

MEDICAL COMPLIANCE INFORMATION

Immunization Requirements

The immunization requirements listed below, apply to all hospital employees, physicians, medical students, midwives, volunteers, students, contract workers, non-medical observers, temporary agencies and independent contractors. Everyone is required to comply with Guelph General Hospital's (GGH) Immunization Policy, which is based on OHA Communicable Disease Surveillance Protocol.

Please see the various options to comply with the Immunization requirements:

1. **If you currently work at another hospital or healthcare facility, please request a copy of your immunization record they have on file for you. This information is acceptable.**
2. If you have copies of your immunization forms from school. This information is acceptable.

If you have not undergone this process before, you will be required to have a doctor or nurse sign off on the Medical Compliance Confirmation Form:

3. Please book an appointment with your family doctor/nurse practitioner and bring with you:
 - a. The requirements found below and the form to be signed
 - b. Your immunizations. Some of this information is available to you through your Family Doctor, **your Yellow Immunization Card or Public Health** (Please call these offices to inquire about your status and attain copies of your records)
 - c. If you do not have the information above, you may be required to get blood work results that verify your immunity. There may be further follow up required e.g. more vaccinations if your blood work does not show the required immunity and or TB skin test follow up

Tuberculosis:

- A **documented 2-Step** tuberculin skin test
- A **documented 1-Step** tuberculin skin test done within the last 12 months
- Individuals who have had a **positive TB skin test**, are required to submit documentation of results and a chest x-ray or IGRAs (bloodwork) done within the last 12 months
- If you have received a live virus vaccine (such as MMR or Varicella) you must wait 4 weeks to complete tuberculin skin testing

Measles, Mumps & Rubella (MMR):

- **2 MMR immunizations OR**
- Laboratory evidence of detectable antibody for Measles, Mumps and Rubella

Hepatitis B Vaccination:

- Documentation of **Hepatitis B vaccine doses** given (Engerix B or Twinrix) **AND**
- Laboratory evidence of detectable antibody

Varicella (Chickenpox):

- Documentation of 2 **Varicella** vaccines **OR**
- Laboratory evidence of detectable antibody

Tetanus/Diphtheria/Pertussis (*Whooping Cough*)

- **Tetanus/Diphtheria** is recommended every 10 years and is available in combination with Acellular Pertussis as Tdap/Adacel

Influenza Vaccine:

- Documentation of annual **Influenza** immunization

MEDICAL COMPLIANCE CONFIRMATION

I _____ (Physician/ Nurse/third party service representative), verify that _____ (First and Last name of contract staff) has met the immunization requirements of Guelph General Hospital and is in good medical standing.

_____ (Name of Organization) is 100% responsible for ensuring their employees have met all medical requirements. In the event of an outbreak at Guelph General Hospital, if _____ (First and Last name of contract staff) is exposed or exposes patients to illness due to improper immunization, it is the liability of _____ (Name of Organization).

Signature: _____ Date: _____