

Student Health Information

1. Athletic Training Students are to have health insurance to attend any clinical setting.
2. North Dakota University System students who do not have health insurance may be able obtain insurance from United Health Care. Information regarding The Affordable Health Care Act and United Health Care please go to the following link <http://www.minotstateu.edu/health/insurance.shtml>
3. Campus health care is available through the Student Health Center to supplement private health care.

Bloodborne Exposure Protocol

1. Students with blood and body fluid exposures are to follow the agency protocol. **The cost will be accrued by the student.**
2. Use soap and water to wash areas exposed to potentially infectious fluids as soon as possible after exposure.
3. Flush exposed mucous membranes with water.
4. Remove contact lens if applicable then flush exposed eyes with water or saline solution.
5. Do NOT apply caustic agents, or inject antiseptics or disinfectants into the wound.
6. Report exposures. Obtain name and information of person you were exposed to if possible. Document routes of exposure and how exposure occurred. Date and time of exposure. Details of the incident: where and how the exposure occurred, exposure site(s) on HCP's body; if related to sharp device, the type and brand of device.
7. **Immediately go to the Emergency room to see a health care professional and to document exposure.**

Information on steps 2-7 above obtained February 11, 2016 from

<http://www.mpaetc.org/MPAETC/media/MPAETC/Product%20Downloads/PEP-final-%282006%29.pdf>

INCIDENT REPORT FORM

Post Exposure Reporting: Date and time of exposure: \_\_\_\_\_

Obtain name and information of person you were exposed to if possible. \_\_\_\_\_

Document routes of exposure and how exposure occurred. \_\_\_\_\_

Details of the incident: where and how the exposure occurred, exposure site(s) on your body; if related to sharp device, the type and brand of device. \_\_\_\_\_

Provide this information to the Health Care Provider and give a copy to your advisor.

Student Name & Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Preceptor Name & Signature: \_\_\_\_\_ Date: \_\_\_\_\_