



Student Guidance on Infectious Diseases (*Infectious Disease Policy*)

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Scope

This policy is applicable to any student or staff engaged in clinical education or clinical research but has particular importance for students participating in the following programmes:

- Undergraduate Entry Medicine (MB BCh BAO)
- Graduate Entry Medicine (MB BCh BAO)
- Undergraduate Entry Radiography (BSc)
- Graduate Entry Radiography (BSc)
- Biomedical, Health and Life Sciences (BSc)

Clinical Context

Students and practitioners in the healthcare professions face the possibility of exposure to infectious diseases such as HIV, viral hepatitis and TB. In addition, those caring for patients have a professional responsibility to protect them from healthcare-associated infections.

While the absolute risk of becoming infected or transmitting an infection may be small, it is important that we take all reasonable steps to minimise the risks to both students and patients.

The increasing efficiency of preventive measures such as post-exposure prophylaxis, preventative and therapeutic vaccination and new therapies for previously chronic infections has highlighted the importance of detection and prevention of serious infections for students participating in patient contact.

This policy document outlines requirements and guidance to protect both students and patients against serious infections including HIV, viral hepatitis, Tuberculosis and other common viral diseases.

In addition, the policy provides guidance for students travelling overseas to areas where potentially chronic, common and sometimes serious infections are endemic. All students affiliated with the School of Medicine should study these guidelines and ensure adherence to the requirements outlined in this policy.

Students have a responsibility:

- To protect themselves, their colleagues, patients and the general public
- To inform the School of any physical, mental or other ill-health that could impact their clinical training

Compliance with this policy is compulsory and will be an essential requirement of at least one module within relevant degree courses. Students who fail to comply with the requirements for vaccination outlined within this policy will not be able to gain credit for these modules and may be prevented from progressing or completing their degree.

School Infectious Disease Specialists

This policy has been developed in consultation with the School's Infectious Disease specialists, many of whom are also in clinical practise.

The following Infectious Disease specialists may be contacted, in confidence, in respect of any individual student query relating the application of this policy:

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Please note that these individuals are not responsible for providing student healthcare and they are not a replacement for one's own Doctor. Student health services are available at the UCD Student Health Centre (<http://www.ucd.ie/stuhealth/>).

Table of Contents

School Infectious Disease Specialists 2

Programme-Specific Guidance..... 4

 Medicine & Radiography Programmes 4

 Biomedical, Health & Life Sciences Programme 4

Screening and Vaccination..... 5

 Measles, Mumps and Rubella (MMR) 5

 Varicella Zoster (Chicken Pox) 5

 Influenza 5

 COVID-19 6

 Other Vaccinations 6

Blood Borne Viruses..... 7

 Human Immunodeficiency Virus (HIV) 7

 Hepatitis C 8

 Hepatitis B 9

 Tuberculosis 10

Students Working Overseas..... 12

 Briefing Meetings for Students Travelling Overseas 12

 Vaccinations 12

 Malaria Prophylaxis 12

 Traveller’s Diarrhoea 12

 Avoiding BBV Exposure and Use of Post-Exposure Prophylaxis (PEP) 12

 Travel Insurance 13

 Recommended Pre-Travel Checklist 13

 Guidance to Avoid Infections During Travel..... 13

Specific Advice for Biomedical, Health & Life Science Students..... 15

 Screening and Vaccination 15

 HIV 15

 Transmission Risk Events..... 15

Screening & Vaccination Refund Policy 16

Programme-Specific Guidance

Medicine & Radiography Programmes

Programme Entry Requirements

Prior to admission to our Medicine and Radiography programmes, students must satisfy the School that:

- They agree to appropriate screening tests as outlined in this document.
- They agree to provide relevant, accurate and comprehensive proof of previous vaccination where necessary and to subsequent vaccination if required.
- They agree to the UCD Student Health Service providing details to the UCD School of Medicine on the compliance of individual students with this policy.
- They agree to the UCD School of Medicine providing evidence of compliance with the requirements outlined in this policy to affiliated clinical practice sites when requested.
- They will sign a Student Acknowledgement form regarding compliance and adherence to the School's policy.

