

Immunization Checklist

Student Name (print): _				Date of Birth:	/	/	<u> </u>
	LAST NAME	FIRST NAME	INITIAL		YYYY	MM	DD

The following Immunizations, based on **The Practice Education Guidelines for BC**¹ set out by the BC Academic Health Council, are required by healthcare students in BC doing practice education placements.

PLEASE READ: IMPORTANT INFORMATION ON HOW TO COMPLETE THE FORM

- 1. Check with your family physician or local public health unit for childhood immunization records.
- 2. Take immunization records and this form to your Doctor or Public Health Nurse to review, complete, sign and stamp.
- 3. Note: Serology testing is required for Hepatitis B, and results of this can take up to 28 days to be processed.
- 4. Submit this form to JIBC when it is complete. Incomplete forms will be returned to the student.

REQUIRED IMMUNIZATIONS	Dates to be in YYYY / MM / DD format					
TETANUS, DIPHTHERIA, PERTUSSIS						
TDP Primary Series	Dates:					
Tetanus and Diphtheria Booster within the last 10 years	Date:					
POLIO						
Primary Series	Dates:					
Booster 10 years after primary series	Date:					
MEASLES, MUMPS AND RUBELLA (MMR)						
Initial Dose	Date:					
Secondary Dose or Booster	Date:					
HEPATITIS B						
Primary Series (may take up to 8 months)	Dates:					
Attach serology (blood test) results showing anti-HBs ≥ 10 IU/L	Date:					
VARICELLA (CHICKEN POX)						
History of Disease > 12 months of age	Date:					
OR Varicella Titer	Date: Results: Positive O Negative O					
If negative, Varicella Vaccine (2 doses)						
Dose #1	Date:					
Dose #2	Date:					

Tuberculosis: You will be required to have a tuberculin skin test (TST) and, upon acceptance into the program, will be notified of when to have the test and submit proof. A Two Step TST is recommended if available, otherwise a negative TST is required.

Influenza (flu): It is recommended that you receive a flu vaccination during flu season, which generally starts in November and lasts until March each year. The vaccine is usually available in mid-October and you will be required to submit proof. You will also be required to carry proof of vaccination during practice education placements.

COVID-19: You <u>must</u> be fully immunized against COVID-19 and submit proof. You will also be required to carry proof of vaccination during practice education placements.

I certify that this information is accurate and up-to-date.

Student Signature		Date:
Name of Health Care Provider reviewing this document (print)	Signature of the Health Care Provider	Date:

Health Care Provider or Physician's Stamp

¹ <u>http://hspcanada.net/docs/PEG/1_3_Immunization.pdf</u>

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