Immunization Documentation Instructions

1. Tuberculosis (TB)

A standard Mantoux tuberculin skin test (PPD) is required within 10 days or your Emory University employment start date (or proof of test within the last 6/12 months depending upon facility). Tuberculin skin testing must be repeated annually unless the health care employee works in the Grady Health System or in an area with increased exposure to patients with tuberculosis in which case a tuberculin skin test is required every six months while the individual is working or training and the PPD remains negative. The self-reading of PPD test results is discouraged.

**NOTE:** Individuals who have received the BCG vaccination for TB and have NOT had a previously positive PPD are required to have a current PPD test AND are subject to the same requirements as non-BCG recipients if the results are positive. Also, health care workers who have not had documented negative PPD test result during the preceding 12 months, the baseline PPD testing should employ the two-step method.

**EXCEPTION:** Subsequent PPD testing is not required for those with a previous positive PPD result; there are specific requirements for individuals with a positive PPD.

**REQUIREMENTS FOR HEALTH CARE WORKERS WITH POSITIVE TUBERCULIN SKIN TESTS (PPD)**

**Positive Baseline PPD**

All health care workers who test positive on their baseline tuberculin skin test (PPD) or convert from a negative to a positive PPD (PPD conversion) during TB surveillance are subject to the following requirements:

1. They must have a current chest x-ray performed (PA and lateral views).

**OR**

2. They must provide written results of a chest x-ray performed within the past 12 weeks, indicating no evidence of pulmonary TB.

Health care workers with positive PPD test results should have a chest radiograph as part of the initial evaluation of their PPD test; if negative, repeat chest radiographs are not needed unless symptoms develop that could be attributed to TB. Emory University affiliated hospitals may require further treatment and x-rays.

**History of Previously Positive PPD**

All new health care workers who present an immunity history documenting a positive PPD are subject to the following requirements:

1. They must provide written documentation from a physician, clinic, or health care facility verifying the conversion date of the positive PPD, results of a chest radiograph taken after the PPD conversion, and a six to twelve month course of INH therapy has been completed or that INH was not recommended.

**OR**

2. If the health care worker is symptomatic or does not have documentation of a negative chest x-ray, a current chest x-ray must be performed (PA and lateral views).
Emory University affiliated hospitals may request further x-rays and treatment for recent converters and other PPD-positive health care workers who are at increased risk for developing active TB.

NOTE: Health care workers who have received the Bacille Calmette-Guerin (BCG) vaccination for TB who have a positive PPD history are subject to the same requirements as non-BCG recipients.

2. Hepatitis B Vaccine (HBV)

Federal guidelines and standards require employers to offer the hepatitis B vaccine (consisting of three doses over a six month period and titer) to their employees who are likely to come in contact with human blood or other bodily fluids. The hepatitis B vaccine is not made from blood products and there is no risk of transmission of infection with the hepatitis B vaccination. You will be required to provide documentation of your hepatitis B vaccination status. If it is not possible to get documentation, your hepatitis B antibody status will be checked. If you elect not to receive the hepatitis B vaccination or are not willing to have your hepatitis B antibody status checked (not recommended), you need to sign the declination form (attached).

NOTE: Under current OSHA standards, all health care workers are also required to receive annual training on the Bloodborne Pathogen Standard.

3. Mumps, Measles, and Rubella (MMR)

You are required to provide documentation from a health care provider or health care facility that you have received the appropriate vaccinations for mumps, measles, and rubella (MMR) after December 31, 1967. If you are unable to provide acceptable documentation, you should receive the MMR vaccination (unless medically contraindicated).

Individuals born before January 1, 1957 and working in health care setting are NOT presumed to have natural immunity to mumps, measles, and rubella (German measles). Serological immunity or proof of vaccination is required.

4. Chickenpox (Varicella zoster)

You must indicate if you have ever had chickenpox or shingles.

NOTE: You must inform the supervisor in your work/training area if you are not immune.

5. Tetanus/Diphtheria

A tetanus/diphtheria booster is highly recommended if it has been more than 10 years since your last booster.

6. Medical Contraindications

Live vaccines are contraindicated in individuals who are immune compromised or pregnant. If you have a medical contraindication, please consult with a health care provider before receiving any vaccinations. Medical contraindicated individuals should obtain a signed medical exemption statement from their physician. A declination form is attached and should be signed if you are declining the hepatitis B immunization.

MMR is a live virus vaccine and should be deferred during pregnancy and not administered until after delivery.

Hepatitis B and PPD are considered safe during pregnancy.