Programme Progression Requirements

As students undertake training at clinical sites and interact with vulnerable patient groups, local infection control measures become even more important. Additional infection control procedures operate in clinical sites that may not exist within the University campus.

Students have a professional responsibility to protect their own health, the health of their colleagues and patients, and to maintain good infection control. Infection control procedures are non-negotiable and are designed to maintain a safe healthcare environment for patients, students and staff.

Failure to comply fully with infection control practices may prevent students from undertaking core clinical rotations and may affect their academic progression.

When attending clinical sites as part of their programme of study:

- Medicine students must complete the activities of the *Passport to Clinical Sites Parts 1 & 2* prior to presenting on any of the School's clinical training sites.
- Radiography students must complete all pre-placement checks and complete any health declarations relevant to the clinical site. As Radiography students begin clinical placements shortly after enrolment, they should initiate contact with student health immediately to progress requirements. Where a newly-enrolled (1st semester) student is unable to fully comply with this policy, a derogation may be provided by the School with the agreement of the clinical site. All students should complete all requirements no longer than 18 months after enrolment.
- Students must not present to clinical sites if they are unwell or if they are experiencing any symptoms indicative of an infectious disease regardless of vaccination status.
- If restricted from attending a clinical site, students must not present at the site until they receive explicit permission from the School.
- Students are required to comply fully with all local infection control policies and take direction from clinical staff.

Biomedical, Health & Life Sciences Programme

Specific guidance for students of our BSc. in Biomedical, Health & Life Sciences programme is available [here](#).

Screening and Vaccination

This section outlines requirements and guidance for students in relation to screening and vaccination of common infections, many of which are covered within national vaccine programmes. Requirements and guidance for screening for blood borne viruses and tuberculosis are included in the subsequent sections of this policy.

Students must attend the UCD Student health Service for screening blood tests for Hepatitis B, Hepatitis C and varicella zoster (VZV). The UCD Student Health Service may require students to undergo additional screening tests as appropriate, where clinically indicated.

Measles, Mumps and Rubella (MMR)

1. Students must provide evidence of having received two doses of an MMR vaccine.
2. Students who cannot provide evidence of having received two doses of MMR vaccine will be required to receive a booster dose of an MMR vaccine, either administered through UCD Student Health Service or another recognised centre in Ireland.
3. Where students choose to undergo vaccination through a centre other than UCD Student Health Service, they will be required to present official documentary proof of vaccination.
4. Student without any prior vaccination will be required to receive two doses of an MMR vaccine, given at least one month apart, unless medically contra-indicated.

Varicella Zoster (Chicken Pox)

- Students will be tested for the presence of immunity to Varicella Zoster virus.
- Non-immune students will require vaccination against VZV unless medically contra-indicated through the programme carried out by the UCD Student Health Service or another recognised centre in Ireland.
- Vaccination via UCD Student Health will incur an additional cost to the Healthcare screening. See link: <https://www.ucd.ie/stuhealth/services/charges/>

Hepatitis B

1. Students with previous Hepatitis B vaccines are required to provide all available documentation of vaccinations to the UCD Student Health Service.
2. Students with demonstrated non-immunity to Hepatitis B are required to undergo vaccination against Hepatitis B through the UCD Student Health Service, including follow-up serology for evidence of immunity.
3. Students who show evidence of Hepatitis B infectivity may be admitted to the UCD School of Medicine degree programmes but may be restricted from participation in certain exposure-prone activities. Infectivity will be assessed in accordance with the Department of Health and Children's current guidelines in relation to infectivity in healthcare workers (<http://www.hse.ie/eng/health/immunisation/hcpinfo/guidelines/chapter4.pdf>)

Influenza

The UCD School of Medicine recommends that all students receive annual seasonal flu vaccination. For students attending clinical sites, vaccination schemes are usually in place for staff and students. Otherwise, advice on where to receive seasonal flu vaccination can be provided from UCD Student Health Service (<http://www.ucd.ie/stuhealth/>).

