

**Dear Incoming Student:**

You are enrolled in a program where the completion of an Entry Immunization Record is **mandatory**. The majority of placement agencies require this information in order to ensure that students working out on placement, as part of their academic experience, are free from, and protected against communicable and infectious diseases. Fleming College has a responsibility for ensuring that each student complies with these guidelines.

It is advised that you begin tracking and recording your records now in order to meet the **September 3, 2010** submission deadline. Failing to do so, may jeopardize your ability to attend placement. If you are unable to find dates of your immunizations, contact your local Public Health Unit or family physician.

To locate an Ontario Public Health Unit nearest you, visit the website: [http://www.health.gov.on.ca/english/public/contact/phu/phuloc\\_mn.html](http://www.health.gov.on.ca/english/public/contact/phu/phuloc_mn.html)

Once your form has been received in Health Services and all mandatory requirements have been met, the form will be stamped "complete" and sent along with any supporting documentation to your Program Coordinator. Do **NOT** submit your form until **all required sections** are complete.

Students who do not participate in immunizations due to a medical contraindication are still required to complete the Entry Immunization Record along with a Refusal Declaration Form and supporting evidence signed by your healthcare provider. We also strongly encourage you to discuss your immunization status with your Program Coordinator, as obtaining a placement may not be possible due to the strict regulations of certain agencies.

If you require another Entry Immunization Record Form, it can be downloaded from our website <http://www.flemingc.on.ca/health>

Please mail the completed form to the appropriate address listed below. Students enrolled at the Frost Campus in the Early Childhood Education, Social Service Worker or Personal Support Worker Program will mail the form directly to the Frost Campus address below. You can also drop the form off in person at the Student Services Department (Sutherland Campus, room 181 across from cafeteria/Frost Campus, room 254). Feel free to call or email us if you have any questions regarding completing this process.

---

**Tuberculin (TB) skin testing (Mantoux):**

**Tuberculin (TB) skin testing is mandatory.** Although not part of your childhood vaccination series, TB testing is still a **mandatory requirement** and must be completed and recorded on the form. If you have had no testing done in the past, then a two-step TB test must be administered within 6 months prior to entry of your program. **(The testing involves four visits to your doctor; two to have the test administered and two to have it read.)** If you have had a prior two-step TB test done, you must provide proof of the testing and results. If your two-step TB testing date is greater than one year, and your placement occurs within a healthcare setting, an additional "one-step" TB test will also be required. The amount of induration for all tests must be measured and recorded in mm ("positive" or "negative" is not sufficient). Individuals having received a BCG vaccination in the past are still required to have a two-step skin test administered. If your test is positive, we expect your healthcare provider to follow up with you. (Reference: *Canadian Tuberculosis Standards, 6<sup>th</sup> Edition 2007, OHA Guidelines - Revised June 2008*).

**Chicken Pox (varicella):**

**Knowing your immunity status to chicken pox (varicella) is required.** If it is determined that you do not have antibody protection, a vaccination is available but not mandatory. However, if you come into contact with someone who has chicken pox, you will not be allowed in the placement agency for three weeks following exposure to ensure you have not caught the disease.

**Measles (red measles), mumps and rubella (German measles):**

**Immunity to measles (red measles), mumps and rubella (German measles) is mandatory;** recording your immunity status on the form is required. If you were born after 1970, you are required to have two doses of the measles vaccine. If you are unable to find the date of your immunization, this may require a blood test or revaccination by your healthcare provider. If you have a blood test, please ensure that it covers measles, mumps and rubella and provide documentation of these results.

**Tetanus/diphtheria:**

**A current tetanus/diphtheria or Adacel immunization along with the date of your primary series of tetanus/diphtheria/pertussis/polio (last dose) is mandatory;** recording your status on the form is required. If the date of your last vaccination was longer than 10 years ago, you **would be** required to get a booster for either tetanus/diphtheria or tetanus/diphtheria/pertussis (Adacel).

**Hepatitis B Vaccinations:**

**Hepatitis B Vaccinations are not mandatory** but strongly recommended. It's important to note that for some agencies, it may be a pre-requisite of placement. Hepatitis B virus (transmitted through body fluids) is a serious, blood-borne disease that affects your liver. Infection from the Hepatitis B virus can be prevented, in most cases, by pre-exposure administration of an effective, safe vaccine. Many of you will have already received Hepatitis B injections while in public school; therefore, all we require are the dates. Proof of immunity is recommended (blood work) for Nursing and Personal Support Worker students, if you have received your vaccinations.

