S-13: STUDENT HEALTH, BACKGROUND, AND SAFETY POLICIES

POLICY: All School of Nursing students must comply with communicable requirements and verify a health history and physical prior to beginning initial nursing course and as required by the School of Nursing and the clinical agencies in which they are placed. The student is responsible for providing the School of Nursing with records of:

1. Common communicable disease immunization or immunity (flu, MMR, Tdap, Varicella)
2. Hepatitis B immunization
3. Annual screening for tuberculosis or x-ray follow-up
4. Health history and physical
5. Basic Life Support Skills Validation (required every 2 years)
6. Documentation of current health insurance
7. Negative drug screen prior to initial enrollment in the nursing classes
8. Background check
9. Malpractice Insurance (graduate students only)
10. Bloodborne Pathogens and HIPAA Training certificates (graduate students only)

RATIONALE: All School of Nursing students who work in settings where patient care is provided are at increased risks for both exposure to and transmission of communicable diseases and bloodborne pathogens and more likely to be in situations where Basic Life Support Skills are required. Hospitals associated with our clinical education program require background checks on incoming students to ensure the safety of the patients treated by students in the program. Therefore specific procedures are needed to:

1. Protect patients and other health care providers with whom students work.
2. Decrease health risks to students.
3. Comply with School of Nursing agency contracts, OSHA regulations, and Centers for Disease Control Guidelines.
4. Provide a mechanism for student treatment if needed.

PROCEDURE:

I. Immunizations
   A. Immunity/Screening Criteria
      1. In order to be in compliance with the mandatory immunization requirements, students will meet the following criteria:
         a. Measles
            i. Born before 1957 (probably infected naturally); or,
            ii. Laboratory confirmation of disease or,
            iii. Laboratory evidence of measles immunity; or,
iv. Adequate immunization with two doses of live measles after the first birthday, and no less than one month apart.

b. Mumps
   i. Born before 1957 (probably infected naturally); or,
   ii. Laboratory confirmation of disease; or,
   iii. Laboratory evidence of mumps immunity; or,
   iv. Adequate immunization with 2 doses of live mumps vaccine on and/or after first birthday.

c. Rubella
   i. Born before 1957 (probably infected naturally); or,
   ii. Laboratory evidence of immunity; or,
   iii. Immunization with 2 doses of live virus on and/or after first birthday.

d. Tetanus, Diphtheria, and Pertussis (Tdap)
   i. Record of booster within the last 10 years
   ii. If the student is pregnant, Tdap should be given during each pregnancy

e. Hepatitis B
   i. Completed vaccine series (initial, one month, six months); or,
   ii. Evidence of Hepatitis B vaccination series in process, with completion of series by the start of the second semester of study in the School of Nursing; or,
   iii. Laboratory evidence of Hepatitis B immunity within preceding 12 months.

f. Tuberculosis
   i. IGRA blood testing (QuantiFERON-TB Gold in tube (QFT)); or
   ii. Evidence of chest x-ray and medical follow-up for those with past history of positive reactivity.

g. Varicella
   i. Completed vaccinations; or,
   ii. Laboratory evidence of immunity.

h. Flu shot (BSN only)
   i. Record of flu shot each fall

B. Documentation of Immunizations or Immunity

1. Nevada Administrative Code (NAC) Chapter 441 A.755 requires that all students, regardless of age, must provide documentation of having received the Tetanus Diphtheria (Td) immunization within the last 10 years or exemption. In addition, students born in or after 1957 must provide proof of immunity for the following: two doses of Measles, Mumps, & Rubella (MMR). This information is provided to Student Enrollment Services prior to admission to the university.

2. When admitted to the School of Nursing and prior to attendance of the first nursing classes, students will need to provide evidence of: 1) required immunizations, 2) documentation related to the BCLS-Health Provider
Card, 3) Health History and Physical Examination (Attachment #1), and 4) evidence of a negative drug screen. Documentation must be submitted to the appropriate program administrative assistant (AA) by the date designated in contract signing.

3. Current students and their immunization status will be maintained by the appropriate program AA, and will be available for faculty access as needed through E*Value.

4. Students who are enrolled in the nursing program who do not submit all required forms to the appropriate program AA by the date designated may be removed from courses and potentially the nursing program.