COVID-19

COVID-19 is a highly transmissible infectious disease caused by the SARS-CoV-2 virus. The virus has spread globally resulting in the introduction of significant public health restrictions. These include, but are not limited to:

- Physical or social distancing
- Quarantining
- Face masks
- Cough and sneeze etiquette (covering coughs and sneezes)
- Handwashing
- Ventilation
- Cleaning of surfaces
- Personal protective equipment (where indicated)

Although most people who fall sick with COVID-19 will experience mild to moderate symptoms, infection may cause serious illness among high-risk populations and there may be long term sequelae of infection.

Although the University does not currently require students to be vaccinated against COVID-19, the UCD School of Medicine strongly recommends that all students and staff are vaccinated. Most clinical sites **will require students and healthcare workers to be vaccinated** (or, if unvaccinated, to undergo a formal risk assessment) prior to attending the site. In assessing the risk/benefit of allowing frontline patient contact, it is highly unlikely that any clinical site could prioritise the training of unvaccinated students over the protection of patients and healthcare staff. **Hence, not being vaccinated may prevent a student from completing core clinical rotations and may affect academic progression.**

To minimise the risk of COVID-19 infection or transmission, all students and staff must comply with all relevant infection control measures required at the relevant clinical sites, including requirements for regular testing and self-isolation if identified as either SARS-CoV-2 infected or a close contact of a confirmed case. Students should familiarise themselves with the relevant infection control guidelines at each clinical site as these may vary between clinical sites.

The UCD School of Medicine has issued specific guidance on the return of students to clinical placement following a confirmed or suspected case of COVID-19 or after having been identified as a close contact of a confirmed case. [[Guidance on Return to Clinical Placement](#)]

Other Vaccinations

The UCD School of Medicine recommends that students be vaccinated against other common vaccine preventable diseases such as pertussis, diphtheria, tetanus and hepatitis A. Normally many of these vaccinations will have been included within an individual's childhood vaccination schedule. Where this is not the case, advice on appropriate screening and where to receive these vaccinations can be provided from UCD Student Health Service (<http://www.ucd.ie/stuhealth/>).

Blood Borne Viruses

This policy addresses requirements for UCD medical students in relation to HIV, hepatitis B and hepatitis C and should be used in conjunction with the policy on vaccination. The UCD School of Medicine aims to provide full support to enable those with blood borne virus infections to complete their medical training in a safe and supportive environment, while maintaining patient safety. This policy offers guidance to help fulfil these aims.

Human Immunodeficiency Virus (HIV)

Background:

HIV is a chronic viral infection that can be transmitted through exposure to infected body fluids. Exposure risk can be dramatically reduced by effective treatment of the infected individual using antiretroviral therapy. In addition, for those not infected with HIV who experience a significant transmission risk event (such as a needle stick injury), risk of transmission can be further reduced with the use of post-exposure prophylaxis (PEP).

Pre-requisite:

- All students are required to know their HIV status.
- Students will be required to complete a declaration stating that they are aware of their HIV status prior to engaging in any patient contact.
- Students may be required to produce proof of their HIV status.

Screening:

- Students must know their HIV status prior to engaging in any patient contact.
- HIV screening is available through the UCD Student Health Service, but students may avail of screening through any clinical service of their choice.
- Screening must be performed using a recognized third/fourth generation antibody/antigen test.

Limitations on Practice:

- Any student who knows their HIV status as positive will be required to liaise, in confidence, with the UCD School of Medicine Infectious Diseases [specialists](#).
- The UCD School of Medicine Infectious Diseases specialists will assist and support students living with HIV to complete their studies in a safe and supportive environment.
- Under certain circumstances, students living with HIV may be prevented from participating in procedures where there is a significant risk of HIV transmission. Any students living with HIV infection will be advised of any restrictions on activities by the Infectious Diseases [specialists](#).
- Under certain circumstances, this may necessitate discussion between the Infectious Diseases [Specialists](#) and the coordinators of particular modules in order to ensure that this policy can be implemented appropriately.

Vaccination:

There are currently no effective HIV vaccines available.

Transmission risk events:

- Where a student believes they have been at significant risk for transmission of HIV infection, either through events related directly to their studies or independent to their studies, they should seek medical advice immediately.
- Confidential advice on post-exposure prophylaxis (PEP) and pre-exposure prophylaxis (PrEP) is available from the UCD School of Medicine Infectious Diseases [Specialists and pre-exposure prophylaxis clinical](#)

[services are available at St Vincent's University Hospital and the Mater Misericordiae University Hospital.](#)

Hepatitis C

Background:

Hepatitis C is a chronic viral infection that can be transmitted through exposure to infected fluids. Hepatitis C infection is a treatable disease with high cure rates achievable.

