A. Each university must develop campus health programs designed to help students avoid interruption of the educational process and to prevent conditions which will keep students from taking full advantage of their educational opportunities. Initial medical care, women's health care, mental health service, prompt, efficient and appropriate referral service, and health education are examples of the services which match the major needs of the campus age group. A balanced program stressing both treatment and prevention through education best serves students' needs.

B. Campus health programs must provide:

1. Treatment which includes ease of reception and acceptance of student patients; expedient and accurate diagnosis; and prompt, effective and humane personal health care.

2. Education programs which include a full explanation of care given and an emphasis on preventing health problems and on promoting healthful lifetime habits.

C. Student health programs emphasize a broad range of relevant initial care rather than offering more complex medical treatment or total health care. Increased gynecological services, beyond routine health examinations and initial medical care, may be provided at the centers if fully supported by appropriate user fees.

   University physicians may prescribe medication based upon the medical needs of their patients. Appropriate medical authorities at each university campus health service shall develop the formulary of their pharmacies.

D. The Board of Regents supports the maintenance in student health services of the statutorily and socially established policy of confidentiality between all health service personnel and patients.

E. The professional quality of medical services must be equal to the standards of the Accreditation Association for Ambulatory Health Care, Inc., consistent with the recommended Standards and Practices for a College Health Program developed by the American College Health Association.
F. Each student health center should be accredited by an appropriate accrediting agency.

Policy History

3/12/1983 The Policy Manual was adopted by the Board to be effective 5/1/1983.

12/14/1985 Policy revision approved by the Board on second reading.

Related Information

See 3/12/1983 meeting minutes.