

**JIBC**

School of Health, Community & Social Justice
Health Sciences Division

Practice Education Immunization Requirements Frequently Asked Questions

Do I need to be fully immunized against COVID-19 and provide proof of vaccination?

Yes. On October 14, 2021, a Provincial Health Officer Order announced that all health care workers, including students, in acute and community care settings must be immunized against COVID-19.

I can't find evidence of my vaccine history. How can I prove my immunity?

Book an appointment with your physician or health care professional. Serology testing can be done to measure antibodies or antigens and is accepted by JIBC as proof of immunity. If your serology test indicates low levels of immunity, additional vaccination is required.

I have completed the series of vaccines for hepatitis B. Do I need a serology test?

Yes, post-vaccination serology (blood test) is required at least one month after the last dose of hepatitis B vaccine. A documented serology with anti-HBs level ≥ 10 IU/L done after the last dose of a complete vaccine series is considered to be protection for life.

What do I do if my hepatitis B serology results show anti-HBs levels < 10 IU/L?

If the test result shows your level is < 10 IU/L, you will require a second vaccine series and retest one month after the last dose of the second series. If anti-HBs remains < 10 IU/L after second vaccine series, you will be considered a non-responder and susceptible to hepatitis B virus. In this case, contact your program for the next steps.

When can I get my TB skin test?

A Tuberculin Skin Test (TST) is required within 12 months of your first practice education placement.

Upon acceptance into the program, you will be provided with details on when to have your TST. This is to ensure your results are valid at the time of your first practice education placement. Do not have the test or submit results earlier than notified, as they will expire.

What do I need to consider when scheduling a TB skin test?

A Two-Step TST is recommended and may take up to two weeks to complete. The first test is placed, and the results are read in 48 – 72 hours. The second test is placed at least seven days after reading the first test, and the results are read in 48 – 72 hours.

If a Two-Step TST is not available, a negative tuberculin skin test is required. This test will require two clinic visits 48 – 72 hours apart. One visit to take the test and second visit to read the results.

Live virus vaccines (TDP, Polio, MMR, and Varicella) can interfere with a tuberculin skin test (TST) by reducing the reactivity of the skin test because of mild suppression of the immune system and result in a false negative. A TST can be done before or on the same day that a live virus vaccine is given. However, if a live vaccine is given on the previous day or earlier, the TST should be delayed for at least 4 weeks (28 days). For more information, contact your immunization provider.

What do I do if my TB skin test is positive?

If your TB skin test is positive (>10 mm of induration or greater), a healthcare professional will conduct a comprehensive TB assessment and possibly recommend a chest x-ray providing clearance for active TB.

What do I need to know about influenza?

Influenza (flu) can be a serious contagious disease, which is spread by droplet transmission through close contact with an infected person. Infected individuals are highly contagious and can transmit the virus for 24 hours before they show any symptoms. Each year, there are approximately 3,500 deaths from influenza and its complications across Canada. Influenza causes by far the most deaths among vaccine-preventable diseases, outpacing all others combined.

Infected health care providers can pass the virus on to their patients before they even know they are sick. The most effective way to prevent the flu is by getting vaccinated and adopting additional preventative measures, such as proper hand hygiene and proper sneezing and coughing etiquette. Immunization helps health care providers reduce their risk of contracting influenza and spreading it to their patients.

In 2012, health authorities in BC adopted a policy requiring all employees, students, physicians, residents, contractors, vendors and volunteers to get immunized or to wear a mask during influenza season when in a patient care area. A patient care area is defined as an area within a health care facility and also includes any other location where care is provided including a patient's home, inside an ambulance or on the street.

Flu season generally occurs during the fall and winter. It usually starts in November and lasts until March. In BC, the vaccine is usually available starting in mid-October and students should be vaccinated annually.

Sources: Practice Education Guidelines for BC (Immunization) <https://hspscanada.net/features/>
BC Centre for Disease Control <http://www.bccdc.ca/>
Immunize BC <https://immunizebc.ca/>
Health Link BC <https://www.healthlinkbc.ca/more/health-features/influenza-flu-season>
Office of the Provincial Health Officer – [Orders](#)
Ministry of Health – [Influenza Prevention Policy](#)