Pre-requisite and Screening:

- All students are required to undergo testing for hepatitis C prior to patient contact.

Screening:

- Screening for hepatitis C is available through the [UCD Student Health Service](#).

Limitations on practice

1. Any student who knows their hepatitis C status as positive is required to liaise, in confidence, with the UCD School of Medicine Infectious Diseases [specialists](#).
2. The School of Medicine Infectious Diseases specialists will assist and support students living with hepatitis C to complete their studies in a safe and supportive environment, including offering advice and assistance on treatment for hepatitis C.
3. Under certain circumstances, students living with hepatitis C may be prevented from participating in procedures where there is a significant risk of Hepatitis C transmission. Any students living with hepatitis C infection will be advised of any restrictions on activities by the Infectious Diseases specialists.
4. Under certain circumstances, this may necessitate discussion between the Infectious Diseases Specialists and the module coordinators to ensure that this policy can be implemented appropriately.

Vaccination

- There are currently no effective hepatitis C vaccines available.

Transmission risk events:

- Where a student believes they have been at significant risk for transmission of hepatitis C infection, either through events related directly to their studies or independent to their studies, they should seek medical advice immediately.
- Confidential advice on post-exposure screening and follow-up is available from the UCD School of Medicine Infectious Diseases [Specialists](#).

Hepatitis B

Background:

Hepatitis B is a chronic viral infection that can be transmitted through close personal contact and exposure to infected fluids. Hepatitis B infection is a treatable disease with various degrees of infectivity. Infectivity can be reduced using antiviral medications.

The School of Medicine aims to provide a safe environment for both students and patients and this policy outlines specific guidance on how students can limit the impact of hepatitis B infection while pursuing their studies.

Pre-requisite

- All students are required to know their hepatitis B status and to provide, where appropriate, evidence of prior vaccination or testing.

Screening and Vaccination:

- Students will be required to fulfil all obligations as outlined in the policy on Screening and Vaccination outlined [above](#), including to undergo screening and, if necessary, vaccination against hepatitis B prior to engaging in any patient contact.
- Screening and vaccination against hepatitis B is available through the UCD Student Health Service.

Limitations on Practice

- Any student with active hepatitis B infection (sAg status positive) is required to liaise, in confidence, with the UCD School of Medicine Infectious Diseases [specialists](#).
- The UCD School of Medicine Infectious Diseases specialists will assist and support students living with active hepatitis B to complete their studies in a safe and supportive environment, including offering advice and assistance on treatment for hepatitis B.
- Under certain circumstances, students living with active hepatitis B may be prevented from participating in procedures where there is a significant risk of hepatitis B transmission. Any students living with hepatitis B infection will be advised of any restrictions on activities by the Infectious Diseases specialists.
- Under certain circumstances, this may necessitate discussion between the Infectious Diseases Specialists and the module coordinator in order to ensure that this policy can be implemented appropriately.

Vaccination

- Hepatitis B is a vaccine preventable condition and students are required to fulfil all obligations as outlined in the policy on Screening and Vaccination outlined [above](#).

Transmission Risk Events:

- Where a student believes they have been at significant risk for transmission of hepatitis B infection, either through events related directly to their studies or independent to their studies, they should seek medical advice immediately.
- Confidential advice on post-exposure screening and follow-up is available from the UCD School of Medicine Infectious Diseases Specialists.

