In general, outpatient services (except emergency described below) are to be provided by the McKinley Health Center. For non-emergency care, seek treatment at the McKinley Health Center. For emergency care (e.g., needle stick or meningitis exposure), seek treatment at the facility where you had exposure. Refer to the card provided with the UICOM-UC name badge for specific contacts. Dial-a-nurse (217-333-2700) is available at McKinly Health Center 24 hours per day, 7 days per week, and can advise you on availability of services there.

The risk to students of acquiring infectious diseases, such as HIV (Human Immunodeficiency Virus) and HBV (Hepatitis B Virus), during their undergraduate medical education emphasizes the need for preventive measures. Accordingly, all students should be familiar with universal and standard precautions, blood and body fluid exposure procedures, and treatment available at each of the COM-UC teaching hospitals (Carle, Provena/Covenant, and Department of Veterans' Affairs, Illiana Health Care Center, Danville) and also services available through the University of Illinois at Urbana Student Medical Health Center (McKinley Health Center). Students should also become familiar with provisions and limitations of the University of Illinois Student Health Insurance plan and the student Long Term Disability Insurance and HIV Infection Indemnity Insurance plan. The following policy applies to all University of Illinois College of Medicine at Urbana-Champaign undergraduate medical students, referred to hereinafter as the subject group.

1. The University of Illinois College of Medicine at Urbana-Champaign endorses the precepts and recommendations contained in the Association of Program Directors in Internal Medicine position paper on AIDS (July 14, 1989) as they apply to the subject group. Attachment #1 contains a summary of the precepts and recommendations contained in this position paper.

2. As part of the educational program the subject group will receive and familiarize themselves with information about HIV and viral hepatitis, specifically about methods by which these agents may be transmitted in the educational setting and how to prevent such transmission. They shall also be provided and familiarize
themselves with the blood and body fluids exposure policy of each affiliated institution and procedures to be taken if exposed. As part of the undergraduate medical curriculum, students will receive a series of informational and practical sessions regarding preventive measures before exposure and follow up procedures after exposure to these agents. The UICOM-UC Clinical Education Center Directors at the teaching hospital sites will monitor their affiliated institution’s policy, will identify procedures for individuals to take after exposure that will include the provision of immediate treatment and counseling, and will keep records of all subject group exposures.

3. Routine or mandatory HIV testing of the subject group is not recommended. All students are strongly advised to undergo personal assessment to determine their need for HIV testing. This assessment should include known high-risk behaviors as well as risks associated with health care related occupational exposure. If individuals in the subject group are at risk they should learn their HIV status in order to protect and improve their health and to receive appropriate treatment and counseling. All persons in the subject group who are infected with HIV/HBV or HCV are advised to report that information to the COM-UC Regional Dean, who will regard the information as confidential and privileged. In such circumstances, the Regional Dean should ascertain that the student has ready access to consultants with expertise in management of seropositive patients. All confidentiality laws shall be followed to protect the identity of students infected with HIV or other blood borne viruses.

4. Individuals in the subject group who have a confirmed diagnosis of the HIV infection are encouraged to inform the Director of Clinical Services at the University of Illinois Campus Health Service (McKinley) for further care. All care at McKinley Health Center is provided in strict confidence.

5. All persons in the subject group who are potentially exposed to HIV and viral pathogens in the course of their medical education should follow the routine teaching site defined reporting procedures (Attachment #2). Expert medical care and counseling will be provided at the site of exposure.

6. Exposed individuals will be able to receive, at the site where exposure occurred, primary injury treatment and management. This should include but not be limited to: wound care (needle punctures, small lacerations, etc.); tetanus prophylaxis, if indicated; the protocol for hepatitis B or C exposure; collection of reference serum samples from all exposed individuals, if possible; assessment of the degree the individual is at risk from the type of exposure; arrangement for counseling; and information and recommendations for zidovudine (AZT) and other antiviral prophylaxis. Such information should include protocol, dosage, duration of treatment, side effects, potential long-term effects, and a balanced assessment of the value of this prophylaxis. Antiviral prophylaxis will be made available if recommended by the medical consultation and desired by the exposed subject; written and informed consent is required. If the exposure risk warrants, counseling is provided, and if the student signs the voluntary consent form, the student will be able to receive sufficient dosage of AZT and other antiviral medication (if desired and within one to two hours of exposure, if possible) until source testing can be completed. A representative of the College will be identified by the Regional Dean to be available at all times to facilitate management of such exposure (See point 3.1 in Attachment #2 Procedur es).

