordinator is also available to assist you.
- Do NOT bathe, shower, or clean up the crime scene. While this may be difficult, it is important to preserve any potential evidence if you decide to press charges.
- Seek medical attention immediately
- For comprehensive information about reporting and resources for sexual assault please refer to the Sexual or Gender-Based Harassment webpage on Drexel University's website (<http://drexel.edu/oed/reporting/Title-IX/>)
- Remember that you are not alone!

Student Mistreatment

It is the policy of the Drexel University College of Medicine that student mistreatment, harassment or abuse will not be tolerated. Student abuse may be verbal, psychological or physical. It includes, but is not limited to, sexual harassment, discrimination due to age, racial and ethnic background, religion, national origin, or disability. It is understood that all personnel will treat students in a collegial and professional manner.

Student abuse and sexual harassment are best defined functionally. Student abuse includes but is not limited to treating students in a harmful, injurious or offensive way; attacking in words;

speaking insultingly, harshly or unjustly to or about a student¹; reviling or demeaning a student; undermining the self-esteem or confidence of a student. Abuse and harassment create a hostile environment in which to work. It is understood that incidents of abuse or harassment may cover a spectrum from flagrant to ambiguous and subjective. The abuser may be a member of the faculty, a resident, a nurse, another student, a member of administration, a hospital employee, or even a patient.

The mechanism of reporting and investigating incidents of student abuse is described below. An algorithm outlining the steps is included. The system and the plan for its implementation are designed to protect students from retaliation and to protect those charged with abuse from unfair accusations. The names of the student, the reporting individual and the alleged abuser will be held in strict confidence on a need-to-know basis.

There are many avenues for student reporting and assistance for instances of gender discrimination, sexual harassment and sexual assault as outlined in the respective sections above. The College of Medicine provides additional mechanisms for reporting of other types of student mistreatment. An incident of abuse may be reported by the student or by an individual who witnessed the incident of abuse. An incident can be reported directly to the College of Medicine's Early Response Group, led by the Vice Dean for Academic and Educational Affairs. The Early Response Group will investigate reports of student mistreatment.

An incident can be reported to the Associate Dean for Student Affairs for discussion and referral to the Early Response Group. Reports made to a trusted faculty member, a class officer, a member of academic administration, or a close friend may be reported to the school's Early Response Group or to the Associate Dean for Student Affairs who will refer the case to the school's Early Response Group.

The College of Medicine's Early Response Group will gather information on the incident from the student, from any known witnesses to the incident and from the accused offender. The communication and interaction involved in this process may lead to resolution of the incident. If the incident is resolved, no further action need be taken. The Early Response Group will follow up on the incident six to eight weeks after the report to assure that there has been no retribution.

An algorithm outlining the mechanisms of reporting and investigation of reported incidents of student abuse is described below. The system and the plan for its implementation are designed to protect students from retaliation and to protect those charged with abuse from unfair accusations. The names of the student, the reporting individual and the alleged abuser will be held in strict confidence on a need-to-know basis.

Guidelines for the Reporting and Handling of Incidents of Medical Student Mistreatment: Reporting

Student mistreatment may be reported by the student or by an individual or group who witnessed the incident of abuse. Incidents can be reported to one of the following:

- The Early Response Group
- Associate Dean for Student Affairs (Students who need to speak with the Associate Dean for Student Affairs urgently can call the Student Affairs Emergency Hotline at 215-991-8184)
- Vice Dean for Educational and Academic Affairs
- College of Medicine On-Line *Anonymous* Reporting System for Unethical/Unprofessional Behavior: <http://webcampus.drexelmed.edu/professionalism/IncidentReport.asp>
- A Trusted Faculty Member (Reports incident to the Vice Dean, the Associate Dean for

- Student Affairs, or The Early Response Group)
- A Friend (Reports incident to a faculty member, an Associate Dean or the Vice Dean.)

If you experience or witness mistreatment or unethical behavior and need to speak with someone urgently and confidentially, call the Student Affairs Emergency Hotline at 215-991-8184.

Investigation of Reports

Reports of Student Mistreatment are investigated by the Early Response Group.

