

Max Rady College of Medicine

Undergraduate Medicine Education Policy

Policy Name:	Accidental Exposure to Infections and Environmental Hazards
Application/Scope:	All Registered Learners in the MD and MD/PhD Program
Approved (Date):	July 20, 2021
Review Date:	July 2026 (5 year after Revised date)
Revised (Date):	July 2021
Approved By:	UGME Management

1.0 **PURPOSE**

This policy sets out the process related to infectious exposures and injuries, to protect the learner's health and that of patients and facility staff.

2.0 **DEFINITIONS**

- 2.1 Infectious exposure – significant contact with an infectious agent (e.g., hepatitis B, measles, tuberculosis) that has the potential of leading to infection in the learner. Infectious exposures include but are not limited to puncture wounds or scratches due to potentially contaminated needles or sharp instruments; splashes of blood or body fluid to non-intact, abraded, or chapped skin or mucous membrane; bites.
- 2.2 Injury – significant contact with an environmental hazard (i.e., a substance, state, or event) that has the potential to threaten the health of the learner. Injuries may include but are not limited to lacerations, burns, crush injuries, and chemical exposures.
- 2.3 Environmental Health and Safety Office (EHSO) – an office of the University of Manitoba.
- 2.4 Learner – a health professional student enrolled in the Rady Faculty of Health Sciences at the University of Manitoba.
- 2.5 Occupational and Environmental Safety and Health (OESH) – a program of the Winnipeg Regional Health Authority.
- 2.6 Visiting student – a student from another university participating either in an elective or in the Summer Early Exposure Program.
- 2.7 Workplace Hazardous Materials Information System (WHMIS) – a system for providing information on the safe use of hazardous products in Canadian workplaces, via product labels, material safety data sheets, and worker education.
- 2.8 The Workers Compensation Board of Manitoba (WCB) – is a workplace injury and disability statutory corporation that insures and supports safe and healthy work and workplaces.
- 2.9 CURIE Student Accident Coverage – a program to provide students with insurance for a workplace injury or accident through the Canadian University Reciprocal Insurance Exchange.

3.0 **POLICY STATEMENTS**

- 3.1 All registered learners in the MD and MD/Ph.D. program shall receive instruction related to infection control and environmental hazards as early as practicable following registration; attendance shall be mandatory for these sessions.
- 3.2 All learners shall comply with the [immunization and testing](#) requirements of the Max Rady College of Medicine.
- 3.3 All learners shall receive a copy of hepatitis B serological results demonstrating immunity if such is possible for the learner to achieve. Learners shall always have hepatitis B serological test results readily available (e.g., kept digitally on a phone, or as a pocket card in a purse or wallet), in the

event of exposure to blood or bodily fluids. See Appendix 1 for an example of a hepatitis B pocket card. Learners who are hepatitis B non-responders shall receive instructions on what to do in the event of exposure to blood or bodily fluids.

