

DHR HEALTH DISTRICT 2

POLICY FOR IMMUNIZATION REQUIREMENTS AND RECOMMENDATIONS FOR HEALTH CARE WORKERS

REQUIREMENTS

1. Rubella

- a. All health care workers (male or 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 should be immune to rubella.¹
- b. Before immunizing, serologic screening for rubella need not be done unless the health facility considers it cost-effective or the potential vaccinee requests it.
- c. Persons can be considered susceptible unless they have laboratory evidence of immunity or documented immunization with live virus vaccine consisting of 2 doses on or after the first birthday. History of rubella infection is often uncertain and must be validated by testing.
- d. All health department workers who are considered to be at increased risk for contact with patients with rubella or who are likely to have direct contact with pregnant females **ARE REQUIRED** to show proof of rubella immunity. This includes all **nursing** personnel (RNs, LPNs, health service technicians, laboratory technicians, case managers, personal care aides and epidemiologists). This also includes health educators, dental specialists, dental hygienists, dental assistants, nutritionists, clerical and environmental health personnel who have even minimal contact with clients. The above stated personnel will show laboratory evidence of immunity or documented immunization with live virus vaccine consisting of 2 doses on or after the first birthday. Any worker without proof of immunity will be required to be immunized with two doses of the Measles-Mumps-Rubella (MMR) vaccine per immunization guidelines.
- e. Any employee who refuses the **Measles-Mumps-Rubella (MMR) Vaccine MUST obtain a signed exemption from a physician stating the medical reason/s the person cannot be immunized with MMR.**

¹Pregnancy is a contraindication to vaccination against measles, mumps, and/or rubella. Vaccine should not be given to pregnant women or those who may become pregnant within 4 weeks of vaccination.

2. **Hepatitis B**

HBV infection is the major infectious occupational hazard for health care workers. The risk of acquiring HBV infection from occupational exposures is dependent on the frequency of per cutaneous and permucosal exposures to blood or blood products. Any health care worker may be at high risk for HBV exposure depending on the tasks that he or she performs. If those tasks involve exposure to blood or blood contaminated body fluids at any time, then such worker should be vaccinated. Vaccination should be considered for other workers depending on the nature of the task.

- a. Persons at high risk for hepatitis B virus infection who are demonstrated or judged likely to be susceptible should be actively immunized. Health-care workers who have contact with blood or blood products are at increased risk. These groups include (but are not limited to) physicians, nursing staff, dental professionals, and laboratory technicians. Clerical personnel and case managers would not be at high risk for hepatitis B acquisition.
- b. Before immunizing, serologic screening for hepatitis B need not be done.
- c. Occupational exposure procedures will be followed when an incident occurs.
- d. All health care workers who are at increased risk for hepatitis B infection (as previously stated) **ARE REQUIRED** to provide proof of immunity or proof of the hepatitis B series. Any high risk worker refusing the hepatitis B vaccine will:
 1. Sign a waiver releasing DHR Health District 2 of any liability in the event of hepatitis B infection, illness or complications. (Attachment I)

OR

 2. Obtain a signed exemption from a physician stating the medical reason/s the person cannot be immunized with hepatitis B vaccine and sign a waiver.
- e. Determine the immune status with post-vaccination testing within one to two months after the administration of the last dose of vaccine.
Note: If the employee fails to respond to the 3-dose vaccine series, consult with Janie Dalton to decide the appropriate follow-up.
- f. Obtain proof of immunity or, if indicated, start the hepatitis B vaccine within 10 working days of being assigned to Category I duties.

2. **Tuberculosis**

- a. All District 2 employees must have annual PPD testing done in order to rule out tuberculosis infection. Employees who do not have patient contact are exempt from this policy (e.g., District Office Staff - clerical functions only).
- b. A **two-step baseline PPD** should be used for new employees who have an initially negative PPD test result and who have not had a documented negative skin test result 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 test, taken 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 two-step baseline PPD must be initiated within **two weeks** of employment on all employees who have not had a documented negative skin test result during the preceding twelve months.