The Early Response Group:

- Gathers information from student, others, the accused.
- Notifies Legal Counsel, as it judges the need.
- Facilitates resolution, whenever possible.
- Requests a remediation plan in instances where student mistreatment is confirmed. This may include individual faculty education, remediation and/or counseling.
- Conducts follow-up assessment 6-8 weeks after the process to determine if there has been any retribution to the student.
- In the strictest confidence, all reported incidents of abuse will be documented by the Early Response Group, including information regarding verification and resolution.

If there is no resolution...

The Early Response Group:

- Confers with Legal Counsel
- Gathers additional information, as needed
- Reports essentials of the case to the Dean for appropriate intervention

Health Policy, Disease Surveillance, and Clearances for Students

Criminal Background Checks and Fingerprinting Requirements

Please be sure to allow time for all required clearance to be processed prior to any scheduled rotation. **Documentation of all clearances must be available on VSAS no later than two weeks prior to any scheduled rotation start date.** Below are directions for the four separate clearances required by DUCoM.

1. PENNSYLVANIA STATE CHILD ABUSE CLEARANCE

- Apply through the Child Welfare Portal at <https://www.compass.state.pa.us/cwis/public/home> (do NOT apply by mail)
- The form must be completed in its entirety and will require an \$8 payment (subject to change)
- On the form, you will check “School Employee Not Governed by Public School Code” – you may not select Volunteer

- The verified form will available *only to you and available only online*
- Documentation must be uploaded to VSAS and assigned to your DUCoM application.

The Child Abuse Clearance report must be completed within two years of a scheduled rotation's end date, it cannot expire mid-rotation (i.e., if your rotation ends 9/1/2017, you must have completed the child abuse check no earlier than 9/2/2015). The complete report must be uploaded to VSAS no later than two weeks prior to your scheduled rotation start date.

2. FBI FINGERPRINTING CLEARANCE

Cost will vary depending on method used

For any student that is located in Pennsylvania, you must be fingerprinted in Pennsylvania. You must register through IdentoGo and you must use the Digital Fingerprinting system as indicated below:

Step 1

- Go to the Pennsylvania IndentoGo site: <https://www.identogo.com/locations/pennsylvania>
- You will choose "Digital Fingerprinting"
- Enter the following Service Code: 1KG738
- You will Schedule or Manage Appointment and follow the instructions

Step 2

- Go to an IdentoGo location of your choice and be fingerprinted
- Details of what is required is on the website
- Estimated turnaround time for Digital Fingerprinting using IndentoGo is 2 weeks

For Students Outside of PA:

Students outside of PA can travel to PA (suggested if you are close to the PA border) or mail their ink cards to IdentoGo to be processed. Estimated turnaround time is a minimum of eight weeks for mailed ink cards.

- Go to the Pennsylvania IndentoGo site: <https://www.identogo.com/locations/pennsylvania>
- You will choose "Digital Fingerprinting"
- Enter the following Service Code: 1KG738
- You will Submit A Fingerprint Card by Mail and follow the instructions
- Estimated turnaround time is a minimum of eight weeks for mailed ink cards.

Students also have the option to research a company within their state that offers FBI Fingerprinting service if the student is not currently located within Pennsylvania. This is the responsibility of the student, DUCoM does not have information regarding which service each state uses.

There is no requirement as to where you have the fingerprinting done, but it must include *arrests with final dispositions*.

The FBI Fingerprinting Clearance report must be completed within 60 months of a scheduled rotation's end date, it cannot expire mid-rotation (i.e., if your rotation ends 9/1/2018, you must have completed the background check no earlier than 9/2/2013). The complete report must be uploaded to VSAS no later than two weeks prior to your scheduled rotation start date.

3.a. NATIONAL CRIMINAL BACKGROUND CHECK (CBC)

- All students must complete a national criminal background check (CBC), a local police check is NOT accepted, to meet DUCoM requirements.
- This is often indicated on your VSAS profile by your school OR you can upload the complete report to VSAS and assign to your DUCoM application.

