

**DISTRICT 2
EMPLOYEE IMMUNIZATIONS
REQUIREMENTS AND RECOMMENDATIONS
Policy # 173**

REQUIRED IMMUNIZATIONS:

The following vaccinations are required for specific categories of personnel, as detailed in each section. Vaccination will be provided at no cost to staff for whom these immunizations are required, as well as to other staff who may wish to take advantage of these immunizations.

Proof of vaccination (single dose vaccines and initial dose of multi-dose vaccine series) for all required immunizations must be provided to Human Resources within 30 days of beginning work.

1. Rubella/Measles/Mumps (MMR)

- a. All Health Care Providers (HCP) (male and female) who are considered to be at increased risk for contact with patients with rubella or who are likely to have direct contact with pregnant patients are required to show proof of immunity to rubella.
- b. HCP born in 1957 or later can be considered immune to measles, mumps, or rubella only if they have documentation of (a) physician diagnosed measles or mumps disease; or (b) laboratory evidence of measles, mumps, or rubella immunity (HCP who have an “indeterminate” or “equivocal” level of immunity upon testing should be considered non-immune); or (c) appropriate vaccination against measles, mumps, and rubella.
- c. Appropriate vaccination consists of two doses of live measles and mumps, separated by 28 days or more and at least one dose of live rubella vaccine. Pre-serological screening is not necessary prior to vaccination unless employee requests it.
- d. Although birth before 1957 generally is considered acceptable evidence of measles, mumps and rubella immunity, it is recommended that HCP should be given one dose of MMR if unvaccinated and in either of following categories:
 - Do not have a history of physician-diagnosed measles and mumps disease or laboratory evidence of measles or mumps immunity; and
 - Do not have laboratory evidence of rubella immunity.

Any HCP who refuses the MMR vaccine or refuses to show proof of immunity to measles, mumps or rubella must obtain a signed exemption from a physician stating the medical reason(s) the person cannot be immunized.

2. Hepatitis B:

- a. Public Health workers who perform tasks that may involve exposure to blood or body fluids must show proof of immunity or receive a three dose series of hepatitis B vaccine at 0, 1, and 6 month intervals. Test for hepatitis B surface antibody (anti-HBs) should be done to document immunity 1 - 2 months after dose #3.

Hepatitis B immunity:

If anti-HBs are at least 10 mIU/ml. (positive), the patient is immune. No further serological testing or vaccination is recommended.

If anti-HBs are less than 10 mIU/ml. (negative) the patient is unprotected from hepatitis B virus (HBV) infection. Revaccinate with a three dose series. Retest anti-HBs 102 months after third dose:

- If anti-HBs is positive, then immune, no further testing or vaccination is necessary.
 - If anti-HBs is negative following six doses of vaccine, the patient is a non-responder.
- b. For non-responders (anti-HBs negative following six doses of vaccine): HCP who are non-responders should be considered susceptible to HBV and counseled regarding precautions to prevent HBV infection and the need to obtain HBIG prophylaxis for any known or probable parental exposure to Hepatitis B surface antigen (HBsAg) positive blood. It is also possible that non-responders are persons who are HBsAg positive. Testing should be considered. HCP found to be HBsAg positive should be counseled and medically evaluated.

3. Tuberculosis:

- a. Employees who have direct patient contact must have annual tuberculin skin testing (TST) done in order to rule out tuberculosis infection.
- b. A two step TST should be used for the initial skin testing of new employees who have not had a documented negative skin test results during the preceding twelve months. The two-step testing allows you to accurately assess whether employees have been occupationally exposed to TB. The first test boosts the immune system and allows for a more accurate reading during the second tests, given between one and three weeks later. Without the second "baseline" test, an employee who tests positive the next year may be considered newly infected when actually he or she was exposed prior to being hired.

- c. The TST should not be performed on a person who has a **documented history** of either a positive TST result or treatment for TB disease. Employee is responsible for providing past medical information regarding their TST, chest x-ray and possible treatment for latent TB or TB disease.

4. Influenza:

All staff with direct patient contact are required to receive the seasonal influenza vaccine annually, unless they have a legitimate medical reason and receive an exemption from the District Health Director. Requests for exemption must be made to the District Health Director on an annual basis. Staff receiving an exemption will be required to wear a mask once it is established that there are seasonal influenza cases in the geographic area served by District 2.

"The CDC and the ACIP have stated that all healthcare workers should be vaccinated in order to protect themselves, their co-workers, their patients, their families, and their communities. Getting vaccinated is the responsible thing to do, and sets a good example for the community. It is hypocritical for Public Health to espouse the importance of flu vaccine, and then ignore that advice itself." -- Dr. Westfall

While not required, it is still recommended that employees who do not have patient contact, including environmental health staff and non-clinical district office staff, receive the seasonal influenza vaccine in order to protect their own health and ability to perform their job duties.

5. Tetanus/Diphtheria/Pertusis (Tdap):

A one-time dose of Tdap is either required or recommended for all staff as delineated on the accompanying chart. Tdap (as opposed to Td) is specified due to the increasing number of pertussis cases in the United States. All staff should receive a booster every ten years.

RECOMMENDED IMMUNIZATIONS

The following immunizations are recommended in addition to the recommendations listed for influenza and Tdap in the previous section. Recommended immunizations are encouraged but not required. Vaccination will be provided at no cost to staff taking advantage of these immunizations.

Environmental Health Staff:

Rabies:

Rabies pre-exposure vaccine is recommended for all Environmental Health Employees who are exposed to animals with possible rabies. For those repeatedly exposed to rabies, periodic testing for immunity, with booster doses given as needed, is recommended. See the Georgia Rabies Control Manual, "Frequent" exposure Risk Category for guidance.

Clinic Staff:

Varicella:

Varicella immunization is recommended for all staff having direct patient contact. Other staff may also request vaccination.

ACIP recommends that all Health Care Providers be immune to Varicella. Evidence of immunity in HCP includes documentation of two doses of varicella given at least 28 days apart, history of varicella or herpes zoster based on physician diagnosis, laboratory evidence of immunity or laboratory evidence of disease.

All Staff:

Hepatitis A:

Hepatitis A vaccine is available for unvaccinated adults who wish to be protected against the Hepatitis A virus.

IMMUNIZATION GUIDE BY JOB TYPE

Proof of vaccination (single dose vaccines and initial dose of multi-dose series vaccines) for all required immunizations must be provided to Human Resources within 30 days of beginning work.

Required

Staff	MMR	Hep B	TB (PPD)	Flu	Tdap
Nurses	x	x	x	x	x
Health Tech/Lab	x	x	x	x	x
Clinic Clerical/ Interpreters	x		x	x	x
Non-Clinic Clerical					
Dental (all)	x	x	x	x	x
WIC CPAs	x	x	x	x	x
WIC Clerical/ Interpreters	x		x	x	x
Environmental					x
District Office Admin					
Non-Clinical Programmatic					

Recommended

Staff	Flu	Rabies	Varicella	Tdap	Hep A
Nurses			x		
Health Tech/Lab			x		
Clinic Clerical/ Interpreters			x		
Non-Clinic Clerical	x			x	
Dental (all)			x		
WIC (all)			x		
Environmental	x	x			
District Office Admin	x			x	
Non-Clinical Programmatic	x			x	
All Staff					x

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David N. Westfall, MD

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