

## INFECTIOUS DISEASE - HEALTH CARE PROVIDER FORM

**Testing for Blood-borne Viruses (HIV, Hepatitis B, Hepatitis C viruses)**

**Medical and Nursing students only**

**Student Name:** \_\_\_\_\_ **Student ID:** \_\_\_\_\_

The student has recently been tested for blood-borne viruses to determine infectivity status

	Date of testing
HIV antibody	
Hepatitis B surface antigen (HBsAg)	
Hepatitis C antibody	

- If positive for Hepatitis B or C, further tests to determine the level of infectivity are required, including HBeAg and HBVDNA or HCVRNA respectively. Subsequent specialist referral is recommended.
- Students who know they are or who test positive for HIV, Hepatitis B and/or Hepatitis C are to be referred for appropriate personal, professional and career counselling.
- Guidelines are available from the Australian Society of HIV Medicine. Available at; [http://ashm.org.au/default2.asp?active\\_page\\_id=402](http://ashm.org.au/default2.asp?active_page_id=402)

### Immunisation Record:

The student has provided me with **either** evidence of immunity to, **or** appropriate immunisation against, the following infectious diseases (as indicated in the following table)

		YES/NO
Hepatitis B virus	anti-HBs $\geq 10$ mIU/mL <sup>1</sup> or equivalent <sup>2</sup>	
Measles/Mumps /Rubella	Documented history of at least 2 doses of MMR vaccine <u>or</u> immunity confirmed serologically or born before 1966	
Varicella	Confirmed Past history of chicken pox/shingles <u>OR</u> immunity to VZV confirmed serologically <u>or</u> documented vaccination according to NIP <sup>3</sup>	
Diphtheria/Tetanus /Pertussis	History of completed childhood vaccinations including dose at 15-17 years <u>or</u> other documented vaccination according to NIP <sup>3</sup> for students who require <ul style="list-style-type: none"> <li>• a catch-up primary course of vaccination;</li> <li>• a booster if they have not received one in last 10 yrs; or a</li> <li>• pertussis booster (dTpa) if not previously received one (as recommended for adults working with children).</li> </ul>	

1. Students who are non-responders to vaccination should undergo further vaccination as recommended in the National Immunisation Program (2008), be referred to an Infectious Diseases Physician for further management and receive appropriate personal, professional and career advice.
2. Some laboratories including the RHH report anti-HBs as “detected” or “not detected”
3. NIP: National Immunisation Program schedule (2008) in current Australian Immunisation Handbook (available on line at [www.immunise.gov.au](http://www.immunise.gov.au) )

## Infectious Disease - Health Care Provider Form

I confirm that this student has provided me with evidence satisfying the above requirements.

Where I have undertaken testing for blood-borne viruses I have provided pre and post-test counselling.

Signature:

Address or Stamp:

Name \_\_\_\_\_

Date \_\_\_\_\_

**This record is confidential and is not released without the written consent of the student.**

**Please return signed forms to the designated person within your school.**

## Health Care Provider Form continued:

### Instructions for the Student

In preparing to visit your health care provider, ensure that you have done the following: **(PLEASE TICK)**

**I have read the procedures and guidelines**

**I have checked sources of documentation (see below) and (if existing) will provide the following information for the doctor**

#### **Evidence of Hepatitis B vaccination**

Bring documentation of 2-3 doses (if you have recently left school this will most likely have been provided during adolescence in Australia<sup>2</sup>. You will still need a blood test to check for immunity but the documentation will assist the doctor to interpret the results.)

#### **Evidence of vaccinations against measles/mumps/rubella**

Bring documentation of **TWO DOSES** of measles/mumps/rubella vaccinations. (if you are a school leaver, these have most likely been provided in infancy aged 1 and 4-5 years<sup>1,3</sup>. Some people may have received a second 'catch-up' dose later in adolescence<sup>2</sup>, early adulthood<sup>3</sup>).

#### **Evidence of immunity to varicella**

Bring dates of past history of chicken pox or shingles (check with parents/care giver) and confirmation varicella zoster serology if previously done.

#### **OR**

Bring documentation of varicella vaccination (A government-funded 'catch-up' vaccination program with 2 doses of vaccine at age 12-13 has existed in Australia since November 2005 but if you are a school leaver you may well have missed this program<sup>2,3</sup>).

#### **Evidence of immunity to diphtheria/tetanus/pertussis**

Bring evidence of childhood immunisations (3 doses in infancy<sup>1,3</sup> and 2 booster doses; the last dose at age 15-17<sup>2,3</sup>).

Students are advised that sources of a documented history of vaccination in Tasmania **may** be available through Child Health Records/Book<sup>1</sup> provided to parents or through recognized immunisation providers such as the local council of the student's high school where vaccination programs may have been provided<sup>2</sup> or General Practitioner<sup>3</sup> (who may provide a record or letter confirming administration of a childhood/previous vaccination) or any relevant Immunisation Register.

**When making the appointment for the doctor, I have notified the receptionist that the appointment is for checking my immunisation status to comply with the UTAS Faculty of Health Science Infectious Disease Policy.**

## Information for Health Care Providers

**Further information:** The Health Science Infectious Disease Procedures and Guidelines are available at: <http://fcms.its.utas.edu.au/healthsci/healthsci/cpage.asp?ICpageID=469>

**Cost:** Students are responsible for the cost of the required serology testing and immunisations.

### **Required serological testing:**

The following serology is required:

- HIV antibody
- Hepatitis B virus: HBsAg\* and anti-HBs
- Hepatitis C virus: HCV antibody\*

(\*follow-up serology is recommended if positive)

Serological testing/evidence may be sought to establish immunity to the stated other infections (as indicated in the table on page 1 of the Health Care Provider Form), however the Faculty of Health Science does not prescribe these as absolute requirements and recognizes that in providing catch-up immunisation in a cost-effective manner, additional doses of vaccines to HBV, MMR, and varicella are rarely associated with significant adverse side effects in adults or in immune individuals.

### **Evidence of immunity to the stated infectious diseases:**

Different levels of evidence are required to establish immunity to the stated infectious diseases (as provided in the table on page 1 of the Health Care Provider Form).

### **Time frame for completion of the program and return of the Health Care Provider Form:**

For students who require vaccinations to meet the requirements of the program the Faculty of Health Science recognizes that, depending on the relevant vaccination schedule, there may be significant delays in returning the form. Students are asked to return the form by **NO LATER THAN the commencement of their first workplace/clinical placement.**

### **Referral:**

The following students should be referred for further assessment and/or counselling:

- Students who know they are or who test positive for HIV, Hepatitis B and/or Hepatitis C should be referred for appropriate personal, professional and career counselling.
- Persistent non-responders to Hepatitis B vaccination should be referred to an infectious diseases physician for further assessment and management including consideration for intra-dermal vaccination.
- Students who do not undertake the immunisation program should be referred to an infectious diseases or occupational health physician for advice on protecting themselves and their patients from infectious diseases.