STUDENT HANDBOOK

FOR THE DIVISION OF
MEDICAL LABORATORY SCIENCE

CLASS OF 2020

WEST VIRGINIA UNIVERSITY
MORGANTOWN
PREAMBLE

This handbook is designed to serve as a guide for students enrolled in the Medical Laboratory Science Division at West Virginia University. The contents of the handbook represent an official communication of the policies and procedures of the Division. Students are expected to be familiar with this handbook and its content.

In order to reach the goals and fulfill the mission of the University, the courses, requirements, and regulations contained herein are subject to continuing review and change by the West Virginia Higher Education Policy Commission, the WVU Board of Governors, University administrators, and the faculty of the Medical Laboratory Science Division. The Division, therefore, reserves the right to change, delete, supplement, or otherwise amend the information, course offering, requirements, rules, and policies contained herein without prior notice.

The Medical Laboratory Science Division is committed to a policy of Equal Opportunity and does not discriminate on the basis of race, color, sex, age, religion, handicap, veteran status, sexual orientation or national origin in the administration of its educational program or activities or with respect to admission and employment.
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Mission & Goals

The mission of the Clinical Laboratory Science and Histotechnology programs within the Medical Laboratory Science Division at West Virginia University is to provide a high-quality education leading to a Bachelor of Science degree that prepares graduates for their roles as members of the healthcare team in an environment of rapidly changing technology.

The goals of the program are:
1. to provide programs which meet the academic standards of the University;
2. to provide graduates for medical (both urban and rural) laboratories, public health laboratories, research laboratories, and industry;
3. to provide an educational background which enables graduates to assume teaching and supervisory positions in the healthcare field;
4. to provide an educational background acceptable for graduate work in the medical sciences.

Academic and Professional Standards Policies Refer to the Academic and Professional Standards Policy in Appendix A.

Procedural Rules for Handling Academic Dishonesty
Students in the Division of Medical Laboratory Science are expected to adhere to the University's Policy concerning Academic Integrity and Dishonesty.

Please refer to the West Virginia University Board of Governors' Policy 31 – University Student Conduct and Discipline Policy at http://bog.wvu.edu/policies and the West Virginia University Undergraduate Catalog (http://catalog.wvu.edu/undergraduate/).

The minimum penalty for all cases of academic dishonesty shall be a zero on the examination or paper. When the grade of "failure" in the course is a part of the penalty for cheating, the grade is to be entered on the student's permanent record as an unforgivable "UF". All academic dishonesty cases will be handled based on the procedure outlined in the West Virginia University Undergraduate Catalog (http://catalog.wvu.edu/undergraduate/).

Professionalism
To uphold the standards of the profession, students must demonstrate the qualities of a healthcare professional. Professionalism is a requirement of the Medical Laboratory Science Division. Professional traits include, but are not limited to:
1. Honesty and integrity
2. Assuming responsibility
3. Accountability
4. Commitment to excellence
5. Respect for others
6. Empathy and compassion
7. Competence
8. Following instruction
9. Positive attitude
10. Appearance

Professionalism will be assessed by professional development (affective) forms. Refer to academic and professional standards policies.
Medical Laboratory Science Policy on Professional Appearance

Health Sciences students must maintain a professional appearance for infection control, to aid in communication and for cultural sensitivity. A professional appearance will help instill trust in you as a health professional and lead to better patient outcomes.

Policy for all students:

1. Hygiene

   Good personal hygiene is to be maintained at all times including regular bathing, use of deodorants/antiperspirants and regular dental hygiene.

   Avoid distracting perfumes or colognes and cigarette odor.
   Hair should be neat, clean and of a natural human color.
   Hair should be styled off the face and out of the eyes.
   Fingernails
      Should be neatly trimmed to no longer than ¼ inch past the end of the finger.
      If nail polish is used it must be clear or light pink color and without chips or cracks.
      Artificial nails are not permitted.
   Beards/mustaches must be neatly trimmed.

2. **VISIBLE BODY TATTOOS OR VISIBLE BODY PIERCINGS INCLUDING TONGUE PIERCINGS ARE PROHIBITED.** Any tattoos must be covered and visible body piercings with the exception of earrings must be removed.

3. **Dress Code**

   Professional uniforms and footwear are to be worn **at all times** in lecture classes (including reviews scheduled by the instructors), examinations and student laboratory sessions in the Health Sciences Center (HSC).

   The official Medical Laboratory Science uniform is **black scrubs**.

   During the senior year, **students must wear scrub colors that are approved by their clinical rotation site.** This may mean that some will have to purchase new scrubs for the clinical rotations.

   Scrubs must not fit too snugly.

   Scrub pants must be worn at the natural waistline and hemmed so they do not touch the floor.

   Scrubs must be clean and wrinkle-free to present a professional appearance.

   In colder weather, students may wear a long-sleeved **black or white** tee shirt under the scrub top. A zip-up or button-up, non-hooded **solid black sweater** is also permitted.

   Other outer wear (coats, hoodies, etc.) must be left in your locker.
Shoes:

Shoes in leather or other non-porous material that cover the entire foot are required. Mesh and/or holes are not permitted.

Shoes must be white with white laces. Shoes must be clean and in good repair at all times.

These white shoes are part of your professional uniform and must be worn at all times in the Health Science Center.

Wear a pair of "outside" shoes to school and change into your white shoes upon arrival. Before you leave the HSC for the day, return to your locker and change shoes. Keep your white shoes in your locker each evening.

Socks

Appropriate socks must cover any exposed part of the foot, ankle and leg.

For safety reasons, failure to wear the proper shoes and/or socks will result in exclusion from the laboratory.

Hats or caps of any kind (except for religious reasons) are not to be worn in the classroom or student laboratory.

Consequences

Failure to adhere to the dress code after one warning will result in referral to the Medical Laboratory Science Academic and Professional Standards Committee.

Revised 5/2018

Additional Policies

Refer to the Policy on Academic and Professional Standards in Appendix A and BOG Academics Rule 2.5 regarding Student Rights and Responsibilities http://bog.wvu.edu/policies

Institutional Policies

Students are responsible for reviewing policies on inclusivity, academic integrity, incompletes, sale of course materials, sexual misconduct, adverse weather, as well as student evaluation of instruction, and days of special concern/religious holiday statements.

Classroom and Student Laboratory Policies

Capstone Experience

"The capstone experience is defined as: an academic experience in which students demonstrate, in a significant, relevant project that has an oral and a written component, their abilities to:
1. Gather material independently, as needed
2. Think critically about and to integrate the theoretical and/or practical knowledge that they have acquired throughout their undergraduate careers
3. Reflect on the ethical issues that are implicit in their project and/or their project’s design

http://registrar.wvu.edu/current_students/capstone_courses

Students in the Medical Laboratory Science Program will fulfill West Virginia University’s undergraduate Capstone requirement in PATH 475 Medical Relevance. This course helps the student develop scientific writing skills and methods of scientific inquiry.

The Capstone Presentation may be offered as a continuing education opportunity for clinical laboratory personnel.

Comprehensive Examination
A comprehensive examination is given near the completion of the senior year that will cover all phases of clinical laboratory science or histotechnology. The examination is one criterion used to determine the student’s eligibility for graduation. Successful completion of the comprehensive examination is a requirement for PATH 475 Medical Relevance.

The examination will be scheduled during the spring semester of the senior year. Students must pass the program Comprehensive Examination with a minimum score of 70% on the 1st attempt. Students will be allowed to repeat the examination once without required remediation in the case of failing the examination on their first try. The minimum passing score for subsequent attempts will be published in the course syllabus. Students must pass the program comprehensive exam to pass the course and to graduate from the program.

Failure to arrive on time for the examination will result in the student forfeiting his/her first attempt at the examination. Requests for excused absences must be in writing and reviewed by the Vice Chair. The Vice Chair will decide what, if any, penalties may be imposed. The examination will be rescheduled for those students not successful on his/her first attempt or for students who missed the first examination. Students who do not meet these standards will be referred to the Academic and Professional Standards Committee.

Drawing Blood
No student is allowed to draw blood from another person except under proper faculty supervision and appropriate circumstances.

Examinations
Final examinations will be scheduled at the end of each semester. Course examinations, quizzes and practicals are scheduled at the discretion of each instructor.

For most examinations in the Medical Laboratory Science courses, students will be assigned seats. All coats, including laboratory coats, books, purses, cell phones and other personal items are placed in the front of the classroom during the examinations. If a calculator is needed, one will be provided by the instructor.

If a student is absent for a scheduled or unscheduled examination he/she will contact the instructor according to the syllabus to schedule a make-up exam. This make-up exam will be an alternate form of the examination and must be taken within three days (Monday through Friday) after returning to campus. This time may be extended at the discretion of the instructor.
Skipping lectures and/or laboratory sessions the day of a scheduled exam is considered unprofessional behavior. If a student is absent from any scheduled class on the day of an examination, he/she will be penalized according to the policies in the individual course syllabus.

Missing a scheduled or unscheduled quiz may result in a grade of zero (0) for that quiz.

Students will have an opportunity to review the results of the examination. These examinations will be filed by student name and will be available for the students to review. This review must be done in the presence of a faculty member.

For the Comprehensive Examination, please see the separate policy.

**Grading**
The following grading scale is in effect for all PATH courses in the junior and senior year:

- 99-100 A+ = Exceptional
- 93-98 A = Excellent
- 85-92 B = Very Good
- 75-84 C = Average
- 70-74 D = Poor
- Below 70 F = Failure

**Laboratory Coats**
The Division of Medical Laboratory Science will provide fluid resistant laboratory coats to all students for use in the student laboratory, and clinical rotations. When the coats are visibly soiled or at the end of the semester, the soiled coats will be collected and professionally cleaned. A clean replacement coat will be provided to the student. During the spring semester of the junior year (1st professional year), students will be issued two coats—one for the MLS student laboratory and one for the microbiology/parasitology laboratories. At the end of the junior year (1st professional year), students will receive their own laboratory coat at the MLS Awards and White Coat Ceremony. The cleaning fee for the coats is $10.00 for fall and spring semester and $5.00 for summer semester. We accept cash or checks made out to WVU.

**Microbiology 200**
All students are required to take MICB 323 Medical Microbiology or MICB 200 plus PATH 323.

Students who complete Microbiology 200 prior to admission into the WVU Medical Laboratory Science Division may be eligible to take PATH 323 according to the following policy.

If the student completed Microbiology 200 with a final grade of "B" or better, it is highly suggested that the student audit the lectures for Microbiology 323 and complete PATH 323 (the laboratory portion of Microbiology 323). The student must register for PATH 323 for two hours to receive credit for the laboratory portion.

It is the student's responsibility to make the above arrangements with the MLS Division Director in order to register for the correct courses.

**Student Laboratories**
Students may use the MLS Program student laboratories only when supervised by MLS Faculty. Because students share drawers and microscope cabinets in the student laboratory, no personal items are to be stored there. Personal items (backpacks, coats, etc.) must be stored in the student's locker during laboratory sessions.
Cell phone use is not permitted during student laboratory sessions except for emergencies with instructor approval.

Additional Policies for Student Laboratory:
1. A clean, white, fluid-resistant lab coat must be worn and completely buttoned or zipped while in the laboratories. Laboratory coats are NOT to be worn to the bathroom, locker room, lounge and class/conference rooms. Laboratory coats are stored in the student laboratory between laboratory sessions.
2. Shoulder length hair must be secured to avoid interference with work.
3. Avoid scarves or ribbons (unless culturally appropriate).
4. Because jewelry represents a potential for cross-infection, only the following are permitted: a watch, up to four rings, small (non-dangling) earrings, academic pins, and other pins, badges or insignia that represent an award, modest bracelets (simple bands without charms or other dangling objects) and necklace chains. Appropriate holiday pin during the holiday is suitable.
5. Missed laboratory sessions in PATH courses may be made up at the discretion of the instructor. If a student misses a final examination, a grade of "I" may be used at the discretion of the instructor.

Unscheduled Examinations
It is the discretion of each instructor to give unscheduled examinations (quizzes) in any course, laboratory or clinical rotation.

Clinical Rotation Policies

Students have been assigned to their clinical rotation sites upon their admission to the program. Upon successful completion of all required Medical Laboratory Science coursework, students are guaranteed a clinical experience; however, a specific site is not guaranteed. Students who are assigned to off-campus sites will relocate to those sites for the final semester of the senior year. Students are responsible for their own housing.

Completion of Materials for Clinical Rotations
Students must complete all of the requirements for each clinical rotation by the end of that rotation unless the student needs to complete competency time. If a student is unable to complete all of the requirements in the stated time frame and no competency time is available, the student must discuss this with the course instructor prior to the end of the rotation. Any student not completing the required elements without discussing this with the course instructor and/or according to rotation guidelines will be given a grade of ZERO (0) on any uncompleted items.

Clinical Sites’ Policies for the Senior Year
During the senior (2nd professional) year, students in the Division of Medical Laboratory Science must abide by the Division and University policies as well as the policies of the clinical site where they are assigned for the clinical rotation.

General Policies

Absence/Tardiness
Students are required to attend all class and laboratory sessions during the junior and senior year. Students who are absent from class for any reason are responsible for work missed.
ALL STUDENTS ARE TO NOTIFY THE DIVISION OF MEDICAL LABORATORY SCIENCE OFFICE (304-293-2069) THE DAY BEFORE OR THE MORNING THAT THEY HAVE TO BE AWAY FROM CLASS, LAB, OR CLINICAL ROTATION. FAILURE TO COMPLY MAY INITIATE ACTION BY THE ACADEMIC AND PROFESSIONAL STANDARDS COMMITTEE.

In addition to notifying the Division of Medical Laboratory Science office, senior students in clinical rotations are to notify their clinical instructor or the laboratory supervisor the morning that they are absent from the lab. This notice should occur before the scheduled start time that morning. It is the student’s responsibility to notify the Division Office on his/her return to classes.

Attendance is mandatory. Tardiness and the use of electronic devices (i.e. cell phones, beepers) including text messaging during a lecture or laboratory session is disruptive and may initiate action by the Academic and Professional Standards Committee.

The senior year consists of approximately 15 weeks of clinical rotations. Since this experience is intended to teach students clinical laboratory procedures and develop stated competencies, it is important that students are present every day.