5. If the student has been in the program for a length of time that the TB/QuantiFERON Gold, Tdap, and BCLS data must be updated, the updating must occur prior to the beginning of the semester with documentation submitted to the appropriate program AA. If the returning student is non-compliant, the student will not be allowed to enroll in any course.

II. Exposure to Communicable and Bloodborne Pathogens - Undergraduate

A. Exposures to Communicable Diseases

1. Students will report exposure to any communicable disease, which may be hazardous to patients or other health care providers, to their supervising clinical faculty.

   a. The supervising faculty member will report the incident to the Associate Dean for Undergraduate Affairs (ADUA) as soon as possible on the day of the incident. If the ADUA is not available, the faculty member must report to the Associate Dean of Faculty or the Dean of the School of Nursing. A written report describing the exposure incident and subsequent actions taken should be placed in the student’s file and copied to the ADUA.

   b. The faculty member will report the incident to the infection control department and/or nursing administration of an involved clinical agency prior to leaving the clinical facility.

B. Exposure to Blood and Body Fluids

1. If the student sustains an exposure to blood and/or body fluids, the student must immediately report, within 10 minutes, this exposure to the clinical instructor and the charge nurse on the unit. If the student is unable to immediately contact the clinical instructor, the School of Nursing is to be contacted.

   a. The student should then go to the nearest Emergency Department or Laboratory Service and ask for baseline lab testing for HIV and Hepatitis B titer. It should be noted that the institution or agency where exposure has occurred has no responsibility to provide any testing or treatment related to the exposure. The person to whom the student has been exposed (the source patient) should be tested for Hepatitis and HIV antibodies. The agency in which the exposure occurred, may or may not, pay the cost of the lab draw on the source patient. When indicated, the Centers for Disease Control
(CDC) recommends initiating post-exposure prophylaxis against HIV as close to the time of exposure as possible, ideally within one hour and continuing for 4 weeks.

b. The faculty member will report the incident to the ADUA and provide a written report describing the exposure incident, including degree of risk considering client status and type of exposure and subsequent actions taken. The faculty member will report the incident to the infection control department and/or nursing administration of an involved clinical agency prior to leaving the clinical facility. The Infection Control department may be a resource in determining the degree of risk in the exposure.

c. The incident report will be filed in E*Value and notification made to the ADUA.

III. Exposure to Communicable and Bloodborne Pathogens - Graduate

A. Exposures to Communicable Diseases

1. Students will report exposure to any communicable disease, which may be hazardous to patients or other health care providers, to their supervising clinical faculty.

a. The student and/or the clinical preceptor will report the incident to the appropriate Program Director as soon as possible on the day of the incident. If the Program Director is not available, the incident must report to the Associate Dean for Graduate Affairs (ADGA) or the Dean for the School of Nursing. A written report describing the exposure incident and subsequent actions taken should be placed in the student’s file and copied to the appropriate Program Director and ADGA.

b. The clinical preceptor will report the incident to the infection control department and/or nursing administration of an involved clinical agency prior to leaving the clinical facility.

B. Exposure to Blood and Body Fluids

1. If the student sustains an exposure to blood and/or body fluids, the student must immediately report, within 10 minutes, this exposure to the clinical instructor and the site coordinator/manager. If the student is unable to immediately contact the clinical instructor, the School of Nursing is to be contacted.

a. The student should then go to the nearest Emergency Department or Laboratory Service and ask for baseline lab testing for HIV and Hepatitis B titer. It should be noted that the institution or agency where exposure has occurred has no responsibility to provide any testing or treatment related to the exposure. The person to whom the student has been exposed (the source patient) should be tested for Hepatitis and HIV antibodies. The agency in which the exposure occurred, may or may not, pay the cost of the lab draw on the source patient. When indicated, the Centers for Disease Control
(CDC) recommends initiating post-exposure prophylaxis against HIV as close to the time of exposure as possible, ideally within one hour and continuing for 4 weeks.

b. The student and/or clinical preceptor will report the incident to the appropriate Program Director and provide a written report describing the exposure incident, including degree of risk considering client status and type of exposure and subsequent actions taken. The clinical preceptor will report the incident to the infection control department and/or nursing administration of an involved clinical agency prior to leaving the clinical facility. The Infection Control department may be a resource in determining the degree of risk in the exposure.

c. The incident report will be filed in E*Value and notification made to the appropriate Program Director and the ADGA.

