



THE UNIVERSITY OF
NOTRE DAME
A U S T R A L I A

SCHOOL OF MEDICINE, FREMANTLE

INFECTIOUS DISEASES POLICY

Purpose:	To outline the necessity of using infection control practices to prevent or reduce risk of transmission of infectious disease
Contact:	Dean
Approval Date:	October 2015
Modification History:	October 2018
Applicability:	School of Medicine, Fremantle

ACRONYMS

AHPRA Australian Health Practitioner Regulation Agency

BBV Blood-Borne Virus

CDNA Communicable Disease Network Australia

DOH Department of Health

DNA Deoxyribonucleic acid

ED Emergency Department

EPP Exposure-Prone Procedure

HBV hepatitis B Virus

HBeAg hepatitis B e Antigen

HBsAg hepatitis B surface Antigen

HCV hepatitis C Virus

HCW Health Care Worker

HIV Human Immunodeficiency Virus

MBA Medical Board of Australia

PEP Post Exposure Prophylaxis

PPE Personal Protective Equipment

RNA Ribonucleic acid

SOMF School of Medicine Fremantle

INTRODUCTION

All students preparing to enrol in the School of Medicine Fremantle (SOMF) should be aware of the high risk of transmission of infectious diseases between themselves and their patients during the course of their medical training and the importance of infection control. The University is required to comply with Commonwealth and State legislation and regulations and is committed to providing a safe learning and teaching environment. The SOMF has developed its *Infectious Diseases Policy* and *Guidelines for Infection Control* with reference to the AHPRA draft Guidelines for the regulatory management of registered health practitioners and students infected with blood-borne viruses 2014 and the Communicable Diseases Network Australia Guidelines 2012.

It is essential that students intending to enrol in the medical program and all current students understand, support and comply with the requirements of this document.

The objectives of this document are to:

- Ensure students understand the risk to their health and career that may occur from exposure to infectious disease.
- Educate students on the importance of infection control practices to prevent or reduce risk of transmission of infectious disease between themselves and their patients or colleagues.
- Provide prospective students with information about the SOMF's immunity and immunisation requirements which are mandatory for enrolment.
- Ensure that students are aware that **testing for infectious diseases including blood borne viruses is required to participate in the course.**

This document should be read in conjunction with the School's *Guidelines for Infection Control*.

RESPONSIBILITIES OF THE UNIVERSITY

- The School will provide prospective and enrolled students with access to electronic or hard copies of its *Infectious Diseases Policy* and *Guidelines for Infection Control*.
- The Dean of Medicine is responsible for implementation and compliance with the Policy.
- The Associate Dean (Clinical) and the Domain Chair of Communication and Clinical Practice will monitor and coordinate compliance with the Policy and be available to answer any queries.
- Testing for infections and administering immunisations is not the direct responsibility of the School. It will maintain signed immunity and vaccination forms from GPs or other medical practitioners documenting students' compliance with the policy. Forms will be treated confidentially and stored in a safe and secure environment.
- As an education provider, the School is required under the National Law to notify Australian Health Practitioner Regulation Agency (AHPRA) if they reasonably believe:
 - a student enrolled in a program of study provided by the education provider has an impairment that, in the course of the student undertaking the clinical component as part of the program of study, may place the public at substantial risk of harm; or
 - a student for whom an education provider has arranged clinical training has an impairment that, in the course of the student undertaking clinical training, may place the public at substantial risk of harm.
- The School will ensure that *Infectious Diseases Policy* requirements are fulfilled. Students who fail to comply with this policy will not be able to undertake clinical practice and may face exclusion from the program.
- Students who are found to have presented the School with fraudulent documentation of their immunisation status will have their enrolment cancelled (refer to the [General Regulations, Cancellation of Offer and/or Enrolment](#)).