If a student is absent from the clinical rotations, they may have to make up the missed work. Competency time will be scheduled by the instructor. If a student needs competency time beyond these scheduled weeks, his/her graduation date may be changed.

The Division of Medical Laboratory Science Academic and Professional Standards Committee will review the performance of any student who misses an excessive amount of time during a clinical rotation.

Some students who are present for the entire rotation may need to spend extra time in the rotation to meet the expected competencies. In this event, the instructor will schedule the extra time. This may delay the student’s graduation.

Accreditation

The Clinical Laboratory Science and Histotechnology Programs are accredited through the National Accrediting Agency for Clinical Laboratory Sciences (NAACLS).

National Accrediting Agency for Clinical Laboratory Sciences
5600 N. River Rd.
Suite 720
Rosemont, IL 60018-5119

847.939.3597
773.714.8880
773.714.8886 (FAX)
http://www.naacls.org

Adverse Weather Commitment

In the event of inclement or threatening weather, everyone should use his or her best judgment regarding travel to and from campus. Safety should be the main concern. If you cannot get to class because of adverse weather conditions, you should contact the division office as soon as possible. Similarly, if faculty are unable to reach your class location, they will notify you of any
cancellation or change as soon as possible using MIX, to prevent you from embarking on any unnecessary travel. If you cannot get to class because of weather conditions, we will make allowances relative to required attendance policies, as well as any scheduled tests, quizzes, or other assessments.

**Cell Phones**

Students are NOT permitted to use their cell phones during classes, student laboratory sessions and clinical rotations. Only with instructor approval for emergency situations should cell phones be used in class, laboratories or rotations. Cell phones that are used during class, student laboratory sessions and clinical rotations may be confiscated by the instructor. The phones will be returned after the student is counseled regarding their use.

Faculty, staff and students should NOT use cell phones for voice calls in the hallway near room 2157 as this is near an office where a pathologist is conducting patient care.

**Community Service**

All students at the WVU Health Sciences Center must complete 50 hours of community service. Additional information can be found in Appendix B.

**Confidentiality of Student Records**

Please refer to the West Virginia University Policy on the Family Educational Rights and Privacy Act, [http://ferpa.wvu.edu/](http://ferpa.wvu.edu/) and the following Board of Governors policies:

- Academics Rule 2.5 [http://bog.wvu.edu/policies](http://bog.wvu.edu/policies)
- Policy 10 [http://bog.wvu.edu/policies](http://bog.wvu.edu/policies)
- Policy 31 [http://bog.wvu.edu/policies](http://bog.wvu.edu/policies)

Often students ask faculty members to serve as references for job applications or graduate school. Students must complete the FERPA form in Appendix C when a faculty is asked to share academic information with others.

**Degree Works**

Degree Works is the online advising and degree auditing tool at WVU. All undergraduate students should have a completed audit for graduation. Some graduate programs also have an audit available in Degree Works. Please refer to this system regularly. Students can access Degree Works through the WVU Portal ([https://portal.wvu.edu](https://portal.wvu.edu)). More information is available at [http://registrar.wvu.edu/dw](http://registrar.wvu.edu/dw).

Degree Works is NOT an official evaluation. All degree requirements must be verified by student’s college or school prior to graduation. Students are responsible for complying with all academic policies published in the University catalog. If students have any questions about the information presented in this audit, they are encouraged to contact their advisor or the Office of the University Registrar at registrar@mail.wvu.edu.

**Directory Information**

Certain directory information may be released at the discretion of WVU, unless the student has completed a request for non-disclosure of Directory Information with the Office of the University Registrar, WVU, PO Box 6878, Morgantown, WV 26506. The full WVU Policy on the Family Educational Rights and Privacy Act (FERPA) is available at: [http://ferpa.wvu.edu](http://ferpa.wvu.edu)
Employment and Service Work
The junior and senior year coursework is very time consuming and demands a concentrated effort from each student. It is recommended that employment be limited or not attempted during the junior and senior years of the Medical Laboratory Science curriculum.

The aim of the West Virginia University Medical Laboratory Science Division is to provide a strong educational background in the clinical laboratory sciences which includes clinical laboratory experience in each discipline. Senior students in clinical rotations may work in suitable positions that are supervised, voluntary, paid, subject to employee regulations, and outside of the hours of their educational experience.

Students enrolled in the Medical Laboratory Science Division are expressly prohibited from rendering care or treatment in any form to any patient, including other students or staff of the University, except when rendered as a part of the classroom or laboratory instruction and/or assigned participation.

The Standards from the National Accrediting Agency for Clinical Laboratory Sciences (NAACLS) addresses students working in the clinical rotations which states:

“Service work by students in clinical setting outside of academic hours must be noncompulsory. Students may not be substituted for regular staff during their student experiences.”

Ethics
All students enrolled in a program of professional study are expected to abide by professional standards of conduct. It is expected that each student will adopt the Code of Ethics of their profession and maintain a demeanor appropriate to that Code at all times.

ASCP BOC Guidelines for Ethical Behavior for Certificants
The Board of Governors approved the following Guidelines for Ethical Behavior for Certificants. These Guidelines will be published on the BOC web page, and will be sent to each new certificant with their wall certificate when they become certified.

Recognizing that my integrity and that of my profession must be pledged to the best possible care of patients based on the reliability of my work, I will:
- Treat patients with respect, care, and thoughtfulness.
- Develop cooperative and respectful relationships with colleagues to ensure a high standard of patient care.
- Perform my duties in an accurate, precise, timely, and responsible manner.
- Safeguard patient information and test results as confidential, except as required by law.
- Advocate the delivery of quality laboratory services in a cost-effective manner.
- Strive to maintain a reputation of honesty, integrity, and reliability.
- Comply with laws and regulations and strive to disclose illegal or improper behavior to the appropriate authorities.
- Continue to study, apply, and advance medical laboratory knowledge and skills; and share such with other members of the healthcare community and the public.
- Render quality services and care regardless of patients' age, gender, race, religion, national origin, disability, marital status, sexual orientation, or political, social, or economic status.
ASCLS Code of Ethics

The Code of Ethics of the American Society for Clinical Laboratory Science (ASCLS) sets forth the principles and standards by which clinical laboratory professionals practice their profession.

I. Duty to the Patient
Clinical laboratory professionals are accountable for the quality and integrity of the laboratory services they provide. This obligation includes maintaining individual competence in judgment and performance and striving to safeguard the patient from incompetent or illegal practice by others.

Clinical laboratory professionals maintain high standards of practice. They exercise sound judgment in establishing, performing and evaluating laboratory testing.

Clinical laboratory professionals maintain strict confidentiality of patient information and test results. They safeguard the dignity and privacy of patients and provide accurate information to other health care professionals about the services they provide.

II. Duty to Colleagues and the Profession
Clinical laboratory professionals uphold and maintain the dignity and respect of our profession and strive to maintain a reputation of honesty, integrity and reliability. They contribute to the advancement of the profession by improving the body of knowledge, adopting scientific advances that benefit the patient, maintaining high standards of practice and education, and seeking fair socioeconomic working conditions for members of the profession.

Clinical laboratory professionals actively strive to establish cooperative and respectful working relationships with other health care professionals with the primary objective of ensuring a high standard of care for the patients they serve.

III. Duty to Society
As practitioners of an autonomous profession, clinical laboratory professionals have the responsibility to contribute from their sphere of professional competence to the general well being of the community.

Clinical laboratory professionals comply with relevant laws and regulations pertaining to the practice of clinical laboratory science and actively seek, within the dictates of their consciences, to change those which do not meet the high standards of care and practice to which the profession is committed.

ASCLS Pledge to the Profession

As a clinical laboratory professional, I strive to:
- Maintain and promote standards of excellence in performing and advancing the art and science of my profession
- Preserve the dignity and privacy of others
- Uphold and maintain the dignity and respect of our profession
- Seek to establish cooperative and respectful working relationships with other health professionals
- Contribute to the general well being of the community.

I will actively demonstrate my commitment to these responsibilities throughout my professional life.
National Society for Histotechnology Code of Ethics

I pledge myself to practice this profession in strict accord with the following code:

1. To conduct my professional life with dignity and integrity.
2. Place the welfare of the patient above all else, with the full realization of personal responsibility for the patient's best interest.
3. Keep inviolate the trust placed in me by patient, physician and professional investigator (veterinarian, scientist, etc.) treating as confidential all information obtained.
4. To conduct my work with integrity, objectivity, and responsibility when engaged in the practice of histotechnology applied to non-clinical research.
5. Accept responsibility for the ethical practices of our fellow members by cooperating with the Society in any efforts of investigation, counsel, or expulsion of violators.
6. Endeavor to promote and support educational and scientific programs which encourage professional growth and advancement of histotechnology professionals.
7. Pledge to uphold, and strive to improve laws and regulations affecting the public's health.

Good Student Discount Certificates

West Virginia University partners with the National Student Clearinghouse to provide automated enrollment or good student discount verification. There is no fee for students to use this service. To protect your privacy be sure to log off the Clearinghouse site and close your browser when finished.

Students can follow the steps below to log in to the National Student Clearinghouse web site and print the good student discount certificate:

1. Login to MIX at http://www.mix.wvu.edu
2. At Secure Access Login enter User Name and Password. Click Login button
3. Click STAR tab
4. Click on the link "Click here to enter STAR"
5. Click "Student Services & Housing"
6. Click "Registration or Student Records"
7. Click "Request NSC Enrollment or Good Student Discount Verification"
8. Click "Go to National Clearinghouse Site" button. You are now directed to the National Student Clearinghouse web site. Review options and make selection. After selection has been made, print.

If the student does not know their MIX/STAR log-in information, please contact OIT by calling 304-293-4444.

Parking

Parking at the Health Sciences Center is limited. Students may access parking information online at http://transportation.wvu.edu.

Parking in Lot 81 and Mountaineer Station is not available for football games even with a yearly permit. Free parking is available at the WVU Coliseum by riding the PRT from the Engineering station to the Health Science Center (Medical Campus).

At no time is parking permitted in the Ruby Hospital parking lots or in the parking lot reserved for patients in lot 80 in front of the HSC Learning Center. See the parking map in Appendix G.
Personnel

Division Director: Michelle Butina, Ph.D., Room 2163 E HSN 304-293-1630
Division Faculty: Marianne Downes, Ph.D., Room 2163 D HSN 304-293-1633
Jason Evans, Ph.D., Room 2163 C HSN 304-293-1632
Kim Feaster, M.A., Room 2320 B HSN 304-293-7628
Kerry Harbert, M.A., Room 2163 A HSN 304-293-3400
Jane Wade, B.A., Room 2144 B HSN 304-293-6547
Laboratory Instruction Specialist: Christine Titus, M.A., Room 2169 HSN 304-293-6229
Program Assistant I: Marty Fizer, Room 2163 E HSN 304-293-2069
Health Science Faculty: Valerie Watson, M.S., Room 2062 HSN 304-293-3759
Mark Paternostro, Ph.D., 3047A HSN 304-293-1513

Student Accounts
The Office of Student Accounts is located at the Mountaineer Hub in the Evansdale Crossing on the second floor. The mailing address is: Office of Student Accounts - 2nd Floor Room 200 - P.O. Box 6004, 62 Morrill Way, Morgantown, WV 26506. Information may be found online at http://studentaccounts.wvu.edu/. The phone number is 304-293-1988.

Student Appointments with Faculty Members
It is the student's responsibility to schedule an appointment with a faculty member outside of class. Faculty may not be able to accommodate unscheduled conferences.

Student Lockers
Students are assigned individual lockers in the Health Sciences Center at the beginning of the junior year. These lockers are for use until graduation. Please store coats, boots, and books in your locker during class. Also during the sessions in the student laboratory, store your backpacks, book bags and purses there. Coats /book bags are not to be brought to the student laboratory or clinical rotations. See Appendix I for a map of locker locations.

Student Memberships
Membership and participation in professional societies is a professional expectation. Student membership in the American Society for Clinical Pathology (ASCP) is free. Applications may be completed online at http://www.ascp.org/Students.

Student membership in the American Society for Clinical Laboratory Science (ASCLS) is available at a cost of $26.00 per year. This includes the $2.00 fee for membership in the West Virginia State chapter of ASCLS. Student members receive American Journal for Clinical Laboratory Science and a monthly newsletter. Applications may be completed online at http://www.ascls.org/join-ascls/join.

Student membership to the National Society for Histotechnology (NSH) is $80 for two years. Applications are available online at http://www.nsh.org/membership/nsh-membership. Student members receive a subscription to the Journal of Histotechnology, eligibility for awards and scholarships, a subscription to the quarterly newsletter NSH In Action, discounts on textbooks, access to archived webinars and other various resources.
Health and Safety Policies

Cardiopulmonary Resuscitation (CPR)
Each student must be certified in CPR, including adult, child, and infant CPR and choking. The certification must be completed prior to beginning the clinical rotations. Only certifications through the American Red Cross or American Heart Association are acceptable.

Drug Screening
Students may be required by their assigned clinical site to have a drug/alcohol screen. Students who test positive for any drugs of abuse will not be allowed to begin the clinical rotation.

Criminal Background Checks
Progress and completion of the degree includes satisfactory completion of the clinical education component of the curriculum. A majority of clinical sites now require students to complete a criminal background check prior to participating in clinical education placements. Therefore, students with unacceptable criminal backgrounds may not be able to meet the academic standards of the MLS Division.

