Risk of infection: Blood borne viruses include Hepatitis B virus (HBV), Hepatitis C virus (HCV) and Human Immunodeficiency virus (HIV). Students who have potential contact with blood and/or body fluids of patients risk infection. Exposure requires both an injury (i.e. percutaneous injury from a needle or other sharp object, a splash of blood or other body fluid onto a mucous membrane or non-intact skin, or a human bite that breaks the skin) and contact with blood or body fluid capable of transmitting HBV, HCV or HIV. In the event of potential exposure, students must report to their supervisor and seek immediate medical attention.

Risk of transmission: Students who perform or assist in performing exposure-prone procedures risk transmitting blood borne viruses to their patients. Exposure-prone procedures include: Digital palpation of a needle tip in a body cavity or the simultaneous presence of the student’s fingers and a needle or other sharp instrument or object in a blind or highly confined anatomic site, (e.g., during major abdominal, cardiothoracic, vaginal and/or orthopaedic operations); or repair of major traumatic injuries; or manipulation, cutting or removal of any oral or perioral tissue, including tooth structures, during which blood from a student has the potential to expose the patient’s open tissue to a blood borne pathogen.

Faculty of Health Sciences requirements for students in Health Professional programs:

Students in all Health Professional programs who are known to be infected with HBV, HCV and/or HIV must self-report their status to the Assistant Dean of their program for further guidance. Most infected students can work safely with patients without risk of transmission of the virus, as long as reasonable precautions are taken.

Hepatitis B vaccination: Students must be protected with Hepatitis B vaccination unless they are known to have chronic HBV infection or are immune due to naturally acquired infection. Post-vaccination serology for immunity is required. If not immune after completion of primary vaccination series, booster dose(s) of vaccine are required. If not immune after two documented vaccination series, the student is considered a vaccine non-responder. Students who have not completed this requirement by their program start date may participate in clinical activities while final vaccinations are in process. Students without documented proof of immunity are considered susceptible to HBV infection in the event of possible exposure. No special precautions are required other than routine infection prevention procedures; however, passive immunization with Hepatitis B Immune Globulin may be required in the event of potential exposure to HBV.

Serologic testing: Hepatitis B surface antigen (HBsAg) serology (test for chronic infection) is required for Postgraduate Medicine students even if immune to Hepatitis B. Students in the Midwifery, Physician Assistant and Undergraduate Medicine programs may perform or assist in performing exposure-prone procedures during their training, and are therefore obligated to know their status with respect to HBV, HCV and HIV. Testing is not required for students in other programs. HBsAg serology is tested once on or after test for Hepatitis B immunity. HCV and HIV serology is tested within six months of program start date and every three years thereafter. Only the dates of tests are required by the Health Screening Office, verified by a health care provider after reviewing the reports. Test results are not required.

Click on the links below for more information:
- Public Health Ontario Routine Practices Fact Sheet
- OHA/OMA Blood Borne Diseases Protocol
- CPSO Blood Borne Viruses Policy

HBV: Public Health Agency of Canada Hepatitis B Get the Facts
- World Health Organization Hepatitis B Fact Sheet

HCV: Public Health Agency of Canada Hepatitis C
- World Health Organization Hepatitis C Fact Sheet

HIV: Government of Canada HIV and AIDS
- World Health Organization HIV/AIDS Fact Sheet

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