



Policy

TITLE: Exposure to Infection with Communicable Diseases

EFFECTIVE DATE: January 1, 2010; Revised April 1, 2021

APPROVER(S): Dean of Medical Education, OCS Head of School

NUMBER: OCS 400.8

I. Purpose

The purpose of this policy is to insure protection for students and patients from exposure to or infection with any infectious diseases. It is the policy of the institution to require that all students, employees, volunteers, and contract personnel follow the guidelines stated in the Ochsner Health System (OHS) Personnel Health Guidelines.

II. Scope

This policy applies to all Ochsner Clinical School medical students.

III. Policy Statements

1. Students who have been exposed to or become ill with an infectious disease are to follow the recommendations in the OHS Personnel Health guidelines (See attached).
2. Ochsner Employee Health and Wellness will refer to the CDC Personnel Health Guidelines (see Attachment A: "Suggested Work Restrictions for Health Care Personnel") and restrict student from patient care contact as recommended. If exposure is work related, Employee Health and Wellness will have the student complete Report of Occupational Injury/Illness form.
3. **If a student has been exposed to Varicella Zoster (chicken pox, shingles) and is unsure of his/her immune status, he/she is to report to Employee Health and Wellness as soon as possible to have a Varicella titer drawn.**
4. If an exposure occurs as a result of a blood or body fluid exposure, immediately report to Employee Health or, if after hours, the Emergency Department for medical evaluation and PEP meds initiation only if the Source patient is HIV positive.
5. Employee Health and Wellness will notify the student's clinical rotation supervisor of work restrictions.
6. Employee Health and Wellness will maintain medical information about student illness/exposure in the confidential Student Health record.
7. Prior to resuming clinical rotation activity, any student who has been excluded from clinical educational activity is required to provide a physician note to the OCS

administration and Employee Health and Wellness clearing the student to return to work and documenting student is no longer contagious.

8. Students missing more than 2 weeks of the educational rotation will adhere to the Medical Student Attendance Policy guidelines in this instance.

IV. Enforcement

Failure to comply with this policy may result in progressive discipline up to and including termination of employment for employees or termination of contract or service for third-party personnel, students or volunteers.

V. References

OHS. HR 408 Occupational Exposure to Communicable Diseases

OCHSNER HEALTH SYSTEM-PERSONNEL HEALTH GUIDELINES
Adapted from CDC PERSONNEL HEALTH GUIDELINES

Summary of Suggested Work Restrictions for Healthcare Personnel Exposed to or Infected with Infectious Diseases of Importance in Healthcare Settings in the Absence of State and Local Regulations (Modified from Advisory Committee on Immunization Practices Recommendations)

DISEASE/PROBLEM	WORK RESTRICTIONS	DURATION
Conjunctivitis	Restrict from patient contact & contact with the patient's environment.	Until discharge ceases.
Cytomegalovirus Infections	No restrictions	
Diarrheal Diseases: Acute stage (diarrhea with other symptoms) Convalescent Stage, Salmonella Species	Restrict Restrict from care of high risk patients	Until symptoms resolve; consult with local & state health authorities regarding need for negative stool cultures.
Diphtheria	Exclude from duty	Until antimicrobial therapy completed & 2 cultures obtained ⊗ 24 hrs apart are negative.
Enteroviral Infections	Restrict from care of infants, neonates, & immunocompromised patients & their environments.	Until symptoms resolve
Hepatitis A	Restrict from patient contact, contact with patient's environment & food handling.	Until 7 days after onset of jaundice
Hepatitis B Personnel with acute or chronic hepatitis B surface antigenemia who do not perform exposure-prone procedures. Personnel with acute or chronic hepatitis B e antigenemia who perform exposure-prone procedures	No restrictions*; refer to state regulations; standard precautions should always be observed. Determine on a case by case basis	Until hepatitis B e antigen is negative
Hepatitis C	No recommendation	
Herpes Simplex: Genital Hands (herpetic whitlow) Orofacial	No restrictions Restrict from patient contact & contact with the patient's environment Evaluate for need to restrict from care of high-risk patients.	Until lesions heal

DISEASE/PROBLEM	WORK RESTRICTIONS	DURATION
Human Immunodeficiency Virus	Determined on a case by case basis	
Measles: Active Postexposure (susceptible personnel)	Exclude from duty Exclude from duty	Until 7 days after the rash appears From 5 th day after first exposure through 21 st day after last exposure &/or 4 days after rash appears.
Meningococcal Infections	Exclude from duty	Until 24 hrs after start of effective therapy
Mumps: Active Postexposure (susceptible personnel)	Exclude from duty Exclude from duty	Until 9 days after onset of parotitis From 12 th day after first exposure through 26 th day after last exposure or until 9 days after onset of parotitis.
Pediculosis	Restrict from patient care	Until treated & observed to be free of adult & immature lice
Pertussis: Active Postexposure (asymptomatic personnel) Postexposure (symptomatic personnel)	Exclude from duty No restrictions, prophylaxis recommended Exclude from duty	From beginning of catarrhal stage through 3 rd week after onset of paroxysms or until 5 days after start of effective antimicrobial therapy. Until 5 days after start of effective antimicrobial therapy
Rubella: Active Postexposure (susceptible personnel)	Exclude from duty Exclude from duty	Until 5 days after rash appears From 7 th day after first exposure through 21 st day after last exposure
Scabies:	Restrict from patient contact	Until cleared by medical evaluation
Staphylococcus Aureus Infection Active, draining skin lesions	Restrict from contact with patients & patient's environment or food handling.	Until lesions have resolved

DISEASE/PROBLEM	WORK RESTRICTIONS	DURATION
Carrier State	No restrictions, unless personnel are epidemiologically linked to transmission of the organism.	
Streptococcal Infection Group A	Restrict from patient care, contact with patient's environment or food handling.	Until 24 hours after adequate treatment started.
Tuberculosis: Active PPD Converter	Exclude from duty No restriction	Until proved noninfectious
Varicella: Employees are to notify Employee Health immediately if have been exposed to "chicken pox" and have never had it. Active Postexposure (susceptible personnel)	Exclude from duty Exclude from duty	Until all lesions dry & crust From 10 th day after first exposure through 21 st day (28 th day if VZIG given) after last exposure
Zoster: Employees are to notify Employee Health immediately if have been exposed to "shingles" and have never had chicken pox. Localized, in healthy person Generalize or localized in immunosuppressed person Postexposure (Susceptible personnel)	Cover lesions; restrict from care of high-risk patients Restrict from patient contact Restrict from patient contact	Until all lesions dry & crust Until lesions dry & crust From 10 th day after first exposure through 21 st day (28 th day if VZIG given) after last exposure or, if varicella occurs, Until all lesions dry & crusted
Viral Respiratory Infections Acute febrile	Consider excluding from the care of high risk patients' or contact with their environment during community outbreak of RSV and influenza	Until acute symptoms resolve