The National CBC report must be completed within 24 months of a scheduled rotation's end date, it cannot expire mid-rotation (i.e., if your rotation ends 9/1/2018, you must have completed the background check no earlier than 9/2/2016). The complete CBC report must be uploaded with the PATCH (see 3b) OR your school must update the VSAS Verification Question #15 on VSAS no later than two weeks prior to your scheduled rotation start date.

If you need to complete a CBC, below are instructions to complete a national criminal background check through Certiphi Screening, the company used by Drexel University College of Medicine. You are NOT required you use this company, but it is an option.

Instructions:

1. Click the link or paste it into your browser: <https://applicationstation.certiphi.com>
2. If this is your first time using the Application Station site then please click "Sign Up" to create an account. Once your account has been created please click "Log In". If you already have an account then you can click "Log In" right away.
3. Enter your Username and Password.
4. Enter the Code: < **DREXELCBC** > in the Application Station Code field.
5. Follow the instructions on the Application Station web site to complete the application.

Contact Information:

If you have technical issues visiting the Application Station site, please contact Application Station Support Team at 888-260-1370 EXT 2006.

3.b. PENNSYLVANIA STATE POLICE CRIMINAL HISTORY CHECK (aka PATCH)

The Pennsylvania Access to Criminal History form must be uploaded along with the Criminal Background Check. **A PATCH is required even if you have a completed a National CBC.** PATCH is required once every 60 months.

Notes for successful completion of this form:

- Apply through the ePatch portal at: <https://epatch.state.pa.us/Home.jsp>
- The form must be completed in its entirety and will require an \$22 payment (subject to change)

- You may *not* select the Volunteer option
- When prompted, please select “other” as the reason for the check
- You need to retain the appropriate information so you can log back in and retrieve your results
- You need to log back in 24-72 hours after you submit your information to retrieve your results (you will be charged an additional fee if you request a mailed or notarized copy; neither is necessary or required)

Once the results have been retrieved by you, you must upload the one page report along with the Criminal Background Check to VSAS and assign to your Drexel University College of Medicine application.

Disease Surveillance and Immunization Requirements

Drexel University College of Medicine follows the recommendations of the AAMC and asks that Visiting Students complete the AAMC Standardized Immunization Form and submit this at the time of the application. It is required that all surveillance must be performed within one year of the completion date of the anticipated clinical rotation (i.e., if your rotation ends 9/1/2017, you must have completed the immunization/surveillance testing no earlier than 9/2/2016).

Influenza Vaccination

All medical students are required to be vaccinated **yearly** with the seasonal influenza vaccine. Documentation of vaccination must be submitted to the Office of Immunization and Surveillance for any student rotating after October 15th each year.

If there is a medical contraindication to influenza vaccination, documentation including the specific contraindication to vaccination is required from the student’s health care provider.

Training and Verifications

Through the VSAS application process a student’s HOME Institution will be asked to verify the following Trainings have been completed in compliance with their own guidelines:

- Good Academic Standing
- OSHA Safety Measures and Infection Control
- Current BLS
- Mask Fit Test
- Medical Liability and/or malpractice insurance to be covered by the HOME Institution
- Personal Health Insurance

Blood and Body Fluids Exposure

Definition of Occupational Exposure

- Exposure to blood, tissues, visibly bloody body fluids or other body fluids to which universal precautions apply (i.e. semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, peritoneal fluid, pericardial fluid, and amniotic fluid)
- Modes of exposure:

- Percutaneous injury: Penetration of skin by needle or other sharp object that was in contact with blood, tissue, visibly bloody fluids or other body fluids as listed above.
- Mucous membrane exposure: Contact of mucous membranes (eyes, nose, or mouth) with blood, tissue, visibly bloody fluids or other body fluids as listed above.
- Non-intact skin exposure: Contact of non-intact skin (e.g. chapped, abraded, dermatitis, open wounds) with blood, tissue, visibly bloody fluids or other body fluids as listed above.
- Bite: A human bite sustained by a healthcare worker from a patient, co-worker or visitor.

