



**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: April 2023

POLICY ON MEDICAL CLEARANCE

Policy Statement

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) 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 Employee Health office. This assessment includes a review of job-related medical history, vital signs, color blind testing (for new residents), hand washing demonstration, N95 Fit Test, an IGRA blood test results (if necessary) and immunization update (if necessary). A full physical examination is not required for clearance.

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.*

GWU Hospital Contact Information and Hours of Operation:

For further information, identify yourself as a GME Resident/Fellow and contact GWU Hospital Employee Health by:

Email: employeehealthservices@gwu-hospital.com | Phone: 202-715-4275

GWU Hospital Employee Health (EH) is located on the Lobby Level of the hospital and hours are Monday- Friday 7:30am-3:30pm. EH is closed daily for lunch 12-12:30pm. Should a resident have an injury or exposure while EH is closed, report to the ED, show your GWU ID, and identify yourself as a GWU resident/fellow.

Who Needs to Know This Policy

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

Associate Dean for Graduate Medical Education, DIO

Who Approved This Policy

Graduate Medical Education Committee (GMEC)

History/Revision Dates

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

REVISIED AND APPROVED BY GMEC: May 20, 2018

REVISIED AND APPROVED BY GMEC: October 21, 2019

REVISIED AND APPROVED BY GMEC: April 17, 2023

Purpose

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

A. TB Screening Requirement

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 have a negative IGRA blood test within 6 months of state date. If a resident does not have a (QFT), this will be done during their onboarding visit free of charge. If a resident has a history of a positive TB Screening (QFT or TSpot) in the past, a negative CXR report will be accepted completed within the past year. If a resident has been exposed to TB during his or her training at GWU, he or she would be required to have a TB test, in accordance with CDC recommendations.

Returning residents are not required to have yearly screening for TB with the exception of fellows in ICU, Pulmonology and Infectious Disease. Given the high-risk status of these groups, a yearly screening with IGRA blood test is required. Some affiliated where Residents/Fellows have rotations require an IGRA blood test, the resident may obtain their IGRA blood test with GWUH Employee Health and must show email requesting additional TB testing.

B. Immunizations

Seasonal 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 is required for those who do not receive vaccination for medical or religious reasons along with the appropriate documentation attached. Employees with exemptions are required to wear a surgical mask when providing care to patients during the flu season.

COVID-19: To prevent the spread of COVID-19 to patients, families and hospital staff completion of a Primary COVID-19 Series is mandatory for all residents. Upon onboarding. An exemption form is required for those who do not receive the vaccination for medical or religious reasons along with the appropriate documentation attached. Employees with exemptions will be required to wear a surgical mask when providing care to patients.

MMR: 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 test will be substituted.

Mumps: Proof of immunity by vaccine series and blood test titer is required.

Measles (Rubeola): Proof of immunity by vaccine series and blood test titer is required.

German Measles (Rubella): Proof of immunity by vaccine series and blood test titer is required.

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 contra indicated. If a resident is exposed to the virus and has not received the vaccine, he/she will be excluded from duty from the 10th day of exposure to the 21st day and this time off will be charged against sick/annual leave.

Hepatitis B: Proof of immunity by vaccine series and blood test titer is required.

Pertussis (Tdap): Proof of immunization with Tdap vaccine within the past 10 years. 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.

Medical Clearance in Subsequent Years

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.*