Procedure
1. All matriculating MLS majors will be required to obtain a Criminal Background Check (CBC) prior to the start of the professional MLS curriculum (typically the junior year).
2. CastleBranch will perform CBCs as a designated agent of the MLS Division.
3. The School of Medicine has designated the depth of the background search to include felonies and misdemeanors at Federal, state, and local levels during the 7 previous years of residence.
4. Clinical sites may require repeated or additional background checks prior to the start of a rotation.
   a. These requirements should be listed explicitly in the Curriculum for the Senior Year.
   b. Students are responsible for reviewing this information and noting sites’ additional CBC requirements.
5. Each student will contact CastleBranch via a secure internet site and place an order for his/her CBC. The student provides his/her name, current and previous addresses, and other identifying information and pays the fee to CastleBranch by credit card.
   To obtain your initial CBC:
   a. Review the instruction sheet from CastleBranch.
   b. Log into the www.castlebranch.com website.
   c. Click on “Place Order”, and enter package code "WB45”.
   d. Enter the requested demographic information.
   e. Enter the requested payment information. Students are responsible for the fee.
6. The MLS Division Director and the Administrative Associate for Professional Programs Student Affairs Office will have access to CastleBranch inquiry results via a secure website using a unique user name and password. Paper copies of CBC results for each class are kept in a secure location under lock and key until the student graduates. Upon graduation, paper copies will be returned to the student or destroyed.
7. The Administrative Associate will forward any positive CBC results to the Associate Dean for Professional Programs (AD).
8. In the case of positive CBC findings:
   a. The AD will review the student’s MLS Application to determine whether the student reported the conviction on his/her application.
   b. The AD will meet with the student to discuss the results and the student’s perspective on the circumstances. The conversation will be documented in writing on the CBC form.
c. If the student feels that a positive CBC finding is in error, the student will be directed to speak with CastleBranch to determine if further investigation is needed. Errors may occur in instances of:
   i. CBC was completed on a different person with the same name
   ii. CBC was completed on a similarly named person
   iii. CBC returned information that was supposed to be sealed or expunged
If the information is in error, the CBC is repeated and CastleBranch will update the CBC report online. If the positive result is truly an error, no further action is taken.
d. The AD will refer the case to the Division of Medical Laboratory Science Academic and Professional Standards Committee for consideration and recommendations as stated in the Policy on Academic and Professional Standards.

9. Prior to the beginning of the clinical rotations, the Division of Medical Laboratory Science will provide the following attestation to each site:

   The Division of Medical Laboratory Science obtains criminal background checks on all students upon admission to the program. Unless otherwise noted, the background check for the students assigned to your facility was negative.

If the clinical site requires more specific documentation, the student will be directed to provide a print-out of his/her results from the CastleBranch website.

Fire Alarms
A possible fire in the Health Sciences Center will be announced with a loud intermittent horn blast. If the alarm sounds, all students, faculty and staff must evacuate the building. Before evacuation turn off all electrical, gas and oxygen equipment and hood fans in your area and take personal items with you. Close doors and windows. Proceed to the nearest exit and completely exit the building. Meet under the trees near the PRT Station. Remain outside until the All-Clear signal is announced over the loud speaker. Do not block the exit or interfere with the emergency personnel.

Health Requirements
The WVU School of Medicine, Professional Programs has compiled a comprehensive health policy designed to address the multifaceted health needs of your career.

HEALTH INSURANCE
Health insurance is required of all students who matriculate at West Virginia University. If you do not have health insurance through your parents, spouse or personal policy, you will be billed for insurance through the University. Additional information may be found at http://sio.hr.wvu.edu/. All students must provide documentation of health insurance annually.

IMMUNIZATIONS AND TITERS
All students who utilize teaching hospitals at the West Virginia University Health Sciences Center or any other hospital or clinic must be immunized and provide verification of immunizations. This requirement has been mandated by the Occupational Safety and Health Authority (OSHA). Students must have a 2-step skin test for tuberculosis (PPD) within three (3) months of starting the program and annually thereafter. Students who have a positive PPD must have a note from a treating physician as to how the positive PPD was managed and a chest x-ray report.
Immunization requirements include recent Tetanus/Diphtheria booster within ten (10) years, completed primary series and booster for polio, and meningitis. BCG vaccine, influenza vaccine and pneumonia vaccine are NOT required but must be noted if medically indicated.

Titers are required for proof of immunization and immunity to Measles, Mumps, Rubella (MMR), Varicella, and Hepatitis B. Should a titer not demonstrate immunity, specific booster immunization must be obtained. For Hepatitis B a repeat titer is required. The health forms are in Appendix D.

All documentation is to be uploaded into the student’s CastleBranch Medical Document Manager account (WB45im).

In addition, individual clinical sites may require additional immunizations.

**STUDENTS WHO HAVE NOT COMPLETED THE LISTED IMMUNIZATIONS AND TITERS WILL NOT BE PERMITTED TO BEGIN THE CLINICAL ROTATIONS.**

Questions concerning these health issues can be sent to Office of the Dean for Professional Programs, WVU, School of Medicine, PO Box 9225, Morgantown, WV 26506-9225, or by calling 304-293-1320.

**HIPAA Policy and Training**

**HIPAA Policy:**
Students, faculty and staff are not permitted to access or disclose confidential health information without authorization. Violations of this policy will be reviewed by the Academic and Professional Standards Committee.

**HIPAA Training:**
All students are required to complete training for awareness and compliance with the patient privacy regulations of the Health Insurance Portability and Accountability Act. This training will be available via SOLE (the on-line learning site) to all Health Sciences Center students and must be completed by the date established in PATH 303. Students who do not complete HIPAA training during the fall semester will not be enrolled for professional courses during the following spring semester.

**Laboratory Incidents/Accidents**

**Student Laboratory:**
1. In the event of exposure, thoroughly wash the area with soap and water, unless a mucous membrane exposure, in which case flush copiously with water.
2. The course instructor must be notified immediately.
3. If it is a non-blood-borne pathogen exposure, the student is sent to Student Health or the Emergency Department dependent on the severity of the incident. If it is a blood-borne pathogen exposure, the student is sent to WVU Medicine Employee Health.
4. The appropriate form (Appendix H) must be completed and placed in the student’s file.

**Clinical Rotations:**
1. In the event of exposure, thoroughly wash the area with soap and water, unless a mucous membrane exposure, in which case flush copiously with water.
2. The clinical instructor must be notified immediately.
3. The student is to follow the procedure stated in the clinical site’s policy.
4. A Laboratory incident/accident form (Appendix I) must be completed and submitted to the Division Director and placed in the student’s file.
Liability Insurance
Students are protected by liability insurance when engaged in recognized, integrated programs which are a part of the course of instruction. This does not include unauthorized work away from the campus or on campus.

OSHA Training
All students must be trained in standards for preventing transmission of blood borne and other infectious agents. This training will occur during the first semester of the professional curriculum and annually thereafter. Training is to be completed by the due date established in PATH 303 Laboratory Applications. Students who have not completed this requirement will not be permitted to register for PATH courses during the following spring semester.

Student Health Services
Information for student health services may be found at http://wvumedicine.org/ruby-memorial-hospital/services/wvu-specialty-clinics/student-health/.

Universal Precautions and Laboratory Safety
The student will be collecting, processing, and working with patient and known blood, body fluids and tissue specimens, and microorganisms that could be potentially pathogenic during his/her professional education.

The student will be oriented to and understand the use of and need for Universal Precautions and will follow these guidelines both in the student and hospital laboratories (Appendix E).

The student will notify the Medical Laboratory Science Division office and the course instructor or clinical instructor concerning ALL incidents or accidents. Please see the policy on laboratory incidents/accidents.

KEY POINTS TO REMEMBER:
1. FOLLOW UNIVERSAL PRECAUTIONS AT ALL TIMES.
2. NO eating, drinking, smoking, mouth pipetting or application of makeup in the student or clinical rotations.
3. NO placing of objects (fingers, pens, pencils, etc.) in the mouth.
4. Wash hands immediately if contaminated and before leaving the laboratory area.
5. Use laminar flow hoods and other safety equipment when required.
6. NO coats, backpacks/book bags or personal belongings are permitted in the student or clinical rotations.
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Policy on Academic and Professional Standards

Revised August 2018

THIS POLICY APPLIES THE REGULATIONS OF THE WEST VIRGINIA BOARD OF GOVERNORS (BoG) POLICIES 10 AND 31, AND ACADEMICS RULE 2.5 (FORMERLY POLICY 15).
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Preamble

The West Virginia University School of Medicine Department of Pathology, Anatomy and Laboratory Medicine Professional Programs, which includes the Medical Laboratory Science Programs and the Pathologists' Assistant Program, have an obligation to evaluate students pursuing a degree as thoroughly as possible for their cognitive and noncognitive abilities, their academic and professional knowledge and skills, their integrity, and their suitability for the practice in Medical Laboratory Science or as a Pathologists' Assistant. Accordingly, this policy incorporates the mandate of the West Virginia Supreme Court that "initial responsibility for determining the competency and suitability of persons to engage in professional careers lies with the professional schools themselves..."[North vs. West Virginia Board of Regents, 332 S.E. 2d (WV 1985)]

This Policy on Academic and Professional Standards is limited to students pursuing the Bachelor of Science (B.S.) Degree in Medical Laboratory Science or the Masters of Health Science/Pathologists' Assistant (M.H.S.) Degree at West Virginia University. This Policy (1) applies Board of Governors (BoG) Policies 10 and 31, and Academics Rule 2.5, (2) covers all behavior and conduct that demonstrates by a preponderance of the evidence that a student lacks the personal qualities necessary for the practice in Medical Laboratory Science or as a Pathologists' Assistant, (3) gives exclusive authority to the Department of Pathology, Anatomy and Laboratory Medicine Professional Programs in such matters, with exceptions stated in this policy.

Conduct and behavior not relating to and not affecting professional practice are governed by the West Virginia University BoG Policy 31 - University Student Conduct and Discipline Policy (http://bog.wvu.edu/policies). Examples of conduct and behavior relating to and/or affecting professional practice are described in this document, course syllabi, course materials, and lectures.
Definitions

Clinical facility – a term applied to any hospital or clinic to which a student is assigned for the purpose of clinical education.

Clinical rotation – period in which a student is completing competencies in a clinical setting.

Course – a component of the program’s curriculum that can include one or a combination of the following: lecture, laboratory or clinical rotations.

Dismissal – termination from the program in which the student is enrolled.

First Year - incorporates the Junior year including Fall I – Spring I within Medical Laboratory Science Programs.
   - incorporates PGY1 didactic year including Spring I – Fall I within the Pathologists’ Assistant Program.

Good standing – a student has not been assigned academic or professional disciplinary sanctions such as remediation, probation or dismissal.

GPA – Grade Point Average
   Overall GPA incorporates all final grades in courses completed within any accredited institution of higher education.

   Semester GPA incorporates all final grades completed within a specific semester, i.e. Fall, Spring or Summer.

   Science GPA incorporates overall final grades in science and math courses only. (only considered upon admission)

   Program GPA incorporates final grades within the specific program the student is enrolled. (Pathologists’ Assistant Program only)

Grade Penalty – defined by the course instructor in the syllabus

In writing – Electronic written communication (e.g., email) or written communication available for pick up or sent via postal service.

Probation – requires remediation within the program in which the student is enrolled.

Remediation – process of correcting a deficiency.

Second Year - incorporates the Senior year including Summer I – Spring II within Medical Laboratory Science Programs.
   - incorporates PGY2 clinical year including Spring II – Fall II within the Pathologists’ Assistant Program.
CHAPTER I

Academic and Professional Standards and Regulations Governing Lecture, Laboratory, and Clinical Assessments within the Medical Laboratory Science and Pathologists' Assistant Programs in Conformity with West Virginia BoG Policies 10 and 31, and Academics Rule 2.5.

SECTION 1. ACADEMIC AND PROFESSIONAL PERFORMANCE

Requirements, Evaluations, Rights and Obligations of Students, Rights and Obligations of the Faculty

1.1 Academic Requirements and Professional Standards

Requirements for admission to the Medical Laboratory Science Programs or Pathologists' Assistant Program are stated in the West Virginia University Academic Catalog (http://catalog.wvu.edu), program brochures, websites and application materials.

The Department of Pathology, Anatomy and Laboratory Medicine (PALM) Professional Programs requires that all enrolled students:

1) Achieve an integrative mastery of their discipline, maintain the motivation to gain such mastery, develop and demonstrate the required professional skills and responsibility

2) Be considerate toward instructors, staff, technologists and peers

3) Fulfill the criteria and requirements for satisfactory academic progress and successful completion of the Medical Laboratory Science or Pathologists' Assistant Curriculum as stated in the West Virginia University Academic Catalog (http://catalog.wvu.edu) and in the syllabus of each course

4) Comply with the rules of procedure, conduct and appearance required by the faculty coordinating a course, laboratory or clinical rotation

5) Follow the standards of the Department of PALM Professional Programs Student Code of Academic and Professional Integrity (Chapter III).

By enrolling in the Medical Laboratory Science Programs or Pathologists' Assistant Program, the student accepts the above academic and professional standards as criteria for successful completion of the curriculum. It is the student's responsibility to know and meet these requirements and criteria, and promptly inform the Program Director and/or Vice-Chair of Medical Laboratory Science ("Vice-Chair") of any serious impediment (such as illness, etc.) hindering satisfactory academic progress.

Failure to meet the requirements listed above may lead to academic penalties and/or remedial changes in the student's curriculum as outlined in Sections 2 and 3. Requirements are subject to change at any time with reasonable notice provided to students.

1.2 Assessments

Academic and professional performance is evaluated by written, computer-based and practical examinations and through the observation of performance in lectures, examinations, laboratories, and clinical rotations. Performance in courses and clinical rotations is described in the course syllabus or by the grades A (excellent), B (good), C (fair), D (poor), F (failure), UF (unforgivable F), Pass, Fail or I (incomplete).
A student must maintain expectations for professional behaviors as defined by the Department of PALM Professional Programs Student Code of Academic and Professional Integrity (Chapter III). Professional behavior deficiencies will be presented to the APSC.

1.3 Rights and Obligations of the Student

It is the student’s responsibility to fulfill coursework and degree requirements and to know and meet the criteria for satisfactory academic progress and completion of the program.

Students shall have the right to access:

1) The West Virginia University Academic Catalog (http://catalog.wvu.edu) in which program requirements are stated,
2) The PALM Department Professional Programs Policy on Academic and Professional Standards (this document)
3) BoG Policies 10, and 31, and Academics Rule 2.5
4) The Medical Laboratory Science or Pathologists’ Assistant Student Handbook

Students shall have access to a written description of content, requirements, and grading policy for each course or clinical rotation in which they are enrolled.

The student shall be graded or have his/her performance evaluated solely upon performance in the course or clinical rotation as measured against academic and professional standards. The student shall not be evaluated prejudicially, capriciously, or arbitrarily. The student shall not be graded nor shall his/her performance be unlawfully evaluated on the basis of gender, race, color, sexual orientation, veteran status, religion, age, disability, national origin, creed, ancestry or political affiliation.