IV. Health and Safety

A. Health History and Physical

1. Prior to admission to a nursing program, students must submit documentation of a current (within previous 6 months) health history and physical examination (Attachment #1).

2. Students are also expected to meet any additional requirements for health history and physical examination as determined by their health care provider or required by the clinical agencies in which they are placed.

3. The Health History and Physical documentation will be maintained by the appropriate AA, and will be available for faculty access as needed through E*Value.

4. Students who are enrolled in the nursing program who do not submit all required forms to the appropriate AA by the date designated may be removed from courses and potentially the nursing program.

B. Basic Life Support Validation

1. Students are required to maintain currency of Health Care Provider Skills (American Heart Association).

2. At the time of admission to the first nursing class and every two years after that date, the student must provide validation that the Health Care Provider Skills are up-to-date. The card must not expire prior to the end of the semester.

3. The BCLS card will be maintained by the appropriate AA and will be available for faculty access as needed through E*Value.

4. Students who are enrolled in the nursing program who do not submit all required forms to the appropriate AA by the date designated may be removed from courses and potentially the nursing program.

C. Health Insurance Validation

1. Students are required to maintain currency of health insurance. The student is responsible to determine that their health insurance coverage includes provisions for emergency room visits in the event of a needle stick or other high risk exposure in the clinical setting, as well as the costs
of anti-HIV drugs if the physician determines the medications are warranted.

2. Each semester the appropriate AA maintains copies of health insurance verification cards for all students and enters copies into E*Value.

D. Injury/Illness in the Clinical Area
1. Faculty member assesses the extent of the injury to determine if the student can remain in the clinical area.
2. If the faculty member determines that the student should seek medical care, the student is referred to his/her private physician.
3. Student and faculty member must complete an incident report if required by the clinical agency.
4. Billing of changes will be to the student’s insurance company, the clinical agency has no responsibility for treatment charges.
5. In the event of pregnancy, students may continue in the clinical experience accordance with the direction of their personal physician.
6. Students with health conditions which interfere with their ability to perform essential tasks as described in this document (Attachment #2) will be referred to the following (as applicable): the appropriate Program Director, ADUA or ADGA.

E. Negative Drug Screen
1. Prior to enrollment in the initial semester of the nursing program, students must participate in a drug screen.
2. The following procedure is to be followed:
   a. The student receives instructions and pays for the drug screen at www.precheck.com by clicking the Student button and following the instructions.
   b. If the results are negative, no additional actions are required. If the results are positive, the student will be notified that he or she will not be admitted to the program by the following (as applicable): the appropriate Program Director, ADUA or ADGA.
   c. Students who do not maintain continuous enrollment in a course with a clinical component must document a negative drug screen prior to beginning courses.
   d. When a student’s behavior suggests impairment,
      i. The student will need to notify a friend or family member to drive him or her to the nearest contracted laboratory for testing.
      ii. The student must arrive at the laboratory within two hours from pick up. If arrival to the laboratory is after this time, the student may be dismissed from the program.
      iii. The student will be directly supervised until picked up.
      iv. If the student is not picked up, then the plan for testing is at the discretion of the clinical instructor in consultation with the following (as applicable): appropriate Program Director and/or ADGA, or ADUA.
v. If the student refuses testing, the student will be immediately dismissed from the program.
e. Faculty instructor will then utilize the policy related to Removal from Clinical Experience.
f. If drug screen produces positive results, the policy related to Removal from Clinical Experience will be followed, including and up to dismissal from the program.

F. Clear Background Check
1. Prior to enrollment in the initial semester of the nursing program and every two years from the initial check, students must complete a background screening through PreCheck, Inc.
2. Payment to PreCheck, Inc. for the background check is a student responsibility.
3. Students will log on to www.precheck.com, click the Student button, and follow the instructions.
   a. The hospital will review the PreCheck report and decide whether the student is cleared to be in clinical at its site. The hospital will notify the UNLV School of Nursing (UNLV SON) if there is a problem.

G. Malpractice Insurance
1. Graduate students must provide proof of malpractice insurance prior to enrollment in the initial semester of the nursing program and each year before the insurance expires.

H. Bloodborne Pathogens and HIPAA Trainings
1. Graduate students must provide proof of Bloodborne Pathogens and HIPAA Trainings (available on UNLV’s Risk Management website) prior to enrollment in the initial semester of the nursing program and each year while in the program.