RESPONSIBILITIES OF MEDICAL STUDENTS

- Students must acknowledge their understanding and acceptance of the School's *Infectious Diseases Policy* and *Guidelines for Infection Control*. This will be in the form of completing a declaration of compliance that is lodged with the School.
- **Students are required to complete requirements of this policy prior to undertaking clinical practice in MEDI6100.** Any student who is having difficulty with completing the requirements should see the Year 1 Coordinator as soon as possible.
- Enrolling students are required to see their GP or other medical practitioner to undergo blood tests and vaccinations to provide evidence of their immunity to certain infectious diseases and blood borne viruses. Some vaccinations are administered over a period of time. **The cost of blood tests/vaccinations is the responsibility of the student.**
- It is mandatory that students attend a lecture on the *Infectious Diseases Policy* in MEDI6100.
- Students are responsible to know their infectious status for blood borne viruses (BBVs) throughout the program.
- Students owe a duty of care to their patients and are responsible for applying standard precautions with **ALL** patients with whom they come in contact, and additional infection control precautions as required. Standard precautions include effective hand washing, aseptic technique, safe disposal of sharps and clinical waste, sterilisation of re-usable equipment and use of personal protective equipment (PPE) such as gloves, gowns, masks and eye protection.
- If students are aware that they have an infectious condition that presents a potential risk to patients, they must seek medical advice on whether and in what ways they should modify their clinical practice. Students must not rely on their own assessment of risk to patients. Students with a blood borne virus will be required to meet with the Dean to ensure that all appropriate precautions and management are being undertaken.
- Students who sustain a needlestick/sharps injury while on clinical practice must report the incident immediately to their clinical supervisor and follow the protocols of the infection control department of the hospital in regard to management. The student should also advise the Placements Coordinator, complete the needlestick injury and exposure incident report form available on the student portal and fax/email it to the Placements Coordinator within 24 hours
- Students are advised to contact the Associate Dean (Clinical) or the Domain Chair of Communication and Clinical practice if they have any queries about this Policy.
- Interstate and international students are subject to the same screening and immunisation standards as Notre Dame students.

BLOOD-BORNE VIRUSES (BBV)

- The issue of transmission of infection between health care workers and patients is a major health issue. The main area of concern is the transmission of blood borne viruses such as human immunodeficiency virus (HIV), hepatitis B virus (HBV) and hepatitis C virus (HCV). People infected with a blood-borne virus (BBV) carry the virus in their blood and may remain infectious all their life. Some may be unaware of their infectious status.
 - It is mandatory that all medical practitioners, including medical students, know their own status in relation to carrying a BBV to ensure that they do not place patients at any risk of infection. A practitioner/student who fails to be aware of their own infection status may be guilty of misconduct in a professional respect. Annual testing for BBVs is advisable with immediate retesting and follow-up care after a potential occupational or non-occupational exposure.
 - To comply with the School's policy, enrolling students are required to have serology testing for BBVs conducted by an accredited pathology laboratory in Australia.
 - All students studying medicine are expected to undertake exposure-prone procedures (EPPs) during their clinical training. Exposure-prone procedures carry a risk of transmission of BBVs and students may become infected.
 - Any student who engages in at-risk behaviour, for example, unsafe sex or drug taking, and who suspects he/she may have had a non-occupational exposure to a carrier of a BBV, has a professional and ethical duty to seek immediate testing.
 - Students who are exposed to a potential BBV during clinical rotations must withdraw from EPPs until tested and cleared of infection.
 - All medical students infected with a BBV should seek the advice of an infectious diseases specialist and follow recommendations for management. This includes not undertaking EPPs until they provide a clearance letter from an infectious diseases specialist.
 - Infected students **must** also seek guidance from the Dean of Medicine about implications for clinical practice and their future career.
 - Student's immunity or infectious status is confidential and will only be disclosed by the University as required by law or with the student's written consent.
10. Information about testing for hepatitis B, HIV and hepatitis C is available at <http://www.ashm.org.au/>.