Students should immediately report all violations of the Department of PALM Professional Programs Student Code of Academic and Professional Integrity that they witness, such as academic dishonesty, to the Chairperson of the APSC, or designee.

If any academic penalties are imposed because of failure to meet academic requirements or the provisions of Student Code of Academic and Professional Integrity, the student has a right to:

1.3.1 Written notice about failure to meet academic or professional standards and potential penalties
The student shall be informed in writing of (1) the student's failure to meet academic or professional standards and requirements or an alleged violation of standards, (2) the methods, if any, by which the student may correct the deficiencies, and (3) the penalty, if any, to be imposed.

1.3.2 Discussion of the matter with those involved
The student may meet with those who have determined that the student failed to meet academic or professional standards and requirements or violated the Department of PALM Professional Programs Student Code of Academic and Professional Integrity (Chapter III).
1.3.3 Appeal
The student may appeal the imposition of any academic penalty, including those imposed as a consequence of violations of the Student Code of Academic and Professional Integrity, as stated in Section 4 of this document in accordance with the West Virginia BoG Academics Rule 2.5 and the West Virginia University Academic Catalog (http://catalog.wvu.edu).

1.4 Rights and Obligations of the Faculty

It is the responsibility of the faculty to evaluate a student's academic and professional performance. This evaluation takes three forms, namely (1) assignment of grades and evaluations by the faculty coordinating a course or clinical rotation, (2) review of behavior, demeanor and adherence to the Student Code of Academic and Professional Integrity, and (3) review of academic and professional performance by the APSC.

Evaluations are not restricted to academic grades, but include the assessment of professional skills, demeanor and conduct.

The Department of PALM Professional Programs reserves the right to withhold the B.S. or M.H.S. degree from a student who may have technically met formal curricular requirements but lacks the professional skills, behavior and demeanor considered necessary for the degree or demonstrated unwillingness to accept professional responsibility in the practice of Medical Laboratory Science or as a Pathologists' Assistant.

Grades and evaluations issued by the course faculty, and decisions or recommendations of the APSC are subject to the provisions of Section 1.3 which describes student rights.

Faculty responsible for a course should issue a written syllabus describing content, requirements, and grading policy for the course or laboratory rotation to each student enrolled in a course or rotation (Section 1.4).

The assignment of a grade and evaluation is the responsibility of the faculty coordinating the course or rotation.

The faculty responsible for a course may impose upon the student the appropriate penalties described in Section 2.1 for failure to maintain academic and professional standards.

Faculty reporting of academic and professional deficiencies is outlined in Section 3.1.

SECTION 2. CONSEQUENCES OF FAILURE TO MEET ACADEMIC AND PROFESSIONAL STANDARDS AND REQUIREMENTS

Upon failing to meet the academic and professional standards or provisions of the Student Code of Academic and Professional Integrity, a student may be subject to the following academic penalties:

2.1 A Zero, A Lower Grade, an Unforgivable F (UF), an Incomplete (I) Final Grade or Exclusion from Further Participation in the Course, Unit or Clinical Rotation

These penalties are imposed by the instructor(s) of a course. The imposition of penalties by the instructor does not preclude further penalties by the Program Director based on the recommendations of the APSC.
2.2 Probation

This penalty is imposed by the Program Director after receipt of recommendations from the APSC (Section 3). The specific remediation requirements associated with the penalty will be stated by the Program Director at the time the student is informed of the penalty in writing (Section 1.3). See Section 3.5 for probation criteria.

2.3 Dismissal

This penalty is imposed by the Program Director after receipt of recommendations by the Department of PALM Professional Programs APSC as a result of academic and professional deficiencies found serious enough to merit dismissal.

After dismissal, readmission in the Medical Laboratory Science Programs or Pathologists’ Assistant Program must be sought through the standard admissions process. See Section 3.7 for dismissal criteria.

SECTION 3. ACADEMIC AND PROFESSIONAL STANDARDS COMMITTEE (APSC):

The Department of PALM Professional Programs APSC has been established for the purpose of the evaluation of Medical Laboratory Science and Pathologists’ Assistant students who fail to meet performance standards in one or more of the following areas: academics, academic integrity, clinical education and professional behavior and conduct.

The APSC is comprised of faculty from the Medical Laboratory Science Programs, Pathologists’ Assistant Program, and Health Sciences appointed by the Vice-Chair and is advisory to the Vice-Chair. A quorum consisting of 50% plus one member of the total membership is required to make a recommendation. The Director of the program in which the student under consideration is enrolled must be present before a recommendation may occur.

The APSC reviews the records of any student who fails to satisfy academic and professional standards which include grades, academic dishonesty or inappropriate professional behavior and conduct. The APSC makes recommendations for disciplinary sanctions and criteria. APSC recommendations for probation or dismissal are based on a comprehensive review of a student’s academic performance, professional behavior and conduct.

3.1 The Formal Process of Review by the APSC:

3.1.1

The faculty responsible for the course in which the student is not adhering to academic and professional standards must meet with the student and document on the appropriate form the following: (1) the problem, (2) meeting date(s) with student, (3) course of action already taken, and (4) recommendations. The form will be provided to the student, Program Director and Chair of the APSC, and a copy placed in the student’s file.

In matters of academic dishonesty or professional misconduct, any party can initiate a concern in writing to the APSC Chairperson, or designee.

The student may also submit in writing his/her arguments to the APSC Chairperson, or designee.
3.1.2
The APSC Chairperson, or designee, will then call a meeting of the Committee. If the student issue involves one of the APSC members, then that Committee member will not participate in the recommendations made. The vacancy may be filled by another faculty member appointed by the Vice-Chair.

The APSC will have access to all academic and professional materials.

3.1.3
All deliberations of the APSC will be closed and confidential. One Committee or staff member will be assigned to keep written minutes of the Committee meetings which must be signed and approved by all members who participate.

3.1.4
At the discretion of the APSC, a student under review may be invited for discussion of his/her academic deficiencies, professional misconduct or any extenuating circumstances that may have a bearing on the student’s performance.

3.1.5
The recommendations of the APSC will be submitted to the Program Director who may accept, modify, or reject the recommendations. The Program Director will then meet with the student to explain the imposition of any penalties and expected criteria. Decisions regarding dismissal will be reviewed and conveyed to the student by the Program Director. (Section 3.7).

3.2 Criteria to Remain in Good Standing

Recommendations for graduation are contingent upon the successful completion of all required courses, clinical rotations and other requirements. Graduation requires approval by the School of Medicine Faculty, including Medical Laboratory Science and Pathologists’ Assistant.

Medical Laboratory Science Programs
A student must:

1) Maintain at least a 2.5 overall GPA and achieve a 2.5 semester GPA each semester while in the program
2) Pass comprehensive examination given at the end of the Spring II semester of the second year
3) Maintain appropriate professional behavior, demeanor and conduct
4) Successfully complete all clinical rotations
5) Successfully complete a capstone project
6) Complete 50 hours of approved community service

A second attempt will be available for any student who does not pass the comprehensive examination. See Sections 3.3, and 3.4 for probation and dismissal criteria.
Pathologists' Assistant Program

A student must:
1) Maintain at least a 3.0 program GPA
2) Pass comprehensive examination given at the end of the Fall II semester of the second year
3) Maintain appropriate professional behavior, demeanor and conduct
4) Successfully complete all clinical rotations
5) Successfully complete a presentation or publication
6) Complete 50 hours of approved community service

A second attempt will be available for any student who does not pass the comprehensive examination. See Section 3.3 and 3.4 for probation and dismissal criteria.

3.3 Probation

3.3.1 Admissions Probation
Automatic probationary status will be assigned to any student admitted with an overall and/or science GPA less than 2.5 in the Medical Laboratory Science Programs. Probation upon admission does not apply to the Pathologists' Assistant Program.

3.3.2 Program Probation

Medical Laboratory Science and Pathologists' Assistant Criteria:
Probation will be recommended by the APSC in any case of:
1) A final grade of “D” during the program
2) Evaluations indicating serious gaps in knowledge and clinical skills and/or inadequate integration of the content of the curriculum
3) The appearance of a specific and serious academic deficiency, e.g., an important clinical skill has not been mastered
4) Failure to assume appropriate professional responsibility and behavior including demeanor and conduct
5) A student's overall or semester GPA less than 2.5 in Medical Laboratory Science programs, or a program GPA less than 3.0 in the Pathologists' Assistant Program
6) Excessive absenteeism and/or tardiness
7) An infraction of the Student Code of Academic and Professional Integrity (Chapter III)

When a student is placed on probation, the student must meet established criteria in the timeframe specified by the Program Director. If the student meets the established criteria in the specified timeframe, the APSC will recommend removal from probation. If the student does not meet the criteria within the specified timeframe, an extension of the student's probationary status will be recommended.

Probationary status can only be assigned for a maximum of two semesters throughout the student's entire matriculation in the program. It is possible for a student to be placed on probation, meet the terms of the probation by the following semester, be placed on probation again during a subsequent semester and meet the terms of probation again by the following semester. However, no further probationary periods will be allowed and dismissal will be recommended.
3.4 Dismissal

Dismissal may be recommended by the APSC for any case of:

Medical Laboratory Science Programs Criteria:
1) A second final grade of “D” in the first year or a final grade of “D” in the second year
2) Two semesters of an overall GPA less than 2.25 or a second semester GPA less than 2.25
3) An overall GPA less than 2.5 by the end of the Spring II semester of the second year
4) Failure of the comprehensive examination after two attempts given during the Spring II semester of the second year
5) Unsatisfactory evaluations which indicate gaps in knowledge and skills and/or inadequate integration of the content of the curriculum
6) Excessive absenteeism and/or tardiness for more than one semester
7) After one semester on probation for failure to assume appropriate professional responsibility, including demeanor and conduct, dependent upon the severity
8) Any infractions of the Student Code of Academic and Professional Integrity (Chapter III)

Pathologists' Assistant Program Criteria:
1) A second final grade of “D” in the first year or a final grade of “D” in the second year
2) Failure of the comprehensive examination after two attempts given during the Fall II semester of the second year
3) Unsatisfactory evaluations which indicate gaps in knowledge and skills and/or inadequate integration of the content of the curriculum;
4) Excessive absenteeism and/or tardiness for more than one semester
5) After one semester on probation for failure to assume appropriate professional responsibility, including demeanor and conduct, dependent upon the severity
6) Any infractions of the Student Code of Academic and Professional Integrity (Chapter III)

Dismissal will be recommended by the APSC for any case of:

Medical Laboratory Science Programs Criteria:
1) An overall GPA less than 2.0 or more than two semesters of an overall GPA less than 2.25 in the Medical Laboratory Science Programs
2) Two final grades of D in the same semester
3) A final grade of “F” or “UF”
4) Meets probationary criteria for more than two semesters (see Section 3.3.2)

Pathologists' Assistant Program Criteria:
1) A program GPA less than 2.75 or more than two semesters of a program GPA less than 3.0 in the Pathologists' Assistant Program
2) Two final grades of D in the same semester
3) A final grade of “F” or “UF”
4) Meets probationary criteria for more than two semesters (see Section 3.3.2)

The APSC expects every student to meet the requirements stated in Section 1.1 and 1.2 of this policy. Therefore, even without an unsatisfactory grade, a student may incur a recommendation for dismissal for failure to meet these requirements.
Recommendation to dismiss a student for failure to meet academic or professional standards can be made only after documented counseling with the student and Program Director or Vice-Chair.

An APSC recommendation for dismissal, including any documentation provided by the student to the committee, shall be forwarded to the Program Director, and to the student. Within 15 calendar days of receipt of the APSC's recommendation, the Program Director, shall inform the student of his/her decision. A decision to dismiss shall specify that the dismissal is from the program, not the college, or school.

The student may appeal this dismissal (Section 4). Students who are dismissed, including students admitted as direct admit, may reapply through the standard admissions process.

SECTION 4. APPEAL OF ACADEMIC DISHONESTY OR ACADEMIC PENALTIES

Due process requirements, appeal procedures and time lines are specified in the West Virginia University Academic Catalog (http://catalog.wvu.edu), and BoG Policy 31 and Academics Rule 2.5.

CHAPTER II

Professional Standards Governing Student Conduct Outside the Department of PALM Professional Programs (BoG Policies 10 and 31)

Conduct and behavior not relating to and not affecting professional practice are governed by the West Virginia University BoG Policy 31 - University Student Conduct and Discipline Policy (http://bog.wvu.edu/policies). Examples of conduct and behavior relating to and/or affecting professional practice are described in this policy and course syllabi.

Academic dishonesty includes plagiarism (intentional or unintentional), cheating and dishonest practices in connection with examinations, papers, projects and laboratories as well as forgery, misrepresentation or fraud as it relates to academic and educational matters.

The process for initiating a charge of academic dishonesty is outlined in the West Virginia University Academic Catalog (http://catalog.wvu.edu).
CHAPTER III

Department of PALM Professional Programs Student Code of Academic and Professional Integrity

The practice of the art and science in Medical Laboratory Science or as a Pathologists' Assistant must be based on reverence for life, compassion and respect for patients, competence, and integrity. Hence the Department of PALM Professional Programs expects students to exhibit professionalism through compassion, consideration and respect towards patients and their families, instructors, staff, and each other, growth of knowledge and clinical skills, and acting honorably at all times.

This Student Code of Academic and Professional Integrity incorporates the Policy on Academic and Professional Standards governing the Department of PALM Professional Programs at West Virginia University School of Medicine and governs student behavior in lectures, examinations, laboratories, clinical rotations, all academic settings of the School of Medicine and the University, and all other settings which reflect upon the integrity and suitability of the student to practice in Medical Laboratory Science or as a Pathologists' Assistant. Successful progression through the curriculum and graduation are contingent upon the student's compliance with this code. Evaluation of student performance under this code follows the procedures established in the Policy on Academic and Professional Standards governing the Department of PALM Professional Programs at West Virginia University School of Medicine.

Specifically, the Department of PALM Professional Programs requires students to adhere to these basic rules of academic and professional integrity:

1. I shall dedicate myself to excellence in patient care.
   I, therefore, shall be conscientious in carrying out my assigned duties, follow the guidance of my instructors, and accept responsibility for my actions.

