10. STUDENT HEALTH AND SAFETY

Policies regarding Medical Student Access to Health Care

Busy health professionals sometimes find it difficult to balance work and personal responsibilities and needs. However, the OSU COM directs that faculty, staff and trainees be permitted and enabled to attend to important medical and personal needs to maintain health and well-being. While medical students are encouraged to use unscheduled time for personal needs when possible, some medical, dental, and other personal issues cannot be resolved except during regular business hours. Students may request time off from educational classroom or clerkship responsibilities within the days specifically allotted for various rotations. Prior notification and approval of the clerkship director is required except in emergent situations. Faculty should learn the rules about excused absences from specific educational experiences including clinical rotations and facilitate medical student efforts to meet personal needs and optimize physical and mental health.

Policies regarding medical student exposure to blood / body fluids

Universal blood and body fluid precautions lessen the risk of exposure to such fluids, and these precautions must be used routinely. Medical students are in many situations during clinical clerkships where breaks in skin (“sharps” injuries) or mucosal contact may expose them to possibly infectious blood or body fluids.

Faculty should know the policies regarding what medical students should do once an exposure to potential pathogens through blood or other bodily fluids has occurred and should help to facilitate the completion of the recommended interventions. It is important to note that medical students are not medical center employees and should not be sent to employee health. Instead medical students should be counseled and treated for BBF exposures through student health or the emergency department.

The policy for BBF from the OSU COM Medical Student Handbook includes:

Students are assigned to several affiliated hospitals as well as University Hospitals. The protocols at each institution are slightly different. The following, however, are common to all facilities:

- Decontaminate (wash with disinfectant) the exposed or contaminated site immediately.
- Go to OSU Student Health or the Emergency Department immediately.
• Have the injury inspected and an incident report filled out by a supervisor (e.g., resident or head nurse).

• Make a note of the patient’s name, hospital number, attending physician, and location.

• Report the injury as soon as possible to Hospital Epidemiology or the OSU Student Health Service.

• Report to your immediate supervisor (attending or resident physician).

• Notify the attending physician of the patient. Usually, this is done by Hospital Epidemiology or OSU Student Health, since it is the hospital’s responsibility to have the patient’s blood drawn and tests done. The attending physician, though, may order the appropriate testing.

• The injured student’s blood may be drawn for baseline serologies at either the affiliated hospital or at OSU Student Health Service.

• Make an appointment to see Dr. Roger Miller, Preventive Medicine, OSU Student Health Service, 1875 Millikin Road. Call 292-4321 for appointments and 688-4108 to speak with Dr. Miller. Reports of tests should be sent to Dr. Miller for follow-up and appropriate medical recording.

• Notify the Associate Dean for Student Life (joanne.lynn@osumc.edu).

• Bills for blood tests and assessment should be submitted to the student’s health insurance. Any uncovered costs and bills should be brought to 155 Meiling Hall (office of the Associate Dean for Student Life).

### Medical Student Duty Hours

Faculty teaching medical students should be aware of and enforce the OSU COM regulations regarding medical student duty hours. This is the policy on student duty hours for clinical rotations:

Clinical rotations for medical students should provide academic and clinical experiences intended to increase the students’ knowledge and skills in caring for patients. To that end, the didactic and clinical responsibilities for students should be carefully planned and balanced with concerns for patient safety and student well being.

The following guidelines are modified from the ACGME resident duty hours standards, to take into account the effects of fatigue and sleep deprivation on learning and patient care.

Medical student duty hours are defined as all clinical and academic activities related to the medical school curriculum and individual department requirements, i.e., patient care and related activities (both inpatient and outpatient,) time spent in-house during call activities, and scheduled academic activities such as didactic sessions and conferences. Duty hours do not include reading and preparation time spent away from the duty site.
Duty hours must be limited to 80 hours per week, averaged over a four-week period, inclusive of all in-house call activities.

Students must be provided with 1 day in 7 free from all educational and clinical responsibilities, averaged over a 4-week period, inclusive of call. One day is defined as one continuous 24-hour period free from all clinical activities.

Adequate time for rest and for personal activities must be provided. In-house call is defined as those duty hours beyond the normal workday when medical students are required to be immediately available in the assigned institution. In-house call must occur no more frequently than every third night. Students should be excused from clinical work at noon following overnight call duties, but may stay for specific didactic or skill-training experiences which may occur in the afternoon.

**Suspected Student Substance Abuse**

**I. Background**

The College of Medicine is committed to the health and well-being of patients and of its students. As part of this commitment, The COM complies with and upholds all federal, state and local laws that regulate or prohibit the possession, use or distribution of alcohol or illicit drugs. Students who are impaired by substance abuse endanger patients, themselves, faculty and staff, and other students. Substance abuse shall be defined as: 1) The use or possession of any drug in a manner prohibited by law; and 2) The use of alcohol or any legal drug or other substance in such a way that the user’s performance as a professional student is impaired. The COM recognizes that early treatment is essential for successful rehabilitation and recovery for students with substance abuse. Students are encouraged to voluntarily request referral for treatment before their substance abuse leads to academic or disciplinary problems.

**II. Policy**

The College of Medicine policy appropriately establishes substance abuse guidelines and procedures that are similar to those already in place for all other employees of the hospitals in which medical students work. Students are prohibited from engaging in substance abuse.

Testing for designated substances will occur on a scheduled basis during first-year orientation and before entrance into clinical duties in the third year of medical school. The College administration also reserves the right to drug test a student at any time that he or she is suspected of substance abuse (on “For Cause” basis) as outlined in Section 14 of this handbook. Prior to testing, students are asked to disclose any substance use and prescription medications to the College administration, who will keep this information confidential. Faculty who suspect a medical student of intoxication should immediately contact the Associate Dean for Student Life (292-5126) to set up “for cause” drug testing.