7. The University of Illinois at Urbana-Champaign student health insurance does not provide for disability insurance related to anything other than accidental dismemberment. However, the University of Illinois College of Medicine has made
available and requires that students purchase Long-Term Disability

Insurance and HIV Infection Indemnity Insurance. The Long-Term Disability Insurance provides for regular income should a student become disabled. Brochures explaining the policy is available from the Office of Student Affairs. Students are strongly encouraged to review the attached New England Journal of Medicine editorial. (Attachment 3).

8. Each year the UICOM-UC will distribute this policy and procedures document to the subject group and to each affiliated institution where a subject group may be at risk. The Clinical Education Center Director at each affiliated institution will be responsible for the development of specific site procedures and the distribution of those procedures to the subject group.

9. This policy will be reviewed on an annual basis by the Clinical Affairs Subcommittee of the UICOM-UC Educational Policy Committee; those reviews will include a review of adherence to each recommendation and the circumstances, management, and results of each policy, relevant to exposure.
General Educational Program
As part of the overall educational experience of undergraduate medical students, training programs should include a formal educational segment that centers around the care of patients with HIV-related diseases. Such a program must emphasize and re-emphasize the principles of universal precaution promulgated by the Centers for Disease Control and the American Hospital Association. Formal educational sessions for medical students devoted to the care of patients with HIV-related diseases should entail up-to-date information of the modes of transmission and risks of the HIV virus. Also to be included are new information on the pathogenesis and treatment of the syndromes, on pharmacological and immunological therapies and on new approaches to the ambulatory or hospice treatments of patients with HIV-related disorders. Educational efforts that define the psychological impact and the fiscal implications should be part of the training.

Counseling of Medical Students
Counseling Services for medical students should be available with individuals with the expertise to address the emotional and psychological stresses embodied in the care of patients with HIV-related diseases. Special attention should be given to the student who expresses reluctance to participate in patient care and educational programs concerned with HIV-related individuals. Students must understand that the obligation to provide care to all patients, regardless of personal risks, whether real or perceived, is deeply rooted in medical history and medical ethics. Open discussions with the reluctant student by the clerkship director or other senior faculty members adept at counseling is often helpful and reduces the fear for the student.

Special Features of the Educational Process
Students should learn to incorporate into their practices, procedures for taking complete sexual histories of their patients. Students must discuss the sexual preference and partners of their patients. They should understand the terminology of specific groups of whom they are dealing, whether these be heterosexual, homosexual, or bisexual. Students should not make assumptions about the patient’s sexual orientation without appropriate questions. Clerkship directors should encourage students to participate in public education programs and community-wide efforts intended to eliminate general misconceptions about AIDS and to diminish public and professional anxiety about the disease.

Confidentiality
Clerkship directors must impart to all students, the concept of patient confidentiality and emphasis the individual patient’s right to privacy. Students have an obligation to
maintain the confidentiality of their patient’s records and should never disclose information to outside sources.

In those circumstances where the health and welfare of individuals supersedes responsibility to maintain confidentiality, the student under the supervision of the attending physician, should inform present or recent sexual contacts, persons with whom an HIV-positive has shared needles, or other persons likely to have contact with the infected person’s blood or body fluids. Since the conflicts that exist between the obligation of confidentiality and the obligation to warn potentially exposed individuals are troublesome, input from the institution’s Ethics Committee might be beneficial. Students who convert or are found to be sero-positive deserve the same respect for confidentiality and individuals rights of privacy as non-health care workers. While the clerkship director or department head should be advised of the student’s serologic status, that information must be regarded as confidential and privileged and never disseminated. In such circumstances, the clerkship directors should ascertain that the sero-positive student has ready access to consultants with expertise and management of AIDS and to an appropriate counselor.