2. I shall safeguard a patient's privacy.
   I, therefore, shall not access or disclose confidential information about a person without authorization.

3. I shall be considerate and respectful towards patients, their families, instructors, staff, and my fellow students.
   I, therefore, shall treat patients with greatest consideration and respect their dignity. I shall be courteous and civil in my dealings with others within the School of Medicine and clinical facilities. I shall respect rules of behavior, professional comportment, and appearance set forth by the School of Medicine, the Department of PALM Professional Programs and clinical facilities. I shall render evaluations of courses and instructors in an objective and civil manner.
   I shall be professional in all forms of communication.

4. I shall act honorably and with integrity in my pursuit of the B.S. or M.H.S. degree.
   I, therefore, shall be truthful about my actions as a student and accept responsibility for them. I shall reject academic dishonesty and not falsely claim competence or knowledge.
   I pledge to refrain from all acts of academic dishonesty. In particular,
   a. I shall not plagiarize and not submit as my own any material taken from other sources without acknowledgement or permission.
   b. I shall not cheat in connection with any examinations, academic assignments and activities, and clinical duties.
   I especially pledge that:
      • I shall not communicate with others, except proctors, during an examination;
• I shall not obtain unauthorized help from another person during an examination or graded academic assignment;
• I shall not give help to another student during an examination or graded academic assignment;
• I shall not take an examination in place of another student;
• I shall not gain access to unauthorized material in connection with an examination;
• I shall not make use of unauthorized material in connection with an examination;
• I shall not obtain impermissible advance knowledge of the contents of examination;
• I shall not alter a scored examination or answer sheet and then resubmit it in order to effect a change of a grade or evaluation;
• I shall not allow another student to submit my work for grading or credit;
• I shall not falsify instructional or clinical laboratory results;
  c. I shall not engage in forgery, misrepresentation, and fraud. I especially pledge that:
   • I shall not furnish false statements as a witness for any University or School of Medicine disciplinary investigation or appeal;
   • I shall not forge or alter educational records or submit such records to the staff and faculty of the University or School of Medicine for fraudulent purposes;

5. I shall act honorably and with integrity at all times.
   I, therefore, shall not engage in behavior or conduct that demonstrates a lack of personal qualities necessary for the practice in medical laboratory science or pathologists’ assistant or that may adversely reflect upon the profession, the Department of PALM Professional Programs or the School of Medicine.

6. I shall support this code of academic and professional integrity.
   I, therefore, shall report to Chairperson of the APSC all violations of this code that I witness.
I have read and understand the Department of Pathology, Anatomy and Laboratory Medicine Professional Programs Policy on Academic and Professional Standards and agree to abide by the academic and professional standards and requirements stated within this document.

Name (Printed):

Signature:

Date:
HSC STUDENT COMMUNITY SERVICE
POLICY, PROCEDURE, AND GUIDELINES

DEFINITION OF COMMUNITY SERVICE:
A method under which students actively participate in organized service that is conduct ed in and meets the needs of a community. It is monitored by their pro gram/school at the Health Sciences Center and the community. This service actively helps foster civic responsibility and may be integrated into and enhances the academic curriculum of the students.

GENERAL GOAL:
All Health Sciences Center students should have an approved community service experience.

The community service is required of **ALL** Health Science students, this includes part-time as well as full-time students and graduate students.

- Health Sciences Programs of **2 years or less** - students must complete **50** hours of community service.
- Health Science Programs of **over 2 years** students must complete **100** hours of community service.

LEARNING OBJECTIVES:
1. To foster civic responsibility.
2. To enhance the hands-on learning experience of the student.
3. To assist the student in identifying and meeting health and social needs of the community.

EXAMPLES OF ACCEPTABLE COMMUNITY SERVICES ARE: (Not an all inclusive list.)
- Read-a-loud at school
- Health Education Sessions in a school or community
- Visiting the elderly (i.e., Nursing Homes, Hospitals, etc.)
- Habitat for Humanity (building homes for people without shelter)
- Hospice
- Morgantown Health Right
- Soup Kitchen, Bartlett House, Meals on Wheels, etc.
- Child Life Program in a Children's Hospital
- Ronald McDonald House
- Big Brothers/Big Sisters
- American Red Cross and Blood Donation Center
- Salvation Army
• United Way of Monongalia and Preston Counties – call 296-7525 or email: UnitedWay@teamunitedway.org
• Christian Help
• Health Fair
• Activities through churches, sororities, fraternities, etc. (i.e. Adopt-A-Highway)
• Working with soccer, baseball, basketball, etc.
• Asthma and Diabetic Camps
• Youth Development camps (i.e. 4-H)
• RHI-Kellogg community service experience will apply toward the 50 to 100 hours, but only the community service not the clinical or research activities.

COMMUNITY SERVICE IS A THREE-STEP PROCESS:
1. Students complete the approved community service under appropriate supervision.
2. Students record the community service activity on SOLE.
3. The designee of the program/school approves the service.

DEPARTMENT GUIDELINES AND RESPONSIBILITIES:
• Review and approve community service hours.
• Keep student records of approved community service hours.
• Summer time and vacation/break time are good times for students to perform community service.
• Approval of the community service activity resides with the dean or designee.

POLICIES:
1. Students' graduation/diploma may be withheld if community service hours are not completed.
2. Community Service appeals should follow the University/HSC standard appeal procedures.
3. Academic credit is provided through a special topics course in the final semester which accumulates the student's community service components. The grade is pass or fail.
Family Educational Rights and Privacy Act Release

Please print:

Student Name: ____________________________

Last   First   Middle

Address: ______________________________________

Cell Phone #: __________________________

Street ______________________________________

City   State   Zip

Student ID: __________________________

Date of Birth: __________

Information related to FERPA at WVU can be located here: http://ferpa.wvu.edu

I understand that (1) I have the right not to consent to the release or disclosure of my education records; (2) I have the right to inspect and review such records upon request; (3) this consent to release or disclose will expire upon graduation or after I cease to be a student for six months or until revoked by me, in writing, and delivered to the Division Director, whichever comes first. Any disclosure of information made by WVU prior to the receipt of written revocation is not affected by revocation. I further understand that in order for WVU to release my education records, this release must be executed. Therefore, I, the undersigned, expressly authorize the Division of Medical Laboratory to do the following:

A. Use necessary information from my education records, including grade point average obtained while attending West Virginia University, as it relates to my candidacy for employment, certification, licensure, awards, or accolades. In addition, I hereby authorize West Virginia University to use any grade point average obtained while attending West Virginia University to publicize and/or display any academic awards or recognition that I may receive.

B. Use my Directory Information and/or my photograph, as defined by the University’s policy and/or procedure, to promote and market the Division of Medical Laboratory Science, the School of Medicine, and West Virginia University.

Student Signature ____________________________________________ Date __________________________

Identity of student must be confirmed upon receipt by the Division Director.

For Office Use Only:

Received by ____________________________ Date __________
Immunization and Health Information

Health Insurance

Health insurance is required of all students who matriculate at West Virginia University. If you do not have health insurance through your parents, spouse or personal policy that meets WVU requirements, you will automatically be enrolled and billed for insurance through the University. All students must provide documentation of health insurance annually.

Physical Examination
All students must complete and submit the following forms at or before new student orientation:

- Personal Immunization History
- Student Health Evaluation form
  - Page 1 (Medical History)
  - Page 2 (Physical Examination by Licensed Health Care Provider)

The student should take these three forms, along with a printout of our immunization/titer requirements (below) and the instructions, to his/her health care provider.

Immunizations and Titer Requirements

A. All students must have the following immunizations and titers prior to starting the professional program. We follow CDC guidelines for health care providers (website http://www.immunize.org/catg.d/p2017.pdf)

1. Hepatitis B:
   i. Shots: 3 dose series IM (0, 1 and 6 mos.)
   ii. Titer: IgG anti-HBs 1-2 mos. after dose #3
      (If the Hepatitis series is not complete before matriculation, the student must have at least the first shot. The entire series and titer must be completed no later than December 1 of the first professional year.)

2. Measles, Mumps, Rubella (MMR)
   i. Shots: 2 doses, 4 weeks apart (if born later than 1957)
   ii. Titer: IgG titer 1-2 mos. after last shot
3. Varicella:
   i. Shots: 2 doses, 28 days or more apart (if non-immune titer or no prior infection)
   ii. Titer: IgG titer 1-2 mos. after last shot

4. Tetanus booster: within the past 10 years.

5. PPD: The Two-step Mantoux tuberculin skin test (TST) is required within 6 months of starting the program. Thereafter, the student must have a one-step test done annually.

6. Poliomyelitis: All students must complete the primary series and booster (age 4-6) for polio.

7. Meningococcus: WVU requires all students to have this vaccination

B. For non-immune titers:
   1. Hepatitis- restart the series, repeat titer required
   2. MMR- give a third MMR shot, no repeat titer required
   3. Varicella- administer two vaccines, no repeat titer required

C. Any student who declines immunizations for religious or other reasons must be made aware of potential personal dangers and will be required to sign a waiver. This can be downloaded waiver-form-for-students-immunizations.pdf. Please forward this completed form to the Office of Student Services/Professional Programs.

CPR (Cardiopulmonary Resuscitation) Training

Each student must be certified in adult, child, and infant CPR and choking. This training must occur no later than October 1 of the first year and be maintained throughout the remainder of the professional curriculum. The student is responsible for keeping his/her training certification up to date. Only certifications through the American Red Cross or American Heart Association are acceptable. Training courses must include a skills check-off; online training courses will not be accepted.

Documentation and Communication of Health Information

Prior to beginning the professional program, the student must submit completed Health History, Personal Immunization History, and Physical Examination forms. The student must also submit copies of titer results and documentation of any additional
immunizations not listed on the Immunization History form. It is the student's responsibility to provide updated information on immunizations, health insurance coverage, PPD results, and CPR certification. Students whose files are incomplete will not be allowed to participate in clinical education rotations. In addition, registration for other courses may be restricted, or course grades may be affected, for students whose files are incomplete.

All forms and supporting documents are to be uploaded to the student’s CastleBranch Medical Document Management account.

Before a student begins a clinical rotation, the academic program must verify to the clinical site that the student has complied with the health requirements. Some sites may request additional documentation, such as copies of immunization cards, lab reports, etc. In this case, the student will be notified and will be required to furnish the clinic with the appropriate records. Therefore, the student should keep a file of his/her own for copies of all the required documentation with them while they are in school.

Revised July 2018

Questions concerning these health issues can be sent to:

Marty Fizer, Program Assistant I
WVU School of Medicine
Division of Medical Laboratory Science
PO Box 9211
Room 2163-E Health Sciences North
Morgantown WV 26506-9211
Phone: (304) 293-2069
Fax: (304) 293-1627
Dear Health Care Provider,

Our matriculating student should bring in the following forms for you to complete.

1. Health evaluation form:
   a. Page 1 – Health History: Complete this form fully and have the patient sign the bottom of the form.
   b. Page 2 – Physical examination form: Complete this fully. A genital examination is not required but recommended. Please don’t overlook the hearing, vision and color blindness tests. Any significant health concerns, physical or mental, should be noted on the form.

2. Immunization form: Complete this form fully.

3. Immunization and Titer requirements: Your patient will need to have the following titers ordered: Hepatitis, Measles, Mumps, Rubella and Varicella. Titer results should be given to the student.

   The student is required to upload all documents (including titer results) to our medical document management company database. Your help in having these tests completed and results given to the student is very much appreciated.

Should you have any questions about any of the paperwork, please do not hesitate to contact our office either by phone or email.

Many thanks,

Michelle Butina, Ph.D.
Director of Medical Laboratory Sciences

Marty Fizer
Program Assistant I
WVU School of Medicine
Division of Medical Laboratory Science
PO Box 9211
Room 2163E Health Sciences North
Morgantown, WV 26506-9211
mfizer@hsc.wvu.edu
Phone: (304) 293-2069
FAX: (304) 293-1627
# West Virginia University

## School of Medicine

### Professional and Undergraduate Programs

Medical Laboratory Science

### Student's Health Evaluation Form

**Part 1 - To be completed by student**

Name: ____________________________ Age: _______ Date of Birth: __/__/____

Permanent Address: ______________________________________________________

In case of emergency, notify: Name: ____________________________ Phone: (_______)

Relationship: ___________ Address: _______________________________________

Student's 700/800#: ______________________________________________________

## Student's Medical History

<table>
<thead>
<tr>
<th>Allergies</th>
<th>Operations (date, type)</th>
<th>Hospitalizations (date, type)</th>
<th>Medical, emotional problems requiring treatment</th>
<th>Medications</th>
</tr>
</thead>
</table>

## Student's Family History

<table>
<thead>
<tr>
<th>FAMILY MEMBER</th>
<th>AGE(S)</th>
<th>STATE OF HEALTH</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mother</td>
<td></td>
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<tr>
<td>Father</td>
<td></td>
<td></td>
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<tr>
<td>Brother(s)</td>
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<tr>
<td>Sister(s)</td>
<td></td>
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<tr>
<td>Spouse</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

What is your current health status?

Comments or additional history:

To my knowledge, the Medical History and Immunization information I have provided on this form is accurate and complete. I give permission to the Associate Dean and staff of Professional Programs of the WVU School of Medicine to release the necessary parts of my health forms, including records and titer results when required for on-campus clinical rotations and rotations at other institutions to which I am assigned.