Tuberculosis

Background

It is estimated that one third of the world's population may be latently infected with *Mycobacterium tuberculosis* (MTB). This is referred to as latent TB infection (LTBI) and is usually diagnosed by one of two methods:

a) Interferon Gamma Release Assay (IGRA) such as Quantiferon®. IGRAs measure cell-mediated immune response to specific MTB antigens. They require a single blood draw and do not require a follow-up visit to be read. Results can be affected by laboratory / assay error and in certain conditions associated with immunosuppression.

b) A Tuberculin Skin Test (TST), i.e. a Mantoux or PPD test. The test is placed intradermally, and induration is read 48-72 hours later. The criteria for a positive skin test depends on the background of the individual:

- >5mm if HIV positive, recent TB contact, immunosuppression or transplant, or radiological findings consistent with old TB.
- >10mm if from a high-prevalence country, injecting drug user, health care workers, residents of and employees of high risk institutions, clinical conditions which put individual at high risk, children <4, or children and adolescents exposed to TB
- >15mm if no TB risk factors

Skin testing can be falsely positive in the setting of recent non-tuberculous mycobacterial infection or recent Bacille Calmette-Guerin (BCG) vaccination, or with misreading the area of induration. False negatives can occur in immunosuppression, malnutrition, or with poor operator technique (i.e. subcutaneous injection in error, or errors in reading the induration).

LTBI is associated with a lifetime risk of approximately 10% of TB reactivation. Treatment of LTBI can reduce this risk by approximately 60-90%.

BCG vaccination

The BCG vaccine is a live attenuated strain of *Mycobacterium bovis* developed as a preventative vaccine for MTB in the early 20th century. It has some local and systemic side effects. In 2015 the National Immunisation Advisory Committee and the Health Information and Quality Authority (HIQA) both recommended that BCG vaccine does not need to be given to all children in Ireland.

The protective benefit from BCG in protecting adults and health-care workers is debated. BCG vaccination of healthcare workers is not routinely undertaken in Canada, the US, Australia and New Zealand. The World Health Organisation has recommended that only adults likely to be frequently exposed to multidrug resistant MTB should be vaccinated. BCG is not currently recommended for HCWs in Ireland as there is no licenced vaccine available.

Recommendations:

1. In light of WHO recommendations, a lack of a licenced vaccine in Ireland, debatable efficacy in adult populations, and implications for future TST testing for students, UCD School of Medicine does not recommend BCG vaccinations for students.
2. At enrolment all students should present documentation of any previous Mantoux test / PPD / IGRA performed within the previous 2 years. If they do not, students will be required to undergo a TST or IGRA test performed within the UCD Student Health Service.

3. Indeterminate IGRAs will be interpreted in the UCD Student Health Service and a repeat test or a TST may be recommended as a requirement.
4. Those with a positive Mantoux / PPD / IGRA (or persistently indeterminate IGRAs) should be referred to the Infectious Diseases Clinics at the Mater Misericordiae University Hospital or St. Vincent's University Hospital for further assessment (including CXR) and clearance to participate in activities involving patient contact.
5. LTBI does not preclude patient contact and participation in clinical rotations; however students should be aware of the risk of LTBI reactivation, the associated symptoms of active TB, and should present for urgent assessment should they become symptomatic.
6. Students determined to have active pulmonary TB will not be permitted to participate in patient contact and participation in clinical rotations until cleared by one of the above clinics.

Students Working Overseas

The School of Medicine recognises the valuable experience gained by students working overseas during their studies and encourages students to familiarise themselves with the following guidance aimed at reducing the risk from infection during travel overseas.

Briefing Meetings for Students Travelling Overseas

The [UCD Infectious Disease Specialists](#) host annual briefing meetings on prevention of travel-related infections for those students undertaking electives / working overseas to areas of high prevalence of blood-borne virus (BBV) and other travel-related infections.

It is a requirement of those students planning overseas electives to areas of high prevalence of BBV to attend these sessions if they wish to avail of the post-exposure prophylaxis (PEP) programme.

Details of the dates / locations of these meetings can be provided through direct contact (by email) with the UCD Infectious Diseases specialists.

Vaccinations

It is the student's responsibility to be aware of and organise relevant vaccinations pertinent to the destination of travel overseas. It is recommended that students maintain up-to-date vaccinations according to the relevant policies within UCD School of Medicine as well as seeking advice on additional, relevant vaccinations according to their proposed destinations. Guidance on relevant vaccinations is available from the Travel Clinic in the UCD Student Health Service. Additional, frequently updated information on infections and outbreaks is available from <http://www.cdc.gov/travel> and <http://wwwnc.cdc.gov/travel/yellowbook/2014/chapter-3-infectious-diseases-related-to-travel/travel-vaccines-and-malaria-information-by-country>.