**Special Considerations: Testing of Students For HIV Antibody**

Mandatory or routine testing of students is not recommended. All students should have available on a voluntary basis the right to be tested for HIV-infection. If a student has exposure to blood or certain other body fluids through percutaneous inoculations or contact with non-intact skin or mucous membrane, prompt evaluation and follow-up should be arranged. Current public health service guidelines should be reviewed. Baseline testing for the student for HIV-antibodies and serologic testing is advised. Exposed individuals should follow precautions to prevent transmission of HIV to others pending results of follow-up testing. An ethical dilemma arises when a student sustains exposure to a known patient source and the patient refuses to consent to an HIV-antibody test. The APDIM agrees with the American College of Physicians and the Infectious Diseases Society of America that in situations of accidental exposure, the patient’s blood may ethically be tested for HIV antibody without the individual’s informed consent. The patient should be informed and counseled if this is deemed necessary. State laws on testing for antibodies without the individual’s informed consent are variable, so clerkship directors must be informed on the legality of such action in their state.

**Sero-positive Student**

Confidentiality is essential. The sero-positive student should be treated as any sero-positive patient. If otherwise able to care for patients, the HIV-infected student should be permitted to do so. Students present virtually no risk of HIV transmission to patients provided they observe the principles of universal precautions regarding blood and body fluids advocated for all health care workers. When an HIV-positive student begins to manifest physical or cognitive impairment that interferes with assigned responsibilities, the clerkship director or counselor should advise against further continuance of study.

**Exposure to HIV-positive Material**

Any student who sustains accidental percutaneous or mucus membrane exposure to infected blood, secretions or other body fluids should be encouraged to test voluntarily for HIV-antibody. Testing of the exposed student should be done at the time of exposure and then 6 weeks, 12 weeks, and 6 months later. The department head and/or clerkship director should be informed of any documented or perceived exposure
by the student and appropriate counseling should begin even before test results are available. Exposed individuals should follow precautions to prevent transmission of HIV pending test results.

**Pregnant Student**
Provided the pregnant student adheres to the principals of universal precaution regarding blood and body fluids, no special precautions are needed.

**Reluctant Student**
The stressful, psychological, and emotional dimensions that caring for patients for HIV-related diseases and the fear of infection of the HIV virus are often the major reasons for student’s reluctance to care for such patients. Counseling with an experienced attending should be arranged.

**Homosexual or Bisexual Students**
Confidentiality and individual privacy are principles that pertain for health care providers including students as well as for patients. Such individuals should not be indiscriminately identified or singled out. Should a patient refuse care or attention by a student because the patient questions the student’s sexual orientation, the clerkship director or attending physician should intervene immediately and directly with the patient. In a diplomatic yet firm manner, the attending should use the occasion to educate the patient about HIV-related diseases and the public misconceptions that surround the disease.

**Recommendations**

1. Clerkship directors should assume the responsibility to assist students to address and cope with their fears and prejudices in treating HIV-infected patients. The clerkship director should articulate a clear policy which emphasizes the student’s responsibility to provide care to all patients without regard to the nature of their illness.

2. Clerkship directors and faculty have the responsibility to provide information and educational programs for students about HIV-infection. These should include:
   a. Up-to-date information on the modes and risks of transmission of the virus.
   b. Training in the universal precautions methods employed in clinical settings, and in the monitoring of compliance.
   c. The policy to be followed in the event of potential exposure.
   d. The appropriate facilities, equipment, and personnel needed to avoid unnecessary risks.
   e. Counseling to those who express reluctance to participate in the education and patient care of HIV-infected individuals.

3. Clerkship directors and their institutions should articulate a policy on HIV-screening and on the HIV-positive trainee.
   a. Mandatory screening of students should **not** be initiated.
   b. Students and faculty at risk of HIV infection should be encouraged to seek testing and counseling.