Student's Signature: ____________________________ Date: ______________
PART 2 - PHYSICAL EXAMINATION (To be completed by physician)

Name_________________________ Age________ Date of Birth ______/_____/_____

Height_________ Weight_________ Pulse_________ Respiration_________ Blood Pressure_________

Vision: OD_________/20; OS_________/20 Hearing: R_________/15; L_________/15

<table>
<thead>
<tr>
<th>NORMAL</th>
<th>ABNORMAL</th>
<th>COMMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>HEENT</td>
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<tr>
<td>Neck</td>
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<tr>
<td>Chest</td>
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<td>Lungs</td>
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<td>Heart</td>
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<td>Extremities</td>
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<td>Orthopedic</td>
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<tr>
<td>Neurologic</td>
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<td></td>
</tr>
</tbody>
</table>

Summary of medical problems/concerns:

______________________________
Healthcare Provider Name (Please print)

______________________________
Healthcare Provider Signature Date of Exam ______/_____/_____/
WVU School of Medicine
Medical Laboratory Science
Personal Immunization Record

NAME: ___________________________ BIRTHDATE: ________________

GENDER: M F (circle one) ALLERGIES: ________________________________

We require the following immunizations: MMR (2 doses); Hepatitis B (3 doses); Varicella (2 doses if non-immune titer or no history of disease); Tetanus (1 dose within 10 years); Polio (initial series and booster at age 4-6); PPD (The Two-step Mantoux tuberculin skin test (TST) is required for initial skin testing.) Meningococcus (required by WVU)

1. M.M.R. (Measles, Mumps, Rubella)
Vaccine #1 __/__/__
Vaccine #2 __/__/__

2. Hepatitis B
Vaccine #1 __/__/__
Vaccine #2 __/__/__
Vaccine #3 __/__/__

3. Varicella
Vaccine #1 __/__/__ or Self Reported Illness Date __/__/__
Vaccine #2 __/__/__

4. Tetanus-Diphtheria-Pertussis (DTaP, Tdap, DT, Td)
Vaccine: __/__/__ (Td or TdaP?) circle one

5. Polio
Booster: __/__/__

6. PPD (The Two-step Mantoux tuberculin skin test (TST) is required for initial skin testing.)
Date applied __/__/__ RESULTS: ______________ Date Read __/__/__
Date applied __/__/__ RESULTS: ______________ Date Read __/__/__

7. Meningococcus
Vaccine __/__/__
Other Immunizations (if indicated)
Pneumovax __/__/__ BCG __/__/__

Health Care Provider: ___________________________ Date: ________________
(Signature)
OSHA’s Bloodborne Pathogens Standard

Bloodborne pathogens are infectious microorganisms present in blood that can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV), hepatitis C virus (HCV), and human immunodeficiency virus (HIV), the virus that causes AIDS. Workers exposed to bloodborne pathogens are at risk for serious or life-threatening illnesses.

Protections Provided by OSHA’s Bloodborne Pathogens Standard

All of the requirements of OSHA’s Bloodborne Pathogens standard can be found in Title 29 of the Code of Federal Regulations at 29 CFR 1910.1030. The standard’s requirements state what employers must do to protect workers who are occupationally exposed to blood or other potentially infectious materials (OPIM), as defined in the standard. That is, the standard protects workers who can reasonably be anticipated to come into contact with blood or OPIM as a result of doing their job duties.

In general, the standard requires employers to:

• **Establish an exposure control plan.** This is a written plan to eliminate or minimize occupational exposures. The employer must prepare an exposure determination that contains a list of job classifications in which all workers have occupational exposure and a list of job classifications in which some workers have occupational exposure, along with a list of the tasks and procedures performed by those workers that result in their exposure.

• **Employers must update the plan annually to reflect changes in tasks, procedures, and positions that affect occupational exposure,** and also technological changes that eliminate or reduce occupational exposure. In addition, employers must annually document in the plan that they have considered and begun using appropriate, commercially-available effective safer medical devices designed to eliminate or minimize occupational exposure. Employers must also document that they have solicited input from frontline workers in identifying, evaluating, and selecting effective engineering and work practice controls.

• **Implement the use of universal precautions** (treating all human blood and OPIM as if known to be infectious for bloodborne pathogens).

• **Identify and use engineering controls.** These are devices that isolate or remove the bloodborne pathogens hazard from the workplace. They include sharps disposal containers, self-sheathing needles, and safer medical devices, such as sharps with engineered sharps-injury protection and needleless systems.

• **Identify and ensure the use of work practice controls.** These are practices that reduce the possibility of exposure by changing the way a task is performed, such as appropriate practices for handling and disposing of contaminated sharps, handling specimens, handling laundry, and cleaning contaminated surfaces and items.

• **Provide personal protective equipment (PPE), such as gloves, gowns, eye protection, and masks.** Employers must clean, repair, and replace this equipment as needed. Provision, maintenance, repair and replacement are at no cost to the worker.

• **Make available hepatitis B vaccinations to all workers with occupational exposure.** This vaccination must be offered after the worker has received the required bloodborne pathogens training and within 10 days of initial assignment to a job with occupational exposure.

• **Make available post-exposure evaluation and follow-up to any occupationally exposed worker who experiences an exposure incident.** An exposure incident is a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or OPIM. This evaluation and follow-up must be at no cost to the worker and includes documenting the route(s) of exposure and the circumstances
under which the exposure incident occurred; identifying and testing the source individual for HBV and HIV infectivity, if the source individual consents or the law does not require consent; collecting and testing the exposed worker's blood, if the worker consents; offering post-exposure prophylaxis; offering counseling; and evaluating reported illnesses. The healthcare professional will provide a limited written opinion to the employer and all diagnoses must remain confidential.

- **Use labels and signs to communicate hazards.** Warning labels must be affixed to containers of regulated waste; containers of contaminated reusable sharps; refrigerators and freezers containing blood or OPIM; other containers used to store, transport, or ship blood or OPIM; contaminated equipment that is being shipped or serviced; and bags or containers of contaminated laundry, except as provided in the standard. Facilities may use red bags or red containers instead of labels. In HIV and HBV research laboratories and production facilities, signs must be posted at all access doors when OPIM or infected animals are present in the work area or containment module.

- **Provide information and training to workers.** Employers must ensure that their workers receive regular training that covers all elements of the standard including, but not limited to: information on bloodborne pathogens and diseases, methods used to control occupational exposure, hepatitis B vaccine, and medical evaluation and post-exposure follow-up procedures. Employers must offer this training on initial assignment, at least annually thereafter, and when new or modified tasks or procedures affect a worker's occupational exposure. Also, HIV and HBV laboratory and production facility workers must receive specialized initial training, in addition to the training provided to all workers with occupational exposure. Workers must have the opportunity to ask the trainer questions. Also, training must be presented at an educational level and in a language that workers understand.

- **Maintain worker medical and training records.** The employer also must maintain a sharps injury log, unless it is exempt under Part 1904 -- Recording and Reporting Occupational Injuries and Illnesses, in Title 29 of the Code of Federal Regulations.

**Additional Information**

For more information, go to OSHA's Bloodborne Pathogens and Needlestick Prevention Safety and Health Topics web page at: https://www.osha.gov/SLTC/bloodbornepathogens/index.html.

To file a complaint by phone, report an emergency, or get OSHA advice, assistance, or products, contact your nearest OSHA office under the “U.S. Department of Labor” listing in your phone book, or call us toll-free at (800) 321-OSHA (6742).

This is one in a series of informational fact sheets highlighting OSHA programs, policies or standards. It does not impose any new compliance requirements. For a comprehensive list of compliance requirements of OSHA standards or regulations, refer to Title 29 of the Code of Federal Regulations. This information will be made available to sensory-impaired individuals upon request. The voice phone is (202) 693-1999; the teletypewriter (TTY) number is (877) 889-5627.

For assistance, contact us. We can help. It's confidential.

---

OSHA®
Occupational Safety and Health Administration
www.osha.gov 1-800-321-6742

DSG 1/2011

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Personal Protective Equipment (PPE) Reduces Exposure to Bloodborne Pathogens

OSHA's Bloodborne Pathogens standard (29 CFR 1910.1030) requires employers to protect workers who are occupationally exposed to blood and other potentially infectious materials (OPIM), as defined in the standard. That is, the standard protects workers who can reasonably be anticipated to come into contact with blood or OPIM as a result of doing their job duties.

One way the employer can protect workers against exposure to bloodborne pathogens, such as hepatitis B virus (HBV), hepatitis C virus (HCV), and human immunodeficiency virus (HIV), the virus that causes AIDS, is by providing and ensuring they use personal protective equipment, or PPE. Wearing appropriate PPE can significantly reduce risk, since it acts as a barrier against exposure. Employers are required to provide, clean, repair, and replace this equipment as needed, and at no cost to workers.

Selecting Personal Protective Equipment

Personal protective equipment may include gloves, gowns, laboratory coats, face shields or masks, eye protection, pocket masks, and other protective gear. The PPE selected must be appropriate for the task. This means the level and type of protection must fit the expected exposure. For example, gloves may be the only PPE needed for a laboratory technician who is drawing blood. However, a pathologist conducting an autopsy would need much more protective clothing because of the different types of exposure (e.g., splashes, sprays) and the increased amount of blood and OPIM that are encountered. PPE must be readily accessible to workers and available in appropriate sizes.

If it can be reasonably expected that a worker could have hand contact with blood, OPIM, or contaminated surfaces or items, the employer must ensure that the worker wears gloves. Single-use gloves cannot be washed or decontaminated for reuse. Utility gloves may be decontaminated if their ability to provide an effective barrier is not compromised. They should be replaced when they show signs of cracking, peeling, tearing, puncturing, or deteriorating. Non-latex gloves, glove liners, powderless gloves or similar alternatives must be provided if workers are allergic to the gloves normally provided.

Gloves are required for all phlebotomies outside of volunteer blood donation centers. If an employer in a volunteer blood donation center judges that routine gloving for all phlebotomies is not necessary, then the employer is required to periodically re-evaluate this policy; make gloves available for workers who want to use them; and cannot discourage their use. In addition, employers must ensure that workers in volunteer blood donation centers use gloves (1) when they have cuts, scratches or other breaks in their skin, (2) while they are in training, or (3) when the worker believes that hand contamination might occur.

When splashes, sprays, splatters, or droplets of blood or OPIM pose a hazard to the eyes, nose or mouth, then masks in conjunction with eye protection (such as goggles or glasses with solid side shields) or chin-length face shields must be worn. Protection against exposure to the body is provided by protective clothing, such as gowns, aprons, lab coats, and similar garments. Surgical caps or hoods, and shoe covers or boots are needed when gross contamination is expected, such as during orthopedic surgery or autopsies.

In HIV and HBV research laboratories and production facilities, laboratory coats, gowns, smocks, uniforms, or other appropriate protective clothing must be used in work areas and animal rooms. Also, protective clothing must not be worn outside of the work area and must be decontaminated before being laundered.
Exception to Use of Personal Protective Equipment

A worker may choose, temporarily and briefly, under rare and extraordinary circumstances, to forego use of personal protective equipment. It must be the worker's professional judgment that using the personal protective equipment would prevent the delivery of health care or public safety services or would pose an increased hazard to the safety of the worker or coworker. When such a situation occurs, the employer is required to investigate and document the circumstances to determine if there is a way to avoid it from happening again in the future. Employers and workers should be aware that this is not a blanket exemption to the requirement to use PPE. OSHA expects that this will be an extremely rare occurrence.

Decontaminating and Disposing of Personal Protective Equipment

Employers must ensure that workers remove personal protective equipment before leaving the work area. If a garment is penetrated by blood or OPIM, it must be removed immediately or as soon as feasible. Once PPE is removed, it must be placed in an appropriately designated area or container for storage, washing, decontamination, or disposal. In addition, employers must ensure that workers wash their hands immediately or as soon as feasible after removal of gloves or other personal protective equipment.

Additional Information

For more information, go to OSHA's Bloodborne Pathogens and Needlestick Prevention Safety and Health Topics web page at: https://www.osha.gov/SLTC/bloodbornepathogens/index.html.

To file a complaint by phone, report an emergency, or get OSHA advice, assistance, or products, contact your nearest OSHA office under the “U.S. Department of Labor” listing in your phone book, or call us toll-free at (800) 321-OSHA (6742).

This is one in a series of informational fact sheets highlighting OSHA programs, policies or standards. It does not impose any new compliance requirements. For a comprehensive list of compliance requirements of OSHA standards or regulations, refer to Title 29 of the Code of Federal Regulations. This information will be made available to sensory-impaired individuals upon request. The voice phone is (202) 693-1999; teletypewriter (TTY) number: (877) 889-5627.

For assistance, contact us. We can help. It’s confidential.
Protecting Yourself When Handling Contaminated Sharps

Sharps are objects that can penetrate a worker’s skin, such as needles, scalpels, broken glass, capillary tubes and the exposed ends of dental wires. If blood or other potentially infectious materials (OPIM), as defined in the OSHA Bloodborne Pathogens standard (29 CFR 1910.1030), are present or may be present on the sharp, it is a contaminated sharp and appropriate personal protective equipment must be worn.

A needlestick or a cut from a contaminated sharp can result in a worker being infected with human immunodeficiency virus (HIV), hepatitis B virus (HBV), hepatitis C virus (HCV), and other bloodborne pathogens. The standard specifies measures to reduce these types of injuries and the risk of infection.

Careful handling of contaminated sharps can prevent injury and reduce the risk of infection. Employers must ensure that workers follow these work practices to decrease the workers’ chances of contracting bloodborne diseases.

Safer Medical Devices

Employers are required to consider and use safer medical devices, wherever possible. These devices include those that are needleless or have built-in protection to guard workers against contact with the contaminated sharp. In addition, employers must ask non-managerial patient care workers who could be exposed to contaminated sharps injuries for their input in identifying, evaluating and selecting effective work practice and engineering controls, including safer medical devices. The employer must document consideration and implementation of these devices, and the solicitation of worker input, in the Exposure Control Plan.

Prompt Disposal

Employers must also ensure that contaminated sharps are disposed of in sharps disposal containers immediately or as soon as feasible after use. Sharps disposal containers must be readily accessible and located as close as feasible to the area where sharps will be used. In some cases, they may be placed on carts to prevent patients, such as psychiatric patients or children, from accessing the sharps. Containers also must be available wherever sharps may be found, such as in laundries.

Contaminated sharps must never be sheared or broken. Recapping, bending, or removing needles is permissible only if there is no feasible alternative or if such actions are required for a specific medical or dental procedure. If recappping, bending, or removal is necessary, employers must ensure that workers use either a mechanical device or a one-handed technique. The cap must not be held in one hand while guiding the sharp into it or placing it over the sharp. A one-handed "scoop" technique uses the needle itself to pick up the cap, and then the cap is pushed against a hard surface to ensure a tight fit onto the device. Also, the cap may be held with tongs or forceps and placed over the needle. Contaminated broken glass must not be picked up by hand, but must be cleaned up using mechanical means, such as a brush and dust pan, tongs, or forceps.

