

Appendix I
MANDATORY HEALTH SCREENING AND IMMUNIZATION REQUIREMENTS –
EMPLOYEES, VOLUNTEERS, STUDENTS AND TEMPORARY AGENCY STAFF

Disease/Screening	Required screening/documentation*:
Four-Year Health Screening	Blood pressure, pulse, and temperature required upon hire and during the annual TB screening visit every four years from employee’s hire date
Hepatitis B	<ul style="list-style-type: none"> • Hepatitis B 3 dose vaccination series; or • Positive blood test indicating immunity (hepatitis B surface antibody); or • History of positive disease (hepatitis B surface antigen); or • Declination during health screening
Influenza Annually (during the months of September through March)	<ul style="list-style-type: none"> • 1 dose of vaccine; or • Declination
Measles (Rubeola)	<ul style="list-style-type: none"> • 2 doses of measles or MMR (measles, mumps, rubella) vaccine given after 1967; or • Positive blood test indicating immunity
Meningococcal disease (For at risk clinical and research microbiologists as identified by HR)	<ul style="list-style-type: none"> • 1 dose vaccine; booster dose in 5 years if person remains at risk; or • Declination during health screening
Mumps	<ul style="list-style-type: none"> • 2 doses of mumps or MMR (measles, mumps, rubella) vaccine given after 1967; or • Positive blood test indicating immunity
Respirator Fit Testing	Pre-employment and annually for those assigned by their departmental Human Resource Representative.
Rubella	<ul style="list-style-type: none"> • 1 dose of rubella or MMR (measles, mumps, rubella) vaccine; or • Positive blood test indicating immunity
Tetanus, Diphtheria and Pertussis (Tdap)	<ul style="list-style-type: none"> • 1 dose of vaccine; or • Declination during health screening visit • Td booster recommended every 10 years

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Tuberculosis (TB) Screening	<p>Upon initial employment:</p> <ul style="list-style-type: none"> • TB symptom review and 2 tuberculin skin tests (TST), the first completed before the first day of patient care; 1 test may be omitted with the following documentation: <ul style="list-style-type: none"> a) 1 negative TST within past 12 months of health screening visit; or b) 2 negative TSTs. <p>Or</p> <ul style="list-style-type: none"> • TB symptom review for persons with a documented positive TST reading, chest x-ray report and associated treatment records <p>Continued employment:</p> <ul style="list-style-type: none"> • Annual TST (biannual for those identified as at-risk lab personnel).
Varicella	<p>Upon initial employment:</p> <ul style="list-style-type: none"> • Two doses of vaccine; or • Positive blood test indicating immunity; or • Diagnosis of shingles (herpes zoster) or chickenpox (varicella) by healthcare provider.* <p>Continued employment:</p> <ul style="list-style-type: none"> • Two doses of vaccine; or • Positive blood test indicating immunity; or <ul style="list-style-type: none"> • Diagnosis of shingles (herpes zoster) or chickenpox (varicella) by healthcare provider*; • Declination during health screening.

* Documentation is defined as a photocopy of the medical record or an immunization record signed by a healthcare provider or previous employer.