4. Clerkship directors should insure that HIV-infected students have access to:
   a. Expert medical care and counseling.
   b. A designated member of the faculty with whom to discuss, confidentially, career activities, and plans.
   c. Support and individualized educational and career counseling.

5. Clerkship directors should establish policies and procedures to insure
confidentiality and appropriate handling of information related to a person’s HIV status.
a. Clearly defined, confidential means of communication and information storage should be established.
b. The rights and welfare of the individual patient are always of first concern so that information about a student or HIV positive patient should be shared only to a degree necessary for the effective implementation of policies.
The following procedures are in effect for University of Illinois College of Medicine at Urbana-Champaign students exposed to blood and body fluids in conjunction with clinical activities. These procedures serve as an addendum to the University of Illinois College of Medicine at Urbana-Champaign “Guidelines and Policy for Infectious Disease Prevention for Medical Students Exposure to Blood and Body Fluids and Risks Related to HIV and Viral Hepatitis” of 12/9/92. (Revised January, 1997)

1. **The first and fundamental step is prompt cleansing of the wound or exposed area with copious amounts of soap and water.**

2. **Access and follow the procedure in effect for the site where the exposure occurred.**
   2.1 Students at Carle Clinic or Carle Foundation Hospital should report their injury to the charge nurse of the unit where the injury occurred (so that primary injury treatment, source testing, and documentation can be initiated promptly) and then report to Carle Employee Health (7:00 am – 5:00 pm weekdays) or to the Nursing House Supervisor or the Carle Emergency Room (at other times). The exposure is then immediately reported to the on call site infectious disease section physician if he has not already been consulted by the physician providing immediate care (see pt. 3.1).

   Reimbursement: Carle pays for primary injury treatment and management including source testing. Subsequent management comes under the responsibility of the McKinley Health Center and student insurance. University of Illinois student health insurance does not pay for medications unless hospitalized.

   2.2 Students at Provena/Covenant Medical Center should follow its “Employee Blood/Body Fluid Exposure Management Protocol.” They should report their injury to the charge nurse of the unit where the injury occurred (who will be familiar with the protocol and will initiate primary injury treatment source testing, and documentation) and then report promptly to Provena/Covenant Emergency Services Department. The exposure must also be reported immediately to the appropriate site infectious disease section physician (see pt. 3.1).

   Reimbursement: Provena/Covenant pays for primary injury treatment and management including source testing not covered by insurance. Subsequent management comes under the responsibility of the McKinley Health Center and student insurance.

   University of Illinois student health insurance does not pay for medications
unless hospitalized. Students should contact Director of Clinical Services at McKinley Health Center to arrange continued care.

2.3 Students at Christie Clinic should follow its “Employee Blood/Body Fluid Exposure Management Protocol.” They should report their injury to their attending physician (who will be familiar with the protocol and will initiate primary injury treatment, source testing, and documentation) and then report promptly to McKinley Health Center (8:00 am – 4:30 pm, Monday–Saturday) or report to the Provena/Covenant Emergency Services Department (at other times). McKinley should be alerted (333-2702, Monday–Friday; 333-3263, Saturday) before leaving Christie. The exposure must also be reported immediately to the appropriate site infectious disease section physician (see pt. 3.1).

Reimbursement: Christie pays for primary injury treatment and management including source testing. Subsequent management comes under the responsibility of the McKinley Health Center and student insurance. University of Illinois student health insurance does not pay for medications unless hospitalized. Students should contact Director of Clinical Services at McKinley Health Center to arrange continued care.

2.4 Students at the Department of Veterans Affairs Illiana Health Care Center, should report their injury to the charge nurse of the unit where the injury occurred (so that primary injury treatment, source testing, and documentation can be initiated promptly). Dr. Anu Mani’s office should be notified immediately (during business hours) or at the beginning of the next business day. The exposure must also be reported immediately to the appropriate site infectious disease section physician (see pt. 3.1).

Reimbursement: The VA will be responsible to insure subsequent care which may be carried out at the VA or McKinley.