Sharps Containers

Containers for contaminated sharps must be puncture-resistant. The sides and the bottom must be leakproof. They must be appropriately labeled or color-coded red to warn everyone that the contents are hazardous. Containers for disposable sharps must be closable (that is, have a lid, flap, door, or other means of closing the container), and they must be kept upright to keep the sharps and any liquids from spilling out of the container. The containers must be replaced routinely and not be overfilled, which can increase the risk of needlesticks or cuts. Sharps disposal containers that are reusable must not be opened, emptied,
or cleaned manually or in any other manner that would expose workers to the risk of sharps injury. Employers also must ensure that reusable sharps that are contaminated are not stored or processed in a manner that requires workers to reach by hand into the containers where these sharps have been placed.

**Handling Containers**

Before sharps disposal containers are removed or replaced, they must be closed to prevent spilling the contents. If there is a chance of leakage from the disposal container, the employer must ensure that it is placed in a secondary container that is closable, appropriately labeled or color-coded red, and constructed to contain all contents and prevent leakage during handling, storage, transport, or shipping.

**Additional Information**

For more information, go to OSHA’s Bloodborne Pathogens and Needlestick Prevention Safety and Health Topics web page at: https://www.osha.gov/SLTC/bloodbornepathogens/index.html.

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For assistance, contact us. We can help. It's confidential.

OSHA® Occupational Safety and Health Administration
www.osha.gov 1-800-321-6742

DSC 1/2011
Formaldehyde

Formaldehyde is a colorless, strong-smelling gas often found in aqueous (water-based) solutions. Commonly used as a preservative in medical laboratories and mortuaries, formaldehyde is also found in many products such as chemicals, particle board, household products, glues, permanent press fabrics, paper product coatings, fiberboard, and plywood. It is also widely used as an industrial fungicide, germicide and disinfectant.

Although the term formaldehyde describes various mixtures of formaldehyde, water, and alcohol, the term “formalin” is used to describe a saturated solution of formaldehyde dissolved in water, typically with another agent, most commonly methanol, added to stabilize the solution. Formalin is typically 37% formaldehyde by weight (40% by volume) and 6-13% methanol by volume in water. The formaldehyde component provides the disinfectant effects of formalin.

What Employers Should Know

The OSHA Formaldehyde standard (29 CFR 1910.1048) and equivalent regulations in states with OSHA-approved state plans protects workers exposed to formaldehyde and apply to all occupational exposures to formaldehyde from formaldehyde gas, its solutions, and materials that release formaldehyde.

- The permissible exposure limit (PEL) for formaldehyde in the workplace is 0.75 parts formaldehyde per million parts of air (0.75 ppm) measured as an 8-hour time-weighted average (TWA).
- The standard includes a second PEL in the form of a short-term exposure limit (STEL) of 2 ppm which is the maximum exposure allowed during a 15-minute period.
- The action level – which is the standard's trigger for increased industrial hygiene monitoring and initiation of worker medical surveillance – is 0.5 ppm when calculated as an 8-hour TWA.

Harmful Effects on Workers

Formaldehyde is a sensitizing agent that can cause an immune system response upon initial exposure. It is also a cancer hazard. Acute exposure is highly irritating to the eyes, nose, and throat and can make anyone exposed cough and wheeze. Subsequent exposure may cause severe allergic reactions of the skin, eyes and respiratory tract. Ingestion of formaldehyde can be fatal, and long-term exposure to low levels in the air or on the skin can cause asthma-like respiratory problems and skin irritation such as dermatitis and itching. Concentrations of 100 ppm are immediately dangerous to life and health (IDLH).

Note: The National Institute for Occupational Safety and Health (NIOSH) considers 20 ppm of formaldehyde to be IDLH.

Routes of Exposure

Workers can inhale formaldehyde as a gas or vapor or absorb it through the skin as a liquid. They can be exposed during the treatment of textiles and the production of resins. In addition to healthcare professionals and medical lab technicians, groups at potentially high risk include mortuary workers as well as teachers and students who handle biological specimens preserved with formaldehyde or formalin.

How Employers Can Protect Workers

Airborne concentrations of formaldehyde above 0.1 ppm can cause irritation of the respiratory tract. The severity of irritation intensifies as concentrations increase.

Provisions of the OSHA standard require employers to do the following:

- Identify all workers who may be exposed to formaldehyde at or above the action level or STEL through initial monitoring and determine their exposure.
- Reassign workers who suffer significant adverse effects from formaldehyde exposure to jobs with significantly less or no exposure until their condition improves. Reassignment may continue for up to 6 months until the worker is determined to be able to return to the original job or to be unable to return to work – whichever comes first.

- Implement feasible engineering and work practice controls to reduce and maintain worker exposure to formaldehyde at or below the 8-hour TWA and the STEL. If these controls cannot reduce exposure to or below the PELs, employers must provide workers with respirators.

- Label all mixtures or solutions composed of greater than 0.1 percent formaldehyde and materials capable of releasing formaldehyde into the air at concentrations reaching or exceeding 0.1 ppm. For all materials capable of releasing formaldehyde at levels above 0.5 ppm during normal use, the label must contain the words “potential cancer hazard.”

- Train all workers exposed to formaldehyde concentrations of 0.1 ppm or greater at the time of initial job assignment and whenever a new exposure to formaldehyde is introduced into the work area. Repeat training annually.

- Select, provide and maintain appropriate personal protective equipment (PPE). Ensure that workers use PPE such as impervious clothing, gloves, aprons, and chemical splash goggles to prevent skin and eye contact with formaldehyde.

- Provide showers and eyewash stations if splashing is likely.

- Provide medical surveillance for all workers exposed to formaldehyde at concentrations at or above the action level or exceeding the STEL, for those who develop signs and symptoms of overexposure, and for all workers exposed to formaldehyde in emergencies.

**Recordkeeping Requirements**

Employers are required to do the following regarding worker exposure records:

- Retain exposure records for 30 years.
- Retain medical records for 30 years after employment ends.
- Allow access to medical and exposure records to current and former workers or their designated representatives upon request.

**Additional Information**

For more information on this, and other health-related issues affecting workers, visit OSHA's website at www.osha.gov.

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For assistance, contact us. We can help. It's confidential.

OSHA
Occupational Safety and Health Administration
www.osha.gov 1-800-321-6742

Occupational Health Guideline for Xylene

INTRODUCTION

This guideline is intended as a source of information for employees, employers, physicians, industrial hygienists, and other occupational health professionals who may have a need for such information. It does not attempt to present all data; rather, it presents pertinent information and data in summary form.

SUBSTANCE IDENTIFICATION

• Formula: C₆H₄(CH₃)₂
• Synonyms: Commercial xylene (xylool) is a mixture, mostly the meta-isomer. 1) O-xylene, ortho-xylene, 1,2-dimethylbenzene; 2) m-xylene, meta-xylene, 1,3-dimethylbenzene; 3) p-xylene, para-xylene, 1,4-dimethylbenzene
• Appearance and odor: Colorless liquids with aromatic odors (pure p-xylene is a solid below 12.7 °C (55 °F)).

PERMISSIBLE EXPOSURE LIMIT (PEL)

The current OSHA standard for xylene is 100 parts of xylene per million parts of air (ppm) averaged over an eight-hour work shift. This may also be expressed as 435 milligrams of xylene per cubic meter of air (mg/m³). NIOSH has recommended that the permissible exposure limit be changed to 100 ppm averaged over a work shift of up to ten hours per day, forty hours per week, with an acceptable ceiling level of 200 ppm averaged over a 10-minute period. The NIOSH Criteria Document for Xylene should be consulted for more detailed information.

HEALTH HAZARD INFORMATION

• Routes of exposure
Xylene can affect the body if it is inhaled, if it comes in contact with the eyes or skin, or if it is swallowed. It may enter the body through the skin.

• Effects of overexposure
  1. Short-term Exposure: Xylene vapor may cause irritation of the eyes, nose, and throat. At high concentrations, xylene vapor may cause severe breathing difficulties which may be delayed in onset. At high concentrations, it may also cause dizziness, staggering, drowsiness, and unconsciousness. In addition, breathing high concentrations may cause loss of appetite, nausea, vomiting, and abdominal pain. Liquid xylene may be irritating to the eyes and skin. Exposure to high concentrations of xylene vapor may cause reversible damage to the kidneys and liver.
  2. Long-term Exposure: Repeated or prolonged exposure to xylene may cause a skin rash. Repeated exposure of the eyes to high concentrations of xylene vapor may cause reversible eye damage.
  3. Reporting Signs and Symptoms: A physician should be contacted if anyone develops any signs or symptoms and suspects that they are caused by exposure to xylene.
• Recommended medical surveillance
The following medical procedures should be made available to each employee who is exposed to xylene at potentially hazardous levels:
  1. Initial Medical Examination:
—A complete history and physical examination: The purpose is to detect pre-existing conditions that might place the exposed employee at increased risk, and to establish a baseline for future health monitoring. Examination of the central nervous system, eyes, gastrointestinal tract, blood, liver, and kidneys should be stressed. The skin should be examined for evidence of chronic disorders.
—A complete blood count: Xylene has been shown to cause reversible hematopoietic depression in animals. A complete blood count should be performed, including a red cell count, a white cell count, a differential count of a stained smear, as well as hemoglobin and hematocrit.
—Liver function tests: Since liver damage has been observed in humans exposed to xylene, a profile of liver

These recommendations reflect good industrial hygiene and medical surveillance practices and their implementation will assist in achieving an effective occupational health program. However, they may not be sufficient to achieve compliance with all requirements of OSHA regulations.

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Public Health Service  Centers for Disease Control
National Institute for Occupational Safety and Health

U.S. DEPARTMENT OF LABOR
Occupational Safety and Health Administration

September 1978
function should be obtained by using a medically acceptable array of biochemical tests.

—Urinalysis: Since kidney damage has been observed in humans exposed to xylene, a urinanalysis should be obtained to include at a minimum specific gravity, albumin, glucose, and a microscopic on centrifuged sediment.

2. Periodic Medical Examination: The aforementioned medical examinations should be repeated on a biannual basis.

• Summary of toxicology
Xylene vapor irritates the eyes, mucous membranes, and skin; at high concentrations it causes narcosis. In animals, xylene causes blood changes reflecting mild toxicity to the hematopoietic system. Repeated exposure of rabbits to 1150 ppm of a mixture of isomers of xylene for 40 to 55 days caused a reversible decrease in red and white cell count and an increase in thrombocytes; exposure to 690 ppm for the same time period caused only a slight decrease in the white cell count. Three painters working in a confined space of a fuel tank were overcome by xylene vapors estimated to be 10,000 ppm; they were not found until 18.5 hours after entering the tank, and one died from pulmonary edema shortly thereafter; the other two recovered completely in 2 days; both had temporary hepatic impairment (inferred from elevated serum transaminase levels) and one of them had evidence of temporary renal impairment (increased blood urea and reduced creatinine clearance). In humans, exposure to undetermined but high concentrations caused dizziness, excitement, drowsiness, incoordination, and a staggering gait. Workers exposed to concentrations above 200 ppm complain of anorexia, nausea, vomiting, and abdominal pain. Brief exposure of humans to 200 ppm caused irritation of the eyes, nose, and throat. There are reports of reversible corneal vacuolation in workers exposed to xylene, or to xylene plus other volatile solvents. The liquid is a skin irritant and causes erythema, dryness, and defattening; prolonged contact may cause the formation of vesicles.

CHEMICAL AND PHYSICAL PROPERTIES

Data in the following section are presented for xylene's three isomers: 1) ortho, 2) meta, and 3) para.

• Physical data
1. Molecular weight: 106.2
2. Boiling point (760 mm Hg): 1) 144.4 C (292 F); 2) 138.9 C (282 F); 3) 138.3 C (281 F)
3. Specific gravity (water = 1): 1) 0.88; 2) 0.86; 3) 0.86
4. Vapor density (air = 1 at boiling point of xylene): 3.7
5. Melting point: 1) -25 C (-12 F); 2) -48 C (-54 F); 3) 13 C (55 F)
6. Vapor pressure at 20 C (68 F): 1) 7 mm Hg; 2) 9 mm Hg; 3) 9 mm Hg
7. Solubility in water, g/100 g water at 20 C (68 F): 1) 0.00003; 2) 0.00003; 3) 0.00003

8. Evaporation rate (butyl acetate = 1): 1) 0.7; 2) 0.7; 3) 0.7

• Reactivity
1. Conditions contributing to instability: Elevated temperatures may cause containers to burst.
2. Incompatibilities: Contact with strong oxidizers may cause fires and explosions.
3. Hazardous decomposition products: Toxic gases and vapors (such as carbon monoxide) may be released in a fire involving xylene.
4. Special precautions: Xylene will attack some forms of plastics, rubbers, and coatings.

• Flammability
1. Flash point: 1) 32 C (90 F) (closed cup); 2) 28.9 C (84 F); 3) 27.2 C (81 F)
2. Autoignition temperature: 1) 465 C (869 F); 2) 530 C (986 F); 3) 530 C (986 F)
3. Flammable limits in air, % by volume: Lower: 1) 1.0; 2) 1.1; 3) 1.1; Upper: 1) 6.0; 2) 7.0; 3) 7.0
4. Extinguishant: Foam, carbon dioxide, dry chemical

• Warning properties
1. Odor Threshold: Patty states that “the initial odor of 200 ppm has an intensity of approximately 3 and an irritation value of 1. As in most other instances, olfactory fatigue occurs rapidly and the odor is no longer detected at this concentration.”
2. Eye Irritation Level: The AIHA Hygienic Guide states that “exposure to vapors at 200 ppm caused eye irritation in most of the persons tested. Lesions in the form of fine vacuoles in the cornea of cats exposed to commercial xylene vapors have been observed.”
3. Other Information: The Handbook of Industrial Organic Chemicals states that xylene “may be irritating to eyes, nose and throat as exposure exceeds threshold limit.” The Hygienic Guide notes that 200 ppm causes irritation of the nose and throat.
4. Evaluation of Warning Properties: Through its irritant effects, xylene can be detected within three times the permissible exposure limit. For the purposes of this guideline, therefore, xylene is treated as a material with good warning properties.

