POLICY ON INFECTIOUS DISEASES

This policy supersedes all previous policies regarding infected healthcare workers at the University of the Pacific Arthur A. Dugoni School of Dentistry.

Purpose

This policy:
- Provides guidance for the requirements for Hepatitis B vaccination for all students and residents.
- provides the guidance for management of health care workers with infectious diseases,
- is intended to enhance the safety of patients and healthcare workers, and;
- acknowledges that a patient's right to informed consent must outweigh the worker's right to privacy when a risk of disease transmission is present.

The determination of risk is made based on scientific evidence and current legal and policy precedent.

Background

Healthcare workers have an obligation to provide care to all members of the public that present for treatment, regardless of the patient's infectious disease status. Standard precautions are adopted to prevent the transmission of infectious diseases from patient to healthcare worker, healthcare worker to patient, or from patient to patient. It is the policy of the University of the Pacific Dugoni School of Dentistry that no patient will be denied treatment based solely on infectious disease status with the exception of those conditions that the US Public Health Service has determined must be carried out in special settings (i.e.: hospital treatment of patients with active infection with tuberculosis). In such cases, all efforts will be made to accommodate the patient or refer them to the appropriate healthcare provider or facility in a timely manner.

The University of the Pacific has a commitment to the rights and integrity of all involved in the educational process of a dental professional, including students, faculty and staff who have infectious diseases. Dugoni School of Dentistry makes the commitment within this policy that no person shall be excluded from participation in, denied the benefits of, or be subject to discrimination under any program or activity sponsored or conducted by the Dugoni School of Dentistry on any basis prohibited by applicable law including, but not limited to, race, color, national origin, religion, handicap or sex.

These guidelines are made in light of current scientific evidence, which supports the fact that the risk of transmission of infectious diseases from healthcare worker to patient is small to negligible if the dental practitioner adheres strictly to the Centers for Disease Control Infection Control Guidelines, avoids exposure-prone invasive procedures and follows the highest standards of professional conduct and behavior. It is within this frame of reference that the following Dental School policies on infectious diseases were developed.
**Policy Statement**

Healthcare workers have an ethical obligation to their patents to know their own infectious disease status. For this reason, all workers who believe they are at risk for human immunodeficiency virus (HIV), hepatitis B virus (HBV), hepatitis C virus (HCV) or other bloodborne diseases are encouraged to discuss their health status with their personal physician.

All students and residents within the general and surgical dental disciplines will be required to submit information regarding their HBV immunity status prior to matriculation. When possible, the vaccination series and post-vaccine testing for surface antibody should be completed before matriculation.

**The Hepatitis B Vaccine**

The Hepatitis B vaccine consists of three vaccines given over a 6-month period of time. Testing for surface antibodies should be conducted 1-2 months after the third and final injection. If that test is negative, indicating the individual did not respond to the vaccine, the entire vaccine series should be repeated. Testing for surface antibodies should again be conducted 1-2 months after completion of the series. If the individual continues to show no immune response to the vaccine, they should be tested for core antibodies (anti-HBC) and surface antigen (HBsAg). The presence of surface antigen indicates either acute or chronic infection with Hepatitis B Virus. These individuals should be referred to their medical provider for counseling and follow up.

**Follow-up for vaccine non-responders**

In most cases, it will not be necessary to conduct additional testing or to restrict the activities of the healthcare workers who are positive for HBsAg. For healthcare workers who perform exposure-prone procedures as defined in the Centers for Disease Control and Prevention Guidelines, *Updated CDC Recommendations for the Management of Hepatitis B Virus–Infected Health-Care Providers and Students* an expert review panel shall be convened to evaluate the infected provider’s clinical and viral burden status; assess his or her practices. Procedures and techniques, experience, and adherence to recommended surgical and dental technique; provide recommendations, counseling, and oversight of the provider’s continued practice or study within the Pacific Dugoni School of Dentistry. The panel will investigate and notify appropriate persons and authorities (e.g., risk management or, if need be, licensure boards) for suspected and documented breaches in procedure or incidents resulting in patient exposure. Current CDC guidelines will be followed in the identification of appropriate members of the expert review panel.

**Human Immunodeficiency Virus**

It is expected that all students, faculty staff and employees will be bound to the principle of strict confidentiality in all patient and health care related activities.
The Dugoni School of Dentistry encourages students, faculty, staff and employees who believe they are at risk of HIV-infection to seek testing and counseling. The Dental School shall provide counseling about access to confidential and anonymous HIV-antibody testing, about the implications of positive or negative results for career and personal health, about the availability of expert medical care, and about the prevention of further spread of infection.

**Student, Faculty, and Healthcare Staff Interaction With Patients With AIDS or HIV-Infection**

Entry into the healthcare professions is a privilege offered to those who are prepared for a lifetime of service to the public. Students, faculty and health care staff have a fundamental responsibility to provide care to all patients assigned to them, regardless of diagnosis. A failure to accept this responsibility violates a basic tenet of the medical profession – to place the patient’s interest and welfare first.

Individuals who feel that their activities within the dental school pose a special risk to their health because of exposure to HIV-infected patients, working conditions presenting a risk of exposure to HIV organisms, or the presence of HIV infection in the individual himself or herself, should seek the assistance of their immediate supervisor.

**Education of Students, Faculty, and Staff of the Dental School about AIDS and it’s Prevention.**

The Dugoni School of Dentistry provides a program on prevention of exposure to infectious organisms in professional and personal situations early in the student’s educational experience and the beginning of clinical rotations.

The Dental School provides an educational program for staff and employees which takes place early in the employment and focuses upon prevention of exposure to infectious organisms in the workplace as warranted by the risk presented by the work setting based on guidelines generated by the CDC and Cal/OSHA. Annual retraining of all employees at risk of exposure is also provided.

**Implementation**

Upon acceptance into the doctoral or residency programs, the student or resident will be required to provide medical information. The information to be included on the medical record is determined by the Division of Student Services in consultation with the appropriate individuals, committees and departments.

Medical forms will be forwarded to the Cowell Wellness Center for review and the information maintained in a secure database.

**Effective date: 1/1/2001**

**Revised July 6, 2012**
References

CDC. Updated CDC Recommendations for the Management of Hepatitis B Virus-Infected Health-Care Providers and Students. MMWR.61(RR03);1-12. July 6, 2012