2.5 Students at the Champaign-Urbana Public Health District should report their injury to a clinic nurse (so that primary injury treatment, source testing, and documentation can be initiated promptly).

Reimbursement: The Public Health District provides initial primary injury treatment including source testing free of charge. Subsequent management comes under the responsibility of the McKinley Health Center and student insurance. University of Illinois student health insurance does not pay for medications unless hospitalized. Students should contact Director of Clinical Services at McKinley Health Center to arrange continued care.

2.6 Students at other College of Medicine-affiliated sites (other than those covered in 2.1 – 2.5) should report their injury to their attending physician (so that primary injury treatment, source testing, and documentation can be initiated promptly) and then report promptly to McKinley Health Center (8:00 am – 4:30 pm, Monday–Saturday) or to the Carle Emergency Room or to Provena/Covenant Emergency Services Department (at other times). McKinley should be alerted (333-2702 Monday–Friday; 333-3263, Saturday) before leaving the site where the injury occurred.
Reimbursement: Primary injury treatment including source testing may or may not be provided at the affiliated site. If there is no on-site payment for primary injury treatment including source testing, subsequent bills should be submitted to the COM Office of Student Affairs. Subsequent management comes under the responsibility of the McKinley Health Center and student insurance. University of Illinois student health insurance does not pay for medications unless hospitalized.

3. **Additional procedures:**

3.1 Students must complete the procedural protocol for each institution and then must report every blood and fluid exposure to a physician in the University of Illinois College of Medicine at Urbana-Champaign Department of Internal Medicine section of infectious diseases as soon as possible. (There is a section physician available 24 hours a day.)

Students who are exposed and who receive care at Christie Clinic, Provena/Covenant Medical Center, should ordinarily report incidents to Dr. England (373-4313). Students who are exposed and who receive care at Carle or the Champaign-Urbana Public Health District should ordinarily report incidents to Drs. Zaman or Musial (383-1554).

Students who are exposed and who receive care at the VA or any other affiliated site should complete the existing site treatment procedures and then call any of the four section physicians.

Students are reminded that they must report their injury to a person at the location where the injury occurred and to a physician in the Section of Infectious Diseases and report for care immediately. Failure to do so may jeopardize their ability to receive optimal care.

Students should understand that blood and body fluid exposure is a medical emergency that will cause their work to be interrupted as would be the case for any other serious injury.

3.2 Students should complete a University of Illinois Employee’s Injury Report. Reports are available at the Clinical Education Center at each site. Completed reports must be forwarded immediately to the Section of Infectious Diseases physician to whom the incident was reported.

3.3 University of Illinois student health insurance is administered by its Benefits Center (333-0165). Currently, 80% of outpatient care expenses over $200 (the deductible) and up to a maximum of $3,000 each contract year are reimbursed. Students should ascertain whether they are covered under other policies (such as those held by parents) and, if so, what coverage is provided. Students are advised to speak to the administrative contact in the institution (see section 4 below) where an injury occurred to see if additional reimbursement is available.

3.4 These procedures do not apply to students exposed to blood and body fluids of nonhuman origin.
4. **Persons to whom questions may be addressed:**

4.1 Administrative questions regarding injuries occurring at Carle can be answered by their Infection Control Practitioner, 383-4876.

4.2 Administrative questions regarding injuries occurring at Provena/Covenant can be answered by the Employee Health Coordinator, 337-2186. Bills from Provena/Covenant for uninsured services associated with primary injury treatment and source testing should be submitted to Vice President for Patient Services, 337-2142.

4.3 Administrative questions regarding injuries occurring at Christie can be answered by the Risk Management Coordinator, 366-7475.

4.4 Administrative questions regarding injuries at the Danville VAIHCS can be answered by the Chief of its Medical Service, 554-4511 or 431-6511.

4.5 Administrative questions regarding injuries at the Champaign-Urbana Public Health District can be answered by the Director of Nursing, 352-7961.

4.6 Any questions regarding these procedures should be addressed to a physician in the Section of Infectious Diseases.