

**EVMS RAMP-UP PLAN FOR STUDENTS RETURNING TO ON-CAMPUS
EDUCATION AND
DIRECT PATIENT CONTACT IN CLINICAL EDUCATION
060520**

INTRODUCTION

The safety of EVMS faculty, staff and students is our highest priority. The COVID-19 pandemic has elevated everyone's safety concerns and need for assurances that EVMS is taking reasonable steps to protect its faculty, staff and students. Safety is, of course, a shared responsibility between individuals and the institution.

On May 30, 2020 the CDC released an updated version of *Considerations for Institutes of Higher Education (IHE)*¹. The majority of the considerations address common measures aimed at reducing the spread of COVID-19, such as handwashing, social distancing, and appropriate cleaning and disinfecting of shared spaces. CDC recommendations for IHE, non-residential, general settings are as follows:

- **Lowest Risk.** Faculty and students engage in virtual-only learning options, activities, and events.
- **Moderate Risk.** Small in-person classes, activities, and events. Individuals remain spaced at least 6-feet apart and do not share objects (e.g., hybrid virtual and in-person class structures or staggered/rotated scheduling to accommodate smaller class sizes).
- **Highest Risk.** Full-sized in-person classes, activities, and events. Students are not spaced apart, share classroom materials and/or supplies, and mix between classes and activities.

This Ramp-Up Plan addresses the Moderate Risk and Highest Risk categories to include a gradual increase in face-to-face educational activities on the EVMS campus and the resumption of student participation in clinical education. The EVMS Ramp-Up Plan has been developed with broad input from the EVMS community and the Ramp-Up Task Force.

EVMS' plan to address safety is based on six components: self-monitoring of personal health status; wearing clean masks; wearing other protective gear (e.g., goggles, lab coats, gloves) as necessary; regular handwashing and use of sanitizers; maintaining appropriate social distance (at least six feet); and using effective housekeeping protocols. All medical and health professions students will be required to complete the Blackboard course *COVID-19 Student Ramp-Up Training* on Blackboard, before returning to on-campus activities and/or re-entering clinical education.

THE PLAN

I. ON-CAMPUS EDUCATIONAL ACTIVITIES

- A. *Requirements for Re-entry of Medical and Health Professions Students into On-Campus Education.* All medical and health professions students must complete the Blackboard course: *COVID-19 Student Ramp-Up Training*, including the Student Health Screening Survey and certify that they understand the requirements therein.
- B. *Lectures and Didactics.* Lectures for groups of more than 10 should continue to take place remotely in an online format, unless otherwise approved by the Vice-Dean for Academic Affairs or the Vice President and Dean, School of Health Professions.

II. CLERKSHIPS AND CLINICAL ROTATIONS

- A. *General.* On March 17, 2020, The Association of American Medical Colleges (AAMC), called for a two-week suspension of activities involving any student/patient interaction, effectively putting all clinical rotations on hold. Returning EVMS students in the MD Class of 2021 and Health Professions students needing to complete graduation requirements will be given priority placement and/or scheduling of any available clinical rotations. EVMS will not accept any visiting MD students until AY 2021-22 without the prior approval of the Vice Dean for Academic Affairs. This will allow EVMS to re-evaluate the evolving situation as well as ongoing recommendations from the AAMC, LCME, and training institutions throughout the academic year.
- B. *Away Rotations for EVMS Students.* Away rotations will be permitted and will be managed by the appropriate program directors.
- C. *Visiting Students.* Visiting student requests will be handled on a case-by-case basis and priority will be given to those students requesting clinical experience in a training program not represented at their home institution.
- D. *Proposed timeline for M3/M4 and Health Professions students return to clinical training:*
 - 1. June 15-July 6, 2020 - Rising M4 students return to complete 2-week clinical experiences (electives) and Health Professions students needing to complete graduation requirements or to initiate clinical rotations according to program schedules (about 40 MD students and about 60 HP students).
 - 2. June 22-August 10, 2020 - Rising M3 students will complete didactic training to prepare them for the M3 year.
 - 3. July 6, 2020 - Rising M4 electives begin.
 - 4. August 10 - 15, 2020 – M3 students will participate in clinical orientation for the M3 year.

5. August 17, 2020 - M3 students begin their core clinical clerkships and other health professions students begin their clinical programs according to their schedules (about 140 HP students).

E. Considerations for direct patient care rotations:

1. Rotations are subject to the rules and regulations of clinical site and availability of teaching and supervision.
2. Must not exceed appropriate patient volume.
3. Rotations are subject to availability of PPE (Face shields will be provided to students by EVMS).
4. Students may not be involved in the care of patients with confirmed or suspected COVID-19.
5. The site supervisor must approve participation in cases where the use of an N95 mask is required.
6. Students will not engage in the care of patients in the ICU without approval from the appropriate program office.
7. Students will limit time in the hospital setting to only that required for essential patient care.
8. All students must wear a surgical mask and will be screened like any other team member before entering clinical sites.
9. Reasonable accommodations will be made for students who miss clinical activities due to illness.

