

**Evidence Required to Demonstrate Protection Against Specified Infectious Diseases**

 Policy Directive: PD2011\_005 *Occupational Assessment, Screening and Vaccination Against Specified Infectious Diseases*

PLEASE TAKE THIS FORM TO YOUR DOCTOR/SERVICE PROVIDER TO ASSIST WITH PROVISION OF THE REQUIRED EVIDENCE

1. Medical certificate signed by General Practitioner
2. Copy of serology results
3. Adult vaccination record card – please ensure the following information is recorded
  - VACCINE NAME AND BATCH NUMBER
  - DATE VACCINE GIVEN
  - VACCINE PROVIDER SIGNATURE AND STAMP
  - SEROLOGY RESULTS RECORDED ON THE CARD ALSO REQUIRE A SIGNATURE AND STAMP
  - IF PROVIDING SEROLOGY, A COPY OF THE ORIGINAL PATHOLOGY RESULTS ARE PREFERRED.

Disease	Evidence of vaccination	Documented serology results	Other acceptable evidence
<b>Diphtheria, tetanus AND pertussis (whooping cough) (dTpa)</b>	One dose of ADULT type dTpa (Boostrix or Adacel)	Serology will not be accepted	Not applicable
****PLEASE CONFIRM**** WITH YOUR GP THAT YOU ARE RECEIVING EITHER BOOSTRIX OR ADACEL (dTpa) AND <u>NOT ADT</u>			
<b>Hepatitis B</b>	History of completed age-appropriate course of Hepatitis B vaccine	Anti-HBs (surface antibodies) greater than or equal to 10mIU/ml	Anti-HBc (core antibodies) indicating past infection
	AND	OR	
	<ul style="list-style-type: none"> <li>Complete Form 1 – Undertaking to complete requirements – if Hepatitis B requirements are incomplete</li> </ul>		
<b>Measles, mumps, rubella (MMR)</b>	2 doses of MMR vaccine - at least one month apart	Positive IgG for measles, mumps and rubella	Birth date before 1966
	OR	OR	
		Results of not detected /equivocal requires a 2 dose course	
<b>Varicella (chickenpox)</b>	2 doses of varicella vaccine at least one month apart  Evidence of one dose is sufficient if the person was vaccinated before 14 years of age	Positive IgG for varicella  Result of not detected/ equivocal requires a 2 dose course	History of chickenpox or physician diagnosed shingles
	OR	OR	
<b>Tuberculosis (TB) Assessment</b>	<ul style="list-style-type: none"> <li>Complete Form 2 – Assessment/Undertaking</li> </ul>		