



8.1.4 Students, Faculty, Staff, and Employees with Positive Antibody to HIV-1 or Clinically Manifest AIDS or AID-Related Complex

Chapter 8 - Health & Safety	Original Effective Date: June 2000
Section: 8.1 Bloodborne Pathogens Policy	Date Last Reviewed: December 2006
Responsible Entity: Vice President for Facilities and Capital Planning	Date Last Revised: December 2006

I. Purpose

The Purpose of this policy is to provide guidance in complying with statutes concerning bloodborne pathogens including human immunodeficiency virus (HIV), Hepatitis B virus (BHV), and Hepatitis C virus (HCV).

II. Scope

This Policy is applicable to students, faculty, and employees of UT Health San Antonio and shall be made available to students, faculty, and staff members of the University by its inclusion in the student, faculty, and personnel guides if practicable, or by any other method.

III. Policy

A. Procedures

1. The Health Science Center encourages HIV-infected students, faculty, staff, and employees to discuss their situation with a designated official. The designated official for each administrative component of the Health Science Center shall be named by the Executive Committee of the Health Science Center in consultation with the Dean of each School.
2. Any modification of the clinical training, working conditions, or privileges of HIV-infected students, faculty, staff, or employees 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-infection, attendant functional disabilities, and the transmissibility of simultaneously carried infectious agents. The Health Science Center may legitimately monitor the clinical activities of students, faculty, staff, or employees who are believed to pose an unwarranted risk to patients. The Health Science Center shall cooperate with the HIV-infected person, his or her personal physician, and other medical experts as appropriate in

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identifying and implementing special precautions and program modifications to safeguard the personal health and safety of such persons/

3. The Health Science Center adheres to the Universal Precautions for Prevention of Transmission of Human Immunodeficiency Virus, Hepatitis B Virus, and Other Bloodborne Pathogens in Health Care Settings (MMWR 38:377-388, 1988) established by the Centers for Disease Control. HIV-infected students, faculty, staff, and employees shall be provided counseling about access to expert medical care and about prevention or further spread of infection. The Health Science Center does not pay for the provision of health care to HIV-infected individuals. Students, faculty, staff, and employees are strongly encouraged to obtain adequate hospital and outpatient insurance coverage during their entire association with the Health Science Center.

B. Confidentiality

1. It is expected that all students, faculty, staff, and employees will be bound to the principle of strict confidentiality in all patient and healthcare related activities.
2. As stated in this Policy and Policy [8.1.3 Screening for HIV-1 Infection](#), of the Handbook of Operating Policies, the Health Science Center encourages students, faculty, staff, and employees who believe they are at risk of HIV-infection to seek testing and counseling. The Health Science Center shall provide counseling about access to confidential and anonymous HIV-antibody testing, about the implications of positive or negative results for career and personal health, about the availability of expert medical care, and about the prevention of further spread of infection. Individuals seeking care within the healthcare facilities of the Health Science Center (i.e., the School of Medicine and Dental School and not including its affiliated healthcare institutions University Hospital, the Audie L. Murphy Memorial Veterans' Hospital, and University Health Center-Downtown) shall be made aware that all HIV-related data become part of the individual's medical record.

IV. Definitions

There are no defined terms used in this Policy.

V. Related References

There are no related documents associated with this Policy.

VI. Review and Approval History

- A. The approving authority of this policy is the University Executive Committee.
- B. The review frequency cycle is set for three years following the last review date, a time period that is not mandated by regulatory, accreditation, or other authority.

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Effective Date	Action Taken	Approved By	Date Approved
06/2000	Policy Origination		
12/2006	Policy Revision		
06/2021	Policy Update/new template		