

THE UNIVERSITY OF KANSAS SCHOOL OF PHARMACY

Policy Regarding Infectious/Communicable Diseases

Infectious/communicable diseases are common and may present a threat to students, faculty, and patients. Infectious/Communicable diseases include blood borne transmitted disease (e.g. Hepatitis B [HBV], Hepatitis C [HCV], Human immune-deficiency disease [HIV; AIDS]), airborne transmitted disease (e.g., tuberculosis [TB], measles, varicella), droplet transmitted disease (e.g., influenza, pertussis, mumps) and contact transmitted disease (e.g., methicillin-resistant *Staphylococcus aureus* [MRSA]). This contact may expose the students to infectious agents, and may result in the student transmitting an infectious disease to other students, faculty, patients, family members, and subjects.

The School of Pharmacy has adopted this policy in order to help protect the health and safety of its students, as well as that of patients and subjects. In order to participate in the School's educational program, it is essential that students not expose other students, faculty, patients, subjects, or others with whom they come in contact in their educational program to infectious/communicable diseases.

Required Health Certification

Upon admission to the School of Pharmacy, students are required to obtain and present to the School of Pharmacy, Associate Dean for Student Affairs, a completed health certification, certifying that that the student has undergone an infectious/communicable disease evaluation. If the student has an infectious/communicable disease, then the health certification shall include the requested information that will allow the School of Pharmacy to make an informed decision regarding the student's ability to participate in clinical activities.

Decisions regarding participation in clinical activities by students who have infectious/communicable diseases will be made on a case-by-case basis considering compliance with universal precautions, health status, and CDC recommendations for preventing transmission of infectious/communicable diseases.

Universal Precautions

As a part of prerequisite clinical preparation, students will receive printed and verbal information and instructions on universal precautions for body fluids and blood borne infections in accordance with applicable CDC guidelines before engaging in any clinical activity. Strict adherence to Universal Precautions is required in all clinical practice and patient care activities as a method of achieving an effective protection from exposure to blood borne pathogens. The cornerstone of the Universal Precautions is that all blood, regardless of the source, be treated as if it is infectious. Appropriate personal protective equipment and work practices must be observed to reduce the possibility of skin and/or mucous membrane exposure to blood and other potentially infectious materials. Courses where exposure to blood is possible must use disposable equipment; this equipment must not be re-used or shared. Disposal of used equipment shall be in accordance with both CDC guidelines.

REQUIRED PHYSICAL EXAMINATION

Physician statement: I have conducted a medical history and physical on the above student, including evaluating the student's current status with respect to Infectious/Communicable Disease, including blood borne transmitted disease (e.g. Hepatitis B [HBV], Hepatitis C [HCV], Human immune-deficiency disease [HIV; AIDS]), airborne transmitted disease (e.g., tuberculosis [TB], measles, varicella), droplet transmitted disease (e.g., influenza, pertussis, mumps) and contact transmitted disease (e.g., methicillin-resistant *Staphylococcus aureus* [MRSA]) and if deemed clinically relevant, I have conducted diagnostic laboratory evaluation for these or other infectious/communicable diseases. By my signature below, I certify the immunization dates listed above, and the following information concerning the student's Infectious/Communicable Disease status: (Please check appropriate statement)

_____ Student is free of any infectious/communicable disease that could present a risk of exposure to other students, faculty, or patients with whom the student might contact

_____ Student has existing infectious/communicable disease, but student will not present a serious risk of exposure to other students, faculty, or patients if the following recommended precautions are in place: (attach additional pages if necessary)

_____ Student has existing infectious/communicable disease that presents a serious risk of exposure to other students, faculty, or patients and cannot be sufficiently managed to safely allow student contact with other students, faculty, or patients.

PHYSICIAN CONTACT INFORMATION AND SIGNATURE

Printed Name: _____

Address: _____ City _____ State ____ Zip _____

Phone: _____ Telefax: _____

Physician Signature: _____ Date _____