SPECIFIC REQUIREMENTS FOR MANAGING STUDENTS INFECTED WITH A BBV

- The School's policy on management of students who test positive to a BBV follows guidelines developed by the Communicable Diseases Network Australia (CDNA) published in February 2012. These principles which have been endorsed by the Australian Health Ministers Advisory Council (AHMAC) are currently being reviewed by the Medical Board of Australia. They are available on Department of Health website.
- The majority of procedures in the health care setting pose minimal risk of transmission of BBVs provided that appropriate prevention and infection control precautions are practised. However, there are certain procedures during which BBVs are significantly more likely to be transmitted. These are referred to as invasive or exposure prone procedures (EPPs).
- During EPPs, it is possible that injury to the health care worker could result in their blood contaminating the patient's open tissues. Under these circumstances, transmission of BBVs is possible. Any student who has been exposed to or infected with a BBV must immediately cease to perform EPPs and seek the advice of a specialist in infectious disease.
- Medical practitioners and medical students who are infected with a blood-borne virus must not perform any exposure prone procedures if they are:
 - HIV antibody positive even if virus levels become undetectable on appropriately monitored retroviral therapy
 - hepatitis B e antigen (HBeAg) positive and or hepatitis B DNA positive (by PCR test)
 - hepatitis C RNA positive (by PCR test)

(AHPRA draft Guidelines for the regulatory management of registered health practitioners and students infected with blood-borne viruses 2014)

OVERSEAS ELECTIVES

- The University has a duty of care to students who organise their medical electives in overseas countries and will provide education and advice to reduce risk of infectious disease.
- The School maintains 24 hour phone support through the Electives Coordinator and the Associate Dean (Clinical) while students are away on electives. If any exposure occurs the student must contact the Associate Dean (Clinical) immediately and appropriate specialist advice will be sought if required.
- Students undertaking overseas electives are required to attend a refresher lecture on the risks to their health from infectious disease and the importance of infection control.
- Students are required to seek medical advice on appropriate vaccinations and prophylaxis from their GP or a travel medicine practitioner.

- Students are required to research their proposed site and submit a *Safety and Risk Assessment* to provide evidence that they are aware of the specific risks to their health of infectious disease and ways to prevent or reduce risk.
- Any elective student travelling to areas which are designated as high risk for infectious disease and HIV by their doctor must have the recommended vaccinations and take a HIV Post Exposure Prophylaxis Pack (HIV PEP pack) with them (refer to *Guidelines for Infection Control*).
- Use of personal protective equipment at all times, is essential when involved with patients with a BBV. Students who are at risk of exposure from a known source should withdraw from an exposure-prone procedure.
- Students are required to take out comprehensive travel and medical insurance prior to travel.
- Further information on overseas electives is available from *Guidelines for Infection Control* and the Year 3 & 4 student portal.

IMMUNISATION & VACCINATIONS

- Vaccination is an important infection control strategy and students are required to meet the immunisation and vaccination requirements of the SOMF prior to undertaking clinical practice. Students should be aware that some vaccines are required to be taken over time, but need to be completed by the first scheduled clinical placement of MEDI6100.
- All vaccination and blood testing costs are the responsibility of the student. Test/vaccines are available through your own GP or a travel medicine specialist.
- Enrolling students will be provided with a form by SOMF which they will need to organise their GP or Registered Nurse working in the same health Care Practice to sign, to provide evidence of their immunity status and vaccinations undertaken.
- Enrolling students must demonstrate by a blood test that they are immune, and be vaccinated if they are not, to the following diseases:
 - Measles
 - Mumps
 - Rubella
 - Varicella
 - Hepatitis A
 - Hepatitis B surface antibody (HBsAb)
 - Students will also need testing for exposure to tuberculosis by Quantiferon TB gold blood test. *NB There is no immunisation against TB.*

NB: Students are advised that live vaccines should not be administered during pregnancy or if the student is immunosuppressed. All students should follow advice of the vaccinating physician in regards to precautions and side effects.