MONITORING AND MEASUREMENT PROCEDURES

• Eight-Hour Exposure Evaluation
Measurements to determine employee exposure are best taken so that the average eight-hour exposure is based on a single eight-hour sample or on two four-hour samples. Several short-time interval samples (up to 30 minutes) may also be used to determine the average exposure level. Air samples should be taken in the employee’s breathing zone (air that would most nearly represent that inhaled by the employee).

• Ceiling Evaluation
Measurements to determine employee ceiling exposure are best taken during periods of maximum expected airborne concentrations of xylene. Each measurement
should consist of a ten (10) minute sample or series of consecutive
samples totalling ten (10) minutes in the employee's breathing zone (air
that would most nearly represent that inhaled by the employee). A minimum
of three (3) measurements should be taken on one work shift and the highest
of all measurements taken is an estimate of the employee's exposure.

• Method
Sampling and analyses may be performed by collection of
vapors using an adsorption tube with subsequent
desorption with carbon disulfide and gas chromatographic
analysis. Also, detector tubes certified by NIOSH
under 42 CFR Part 84 or other direct-reading devices
calibrated to measure xylene may be used. An analytical
method for xylene is in the NIOSH Manual of Analytical
Methods, 2nd Ed., Vol. 3, 1977, available from the
(GPO No. 017-033-00261-4).

RESPIRATORS

• Good industrial hygiene practices recommend that
engineering controls be used to reduce environmental
concentrations to the permissible exposure level. How-
ever, there are some exceptions where respirators may
be used to control exposure. Respirators may be used
when engineering and work practice controls are not
technically feasible, when such controls are in the
process of being installed, or when they fail and need to
be supplemented. Respirators may also be used for
operations which require entry into tanks or closed
vessels, and in emergency situations. If the use of
respirators is necessary, the only respirators permitted
are those that have been approved by the Mine Safety
and Health Administration (formerly Mining Enforce-
ment and Safety Administration) or by the National
Institute for Occupational Safety and Health.

• In addition to respirator selection, a complete respira-
atory protection program should be instituted which
includes regular training, maintenance, inspection,
cleaning, and evaluation.

PERSONAL PROTECTIVE EQUIPMENT

• Employees should be provided with and required to
use impervious clothing, gloves, face shields (eight-inch
minimum), and other appropriate protective clothing
necessary to prevent repeated or prolonged skin contact
with liquid or solid xylene.

• Clothing contaminated with xylene should be placed
in closed containers for storage until it can be discarded
or until provision is made for the removal of xylene
from the clothing. If the clothing is to be laundered or
otherwise cleaned to remove the xylene, the person
performing the operation should be informed of xye-
lene's hazardous properties.

• Any clothing which becomes wet with liquid xylene
should be removed immediately and non-impervious
clothing which becomes contaminated with xylene
should be removed promptly and not worn until the
xylene is removed from the clothing.

• Employees should be provided with and required to
use splash-proof safety goggles where liquid or solid
xylene may contact the eyes.

SANITATION

• Skin that becomes contaminated with xylene should
be promptly washed or showered with soap or mild
detergent and water to remove any xylene.

• Employees who handle liquid or solid xylene should
wash their hands thoroughly with soap or mild deter-
gent and water before eating, smoking, or using toilet
facilities.

COMMON OPERATIONS AND CONTROLS

The following list includes some common operations in
which exposure to xylene may occur and control meth-
do which may be effective in each case:

<table>
<thead>
<tr>
<th>Operation</th>
<th>Controls</th>
</tr>
</thead>
<tbody>
<tr>
<td>Use as an intermediate during manufacture of plastics, synthetic fibers, and mixed/pure isomers</td>
<td>Process enclosure; local exhaust ventilation; general mechanical ventilation; personal protective equipment</td>
</tr>
<tr>
<td>Use as diluent or solvent in surface coatings, printing operations, and manufacture of rubber; degreasing agent in plastics and electronics manufacture; in organic synthesis reactions and manufacture of epoxy resins</td>
<td>Process enclosure; local exhaust ventilation; general mechanical ventilation; personal protective equipment</td>
</tr>
<tr>
<td>Use in formulation of insecticides</td>
<td>Process enclosure; local exhaust ventilation; general mechanical ventilation; personal protective equipment</td>
</tr>
<tr>
<td>Use in manufacture of xylene-formaldehyde resins; pharmaceuticals, vitamins, leather; and as a sterilizing agent for cat-gut and in microscopy</td>
<td>Process enclosure; local exhaust ventilation; general mechanical ventilation; personal protective equipment</td>
</tr>
</tbody>
</table>
Operation
Use during blending of motor and aviation fuels

Controls
Process enclosure; local exhaust ventilation; general mechanical ventilation; personal protective equipment

EMERGENCY FIRST AID PROCEDURES

In the event of an emergency, institute first aid procedures and send for first aid or medical assistance.

• Eye Exposure
If liquid or solid xylene gets into the eyes, wash eyes immediately with large amounts of water, lifting the lower and upper lids occasionally. Get medical attention immediately. Contact lenses should not be worn when working with this chemical.

• Skin Exposure
If liquid or solid xylene gets on the skin, promptly wash the contaminated skin using soap or mild detergent and water. If liquid or solid xylene penetrates through the clothing, remove the clothing immediately and wash the skin using soap or mild detergent and water. If irritation is present after washing, get medical attention.

• Breathing
If a person breathes in large amounts of xylene, move the exposed person to fresh air at once. If breathing has stopped, perform artificial respiration. Keep the affected person warm and at rest. Get medical attention as soon as possible.

• Swallowing
When xylene has been swallowed, do not induce vomiting. Get medical attention immediately.

• Rescue
Move the affected person from the hazardous exposure. If the exposed person has been overcome, notify someone else and put into effect the established emergency rescue procedures. Do not become a casualty. Understand the facility’s emergency rescue procedures and know the locations of rescue equipment before the need arises.

SPILL, LEAK, AND DISPOSAL PROCEDURES

• Persons not wearing protective equipment and clothing should be restricted from areas of spills or leaks until cleanup has been completed.

• If xylene is spilled or leaked, the following steps should be taken:

1. Remove all ignition sources.
2. Ventilate area of spill or leak.
3. For small quantities, absorb on paper towels. Evaporate in a safe place (such as a fume hood). Allow sufficient time for evaporating vapors to completely clear the hood ductwork. Burn the paper in a suitable location away from combustible materials. Large quantities can be reclaimed or collected and atomized in a suitable combustion chamber. Xylene should not be allowed to enter a confined space, such as a sewer, because of the possibility of an explosion. Sewers designed to preclude the formation of explosive concentrations of xylene vapors are permitted.

4. If the solid form, allow to melt and treat as in (3) above.

• Waste disposal method:
Xylene may be disposed of by atomizing in a suitable combustion chamber.

REFERENCES


WEST VIRGINIA UNIVERSITY
BOARD OF GOVERNORS
POLICY 57

TOBACCO FREE CAMPUS

Section 1: General.

1.1 **Purpose.** – To establish a policy that prohibits tobacco use at West Virginia University ("WVU").


1.3 **Scope.** – Subject to the provisions below, this policy applies to all members of the University community.

1.4 **Effective Date.** – This Policy is enacted June 7, 2012, however, as set forth below, the University will not be tobacco free until July 1, 2013.

1.5 **Revision History.** – This is a revision to the original Policy 57, which was effective June 4, 2010, and remains in effect until July 1, 2013, regarding a tobacco free Health Sciences Center Campus.

Section 2: Definitions.

2.1 "WVU Campus" is defined as (1) property controlled by WVU and under the jurisdiction of the West Virginia University Board of Governors, which includes any premises owned, operated, leased, or occupied by WVU; or (2) any street, road, or thoroughfare immediately adjacent to or passing through WVU owned property. This definition does not include the divisional campuses; however, the President is hereby delegated the authority to extend this Policy to the divisional campuses, once appropriate input and comment has been obtained from each of the campuses.

2.2 "Member of the University community," for purposes of this policy only, is defined as an individual engaged in any WVU activity or program, or any individual on the WVU Campus, including, but not limited to, any person who is a student, staff, faculty member, other WVU official, vendor, patient, or visitor.

Section 3: Policy.

3.1 Subject to section 3.2 below, beginning July 1, 2013, use of tobacco products, in any form, by a member of the University community located on or visiting the WVU campus is prohibited. Members of the University community shall be required to comply with this prohibition on the use of tobacco products.
3.2 Events that attract a large number of off-campus visitors to the WVU Campus may be exempted on a case by case basis with the approval of the Vice President for Administration and Finance, provided that all smoking be restricted to designated outdoor smoking areas.

Section 4: Communication of Policy and Designation of the Tobacco Free Boundaries.

4.1 Signs posted at vehicular and pedestrian entry ways into the WVU Campus will indicate that the WVU Campus is tobacco free. The policy will be posted on appropriate WVU website(s). In addition, implementation of the policy will be communicated internally by a variety of electronic and written means. To the extent practical, adequate notification that the WVU Campus is tobacco free will be made to the appropriate individuals, including those that apply for employment, attend meetings and conferences on the WVU Campus, and those that apply for enrollment at any of the WVU schools and/or programs.

Section 5: Compliance.

5.1 All members of the University community must comply with this policy. Violation of the policy by students may subject them to disciplinary sanctions, up to and including expulsion. Violation of this policy by employees may subject them to disciplinary action, up to and including termination of employment. Violation of this policy by other members of the University community may subject them to removal from the WVU Campus. The President’s designees shall be responsible for enforcement of this policy.

5.2 Members of the University community are expected to comply with the provisions of the tobacco free policies of any entity, whose property adjoins the WVU Campus.

Section 6: Tobacco Cessation Program.

6.1 WVU is committed to supporting our students, faculty, and staff who wish to overcome their addiction to tobacco products. A comprehensive description of tobacco use cessation options and resources available to our students and employees can be accessed at: http://www.wvu.edu.

6.2 Employees shall be eligible to utilize all tobacco cessation programs and resources which may be free or reimbursable by insurance. Students shall be eligible to utilize all tobacco cessation programs available through WellWVU.
Section 7: Responsibility for Application/Interpretation/Development of Procedures.

7.1 Responsibility for the application and interpretation of this policy and the development of procedures, if any, rests with the President and/or the President's designees.
FOR BLOOD-BORNE AND NON BLOOD-BORNE PATHOGEN EXPOSURE
WVU DIVISION OF MEDICAL LABORATORY SCIENCE
INCIDENT/ACCIDENT REPORT

Student Name: _______________________________________________________

Date of Occurrence: ________________    Time: _________________________

Place of Occurrence: _______________________________________________

Description of incident or accident: ___________________________________

_________________________________________________________________

Immediate action taken: _____________________________________________

_________________________________________________________________

Student taken to health services for review, evaluation and/or testing according to laboratory policy?

Yes _____    No _____

if yes, name or description of health service: ___________________________

_________________________________________________________________

Person(s) making report:

____________________________________    Date: _______________________

____________________________________    Date: _______________________

Program Director:

____________________________________    Date: _______________________

THIS FORM MUST BE COMPLETED AND FILED IN THE STUDENT’S FILE IN THE WVU MEDICAL LABORATORY SCIENCE DIVISION OFFICE.
FOR NON BLOOD-BORNE PATHOGEN EXPOSURE ONLY

STUDENT or VISITOR ACCIDENT REPORT FORM
West Virginia University
Environmental Health and Safety

THE INJURED STUDENT OR VISITOR AND WVU DEPARTMENT REPRESENTATIVE SHOULD COMPLETE THIS FORM.

Name: ___________________________ Status: (circle one) Student or Visitor

Date: ___________________________ Phone: ___________________________

Sex: Male or Female (circle one) Time accident occurred: ___________________________

Building/Location and Room or area in which accident occurred: ___________________________

Description of Accident: Please describe how the accident happened. What was the injured person doing? List any specific acts by individuals or conditions that led to the accident. (include any tools, machinery or instruments involved)

______________________________________________________

______________________________________________________

______________________________________________________

______________________________________________________

______________________________________________________

______________________________________________________

______________________________________________________

Nature of Injury

_Abrasion_    _Cut_    _Scratch_
_Amputation_  _Dislocation_  _Shock_
_Aspiration_  _Fracture_    _Sprain_
_Bite_        _Laceration_  _Splinter_
_Bruise_      _Poisoning_   _Strain_
_Burn_        _Puncture_    _Fainted_
_Concussion_  _Repetitive Stress Injury_
_Other specify_

Part of Body Injured

_Abdomen_  _Face_    _Leg_
_Ankle_     _Finger_  _Mouth_
_Back_      _Foot_    _Nose_
_Chest_     _Forearm_ _Shoulder_
_Ear_       _Hand_    _Teeth_
_Elbow_     _Head_    _Wrist_
_Eye_       _Knee_    _
_Other (specify)_

Was first aid administered?  Y or N
Did you receive medical treatment?  Y or N
Treatment location: ___________________________

Signed: ___________________________ Student ___________________________

or

Signed: ___________________________ WVU Department Representative ___________________________

Visitor ___________________________

E-Mail Original to timothy.dawson@mail.wvu.edu, Mike.Gansor@mail.wvu.edu
APPENDIX J

WVU Medical Laboratory Science
Student Grievance/Complaint Policy

A grievance or complaint must be submitted to the Medical Laboratory Science (MLS) Division Office within 15 working days of the incident using the form in Appendix J. A conference will be held with the MLS Division Director, the student and the offending person(s) if deemed appropriate. If the grievance is not resolved or if the student does not agree with the recommendation for action, the student may appeal to the Dean of the Professional Programs. If the grievance involves the MLS Division Director, the student should address his or her concern to the Dean of Professional Programs.
WVU Medical Laboratory Science

Form for Documenting Student Conferences/Complaints/Grievances

Student Name: ________________________________

Date: ______________________________________

Session Initiated by: _________________________

Nature of Session: ____________________________

Summary of Discussion:

Resolution/Recommendation:

Recommendation for Action:

___ None/Place in Student File for Future Reference
___ Division Director
___ Academic and Professional Standards Committee
___ Dean

Faculty Signature: ____________________________

Student Signature: __________________________
(Student signature does not mean that the student agrees or disagrees with the decision, only that he/she was present for this conference.)

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