3. The following are recommended but not required by DHR Health District

- a. Influenza See latest CDC recommendations
All employees who have contact with high-risk patients (elderly, transplant recipients or persons with HIV disease) in all age groups, including infants, should receive flu vaccine.
- b. Measles See latest CDC recommendations
- c. Mumps See latest CDC recommendation
- d. Poliomyelitis See latest CDC recommendations
- e. Tetanus and Diphtheria See latest CDC recommendations
- f. Pneumococcal See latest CDC recommendations
- g. Rabies Vaccine See latest CDC recommendations

All environmental health employees will be offered the rabies pre-exposure vaccine. The primary series is the only recommendation for individuals who are infrequently exposed. No booster dose or post vaccine testing is recommended.

LIST OF EMPLOYEE POSITIONS REQUIRED TO SUBMIT PROOF OF RUBELLA AND/OR HEPATITIS IMMUNITY/VACCINATION

RUBELLA - **All District 2 Employees (Category I and II)**

*****All Staff whose tasks do not involve exposure to blood, body fluids, or tissue*****

- **Clerical Personnel (staff with minimal contact with patients)**
- **Dental Assistants**
- **Dental Hygienists**
- **Dentists**
- **Environmental Health Personnel**
- **Epidemiologists**
- **Health Educators**
- **Interpreters**
- **Laboratory Technicians**
- **Nursing Personnel (RNs, LPNs, Health Service Technicians, Case Managers)**
- **Nutritionists**

HEPATITIS B – (Category I Employees Only)

*****All Staff whose tasks involve exposure to blood, body fluids, or tissue*****

- **Dental Assistants**
- **Dental Hygienists**
- **Dentists**
- **Health Service Technicians**
- **Laboratory Technicians**
- **LPNs**
- **Nutritionists (working clinic performing Hgb/Hct determinations)**
- **RNs**

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**EMPLOYEE STATEMENT OF REFUSAL TO CONSENT TO
HBV VACCINATION**

I understand that, due to my occupational exposure to blood or potentially infectious materials, I may be at risk of acquiring Hepatitis B virus (HBV) infection. I have been given the opportunity to be vaccinated with Hepatitis B at no charge to me. However, I decline HBV vaccination of this time. I understand that by declining this vaccine, I continue to be at risk of acquiring Hepatitis B, a serious disease. If in the future I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with Hepatitis B vaccine, I can receive the vaccination series at no charge to me.

Employee Signature

Date

Witness

Date

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GUIDELINES FOR OBTAINING REQUIRED IMMUNIZATIONS AND TUBERCULIN SKIN TEST

1. Rubella

- a. Receive the vaccine, or
- b. Provide immunization record from a health care provider, or
- c. Provide lab results indicating immunity, or
- d. Complete lab work to test for immunity.
- e. If you choose not to receive the Rubella vaccine, employee must obtain a signed exemption from a physician stating the medical reason that the MMR cannot be given.

2. Tuberculin Skin Test

- a. A two-step baseline PPD must be initiated within two weeks of employment on all employees who have not had a documented negative skin test result during the preceding twelve months.
- b. If a follow-up x-ray is required, it must be obtained at the employee's expense.

3. Hepatitis B

- a. Start the Hepatitis B vaccine within 10 working days of being assigned to Category 1 duties, or
- b. Provide immunization record from a health care provider, or
- c. Provide lab results indicating immunity, or
- d. Complete lab work to test for immunity.
- e. If you choose not to receive the Hepatitis B vaccine, sign a waiver (Attachment 1) releasing DHR Health District 2 of any liability in the event of Hepatitis B infection, illness, or complications, or
- f. Obtain a signed exemption from a physician stating the medical reasons the person cannot be immunized with Hepatitis B vaccine and sign a waiver.

NOTE: Required vaccines and lab work will be provided to the employee free of charge. It is the employee's responsibility to check with the local nursing staff to determine the immunization and testing schedule. Documentation of the required immunization/s and skin test results must be forwarded to the District Personnel Office within *three months* of employment. If the Hepatitis B vaccine series has begun, send proof of the three vaccines after completion.