- A small proportion of vaccinated students fail to develop immunity to hepatitis B. Students in this category will need to discuss their options with the Infection Control Officer and are recommended to attend a clinic experienced in vaccination and travel.
- A blood test cannot determine immunity status to the following diseases. Students are therefore advised that vaccination or a booster is required if they cannot produce documentation from their childhood for vaccination against:
 - Diphtheria
 - Pertussis
 - Tetanus
 - Polio
- Recommended vaccinations:
 - Annual influenza vaccination is recommended.
- Students should be aware that vaccines are not always 100% effective and they may still be at risk of catching a disease they have been vaccinated against. It is therefore advisable to follow standard precautions for infection control at all times.

BLOOD-BORNE VIRUS (BBV) SCREENING

Students must demonstrate up to date blood tests in an **accredited Australian laboratory** for exposure to the following blood- borne viruses:

- Human Immunodeficiency Virus (HIV)
- hepatitis B (HBV)
- hepatitis C (HCV)

NB: There is currently no vaccine available for HCV or HIV

Although BBV testing is required, results are confidential. It is essential, however, that students who test positive for a BBV seek advice and counselling from an appropriate infectious diseases specialist. In addition, students who test positive must seek a confidential discussion with the Dean to determine how their clinical training will be affected and implications for future medical practice.

MRSA SCREENING

MRSA (Methicillin-resistant Staphylococcus aureus) screening is required for all students who have been a patient or worked in a hospital interstate or overseas within the previous 12 months. These can be organised via your General Practitioner. This includes during the program if and when a student has been a patient or worked in a hospital interstate or overseas.

COMMUNICABLE DISEASE INSURANCE

Testing for immunity at the time of enrolling in medical school has benefits for medical indemnity insurance. Students are advised to contact their medical student indemnity insurance provider (e.g. Avant, MIGA) for advice on optional cover for communicable diseases (HIV, HBV, HCV).

If their initial tests, conducted by an accredited pathology laboratory in Australia, are demonstrated to be seronegative at time of inception of the first policy, and they later test seropositive for occupational exposure during the period of insurance, they may be eligible to claim.

REFERENCES

1. The Medical Board of Australia: Draft Guidelines for Medical Practitioners and Medical Students infected with Blood- Borne Viruses 2014
<http://www.medicalboard.gov.au/documents/default.aspx?record=WD11%2F4740&dbid=AP&chksu m=aw4yGFhsa9fCO7SpmZy8pQ%3D%3D>
2. National Health and Medical Research Council (NHMRC) Australian *Guidelines for the Prevention and Control of Infection in Healthcare* 2010 *Clinical Educators Guide*
http://www.nhmrc.gov.au/ files_nhmrc/publications/attachments/cd33_infection_control_healthc are.pdf
3. Australian Department of Health and Ageing *Communicable Diseases Information*
<http://www.health.gov.au/internet/main/publishing.nsf/Content/ohp-communic-1>
4. Communicable Diseases Network Australia (CDNA) Guidelines on the Management of Healthcare Workers (HCWs) with Blood Borne Viruses Endorsed by the Australian Health and Medical Advisory Council (AHMAC) 28 February 2012, published at
<http://www.health.gov.au/internet/main/publishing.nsf/Content/cda-cdna-bloodborne.htm>
5. Medical Board of Western Australia Policies *Medical Practitioners and Blood Borne Viruses* 2003
6. Department of Health Western Australia *Management of Occupational Exposure to Blood and Body Fluids in the Health Care Setting Operational Directive OD 0091/07 December 2007*
www.health.wa.gov.au
7. Australian Government, Dept of Health and Ageing (2012). Australian National Guidelines for the Management of Health Care workers known to be infected with Blood-Borne Viruses.
[www.health.gov.au/internaet/main/publishing.nsf/content/36D4D796D31081EBCA257BF0001DE6B7/\\$File/Guideleines-BBVfeb12.pdf](http://www.health.gov.au/internaet/main/publishing.nsf/content/36D4D796D31081EBCA257BF0001DE6B7/$File/Guideleines-BBVfeb12.pdf)