Malaria Prophylaxis

Malaria infection can be life-threatening, and is largely avoidable by the use of malaria prophylaxis and mosquito bite protection. A list of malaria-endemic countries and areas is available at <http://www.cdc.gov/malaria/map>.

Students should take the necessary precautions to avoid mosquito bites (see section on Mosquito Bite Protection below). Effective chemoprophylaxis against malaria is an essential component when travelling to malaria-endemic areas. Guidance on the most appropriate malaria chemoprophylaxis is available from the Travel Clinic in the UCD Student Health Service.

Traveller's Diarrhoea

Traveller's diarrhoea (TD) is a very common clinical syndrome that affects as many as 70% of all travellers. It is usually caused by Enterotoxigenic E. coli, Campylobacter, Shigella or Salmonella species, or viral infections. Most episodes of TD self-resolve. The mainstay of treatment is oral rehydration therapy. Students may also carry a course of antibiotics to use if symptoms of fever are present, or if blood, pus or mucous are visible in the stool. Details of relevant antibiotics are available from both the Travel Clinic in the UCD Student Health Service and from the briefing meetings for Students Travelling Overseas. If symptoms persist despite rehydration therapy or fevers persist, medical advice should be sought without delay.

Avoiding BBV Exposure and Use of Post-Exposure Prophylaxis (PEP)

The ID service at the Mater Misericordiae University Hospital and St. Vincent's University Hospital can provide a 5-day PEP starter pack for use in Transmission Risk Events (see section on Blood Borne Viruses) to students travelling to countries with a high HIV prevalence provided they attend the relevant briefing meetings for

Students Travelling Overseas prior to travel. Advice on how to avoid BBV exposure, risk assessment after exposure and appropriate use of PEP is outlined in the briefing meetings for Students Travelling Overseas.

Travel Insurance

It is strongly recommended that students have adequate travel insurance purchased to cover significant illnesses abroad and the need for medical evacuation if required.

Recommended Pre-Travel Checklist

1. Ensure all medications are purchased PRE-TRAVEL
2. Insect repellent
3. Oral rehydration sachets
4. Antibiotic for traveller's diarrhoea
5. Contact details for UCD Infectious Diseases Consultants at MMUH / SVUH
6. Malaria prophylaxis (where appropriate)
7. Mosquito net (where appropriate)
8. Post-exposure prophylaxis for HIV (where appropriate)

Guidance to Avoid Infections During Travel

Food and Drink

It is recommended that students take precautions to prevent food and waterborne illnesses. Meat should be cooked through. Fruit and vegetables should be peeled, or washed. Students should avoid uncooked vegetables, salads, unpasteurized milk and milk products, and unpasteurized fruit juices where possible. In areas where water may be contaminated bottled water or boiled water should be used. Ice in drinks should be avoided unless made from bottled / boiled water.

Water Exposure

Freshwater areas can be a source of infection. Rivers and lakes can be contaminated by sewage and faecal matter from humans and animals. Schistosomiasis is a common freshwater pathogen in many lakes and rivers in Africa and South America (including Lake Malawi, Lake Victoria, and the Zambezi and Nile rivers). Students should avoid swimming or diving in these waters, or showering using untreated waters derived from known contaminated lakes or waterways.

Exposure to Blood Borne Viruses

Hepatitis B and C virus, and HIV are blood-borne viruses that can be transmitted by exposure in an occupational or non-occupational setting.

While travelling students should try and minimize their potential for exposure to these agents by use of universal precautions (including gloves and goggles where appropriate), safe handling of sharps and contaminated material and avoidance of exposure-borne procedures.

Students should familiarise themselves with the policy on Blood Borne Viruses, including relevant information on screening and vaccination in addition to the sections on Transmission Risk Events. If a student feels they have had a significant exposure from body fluids of an individual suspected or known to be HIV positive they should follow the relevant guidance, start PEP immediately and contact the UCD Infectious Diseases [specialists](#) immediately to assess risk and, if appropriate, arrange return travel to Dublin for formal assessment and management.

