



**Association of  
American Medical Colleges**  
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## Association of American Medical Colleges

### Recommendations regarding Health Services for Medical Students

#### General

1. Medical schools should have a system for preventive and therapeutic health services for students. This system should include, but not be limited to, written institutional policies regarding provisions for outpatient care, mental health services, and hospitalization for medical students. These policies should be reviewed with students on a regular basis. Efforts should be taken to ensure that students understand that the cost of hospitalization is their personal responsibility.
2. Schools are encouraged to have written policies about the availability of medical leave of absence for students. Such policies should be clearly communicated with students.
3. Schools should require students to undergo a complete history and physical examination after admission to school is assured but prior to matriculation. The results of the physical examination should be reported to the medical school.
4. Schools are encouraged to develop a program to identify students at high risk for treatable conditions (e.g., hypertension, diabetes, hypercholesterolemia), and refer them to appropriate services.

#### Insurance

5. Schools are strongly encouraged to establish the requirement that all medical students and their dependents have health insurance. Schools should assist students to understand the limits of their insurance coverage and the provisions for hospitalization should be clearly delineated. If insurance is made available but not required, students should understand the risks of being uninsured.
6. Schools should be encouraged to work with other national health organizations such as the American College Health Association toward the establishment of adequate mandatory health insurance for all undergraduate, graduate, and professional students at the lowest possible cost.
7. Schools should make available disability insurance for their students.

#### Mental Health

8. Schools should provide access to confidential counseling by mental health professionals for all students. Institutional policies regarding the confidentiality of mental health service records for medical students should be established. These policies should make the necessary distinction between voluntary and administratively mandated evaluation and/or treatment. For administratively mandated evaluation, disclosure of evaluation and/or treatment results should be limited to those who required the evaluation and should be in accordance with federal or state laws governing the disclosure of confidential information.

9. Schools should have guidelines regarding the utilization of mental health professionals and/or records of assessment and treatment by mental health professionals in proceedings regarding student advancement and dismissal. The committee recommends that evaluation and/or treatment of students be undertaken by non-teaching faculty or, at a minimum, by different individuals than those rendering advancement or promotion decisions.
10. Schools should publish and regularly update a list of available mental health assessment and counseling services, the institutional assurance of confidentiality, the means of access, and the associated costs for their students.

#### Chemical Dependency

11. Schools should establish written policies regarding institutional response to known or suspected chemical dependency in students, including definition of what constitutes impairment. Schools are also encouraged to develop programs that will identify and assist impaired students.

#### Immunizations

12. Pre-matriculation and annual testing for tuberculosis (TB) should be required at all medical schools for all students. In view of the significant incidence of multi-drug-resistant TB, the development of appropriate policies concerning student exposure to infections and environmental hazards and implementation of effective instruction in appropriate precautionary measures and infection control measures are of particular importance and should be undertaken by all schools.
13. All schools should require all students to present proof of immunity consistent with current recommendations of the Centers for Disease Control and Prevention (CDC) for healthcare workers. (As of September 2006, CDC recommendations included immunity to rubeola, mumps, rubella, pertussis, varicella, and hepatitis B, as well as a booster every 10 years for diphtheria and tetanus and every year for influenza.)
14. A student who declines hepatitis B vaccination should be required to sign a formal declination waiver form consistent with procedures promulgated by the Occupational Safety and Health Administration (OSHA) for hospital employees (see: [www.osha.gov/SLTC/etools/hospital/hazards/bbp/declination.html](http://www.osha.gov/SLTC/etools/hospital/hazards/bbp/declination.html)).
15. Medical schools should not be required to pay the cost of immunizations, but are encouraged to do whatever is possible to make the vaccines available to students at the lowest possible cost. Medical schools should inform affiliated institutions of the vaccination status of students in training.
16. "Proof of immunity" should include either documentation of completion of the full vaccination series OR reliable medical documentation of prior illness OR documentation via positive titer of immunization status.
17. Schools should require documentation that visiting students meet the same health examination and immunization requirements as regularly enrolled students.
18. Schools should develop a centralized system for confidentially monitoring the health and immunization status of medical students.
19. Students who travel outside of the United States as a component of their medical education or who may be at risk of exposure (e.g., to polio, rabies) in laboratory or field experiences should be advised of and follow CDC health and immunization guidelines for those destinations and settings.

#### Occupational Exposure

20. In accordance with the Liaison Committee on Medical Education "Standards for Accreditation of Medical Education Programs Leading to the M.D. Degree", schools should develop policies concerning students' exposure to infectious and environmental hazards. The policies must include:
  1. education of students about methods of prevention
  2. the procedures for care and treatment after exposure, including definition of financial responsibility
  3. the effects of infectious and/or environmental disease or disability on student educational activities
21. Schools should be particularly diligent in their implementation of effective instruction in precautionary and infection control measures for airborne and blood- borne pathogens prior to students' first contact with patients and first contact with human tissue, blood products, and body fluids. Schools are urged to require their graduate students in the medical sciences to participate in these instructional sessions.

Approved: June 25, 1992, AAMC Executive Council

Revised: September 28, 2006, AAMC Executive Council: Immunizations section