- 3.4 Learners shall comply with clinical teaching sites' respective policies related to infection control and exposure to infectious and environmental hazards, to protect the learner's health and that of patients and facility staff.
- 3.5 All learners shall receive Workplace Hazardous Materials Information System (WHMIS) training. If a learner has taken WHMIS training in the past this training may carry forward as long as the learner retains a record or certificate of proof. Note that with the new provincial WHMIS legislation learners are required to receive training for "WHMIS 2015". Students and staff at the university can access this training and certification by enrolling in the online course available on UMLearn. Instructions on how to self-register (UMNetID and password) for the training are [located here](#).
- 3.6 A learner who sustains an infectious exposure or injury shall comply with the following procedures:
 - 3.6.1 The learner shall perform or receive from another person immediate first aid:
 - 3.6.1.1 For a puncture injury or laceration, the learner shall wash the injury site thoroughly with soap and water and cover the area with a sterile dressing if necessary.
 - 3.6.1.2 For an eye or mucosa splash, or exposure to non-intact, abraded, or chapped skin, the learner shall flush the injury with water for 15 minutes.
 - 3.6.1.3 For other infectious exposures or injuries, the immediate first steps will depend on the nature of the incident.
 - 3.6.2 The learner shall immediately inform the learner's clinical supervisor (e.g., attending physician) about the infectious exposure or injury. The clinical supervisor will assist the learner in determining appropriate next steps, which will depend on the nature of the infectious exposure or injury, as well as the time of day it occurred. Some incidents (e.g., lacerations; exposure to blood or bodily fluids) require immediate follow-up; follow-up for certain infectious exposures (e.g., exposure to tuberculosis) may be delayed until the next business day.
 - 3.6.3 The learner shall notify the occupational health service of the clinical or educational institution in which the incident occurred. As the learner may be anxious or confused by the incident, and/or not familiar with how to access the local occupational health service, the clinical supervisor is responsible for assisting the learner with this notification. The occupational health service will provide access to immediate medical assessment and ongoing investigation of the incident. If the occupational health service is not available (e.g., after hours) and immediate follow-up is warranted, the learner shall be directed to the nearest emergency department immediately.
 - 3.6.4 Site occupational health contacts for infectious exposures or injuries are as follows:
 - 3.6.4.1 Infectious exposures or injuries which occur at the University of Manitoba Bannatyne Campus or Health Sciences Centre (HSC):
 - Occupational and Environmental Safety & Health (OESH)
 - SR149-700 William Avenue
 - Office hours Monday to Friday: 7:00 am to 3:00 pm
 - Call [204-787-3312](tel:204-787-3312) and ask to speak to the Occupational Health Nurse regarding the infectious exposure or injury.
 - If the incident occurs outside the above-stated hours, call 204-787-3312 and leave a message stating the name of the learner, contact phone number, and circumstances of the incident. Then report to the HSC Adult Emergency Department as soon as possible (700 William Ave, Winnipeg, [204-787-3167](tel:204-787-3167)).
 - 3.6.4.2 Infectious exposures or injuries which occur at the St. Boniface General Hospital or St. Boniface Research Centre:

- St. Boniface Occupational Health and Safety Department
- Room TG002B, 409 Tache Avenue
- Office hours Monday to Friday: 7:45 a.m. to 4:00 p.m.
- Call 204-237-2439 and ask to speak to the Occupational Health Nurse regarding the infectious exposure or injury.
- If the incident occurs outside the above-stated hours, call 204-237-2439 and leave a message stating the name of the learner, contact phone number, and circumstances of the incident. Then report to the St. Boniface General Hospital Emergency Department as soon as possible (409 Tache Ave, Winnipeg, 204-233-8563).

3.6.4.3 Infectious exposures or injuries, which occur at another facility, shall contact the occupational health office of the appropriate facility (WRHA information is [located here](#).) If the incident occurs outside the hours of the nearest occupational health office, report to the closest emergency department; follow up with the occupational health office the next business day.

- 3.6.5 As soon as practical the learner shall notify the University of Manitoba Environmental Health and Safety Office (EHSO) Occupational Health Coordinator (204-474-6633), EHSO@umanitoba.ca) for all infectious exposures or injuries requiring medical follow-up. The EHSO will assist the learner with reporting the incident to Workers Compensation if required. If reporting is necessary, the EHSO will assist the learner with the completion of the [Notice of Injury Form](#).
- 3.6.6 The learner has the option of notifying the Office of Student Affairs Medicine at the University of Manitoba regarding the incident. Student Affairs Medicine can provide the learner with the following services as needed. Counseling regarding the incident; assistance with the completion of documentation that may be required. Liaison with EHSO and the occupational health services of the institution in which the infectious exposure or injury occurred. Liaison with the learner's program if there is a need to alter the curriculum or clinical rotation resulting from the incident.
- 3.7 Documentation of the learner's immune status will be relevant for many post-exposure assessments involving infectious diseases, and therefore a copy of this documentation should be brought to the assessment or requested immediately. Such documentation may include the learner's status regarding measles, mumps, rubella, tetanus, diphtheria, pertussis, polio, hepatitis B, varicella, influenza, and tuberculosis infection:
- 3.7.1 A learner should bring hepatitis B serologic results (e.g., pocket card) to the assessment (see section 3.3 and Appendix 1).
- 3.7.2 A learner or an individual providing care to a learner can request the learner's immune status record through the Immunization Program office: 204-480-1305, fax: 204-480-1333, immune@umanitoba.ca, P127 Pathology Building, Bannatyne Campus; office hours Monday to Friday 8:30 a.m. – 4:30 p.m.
- 3.7.3 Learners and visiting students attending a host school can access their Association of Faculties of Medicine of Canada (AFMC) Student Portal Immunization and Testing Form online through the AFMC Portal; learners are also encouraged to keep a copy of their records handy while visiting a host school.
- 3.8 The clinician providing an assessment following significant contact with an infectious agent may require additional details regarding the source of exposure; for example, the risk level or serologic status of a client to whose blood or bodily fluids the learner was exposed. The clinician providing the assessment should liaise with the clinical supervisor for any necessary information regarding the source or incident. A learner should not approach a client or review the clinical chart to obtain information necessary for a post-exposure assessment, and a learner should not be involved with arranging to test a client for this purpose.
- 3.9 If an infectious exposure or injury occurs outside of Winnipeg or Manitoba learners should promptly access all necessary care locally. If additional follow-up is warranted this can be provided by contacting WRHA OESH upon the learner's return to Manitoba (see contact information in

