

COLUMBIA COLLEGE OF NURSING, INC.**TITLE**

Clinical: Health Requirements

POLICIES AND PROCEDURES

Date Issued: 09/83
Date Revised: 11/01, 08/02, 08/03,
08/04, 07/09, 08/10,
08/11, 08/12
Last Reviewed: 08/07, 08/08, 07/14,
08/15, 08/16, 08/17

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All students must be in good health and able to carry out the functions of a professional nurse (See Technical Standards for Admission to/Progression in the Nursing Program policy). Beginning with the first clinical nursing course (NUR 331) in the junior year, the student must:

- I. Complete an admission physical examination as directed by the College. Procedure for examination will be provided by the College, prior to the start of the first clinical nursing course (NUR 331).
- II. Complete an Immunization Record

Immunization records are required of all students at the time of admission physical examination. Required immunizations include:

- A. Documentation of rubella (German measles) immunity is required of students. If no documentation is provided, an immunity screen will be drawn to determine serologic immunity. Documentation consists of a record of having received two (2) doses of each vaccine on or after the first birthday, or record of laboratory evidence of immunity. Non-immune students will be given the MMR immunization.
- B. Documentation of mumps immunity is required of students. If no documentation is provided, a mumps immunity screen will be drawn to determine serologic immunity. Documentation consists of a record of having received two (2) doses of live vaccine on or after the first birthday, or record of laboratory evidence of immunity. Non-immune students will be given the MMR immunization.
- C. Documentation of rubeola (measles) immunity is required for students born during or after 1957. If no documentation is provided, a rubeola immunity screen will be drawn to determine serologic immunity. Documentation consists of a record of having received two (2) doses of live vaccine on or after the first birthday, or a record of laboratory evidence of immunity. Non-immune students will be given the MMR immunization.
- D. Documentation of one time doses of tetanus, diphtheria and pertussis vaccine, and then a tetanus booster is required every 10 years.
- E. Varicella (Chicken Pox) immunity will be assessed at the admission physical examination. Students who have not had two (2) doses of the vaccine (4 weeks apart) will be tested for serologic immunity through a Varicella screen. Non-immune students are required to be vaccinated to take part in clinical.
- F. Because of the nature of nursing and risk for exposure to blood or body fluids, students will be offered Hepatitis B immunizations. Students who refuse the vaccine are required to sign a declination form, which will be filed in their student health record. Students who initially decline may request the vaccine at a later date while enrolled in the CCON Program.

- G. Seasonal flu vaccinations will be required of all students who wish to participate in clinical experiences. Students must provide medical documentation of an annual influenza vaccination. Annual influenza vaccination is the most effective method for preventing influenza virus infection and its complications. Routine influenza vaccination is recommended for all persons aged ≥ 6 months that do not have contraindications to vaccination. Students who decline due to medical or religious reasons must submit valid documentation. Valid documentation includes completion of the *Request for Medical Exemption from Influenza Vaccination form* by the student's primary care physician.

III. Undergo Tuberculin Skin Testing

All students must undergo a two-step tuberculin skin test (TST) (PPD intermediate strength) upon admission to the program. Students with a documented zero (0) mm induration TST within the past 12 months only need one additional TST done within 90 days of starting the program. A QuantiFERON[®]TB Gold test completed in the past 12 months is also accepted. Subsequently, students need a TST or QuantiFERON[®]TB Gold test annually. Students with a previous history of a positive tuberculin skin test must submit a chest x-ray completed within the year preceding clinical courses, and they must complete a yearly Signs and Symptoms of Tuberculosis Form.

IV. Complete the Background Information Disclosure Form

There may be additional tests required by specific agencies in which students have clinical experiences. Students will be notified by the College when additional tests are requested by these agencies.

V. Undergo a Drug Screen

All students will undergo a 10-panel urine drug screen prior to final acceptance into the Program. A drug screen may be required at other times throughout the Program. Students with a positive drug screen may be subject to rejection of their application or dismissal from the Nursing Program. Students with a positive drug screen will not be allowed to participate in clinical.

VI. Submit Annual Health Status Declaration

All students will be required to submit the *Student Affirmation Form* biannually. This declaration is an acknowledgement by the student that to the best of their knowledge their health status is unchanged.

VII. Report Any Medical Conditions Requiring Immediate Student Clinical Restrictions

Students are required to notify their clinical instructor and the Associate Dean of Academic Affairs of any sudden health changes or injuries, prior to their next scheduled clinical day. Evaluation of student ability to safely continue in clinical will be made on an individual basis. Some examples may include, but are not limited to, casts or braces on the leg or foot or arm. Students with leg casts or braces will be evaluated based upon their ability to provide safe patient care. Cast or braces on the arm will not be allowed because of student's inability to properly wash their hands.

Documentation of these requirements must be on file with the Academic Affairs Office at CCON, Inc. Failure to satisfy these requirements will jeopardize student participation in clinical course work. Any condition that may potentially impair a student's ability to carry out his or her responsibilities in the clinical setting must be reported to their clinical instructor and the Associate Dean of Academic Affairs. The student will need to have their healthcare provider complete the *Health Condition Certification Form* certifying that the student is able to fulfill all responsibilities and, that in so doing, the student is not endangering him/herself, fellow students, faculty, and/or clients/patients.

