

## Immunizations for Students in Fraser Health

RECOMMENDED <sup>±</sup>	
Disease	Immunization is recommended:
<b>Chickenpox/ Varicella</b>	If you have not had the disease after the age of 1 and before 2004, OR you do not have a blood test confirming immunity OR you do not have 2 doses of the vaccine (minimum 4 weeks between doses)
<b>Measles</b>	If you were born after 1957, have no laboratory evidence of immunity, no history of laboratory confirmed measles disease, and do not have a record of 2 doses
<b>Mumps</b>	If you were born 1957 – 1969 and do not have record of at least 1 dose. OR you were born in 1970 or later and you do not have record of at least 2 doses. If you were born before 1957, you are considered immune, and no action is required
<b>Rubella</b>	If you do not have a record of at least 1 dose OR you do not have a blood test confirming immunity
<b>Tetanus/Diphtheria</b>	If it has been 10 years or more since your last booster dose
<b>Pertussis</b>	If you do not have proof of immunization (if not previously immunized or immunization history is unknown), or proof of 1 dose booster (if immunized as a child)
<b>Hepatitis B*</b>	If you are at risk of being exposed to blood or body fluids <ul style="list-style-type: none"> <li>• AND You do not have a record of a 2 dose or 3 dose series.</li> <li>• AND you do not have a blood test confirming immunity (protection)</li> </ul>
<b>Polio</b>	Primary immunization is recommended for all health care students. A booster dose is recommended if you are at risk of being exposed to feces (stool) AND you have not received a single booster dose 10 years after the primary series (childhood or your initial series)
<b>Meningococcal</b>	Only recommended to those who are at high risk and routinely exposed to <i>Neisseria meningitidis</i> such as those placed in a clinical laboratory setting
<b>Influenza</b>	Report to PSI annually if vaccinated or not. Expectations for required medical masking in Patient Care Locations are outlined every year, during respiratory season, as declared by the Provincial Health Officer.
<b>Covid-19</b>	To reduce student illness during periods of high SARS-CoV-2 circulation in the community and to reduce transmission of SARS-CoV-2 to vulnerable individuals receiving health care, personal care or home support in hospital or community settings. Dose recommendations may vary based on age and product formulation.

± If recommended immunizations are not completed, this should be noted in the educational institution records. If there is an outbreak of any immunization-preventable illnesses, the student may not be allowed to attend their placement until the outbreak is over.

\*If Hepatitis B immunization was given to you in grade 6 in 2002 or later, this was a 2-dose series; you should have a record of both doses. If you received the doses before 2002, you should have a record of 3 doses.

# Immunizations for Fraser Health Students

## Required Screening for Students Placed at Long Term Care Sites

### Tuberculosis (TB)\*

Must follow all screening guidelines listed in [Tuberculosis Screening for Staff/Volunteers/Students document](#), including:

- Baseline TB screening prior to first placement in the health care organization
- A TST (Tuberculosis Skin Test) is recommended at baseline for students with no prior TST or previous TB treatment.
- TST or chest x-ray may be necessary if TB screening indicates that a student is symptomatic\*\* or at risk\*\*\* prior to placement start.

Note: a PSI, or an employer not affiliated with Fraser Health, may require a TST.

\*This screening requirement is unrelated to the Tuberculosis (BCG) Vaccine, which is not routinely administered to health care workers

### \*\*Signs/symptoms of active TB include

- a) Productive, prolonged cough (lasting more than three weeks)
- b) Hemoptysis (coughing up blood)
- c) Fever, weight loss, night sweats, unexplained weight loss, fatigue (with no other confirmed diagnosis)
- d) Non-resolving pneumonia

### \*\*\*Risk factors for development of active TB disease include

- a) Substantial immune suppression, i.e. HIV infection/AIDS
- b) Known contacts to infectious TB disease within the prior two years, especially those with substantial immune suppression

## References

BCCDC – *Immunization Manual: Immunization of Special Populations: Health Care Workers*

(2024). From <http://www.bccdc.ca/resource-gallery/Documents/Guidelines%20and%20Forms/Guidelines%20and%20Manuals/Epid/C/D%20Manual/Chapter%202%20-%20Imms/Part2/HealthCareWorkers.pdf>

BCCDC - *Communicable Diseases Control Manual, Chapter 2: Immunizations, Part 1 –*

*Immunization Schedules* (2020). From [http://www.bccdc.ca/resource-gallery/Documents/Guidelines%20and%20Forms/Guidelines%20and%20Manuals/Epid/C/D%20Manual/Chapter%202%20-%20Imms/Part\\_1\\_Schedules.pdf](http://www.bccdc.ca/resource-gallery/Documents/Guidelines%20and%20Forms/Guidelines%20and%20Manuals/Epid/C/D%20Manual/Chapter%202%20-%20Imms/Part_1_Schedules.pdf)

Fraser Health - *Tuberculosis Screening for staff/volunteers/students* (2016). From

[https://www.fraserhealth.ca/-/media/Project/FraserHealth/FraserHealth/Health-Topics/Long-term-care-licensing/20160314\\_General\\_Immunization\\_Info\\_Health\\_Care\\_Workers.pdf](https://www.fraserhealth.ca/-/media/Project/FraserHealth/FraserHealth/Health-Topics/Long-term-care-licensing/20160314_General_Immunization_Info_Health_Care_Workers.pdf)

PHSA - *Practice Education Guidelines for BC: Communicable Disease Prevention* (2024). From

<https://spe.healthcarebc.ca/Documents/Practice%20Education%20Guidelines/PEG%20Prevention%20Screening%20and%20Monitoring%20of%20Communicable%20Diseases.pdf>

PHSA - *Student Practice Education Core Orientation: Preparation Checklist* (2024). From

<http://www.phsa.ca/student-practice-education-site/Documents/SPECO%20Checklist.pdf>