section 3.6.4.1). EHSO should be notified of all infectious exposures or injuries requiring medical follow-up occurring in the course of the learner's training regardless of at which site the exposure occurred.

- 3.10 Financial responsibility following learner Infectious exposure or injury: all learners, including visiting students on placement who sustain an infectious exposure or injury (as defined in section 2) have full coverage through the Workers Compensation Board of Manitoba (WCB) which is governed by The Workers Compensation Act (Manitoba).

The University also has reciprocal agreements with the governing WCB authorities in the Provinces of Alberta, Ontario, and the Territory of Nunavut. For the remaining jurisdictions, the University has an Accidental Injury Coverage for the Student Placements Policy. This coverage is provided through Industrial Alliance Insurance and is equivalent to the WCB coverage.

Further, the Canadian University Reciprocal Insurance Exchange (CURIE) provides liability insurance to all students on placement regardless of their location.

- 3.11 Manitoba's Testing of Bodily Fluids and Disclosure Act enables a person who has come into contact with a bodily fluid of another person to apply for a court order requiring the other person to provide a blood sample which will be tested to determine if that person is infected with hepatitis B, hepatitis C or HIV. More information on this legislation is [available here](#).

- 3.12 This policy shall apply equally to all visiting students. Of note:

3.12.1 Visiting students have access to all local post-exposure services including occupational health offices and emergency departments.

3.12.2 Visiting students are expected to have received instruction related to infection control and environmental hazards before attending the University of Manitoba for an elective.

- 3.13 This policy is consistent and complementary to the University of Manitoba Biosafety Guide (March 2005), produced by EHSO.

Note: occupational health contact information and business hours found in the current policy are more up to date.

- 3.14 This policy will be reviewed on the first anniversary of its original passage and every five years thereafter.

4.0 PROCEDURES

RESPONSIBILITIES OF THE PRE-CLERKSHIP AND CLERKSHIP ADMINISTRATORS, UGME

- 4.1 In each academic year Undergraduate Medical Education will provide instruction related to infectious exposures and injuries as follows:

4.1.1 Year I learners will participate in a mandatory Infection Control and Prevention session that is by the Winnipeg Regional Health Authority program for healthcare workers.

4.1.2 The UGME Administrator, Enrolment will ensure that at the beginning of Year 1 all learners receive a card outlining the procedure following infectious exposures or injuries. Learners are to wear this card on their lanyard and are expected to keep it for the full duration of their time in the UGME Program (Appendix 2).

RESPONSIBILITIES OF THE IMMUNIZATION PROGRAM

- 4.2 Ensure learners comply with the immunization and testing requirements of the Max Rady College of Medicine; advise the Associate Dean of Undergraduate Medical Education when learners are not meeting requirements.
- 4.3 Provide learners with a copy of hepatitis B serological results and provide advice to learners who are hepatitis B non-responders.
- 4.4 Provide learners an immune status orientation session, which includes information on infectious exposures and injuries.

