John A. Burns School of Medicine  
University of Hawai‘i  

Health Policy for Medical Students  
Effective January 1, 2002

I. Purpose

This Health Policy for medical students is to insure students:
1. Are adequately protected against specific diseases;
2. Undergo initial screening for health problems and annually for tuberculosis;
3. Are aware of the risks of exposure to diseases and disability;
4. Are covered by and understand the provisions of their health insurance policy;
5. Are aware of the availability of general and mental health services.

The School of Medicine ascribes to the philosophy that health care and maintenance is the individual responsibility of each student, including adequate insurance coverage. However, in recognition of the increasing cost of acquiring a medical education and in order to decrease some anticipated costs, certain programs are provided for in this policy by the School of Medicine.

II. Policy

The policy is in accordance with the Association of American Medical College’s “Recommendations Regarding Health Services for Medical Students”, and approved and amended by it’s Executive Council (February 1992/September 1992).

A. Requirements for Admission

All entering students will be required to submit:

1. A completed UHM CONFIDENTIAL HEALTH FORM;
2. A PHYSICAL ASSESSMENT form based on an exam completed within six months prior to matriculation;
3. Results of a TUBERCULIN SKIN TEST (PPD) and/or CHEST X-RAY performed within three months prior to matriculation in accordance with Hawai‘i State regulations (§11-93-14):
   a. An initial two-step PPD, not less than one week and not more than three weeks apart if the initial PPD is negative and annually thereafter; OR
   b. A chest X-ray if the initial PPD is positive; OR
   c. If there is a history of a positive PPD, documentation of a follow-up chest X-ray, and antimicrobial therapy for tuberculosis and subsequent chest X-rays if applicable.
4. Documentation of CURRENT IMMUNIZATION status and/or PROTECTIVE TITERS according to CDC guidelines against the following diseases:
   1) diphtheria, 5) rubella (protective titer only),
   2) tetanus, 6) polio,
   3) measles (rubella), 7) varicella (protective titer only)
   4) mumps, 8) hepatitis B

B. Mandatory Health Insurance

In order to facilitate provision of outpatient, mental health and hospitalization services, all students are required to carry health insurance with the following minimum coverage:
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1. Outpatient (including periodic screening): 80% of charges
2. Mental Health: 80% outpatient visits
3. Hospitalization: 80% of charges
4. Emergency Care: 80% of charges

C. Disability Insurance

Students are not required to carry Disability Insurance, but should be aware of their risk and are strongly encouraged to consider obtaining some form of Disability Insurance. Information is available through the Office of Student Affairs.

D. Mental Health Services

The Medical School recognizes that mental health problems can take many forms that may affect a student’s academic performance or personal adjustment. Causes may range from academic stress, personal problems, substance abuse and chemical dependency to major mental illness. In all cases, early recognition and prompt treatment is the most effective approach, and students are encouraged to utilize resources identified and/or provided by the School.

1. Appropriate mental health intervention may be obtained in one of two ways:
   a. An administrative decision for evaluation and/or treatment on the part of the Administration and faculty as part of an academic decision-making process to facilitate recommendations for remediation and issues related to student standing. The results are not confidential and a student must agree to allow appropriate faculty, via the Office of Student Affairs, access to information regarding a mandated plan in order to facilitate monitoring and re-assessment. The cost of the initial assessment will be covered by the School of Medicine and coordinated by the Chairman of the Department of Psychiatry or his or her designee.
   b. A student may self-refer to a psychiatrist/psychologist of his/her choice in the faculty or community, or choose from a resource list in the Student Handbook, or be referred by his/her advisor, in consultation with the Associate Dean in the Office of Student Affairs. These proceedings, including the initial referral, are confidential and protected by doctor-patient confidentiality, and can only be waived if the student so desires. The cost of the evaluation and treatment shall be covered by the student’s health insurance.

2. Confidentiality of records:
   a. Any requests for referral or reports related to mental health services will be kept in the student’s Confidential file and is not part of the open record.
   b. In situations where an evaluation or referral is administratively mandated, relevant information will be summarized by the Dean of Students and reported to the appropriate Committee. The records will be kept in the Confidential file and not open for review except by the Associate Dean in the Office of Student Affairs.

E. Leave of Absence (Medical)

Any Leaves of Absence for medical reasons will be in adherence with the general Leave of Absence Policy with the exception that any relevant documentation will be held as confidential and not part of the open record. The reason for the request will be noted as “personal” without further notation.

F. Chemical Dependency

1. Students will be exposed to the concerns of chemical dependency and alcohol use as part of their professional education, including the fact that chemical dependency is a treatable disease that affects all of society.
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2. Information regarding the availability of resource programs, including for diagnostic, therapeutic and support services, through the Department of Psychiatry and Hawai‘i Medical Association’s Committee on Physicians’ Health, will be publicized during orientation and in the Student Handbook. Appropriate levels of confidentiality will be insured for those seeking information, referral and treatment. [Any student known to or suspected of having a chemical dependency will be offered diagnostic and therapeutic services via the Department of Psychiatry or Hawai‘i Medical Association’s Impaired Physician Program.]

