



**THE GEORGE  
WASHINGTON  
UNIVERSITY**  
WASHINGTON, DC

Responsible University Official: Associate Dean for Graduate  
Medical Education, DIO  
Responsible Office: SMHS Office of GME  
Most recent revision: February 26, 2018

## **POLICY ON MEDICAL CLEARANCE**

### **Policy Statement**

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District of Columbia law states that each individual who is involved in direct patient care must have an occupational health clearance prior to the starting date of clinical care, and then annually thereafter. The health clearance requires that the resident complete a job-related medical questionnaire and provide a TB screening blood test (IGRA) or PPD results and immunization records prior to coming to GWU for residency. These documents are submitted via the MedHub system and must be uploaded per the instructions and deadline specified by the GME Office.

A health assessment is required and may be performed by a clinician chosen by the resident or at the GWUH Occupational Health office. This assessment includes a review of job-related medical history, vital signs, color blind testing (for new residents) an IGRA blood test or PPD results and immunization update if necessary. A full physical examination is not required for clearance. The color blind testing will be conducted by GWUH Occupational Health at orientation.

It is the responsibility of each Resident to ensure that this health clearance is completed within the requisite timeframe. *New Residents who do not have their health clearance completed will not be permitted to begin their training program. All returning Residents are required to renew their health clearance annually. All returning Residents must complete the requisite annual health clearance by **August 31** of the academic year or they will be suspended from clinical duties until medical clearance is obtained.*

### **Who Needs to Know This Policy**

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All Accreditation Council for Graduate Medical Education (ACGME)-accredited residency and fellowship programs sponsored by the GW School of Medicine and Health Sciences (SMHS)

### **Policy Contact**

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Associate Dean for Graduate Medical Education, DIO

### **Who Approved This Policy**

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Graduate Medical Education Committee (GMEC)

## History/Revision Dates

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Created: August 28, 1995

REVIEWED AND REVISED BY GMEC: April 16, 2001

REVISIED AND APPROVED BY GMEC: March 17, 2003

REVISIED AND APPROVED BY GMEC: December 19, 2011

REVISIED AND APPROVED BY GMEC: March 21, 2016

REVISIED AND APPROVED BY GMEC: March 20, 2017

REVISIED AND APPROVED BY GMEC: February 26, 2018

## Purpose

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To ensure compliance with District of Columbia Law and the Rules and Regulations of The George Washington University Hospital regarding health clearance policies for employees involved in direct patient care.

## Requirements

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### TB Screening Requirement

Tuberculosis is of particular concern here in the District of Columbia. Our goal is to be sure that our providers and patients are protected from and appropriately treated for this highly communicable disease. For new residents, GWU requires that the resident has an IGRA blood test or two PPDs. If there is history of a positive test, the resident must complete a TB symptom survey and provide a chest x-ray dated after the positive test.

The PPD skin test for **new residents** must include a two-step test unless the resident has a documented negative test within the last 12 months. If the resident does have written documentation of a negative PPD within the past 12 months, s/he will need to undergo an additional PPD test. If the resident does not have or is unable to show written documentation of a negative PPD test from the past 12 months, s/he must have two PPD tests performed between 1-3 weeks apart.

- **PPD # 1: Must be within one year of the residency start date**
- **PPD # 2: Must be within three (3) months of the residency start date**

**Returning residents** are required to present the results of an IGRA blood test or PPD.

### *Immunizations*

In 1988, GWUMC developed regulations to further reduce the possible spread of communicable diseases such as measles (rubeola), mumps, and German measles (rubella) within its community. Residents must provide proof of immunity or be immunized. Immunization requirements will be waived on receipt of written certification from a physician or public health authority that they are medically contraindicated. A requirement of blood tests will be substituted.

Mumps: Proof of two immunizations (the last immunization given in 1980 or later) or proof of immunity by blood test is required.

Measles (Rubeola): Proof of immunization or proof of immunity by a blood test is required. The first measles vaccine should have been given on or after the first birthday and a second one given in 1980 or later. Measles vaccine should be repeated if this is not the case.

German Measles (Rubella): Proof of immunization or proof of immunity by a blood test is required. Two immunizations should have been given since birth. The last immunization should have been given in 1980 or later. Rubella vaccine should be repeated if this is not the case.

Chicken Pox (Varicella Zoster): Proof of two varicella vaccines or immunity by blood test. If the titer is negative, the resident will receive the vaccine (a series of two injections) unless contraindicated.

Pertussis (Tdap): Proof of immunization with Tdap vaccine. Tdap vaccine is recommended for health-care personnel in hospitals or ambulatory care settings who have direct patient contact. Tdap should be given without regard to the interval since the previous dose of Td.

Influenza: To prevent the spread of influenza to patients, families and hospital staff, the flu vaccine is mandatory for all residents annually by the designated date. An exemption form will be required for those who do not receive the vaccination for medical or religious reasons along with the appropriate document attached. Employees with exemptions will be required to wear a surgical mask when providing care to patients during the flu season.

### **Medical Clearance in Subsequent Years**

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D.C. Law requires each resident to complete an annual health clearance. *Returning residents must complete the annual health clearance by **August 31** of the academic year or they will be suspended from clinical duties until medical clearance is obtained and recorded to the satisfaction of The University Hospital.*