Prior Approval:
Approved by Student Affairs: 11/19/12, 10/13/14, 11/10/14, 5/9/16, 2/13/17, 7/16/18
Approved by Faculty Org: 3/18/13, 10/27/14, 11/24/14, 5/23/2016, 2/27/17, 7/30/18
Approved by: Executive Committee: 04/05/05
Approved by: Dean 04/05/05, 11/17/14, 11/24/14, 5/23/2016, 2/27/17, 7/30/18
HEALTH HISTORY & PHYSICAL EXAMINATION

TO BE COMPLETED BY A LICENSED HEALTH CARE PROVIDER

Is there any significant medical history or condition that could affect functioning as a nursing student as described in the attached “Essential Functions for Clinical Course Work in the School of Nursing?”

Yes ______ No ______ Please Describe: _________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

Is this individual currently taking any medication that could affect participation in a nursing education program, including interaction with patients and staff in clinical settings?

Yes ______ No ______ Please Describe: _________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

Please check the correct response box and initial:

_____ The student IS in good physical and mental health and appears able to undertake all aspects of the nursing education program, including interaction with patients and staff in clinical settings. (Please see “essential functions for clinical course work in the School of Nursing” on reverse side) Initial: _______.

_____ The student IS NOT in good physical and mental health and appears unable to undertake all aspects of the nursing education program, including interaction with patients and staff in clinical settings. (Please see “essential functions for clinical course work in the School of Nursing” on reverse side) Initial: _______.

Practitioner’s name (print):_____________________

Practitioner’s signature: ________________ Date: ____________

Licensed as (circle one): ARNP Physician Assistant Physician

License number: ________________ State/Country Licensed: _______

DOCUMENTATION OF HEALTH HISTORY AND PHYSICAL EXAMINATION
TO BE SUBMITTED BY ________________________________ TO BHS 419.
Essential Functions for Clinical Coursework

The University of Nevada, Las Vegas is dedicated to the equality of educational opportunity and the creation and maintenance of a campus environment free of barriers that discriminate against individuals with disabilities. Equality of access is achieved through reasonable classroom accommodations and reasonable adaptation of examination and evaluation procedures.

Becoming a nurse requires the completion of a professional education program that is both intellectually and physically challenging. A student interested in enrolling in the nursing program should be able to fully perform the essential functions in each of the following five categories: observation, communication, motor, intellectual, behavioral and social.

1. **Observation**: The applicant must be able to observe demonstrations of physical and psychosocial nursing interventions, and must be able to accurately observe a patient for the purpose of assessment, intervention, and evaluation. Observation, assessment, and evaluation requires the use of judgment as well as the functional use of the senses of vision and hearing, as well as other sensory modalities such as smell and touch.

2. **Communication**: An applicant must be able to effectively and efficiently speak, understand, and write the English language at a level consistent with successful course completion. The applicant must be able to communicate effectively and sensitively with patients and members of the health care team. Communication skills are used to gather assessment data, patient teaching, and provision of emotional support for patients and their families.

3. **Motor**: Applicants must have sufficient motor function to elicit information from patients by palpation, auscultation, percussion, and other diagnostic/evaluative procedures. Applicants should be able to execute reasonable motor movements required to provide general or emergency treatment of patients. Such actions require moderate motor strength, coordination of both gross and fine muscular movements, equilibrium, and functional use of the senses of touch and vision.

4. **Intellectual**: The applicant must be able to measure, calculate, reason, analyze and evaluate, synthesize and apply complex information. Students must be fully alert and attentive at all times in the clinical setting.

5. **Behavioral/Social**: Applicants must possess the emotional health required for full use of intellectual abilities, the exercise of good judgment, prompt completion of all responsibilities attendant to the assessment, intervention and evaluation of patients, and the development of mature, sensitive, and effective relationships with patients and co-workers. Applicants must be able to tolerate physically-taxing workloads and to function effectively under stressful conditions, and adapt to changing environments, display flexibility, and learn to function in the face of uncertainties inherent in the clinical care of many patients. Compassion, integrity
concern for other, interpersonal skills interest, and motivation are all qualities which applicant should possess.

Students in the health professions are held to standards of conduct that may exceed those typically expected of university students. Adherence to the standards of acceptable conduct as outlined in the American Nurses Association Code of Ethics and the Nurse Practice Act of Nevada (NRS 632) is required.