If you believe you have had an Occupational Exposure:

1. WASH.

- Skin exposures (intact or non-intact): Immediately wash the area with antibacterial soap and water.
- Small wounds and punctures: Cleanse thoroughly with alcohol-based skin disinfectant.
- Mucous membrane exposure: Flush the area with copious amounts of water.

2. REPORT IMMEDIATELY. Report the incident to *all* of the following:

- Your immediate supervisor (resident and/or attending)
- Director of Medical Education at affiliate site
- Your Home Institution Office of Student Affairs
- Fill out the Appropriate Incident Report
- ***NOTE: Reporting should not prevent you from seeking immediate medical care.***

3. SEEK **IMMEDIATE** MEDICAL EVALUATION. **DO NOT WAIT:**

- Visiting students: Go immediately to the Employee Health Department or the Emergency Department of the hospital where you are working. During regular working hours [usually 8 am-5pm Mon-Fri] you will usually be evaluated in the Employee Health Department or its equivalent. During other hours evaluation will usually be in the Emergency Department. However, students should consult the exposure policy of the specific hospital for specific instructions and those instructions of your Home Institution.
- Identify yourself as a medical student with an exposure. You are not an employee of the hospital.
- Have the name and medical record number of the patient involved in the exposure, if available.
- Baseline testing and immediate treatment may be necessary for exposure to fluids or tissue from patients with known or suspected HIV or Hepatitis infection. If it is determined that HIV post-exposure prophylaxis is indicated, antiretroviral medications should be started as early as possible after an exposure (ideally *within one to two hours*). **DO NOT WAIT** to seek medical evaluation.
- Provide your insurance information and **do not** allow yourself to be submitted to Workman's Compensation.
- Obtain appropriate referrals as required by your insurance company (it will be too late if you wait for Workman's Comp to turn you down). You are responsible for knowing your insurance company's policies regarding provider notification.

- Retain your Explanation of Benefits (EOB) when you receive it from your insurance company. Always keep copies for your records.

4. FOLLOW-UP.

- Get copies of all testing, assessments, and recommendations (This should include results of the source patient's testing).
- Follow-up care (including follow-up testing, monitoring of medications, etc.) can be coordinated through your own physician, your Home Institution Student Health, or through the hospital where the exposure occurred. Regardless of where you elect to have care rendered, your medical insurance will be billed and you will be responsible for co-payments or services that are not covered.

5. All HIV testing and information processing in Pennsylvania hospitals will adhere to PA Act 148 as well as applicable federal laws.

Honor System

Patient Care Standards of Conduct

The guiding ethical principles of patient care include respect for patients as persons, protection of patient autonomy and elevation of patient welfare above all other concerns. These require treating all patients with compassion and dignity, assuring informed consent and shared decision-making, protecting patient privacy and confidentiality in speech, writing and electronic communication all uses of digital communications and electronic medical records. Social justice is another guiding ethical principle that is expressed in the commitment to advocate for patients who are socially vulnerable, navigation of social and cultural differences to deliver optimal care, and also to steward limited healthcare resources. Trust is the foundation of the physician-patient relationship.

Honesty in communication and documentation of the clinical record is essential to that trust. Medical records are legal documents and under no circumstances should false information be recorded, items entered of which the student has no direct knowledge or records altered.

Promoting patient welfare requires physicians to promote a culture of safety, improve quality of care and work as an effective member of the interdisciplinary medical team, bringing respect and empathy to all professional and inter-professional interactions. It also requires physicians to maintain appropriate boundaries in professional relationships and manage conflicts of interest. Patient welfare necessitates honesty and transparency when medical error occurs, and also demands appropriate response to witnessing unethical or unprofessional behavior of a faculty member, physician, other healthcare provider, or medical student.

Personal Standards of Conduct

Personal misconduct includes, but is not limited to, any violation of federal, state, local, or Drexel University rules and regulations, as well as complicity in violating those rules and regulations. Moreover, medical students and physicians are expected to behave in a manner befitting of members of the community of medical professionals endowed with the trust and respect of society. The public conduct of a medical student or physician, including online presence and communications through social media, reflects upon that individual and also upon our academic community and the medical profession as a whole.