**Hepatitis A Vaccinations:**

**Hepatitis A Vaccinations are not mandatory** but recommended. Hepatitis A (transmitted through fecal-oral route, blood-borne) is a virus that infects the liver.

**Meningitis Shots:**

**Meningitis shots are not mandatory.** It can lead to serious infections of the blood and the covering of the brain and spinal cord. If you are between the ages of 15-21, the vaccine is publicly funded. For those that are not eligible for publicly funded vaccine, the vaccines can be purchased from a pharmacy with a prescription. Talk to your doctor to discuss your individual risks and needs for the vaccine.

**Flu Shots:**

**Flu Shots may be mandatory** for pre-placement at many community agencies. The flu vaccine is not available until October/November. In the past, a Flu Vaccine Clinic has been offered to students on-campus by our local Public Health Unit.

Thank you.

**Leslie Gifford, RN**  
Fleming College  
**Sutherland Campus Health Services**  
599 Brealey Drive, Peterborough, ON K9J 7B1  
Phone: Toll-free 1-866-353-6464, ext. 1557 or direct 705-749-5557  
Email: [legiffor@flemingc.on.ca](mailto:legiffor@flemingc.on.ca)

**Betty McNeely, RN BSN**  
Fleming College  
**Frost Campus Health Services**  
Box 8000 Lindsay, ON K9V 5E6  
Phone: Toll-free 1-866-353-6464, ext. 3304 or direct 705-878-9304  
Email: [bmcneely@flemingc.on.ca](mailto:bmcneely@flemingc.on.ca)



# ENTRY IMMUNIZATION RECORD

FORM MUST BE COMPLETED AND SUBMITTED BY: September 3, 2010

Do NOT submit your form until all required sections are complete.

PLEASE PRINT

Last Name: \_\_\_\_\_ Given Names \_\_\_\_\_ Program: \_\_\_\_\_

Date of Birth (yy/mm/dd): \_\_\_\_\_ Student #: \_\_\_\_\_ Health Card #: \_\_\_\_\_

Admission year: 20 \_\_\_\_ Phone #: home \_\_\_\_\_ work \_\_\_\_\_ cell \_\_\_\_\_

TB Testing Date Given: Step #1	Date read:	Results in mm:
Date Given: Step #2 (7-28 days apart)	Date read:	Results in mm:
Additional One-Step TB test (required if previous two-step dates are greater than one year and if <b>placement occurs within a healthcare setting</b> ) Date Given:	Date read:	Results in mm:
If TB test result is positive, a chest x-ray is required Date of x-ray:	Result (attach copy):	

Immunization	Date of Immunization	Date of Blood Work	Results of Blood Work (record result on form & attach copy)
History of Chicken Pox <input type="checkbox"/> Yes or <input type="checkbox"/> No (Bloodwork required if you have not had Chicken Pox. Vaccines recommended if non-immune.)	#1  #2	Date:	
Red Measles, Mumps, Rubella(MMR)  Measles 2 <sup>nd</sup> dose required if born after 1970. Vaccine required if non-immune.	#1  #2	Blood Work required if immunization dates are not available.  Date:	
Tetanus/Diphtheria/Pertussis/Polio Primary series - last dose		N/A	N/A
Tetanus/Diphtheria Booster - every 10 yrs. →		N/A	N/A
<b>OR</b> Adacel →		N/A	N/A
<input type="checkbox"/> Hepatitis B or <input type="checkbox"/> Twinrix highly recommended	Date: 1 <sup>st</sup> dose	2 <sup>nd</sup> dose Date:	3 <sup>rd</sup> dose Date:
Hepatitis B antibodies titre ( <b>recommended if in the health care field and has been immunized.</b> )		Date of blood work:	Results:
Hepatitis Booster dose (if required)	Date:	N/A	N/A

By signing below, you confirm that the information recorded on this form has been completed to the best of your ability. Your signature also gives Fleming College's Health Services Department permission to release this form and any supporting documentation to your Program Coordinator. Your Program Coordinator may share this information with a placement agency for purposes of assisting you in securing your placement. This form will **not be** retained by Health Services and so we suggest you **keep a copy of this form** as you may be required to submit it to your placement agency.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_