RESPONSIBILITIES OF THE LEARNER

- 4.5 All learners shall attend the mandatory sessions related to infection control and environmental hazards offered following registration.
- 4.6 All learners shall comply with the immunization and testing requirements of the Max Rady College of Medicine. Learners who may have a medical or health condition necessitating a possible exemption from a specific immunization or test requirement must notify the Immunization Program of this.
- 4.7 A learner who experiences an infectious exposure or injury shall:
 - 4.7.1 Perform or receive from another person immediate first aid, including referring to WHMIS as appropriate.
 - 4.7.2 Notify the clinical supervisor of this immediately.
 - 4.7.3 Notify the occupational health service of the clinical or educational institution in which the incident occurred or equivalent (e.g., emergency department) as appropriate.
 - 4.7.4 Notify EHSO (for all incidents requiring medical follow-up).
 - 4.7.5 Follow instructions provided by the entities listed above.

RESPONSIBILITIES OF THE CLINICAL SUPERVISOR

- 4.8 All clinical supervisors shall be familiar with their responsibilities under this policy.
- 4.9 All clinical supervisors who are contacted by a learner regarding an infectious exposure or injury shall without delay provide the learner with all necessary support; this includes:
 - 4.9.1 Assisting the learner in determining appropriate next steps, which will depend on the nature of the infectious exposure or injury and the time of day it occurred.
 - 4.9.2 Assisting the learner in determining the most appropriate location for an evaluation and assessment, if one is indicated.
 - 4.9.3 Providing the learner time off from clinical duties, as necessary, to obtain an evaluation and assessment if one is indicated.
- 4.10 Clinical supervisors shall understand that the learner may be anxious or confused, and/or not familiar with how to access the necessary services, and therefore additional support may be necessary.
- 4.11 Clinical supervisors shall be available to correspond with the clinician providing the post-exposure assessment if additional information regarding the source or incident is necessary.

RESPONSIBILITIES OF THE ASSOCIATE DEAN UGME STUDENT AFFAIRS

- 4.12 The Associate Dean of UGME Student Affairs is available to provide counseling as needed to learners regarding infectious exposures and injuries, liaison with the institution in which the infectious exposure or injury occurred, and support the learner in obtaining and completing all EHSO appropriate forms. The learner doesn't need to contact the Associate Dean of UGME Student Affairs for all types of infectious exposures or injuries; however, support is available for learners who require it.
- 4.13 If, as determined by the clinician assessing the learner, a leave of absence from the scheduled curriculum is required because of an infectious exposure or injury, the clinician shall contact the Associate Dean of UGME Student Affairs and confer with the appropriate faculty to develop an appropriate alternate schedule.

RESPONSIBILITIES OF THE ADMINISTRATOR, ELECTIVES, UGME

- 4.14 Provide each visiting student a link to this policy when the visiting student accepts a clinical placement at the University of Manitoba.

5.0 REFERENCES

- 5.1 Liaison Committee on Medical Education: Functions and Structure of a Medical School. Medical Students: Standard MS-30.

- 5.2 Winnipeg Regional Health Authority. Blood and Body Fluid – Post Exposure Management. September 2011.
- 5.3 UGME Policy & Procedures – Medical Learners with Blood Borne Pathogens.
- 5.4 University of Manitoba Biosafety Guide (2005).

6.0 POLICY CONTACT

Associate Dean of UGME Student Affairs.

Appendix 1

All learners shall provide a copy of hepatitis B serological results demonstrating immunity if such is possible for the learner to achieve. Learners will be encouraged to keep hepatitis B serological test results readily available at all times, in the event the Learner needs this information due to exposure to blood or bodily fluids. Learners who are hepatitis B non-responders will receive instructions on what to do in the event of exposure to blood or bodily fluids. The Learner's pocket cards stating hepatitis B serologic results (see sample shown below) shall always be on hand with the Learner.

Appendix 2

The UGME Administrator, Enrolment will ensure that at the beginning of Year 1 all learners receive a card (shown below) outlining the procedure following infectious exposures or injuries. Learners must wear this card on their lanyard and must keep it for the full duration of their time in the UGME Program.