USEFUL RESOURCES

1. Australasian Society for HIV Medicine (ASHM)

The Australasian Society for HIV Medicine (ASHM) is the peak representative professional body of health professionals in Australia who work in the areas of HIV/AIDS, viral hepatitis and related areas. They have up to date guidelines and policy and offer a GP Toolkit for initiating PEP:

www.ashm.org.au

HIV Viral hepatitis and STIs A Guide for Primary Care- A comprehensive monograph for primary health care professionals working in the areas of HIV, viral hepatitis and/or STIs (2009)
www.ashm.org.au/publications/monographs/HIV_viral_hepatitis_and_STIs_a_guide_for_primary_care/hiv_viral_hepatitis_and_stis_whole.pdf

GP Toolkit and Guidelines for initiating Post Exposure Prophylaxis www.ashm.org.au/guidelines/

The ASHM provides information on the HIV prescriber program www.ashm.org.au/hiv-prescribers/

The ASHM website also provides counseling and support services information with contact details available from www.ashm.org.au or www.napwa.org.au

2. Western Australian Department of Health

The Western Australian Department of Health has a directive entitled “Management of Occupational Exposure to Blood and Body Fluids in the Health Care Setting (20 Dec 2007) www.health.wa.gov.au

Health policy directives on “Occupational Assessment, Screening and Vaccination against Specified Infectious Diseases” is also found on this site.

A good resource on Guidelines for Managing Sexually Transmitted Infections including HIV can be found at <http://silverbook.health.wa.gov.au>. It contains a table on Risk of Transmission of HIV Exposure from 2007 National Guidelines

3. The Australian National Health and Medical Research Council (NHMRC)

The Australian National Health and Medical Research Council provide guides and tools on preventing infection at: <http://www.nhmrc.gov.au>. including the NHMRC Australian Guidelines for the Prevention and Control of infection in Healthcare in 2010. A Summary of Recommendations is in the Clinical Educators Guide for the Prevention and Control of infection in Healthcare

4. Center for Disease Control and Prevention (CDC) United States, The Center for Disease Control (CDC)

www.cdc.gov is part of the US Department of Health and Human Services (DHHS) which released the latest version of the Guidelines for the Use of Antiretroviral Agents in HIV-1 Infected Adults and Adolescents on 29 March 2012-updated 28/10/15: <http://www.aidsinfo.nih.gov/guidelines>.

The Clinical Guidelines Portal contains Guidelines for Occupational Exposure to HIV and Guidelines for Occupational Exposure to HBV, HCV and HIV.

www.aidsinfo.nih.gov/contentfiles/HealthCareOccupExpoGL.pdf.

CDC Updated US Guidelines for the Management of Occupational Exposures to HBV, HCV and HIV and Recommendations for Post Exposure Prophylaxis MMWR 2001;50 (No RR-11) pp 1-42.

The CDC site provides a wealth of advice including a Travellers' health site and the Yellow Book. The Yellow Book 2012 is a wide-ranging resource written primarily for health professionals and contains up to date information on infectious disease and health information for travel to over 200 destinations. It is published every two years by the Centre of Disease Control and Prevention (CDC) :

<http://wwwnc.cdc.gov/travel/>

5. United Nations Organisation

The United Nations Organisation operates a website specifically related to HIV/AIDS

www.unaids.org/en/.

6. World Health Organisation (WHO)

This website offers a multitude of useful information for travellers and its Health Topics fact sheets are useful resources. The WHO Infectious Diseases site offers wide-ranging information on symptomology and treatment of infectious disease.

WHO publishes regularly updated advice on vaccines against disease of international relevance

www.who.int/immunization/en.

Post- exposure prophylaxis to prevent HIV infection: Joint WHO/ ILO guidelines on post-exposure prophylaxis (PEP) to prevent HIV infection Geneva: World Health Organisation 2007

7. The Australian Department of Foreign Affairs and Trade (DFAT)

This site gives travel advice by country for infectious disease and is an essential resource for Australian travelers: www.dfat.gov.au.