


Name of Policy: Student hepatitis B positive virus status Policy Number: 3364-81-04-016-03 Approving Officer: Dean, College of Medicine Responsible Agent: Director, University Health Services Scope: All University of Toledo Campuses	 Effective date: 01/12/09
<input type="checkbox"/> New policy proposal	<input type="checkbox"/> Minor/technical revision of existing policy
<input type="checkbox"/> Major revision of existing policy	<input checked="" type="checkbox"/> Reaffirmation of existing policy

(A) Policy statement

(B) Purpose of policy

(D) Procedure

The hepatitis B virus (HBV) is a DNA virus and member of the hepadna family of viruses, and it is a very common virus. It is estimated that there are approximately 1 – 1.5 million carriers in the United States. In populations where hepatitis B is endemic (Asia and some Mediterranean countries), the virus is usually transmitted from the infected mother to her child during the birth process or sometimes between children. In Western countries, infection is most commonly spread from needle sticks or sexual contact.

Any student whose lab testing is positive for the hepatitis B surface antigen or with a positive hepatitis B antibody and who has NOT received the hepatitis B vaccine are recommended to receive a review at UHS upon admission. This is optional and not mandatory. An evaluation appointment is scheduled with the UHS Medical Director. If students have not had subsequent hepatitis B work-up based on their lab status, specific labs are ordered to check infectivity and liver status. Students are counseled on the possible impact of positive hepatitis B status on their education and training. There is also an increased risk that hepatitis B-induced liver cell cancer can occur. For this reason, students are referred for evaluation to a gastroenterologist/hepatologist specialist of their choice.

Hepatitis B is a chronic disease and once it is contracted there is no cure. The Center for Disease Control (CDC) guidelines recommend that ‘health care workers’, in this case meaning ‘students training in health care professions’, who are hepatitis B surface antigen positive and who do not perform exposure-prone invasive procedures generally should not have any work restrictions.

They should use appropriate barrier precautions to prevent exposure to blood and body fluids. Possible reasons that an infected student may have limited work restrictions include 1) If they are acutely ill with hepatitis they should not be engaged in patient activities until resolution of the illness, 2) If they have exudative lesions on their hands (e.g. dermatitis, infected areas, burns, etc.) they should be evaluated as to whether they should have direct patient contact. Students who perform invasive procedures (i.e. procedures where the hands or fingers are in a body cavity at the same time as sharp instruments) should be evaluated further, including testing for hepatitis B e antigen (HBeAg). It is recommended that students talk with their preceptors early in their training to avoid being placed in a situation where there may be a risk of transferring the disease. There is no mandatory reporting to the preceptors or attending physicians.

<p>Approved by:</p> <p>Jeffrey Gold, M.D.</p> <hr/> <p>Name Dean, College of Medicine</p> <hr/> <p>Title</p> <hr/> <p>Date</p> <p><i>Review/Revision Completed by:</i></p>	<p>Policies Superseded by This Policy: None</p> <p>Initial effective date:</p> <p>Review/Revision Date:</p> <ul style="list-style-type: none"> •10/20/00 •08/17/01 •07/16/03 •09/17/04 •12/05/05 •01/12/09 <p>Next review date: 01/12/12 (three years from most recent revision/review date)</p>
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