3. In cases where a chemical dependency is confirmed or identified as a cause of academic malperformance, entry into a rehabilitation program may be mandated by the Student Standing and Promotion Committee and monitored by the Office of Student Affairs.

4. Every effort shall be made to provide an environment in which recovering impaired students are able to continue their medical education without stigma, and, where possible, facilitate their transition to licensure.

G. Visiting Medical Students Health Requirements

All visiting medical students must meet all requirements of this policy, including the following, prior to receiving approval for electives:

1. Tuberculin skin test and/or Chest X-ray as detailed in II. A. 3. a) - c);

2. Current health insurance;

3. Current immunization status and/or protective titers to diphtheria, tetanus, polio, measles, mumps, rubella (titer only), hepatitis B, and varicella (titer only) in accord with CDC guidelines.

H. Student Health Surveillance and Monitoring System

Responsibility for the initial assessment of health records and the periodic review of students’ health status shall be the responsibility of the Associate Dean in the Office of Student Affairs. All information regarding a specific student’s health status, except as noted above, shall be maintained in a confidential file in the Office of Student Affairs and subject to all Federal and State laws regarding confidentiality.

I. HIV Policy

1. Students who believe they are at risk for HIV (Human Immunodeficiency Virus) infection either by behavior or exposure shall be encouraged to seek testing. There will be no mandatory testing of students by the Medical School.

2. The Medical School will provide information, education, counseling and may help facilitate medical care for all HIV infected students who seek help.

3. Every effort will be made to protect the personal rights of HIV positive students, including the right to freedom from unwanted disparate treatment and improper handling of private information. All information related to students' HIV status will be held in strictest confidence.

4. In order to provide expert and safe patient care, any modification of the clinical training of HIV positive medical students will be determined on a case-by-case basis, taking into account the nature of the clinical activity, the technical expertise of the infected person, and the risks posed by HIV carriage, attendant functional disabilities and the transmissibility of simultaneously carried infectious agents.

5. The Medical School shall provide information, education and counseling about HIV infection that promotes the personal and professional well being of all students.

6. In considering the admission of an applicant known to be HIV positive, the Medical School will determine whether they are qualified in terms of the technical standards established by the institution in compliance with Section 504 of the 1973 Vocational Rehabilitation Act.
J. Occupational Exposure

As an integral part of the preventive medicine and professional education aspects of the curriculum, and in accordance with the Liaison Committee of Medical Education's "Standards for Accreditation of Medical Education Programs Leading to the MD Degree", students will be trained regarding the prevention of (Universal Precaution) and care and treatment after exposure to infectious and environmental hazards prior to patient contact, and receive refresher courses during the introduction to second and third year sessions. The initial orientation shall include information regarding the effects of infectious and/or environmental disease or disability on student educational activities.

III. Procedure

The responsibility for implementing and enforcing this Health Policy shall be the responsibility of the Associate Dean in the Office of Student Affairs.

1. All students upon admission shall be sent UHM Confidential Health and JABSOM Physical Assessment Forms with a deadline for completion prior to matriculation. All forms will be screened and any significant findings identified for follow-up by the Associate Dean in the Office of Student Affairs.

2. Documentation of immunizations and/or titers will be evaluated prior to matriculation and any additional requirements sent to the student in writing with a deadline for completion. A Health Summary Sheet will be maintained by the Office of Student Affairs, will be a part of the student's academic folder, and will also be used for the purpose of complying with hospital requests pursuant to specific Affiliation Agreements.

3. Effective fall, 1991, all students shall be required to provide documentation of current health insurance coverage to the Office of Student Affairs.

4. During the First-Year Orientation program, the contents of this Policy as well as information regarding various resources (general and mental health) will be reviewed with the students by the Office of Student Affairs. In addition, instructions will be given in precautionary and infection control measures (i.e., Universal Precautions).

5. A general review of resources and health insurance requirements, including risks and costs will be provided to students yearly.

6. Reminders regarding updates with respect to recurring screening tests will be sent by the Office of Student Affairs and results added to the Health Summary Sheet.

7. Failure to adhere to or fulfill the requirements set forth under this Policy shall constitute grounds for suspension or delay of registration.

Revised and approved by the Executive Committee: 05/15/93
Revised and approved by the Executive Committee: 06/01/94
Revised and approved by the Executive Committee: 04/12/96
Revised and approved by the Executive Committee: 03/14/97
Revised and approved by the Executive Committee: 01/09/98
Revised and approved by the Executive Committee: 12/21/01

Accepted by:

[Signature]
Edwin C. Cadman, MD
Dean
Date: 12/21/01

OSA: 12/01