**RETURN OF MEDICAL AND HEALTH PROFESSIONS STUDENTS TO CLINICAL
EDUCATION
(FOR PROGRAM REFERENCE - TRAINING LINKS WILL BE INCLUDED IN THE
COURSE)**

- A. Completion of screening questionnaire with attestation regarding
1. Presence of symptoms:
 - a) Fever (subjective or documented ≥ 100.0 F)
 - b) Signs/symptoms of a lower respiratory tract illness – cough or shortness of breath
 - c) Loss of sense of taste or smell
 - d) Sore throat
 - e) Other constitutional symptoms such as myalgia, nausea, vomiting, diarrhea, abdominal pain, headache, rhinorrhea, fatigue
 2. Travel history within the previous 14 days (both international and domestic)
 3. Contact with known positive COVID-19 individual or personal history of positive COVID-19 test
 4. Students with positive screens will be referred to EVMS Student Health
- B. COVID-19 Testing and Retesting:
1. All symptomatic students
 2. Contact with known COVID-19 positive individual or COVID-19 person(s) under investigation
 3. Testing to be conducted on day number ten of self-monitoring
 4. Previously tested positive for COVID-19:
 5. Symptomatic: Re-test after resolution of fever and symptomatic improvement with RT-PCR, two negative tests required at least 24 hours apart, or
 6. Asymptomatic: Re-test ten days after the first positive test if student remains asymptomatic, two negative RT-PCR tests separated by at least 24 hours required
- C. Personal Protective Equipment:
1. Availability of adequate personal protective equipment (PPE)
- D. Students will verify completion of training modules on:
1. COVID-19 safety precautions. <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html>
 2. Appropriate donning and doffing of PPE. <http://www.etrainetc.com/covid19PPE-emicsim>
 3. Mask and PPE guidelines. <https://www.cdc.gov/coronavirus/2019-ncov/hcp/using-ppe.html>
 4. EVMS Self-Monitoring (see Statement on Self-Monitoring for Students).
 5. Abiding by Travel policy and requirements. <https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html>

- D. Following Hospital and Other Clinical site-specific policies
 1. Contact Site Lead Preceptors as soon as possible for policies for student re-entry
 2. If sites request added language regarding indemnification and “hold harmless” or immunity language or that students sign waivers, contact CERS.
 3. Non-involvement of students in the care of patients with confirmed or suspected COVID-19

- E. Steps to take in case of an exposure or illness
 1. Students are to stay home if they are sick with:
 2. Fever (subjective or documented ≥ 100.0 F)
 3. Signs/symptoms of a lower respiratory tract illness – cough or shortness of breath
 4. Have been tested for COVID-19
 5. Contact with known COVID-19 positive individual or COVID-19 person(s) under investigation
 6. If it is a medical emergency, students should go to the Emergency Room or call 911
 7. Notify their immediate onsite clinical supervisor
 8. Notify Student Affairs about their situation (757-446-5244)
 9. Notify EVMS Student Health (757-446-5700) if they suspect they have COVID-19 or think they have been exposed to someone with COVID-19

- F. Contact Information for EVMS Student Primary Health
 - EVMS Student Primary Healthcare: 757-446-5811
 - EVMS Student Health Clinic: 757-446-5700
 - EVMS Student Affairs: 757-446-5244 or 757-774-6577

- H. Students should contact EVMS Student Affairs (757-446-5244 or 757-774-6577) if there is a concern about participating in a clinical rotation because they meet any of the following criteria:
 - i. Personally immunocompromised
 - ii. Pregnant
 - iii. Household member who is immunocompromised
 - iv. Other concerns about personal safety

GUIDELINES ON SELF-MONITORING

EVMS is not universally testing for COVID-19 infections, antibodies or antigens or conducting temperature screenings of faculty/staff/students as they return to campus. However, persons with symptoms, known COVID-19 exposures and/or additional risks identified during the re-entry survey will be tested according to the EVMS occupational health protocols.

There are several reasons for this approach.

First, unlike the emergency room, the ICU, or busy patient care settings, faculty and administrative offices are a relatively lower risk environment.

Second, testing supplies continue to be limited and only provide information about the status of infection at one point in time. That status could change in an hour, a day, or a month after the test and so is not useful on an ongoing basis.

Third, temperature readings in and of themselves are not a reliable indicator of illness. Our approach relies on self-identification of any number of symptoms that, taken together, might indicate illness.

Fourth, self-monitoring of illness, wearing masks, washing hands and maintaining social distance have been proven effective. Therefore, based on guidance from the CDC and the EVMS Medical Group, EVMS has chosen to employ an approach that is supported by the data.

The guidelines for self-monitoring remain as straightforward as the Screening Survey included in the Blackboard course:

Steps to take in case of an exposure or illness

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 - a) Fever (subjective or documented ≥ 100.0 F)
 - b) Signs/symptoms of a lower respiratory tract illness – cough or shortness of breath
 - c) Have been tested for COVID-19 or have had contact with known COVID-19 positive individual or COVID-19 person(s) under investigation
2. If it is a medical emergency, students should go to the Emergency Room or call 911
3. Notify their immediate onsite clinical supervisor
4. Notify Student Affairs (757-446-5244 or 757-774-6577)
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Contact Information for EVMS Student Primary Health

1. EVMS Student Primary Healthcare: 757-446-5811
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Students should contact EVMS Student Affairs (757-446-5244) if there is a concern about participating in a clinical rotation because they meet any of the following criteria:

- v. Personally immunocompromised
- vi. Pregnant
- vii. Household member who is immunocompromised
- viii. Other concerns about personal safety

¹ CDC Coronavirus Disease 2019 (COVID-19) [Recommendations for Institutes of Higher Education](#): Updated May 30, 2020.