

Dalhousie University Faculty of Health

Occupational Health and Infectious Diseases: Preclinical Placement Requirements for Health Care Worker Students

This document outlines immunization and other occupational health requirements that health care worker students need before they begin any clinical placement in a health facility through the course of their health professional program. Health Canada in their guideline “Prevention and Control of Occupational Infections in Health Care” use the term health care worker (HCW) to include any individual who has the potential to acquire or transmit infectious agents during the course of his or her work in health care and includes students and researchers.¹

The medical literature and our own workplace experience documents the potential for health care workers to acquire infections, both in and outside the workplace, and for them to transmit infection to patients, co-workers, and family members.^{2 3 4} These infections may be spread through the airborne route (e.g. tuberculosis, varicella, measles), droplets (e.g. respiratory syncytial virus, influenza, rubella, pertussis), contact (e.g. hepatitis A, group A streptococcus), and mucosal or percutaneous exposure (e.g. hepatitis B and C, HIV).⁵ Several of these infections are vaccine preventable. Most of these vaccine preventable infections may be transmitted from person-to-person. With that in mind, both the Steering Committee on Infection Control Guidelines and the National Advisory Committee on Immunization have provided recommendations for health care worker immunization.⁶

The following forms (Faculty of Health – School of Nursing Immunization Record and Mandatory Tuberculosis Skin Test) are to be completed by a health care professional (physician, nurse practitioner, public health nurse or pharmacist) prior to your commencement of clinical learning experiences at Dalhousie University. It is advised that all of your immunizations be up-to-date before you begin your program as some immunization schedules take several months to complete. Please read the form carefully as there are different documentation requirements for some of the diseases. You will be required to comply with all requests for documentation. Please present the completed forms to the university official responsible for your program when you begin.

We hope that you enjoy your program!

¹ Health Canada. Prevention and control of occupational infections in health care. CCDR 2002; 28S1.

² Sepkowitz K.A. Occupationally acquired infections in health care workers. Part 1. Ann Intern Med 1996; 125:826-34.

³ Sepkowitz K.A. Occupationally acquired infections in health care workers. Part II. Ann Intern Med 1996; 125:917-28.

⁴ Patterson W.B., Craven D.E., Schwartz D.A., Nardell E.A., Kasmer J., Noble J. Occupation hazards to hospital personnel. Ann Intern Med 1985; 102:658-80.

⁵ Health Canada. Routine practices and additional precautions for preventing the transmission of infection in health care. CCDR 1999; 25S4.

⁶ Health Canada. Canadian Immunization Guide. <https://www.canada.ca/en/public-health/services/canadian-immunization-guide.html> and <https://www.canada.ca/en/public-health/services/publications/healthy-living/canadian-immunization-guide-part-3-vaccination-specific-populations/page-11-immunization-workers.html> accessed July 6, 2017

Please see below the list of immunization requirements for nursing students. Please have a health care professional (**physician, nurse practitioner, public health nurse or pharmacist**) complete the form indicating your present immunization status. **Please double check that the form is fully complete prior to submitting to your program.**

Failure to complete this form will delay entrance into clinical practice courses and possibly delay your entrance into the next year of study or graduation from the program. Students are responsible for the cost of vaccines, mantoux/TB and blood tests, if applicable.

First Name (Please Print)	Last Name (Please Print)
Banner Number	Date of Birth DD / MM / YY

MANDATORY MMR Requirements	
<i>Please note that the mandatory 2-step TB skin test should be done 4-6 weeks before/after the administration of an MMR.</i>	
Documented record of <u>two</u> MMR vaccinations at least one month apart	DD / MM / YY
_____ OR _____	DD / MM / YY
If you are unable to document 2 MMR vaccinations a booster is required	DD / MM / YY

MANDATORY Varicella (Chicken Pox/Shingles) Requirements	
Documented history of Varicella (Chicken Pox/ Shingles)?	<input type="checkbox"/>
_____ OR _____	YES/NO
If history is uncertain, attach serology report demonstrating immunity to naturally acquired Varicella. Please do not order serology if student is vaccinated or will be vaccinated.	<input type="checkbox"/>
	YES/NO
Documented record of <u>two doses</u> of Varicella vaccination given at least one month apart. Please do not order serology after vaccination.	DD / MM / YY
	DD / MM / YY

MANDATORY Tetanus, Pertussis and Diphtheria Requirements	
<i>Please Note: vaccine must be administered within past five years for all Horizon Health New Brunswick Rotations</i>	
Documentation of dose of tetanus, diphtheria and pertussis vaccine, administered within the PAST TEN YEARS (e.g. Adacel™ or Boostrix™). Please provide a booster if needed.	DD / MM / YY

MANDATORY Hepatitis B Requirements		<u>PART A</u>
Documentation of Hepatitis B vaccination Series (3 Doses)		DD / MM / YY
		DD / MM / YY
	AND	DD / MM / YY
HBsAb (Anti – HBs) Bloodwork Titre Level Result - taken at least 4-8 weeks after immunization. <i>(Please attach copy of serology lab report results)</i>		RESULTS
		DD / MM / YY

If titre results above show you are not immune to Hepatitis B, it is mandatory to complete Part B (See Below)

Hepatitis B Repeat Series <i>To be completed if titre results in PART A signify non-immunity</i>		<u>PART B</u>
Dose 1 of Repeat Series		DD / MM / YY
<i>Serology may be taken one month after first dose of repeat series to assess immunity if original series was completed more than 6 months prior to a negative HBsAb test.</i>		
Dose 2 of Repeat Series		DD / MM / YY
Dose 3 of Repeat Series		DD / MM / YY
Repeat HBsAb (Anti – HBs) titre results – taken at least 4-8 weeks after immunization <i>(Please attach copy of serology lab report results.)</i>		RESULTS
		DD / MM / YY

Non-responders may require testing for HbsAg.