Reporting of Illness

A student who is unable to report for clinical should follow the procedures of that institution, as described by the instructor for the unit.

A student who becomes ill on the clinical unit or appears to have a condition that might be communicable or infectious should be sent to Occupational Health Services at their clinical site for evaluation, or seek prompt medical care if at a community site. When indicated, laboratory studies may be completed, and the student may be required to remain off the clinical unit, pending those laboratory results.

The instructor must be notified each day the student is absent due to illness, unless the length of absence from the clinical assignment has previously been specified on a health condition certification form.

Care of injuries sustained while on the clinical sites at CSM

- I. Report to instructor immediately.
- II. During business hours, contact Associate Health and Wellness. After hours, contact the Hospital Administrative Representative.
- III. Complete an Occupational Incident Report with your faculty member.

Care of injuries sustained while on the clinical site at other agencies

- I. Report to instructor immediately.
- II. Instructor will determine appropriate course of action.

Management of a Student Blood or Body Fluid Exposure – Steps

- I. Provide Immediate Care to the Exposed Site
 - A. Wash wound or cut with anti-microbial soap
 - B. Rinse mouth with water
 - C. Irrigate eyes with normal saline or water
- II. Notify instructor immediately
- III. Evaluate the exposure

Did the incident cause someone else's blood or body fluid to enter the student's body?
Body fluids considered potentially infectious are blood, body fluids containing visible blood, cerebrospinal fluid, synovial fluid, pleural fluid, peritoneal fluid, pericardial fluid, amniotic fluid, breast milk, semen, and vaginal secretions.

Feces, nasal secretions, saliva, sputum, sweat, tears, urine, and vomitus are not considered potentially infectious unless they contain blood.

- A. **If yes**, call facility contact immediately
- B. **If no**, this is not a blood or body fluid exposure. Do not continue.

IV. Determine the HIV status of the source person
Do you know who the source person is?

If yes, the Human Immunodeficiency Virus (HIV) status of the source person will need to be determined as soon as possible. An HIV test performed within the last 30 days is acceptable. If that is not available, the source person's informed consent for HIV testing needs to be obtained. Telephone consent is not acceptable. The source person will not be charged for this testing. **Do not discharge the source person until his/her lab work is drawn.** If the source person refuses testing, see the facility's Blood or Body Fluid Exposure policy for next steps.

- A. After consent is obtained, notify the Laboratory of the need for a STAT blood draw for the Rapid HIV test using the facility's order form for source person lab. Additional test for HIV, Hepatitis B and Hepatitis C should also be ordered.
- B. The facility contact will notify the student of the Rapid HIV results.
- C. If rapid HIV result is negative, continue to Step 5.
- D. If the source person's HIV test is positive, the student will be counseled regarding possible post exposure prophylaxis (PEP), and referred to the Emergency Department (ED). Cost of the ED visit, and medications dispensed, will be the student's responsibility. If PEP is ordered, the student will need to have baseline laboratory testing, including a pregnancy test (if indicated), before the medication is started.

If no (the source person is unknown), initiating post exposure prophylaxis should be decided on a case by case basis based on the exposure risk and likelihood of HIV infection.

V. Post exposure counseling

The student should practice precautions to prevent the transmission of blood-borne diseases if the source person is unknown or until all of the source person's results are known:

- A. Refrain from blood, plasma, semen, tissue, or organ donation;
- B. Abstain from or use measures to prevent HIV transmission and/or pregnancy during sexual intercourse; avoid any unprotected sexual practices;
- C. Females who are breast feeding infants should be aware of the risk of HIV transmission through breast milk, and discontinuation of breast feeding should be considered, especially for high risk exposures;
- D. Toothbrushes, razors, and other implements subject to contamination with blood should not be shared;
- E. Minor injuries (i.e., cuts, scrapes) should be cleaned promptly with soap and water to decrease risk of infection, cover injury until healed;
- F. Use diluted (1:10) solution of household bleach to kill both the hepatitis and HIV virus on non-porous surfaces (i.e., bathroom counters, etc.) contaminated with your blood.

VI. Complete Facility Accident / Incident Report

The student is to complete a facility accident / incident report per the facility policy. The following information may be included on the report.

- A. Type of sharp device and brand name

- B. Purpose sharps device was used for
 - C. Does the device have a safety mechanism and was it activated at the time of exposure
 - D. Was the object that produced the puncture / laceration contaminated? If yes, with what?
 - E. PPE worn when exposure occurred such as eye protection, mask, PFR95 / N95 respirator, gloves, double gloves, gown, none
 - F. Name of person holding the sharps device when exposure occurred
- VII. Post Exposure Baseline, Follow-up Testing, and Further Instruction for Known or Unknown Sources
- A. It is the student's responsibility to notify the Associate Dean of Academic Affairs of the exposure, and provide a copy of the accident/incident report.
 - B. Cost of the student's medical monitoring and follow-up testing, if needed, is the student's responsibility.
 - C. If indicated, Employee Health / Associate Health / Occupational Health will record incident on facility's OSHA log.