A list of exposures and relevant risk associated with specific body fluids is available from UCD Student Health Services (<http://www.ucd.ie/stuhealth/>). All care to those with a significant Transmission Risk event will be provided on a confidential basis within either MMUH or SVUH.

Mosquito Protection

Students should maximize attempts to prevent mosquito-bites. These will help prevent not only malaria, but other mosquito-borne infections such as Dengue, Chikungunya fever, Yellow Fever and Japanese Encephalitis.

These measures include:

- Long sleeve clothing and pants, socks, particularly at dusk and dawn when mosquito activity is at its highest
- Bed nets (treated with insect repellent if possible) in rooms without screens or air-conditioning
- Insect repellents (containing a high percentage ($\geq 35\%$) DEET)
- Guidance on DEET can be obtained from the Travel Clinic in the UCD Student health Service

Animal Bites

It is recommended that students avoid contact with feral animals. Animal bites should be washed in soapy water and, depending on the animal antibiotic prophylaxis is usually warranted. Where there are concerns about an animal bite, students should contact the UCD Infectious Diseases [specialists](#) for appropriate advice.

Sexual Contacts

Students are advised to practice safe-sex measures, including the use of barrier methods of contraception to prevent the acquisition of sexually-transmitted infections including chlamydia, gonorrhoea, syphilis and HIV.

Post-Travel

It is recommended that students who become unwell, even after one year after returning from travel (particularly with fever), present for early assessment (to the UCD Student Health Service, their general practitioner, a Travel / Infectious Diseases clinic or even to the hospital Emergency Department if appropriate).

Specific Advice for Biomedical, Health & Life Science Students

As students participating in the BSc Biomedical, Health and Life Sciences programme may be in contact with human material during the course of their studies (e.g. blood or tissue samples as part of laboratory research projects) the School of Medicine recommends that all students are appropriately vaccinated against transmissible infections and also have baseline serology available for blood borne virus infections in case of unintentional exposure during the course of their studies.

Screening and Vaccination

Prior to admission to the School of Medicine, all students entering the BSc Biomedical, Health and Life Sciences programme must meet the criteria for screening and vaccination against hepatitis B and Varicella zoster (chicken pox) as set out in the Screening and Vaccination section of this policy.

Students should also undergo screening for hepatitis C as set out in the Blood Borne Viruses [section](#) in this policy.

HIV

In addition, all students must satisfy the following pre-requisite criteria for HIV prior to admission to the BSc Biomedical, Health and Life Sciences programme:

- All students are required to know their HIV status
- Students will be required to complete a declaration stating that they are aware of their HIV status
- prior to admission to the BSc Biomedical Health and Life Sciences programme
- Students may be required to produce proof of their HIV status

Transmission Risk Events

Students should familiarise themselves with the guidance on transmission risk events outlined in the Blood Borne Viruses [section](#) of this policy and, in the event of an unintentional exposure to human tissue or blood (needle-stick injury or equivalent), should immediately contact their supervisor and follow the guidelines on Transmission Risk Events for each of the Blood Borne Viruses specified in conjunction with advice from the School of Medicine Infectious Diseases Specialists.

Students are required to complete a Student Acknowledgement Form to confirm their understanding of University and School Policy.

Screening & Vaccination Refund Policy

The UCD Student Health Service has an agreement with the UCD School of Medicine to screen and vaccinate students to ensure the safety and health of students and their future patients. The service follows National Guidelines and protocols agreed with the UCD School of Medicine.

Information about the Health Screening Fee and the refunds policy are available on the Student Health website <https://www.ucd.ie/stuhealth/services/healthscreening/>

Each course has a tab, providing course specific information on the programme. The documents include:

- Compulsory UCD Health Screening Programme Requirements
- Health Screening Charge Reduction/Refund Policy

The refund will only be paid out to the individual student once they have satisfied all compulsory elements in the pre-entry screening process as outlined above. The UCD Student Health Service will identify all students due a refund under the above criteria and manage the refunds process on behalf of the UCD School of Medicine.

Please note - refunds are paid towards the end of the Academic year by a cheque sent to the student's permanent address. It is the student's responsibility to ensure that all contact information is complete and correct through their SISWeb account.