RECOMMENDED Annual Flu Vaccination	
Date of most recent annual flu vaccination	DD / MM / YY

Polio <i>Mandatory if lived/visited a country in which there has been a recent Polio outbreak.</i>	
Documentation of Primary Series	DD / MM / YY

Name of Healthcare Professional or Public Health Official	Phone Number
Signature	Date

Please have a health care professional complete one of the below options indicating your current status:

**MANDATORY
TUBERCULOSIS
SKIN TEST (TST)**

Name (Please Print)

Banner Number

Signature of Healthcare
Professional or Public
Health Official

Date

Phone Number

A No Record of Previous 2 Step TST

Provide Dates & Results of 2 Step TST below:

Dates Planted		Dates Read	
Step 1	DD/MM/YY	1st Date	DD/MM/YY
		Results	
Step 2	DD/MM/YY	2nd Date	DD/MM/YY
		Results	

**B Record of Previous 2 Step TST
Within Last 12 Months**

Attach Documentation of the previous 2 step TST
with dates and results:

Documentation Attached (Y/N)

**C Record of Previous 2 Step TST
More Than 12 Months Ago**

1 Step TST & Documentation of the previous 2
step TST:

Date Planted	DD/MM/YY		
Date Read	DD/MM/YY	Results	

Documentation Attached (Y/N)

**D Positive TST
(Do not repeat test)**

Chest x-ray required for the following:

- Documented prior positive TST
- Previous Treatment for active TB
- Previous Treatment for latent TB

Date	DD/MM/YY	Results	

Documentation Attached (Y/N)

E TST Contraindicated

Contraindications to TST include:

- History of severe blistering or Anaphylaxis from TST
- Previous Positive TST (See Choice E)
- Severe active viral infection
- Received a live virus vaccination in the past month (MMR)
- Other

If there is a contraindication to TST such as a documented prior positive TST, previous treatment for active TB, or previous treatment for latent TB (See list above for more contraindications), a TST is not required—Medical evaluation and chest X-ray within 1 year are required.

Please note: A prior BCG is not a contraindication. If a BCG has been administered in the past, please follow options A, B, or C

Frequently Asked Questions

Where can I obtain a Mantoux Test/TB Test?

Students are advised to contact their family doctor or primary health care provider's office to determine where they can obtain a two-step Mantoux/TB test in their area of the Maritimes/Canada. **Students should note:** that a two-step Mantoux/TB test requires four separate visits to a health care provider trained to administer and read the test over a required period of time.

Possible Mantoux (TB-Tuberculosis) Testing locations in Halifax include:

Please Note: you should call ahead to verify pricing and book an appointment.

1. Dalhousie University Health Services

Telephone: **902-494-2171**

Website: https://www.dal.ca/campus_life/health-and-wellness/health-services.html

2. International Travel Clinic

Public Health Services

Unit #5, 7 Mellor Ave

Dartmouth NS B3B 0E8

Telephone: **902 481 5900**

travelclinic@nshealth.ca

3. Sobeys Travel Clinic at Sobeys Mumford Road:

Telephone: **902-454-7416**

<https://www.travelwellness.ca/>

(availability depends on Nurse schedule)

How can I find out if my vaccinations are up-to-date, or get a copy of my vaccination record in Prince Edward Island?

If you received your vaccinations in PEI and need to determine if your vaccinations are up-to-date, or need a copy of your vaccination record, call a Public Health Nursing Office in your area. It takes approximately **two weeks to process your request** for a copy of your record. Call: 902-368-4530.

Looking for your immunization records in New Brunswick?

To obtain an NB immunization record, you need to contact the immunization provider as below:

- If you received your immunizations from a doctor, contact him or her.
- If you received your immunizations at a Public Health clinic, contact your local clinic.
http://www2.gnb.ca/content/gnb/en/departments/ocmoh/healthy_people/content/public_health_clinics.html.

Where can I locate my immunization records in Nova Scotia?

In the NS Health Central Zone most childhood and adult immunizations are given by your family doctor and school immunizations are given by Public Health Nurses, so your immunization records may be at both your doctor's office and at the Public Health Office.

If you attended school in another part of Nova Scotia or another province, you will have to contact the Public Health Office in that area to request your school immunization records. In Nova Scotia for further information, please call: 902-481-5890 or see this list of Public Health Offices in Nova Scotia:
<https://novascotia.ca/dhw/publichealth/phs-offices.asp>

If you received an immunization from a Pharmacist. Please contact the Pharmacy location where you received the immunization for a copy of your record.