

Occupational Health Services (OHS) Immunization and Screening Requirements

To protect our vulnerable patient population, you must meet these standards prior to your start date.

Dana-Farber paid staff:

- If you are scheduled for an in-person health screening with OHS, please bring vaccination documentation with you. If you have not previously completed the required vaccines or TB Testing, OHS will complete them at your visit. Bringing your vaccine records helps prevent delays to your start date.
- If you are scheduled for a virtual screening, you must, before your appointment, work with your healthcare provider, school clinic, or former employer to complete any missing vaccines and TB testing and submit the documentation to OHS. You are responsible for any costs associated with obtaining the missing immunization requirements.

Sponsored staff (not paid by Dana-Farber):

• Sponsored staff scheduled for a record review are responsible for completing these requirements with their own healthcare provider, agency or home institution and submit the documentation to OHS.

✓ Tuberculosis Screening

- Documentation of 2 negative TB skin tests, one within a year and the second within 3 months prior to yours start date or 1 negative TB blood test (T-Spot or QuantiFERON Gold) within 3 months prior to your start date.
- If you have had a **positive** TB skin test or a **positive** TB blood test (T-Spot or QuantiFERON Gold): written
 documentation of these results along with a <u>chest x-ray report</u> that rules out active TB must be
 provided. Documentation of treatment prescribed should also be provided.

TB testing should be completed before or on the same day that a live vaccine (MMR, Varicella) is administered, otherwise you must wait 28 days after the live vaccine is given to get tested for TB.

✓ Measles, Mumps, and Rubella Immunity

o Documentation of two MMR vaccinations, at least 28 days apart.

or

o Proof of immunity to Measles, Mumps, and Rubella by titer (blood test).

✓ Varicella (Chickenpox) Immunity (We do not accept a history of Varicella as proof of immunity.)

o Documentation of two Varicella vaccinations, at least 28 days apart.

or

o Proof of immunity to Varicella by titer (blood test).

If you are not immune to MMR or Varicella and require a vaccine, they should be administered on the same day, or at least 28 days apart.

✓ Hepatitis B Immunity Recommended (only for staff who will have contact with blood, body fluids or cells)

 Documentation of three Hepatitis B vaccinations and proof of immunity to Hepatitis B by surface antibody titer (blood test).

✓ Influenza Vaccination (Seasonal)

• The flu vaccine is required for all staff at Dana-Farber Cancer Institute annually during Flu season, typically August through March but may vary depending on Flu activity. OHS will determine compliance.

Please send your documentation to:

Email: occhealthservices@dfci.harvard.edu

Fax: 617-632-5418



OHS Immunization Summary Form- International Records

Directions: Please take this form to your health care p	rovider or Health Service for completion.
New Hire Name:	
Date of Birth:	
Health Care Provider Name (please print):	
Health Care Provider Signature:	
Address:	
Phone Number:	
TB Screening	
 a. Documentation of a negative TB blood temporary past 3 months. 	st (T-spot or Quantiferon gold preferred) within the
— · · · · · · · · · · · · · · · · · · ·	or positive blood test for TB (T-Spot or not
TB testing should be completed before or on the sam	e day that a live vaccine (such as MMR, Varicella)
is administered. Otherwise, you must wait 28 days a	fter the live vaccine to get tested for TB.
T-Spot /Q-Gold test:	CXR report:
Date:	Date:
Date.	□ № ТВ
Result:	
	- '

Measles, Mumps, and Rubella Immunity

Documentation of two MMR vaccines, at least 28 days apart $\underline{\mathbf{or}}$ proof of immunity to measles, mumps, and rubella by titer (blood test).

	Date of Vaccine # 1	Date of Vaccine # 2	Date of Titer (Blood Test)	Titer Results (POS + /NEG -)
MMR				
Measles				
Mumps				
Rubella				

Varicella (Chicken Pox) Immunity (We do not accept a history of chicken pox disease.)Documentation of two varicella vaccinations, at least 28 days apart, or proof of immunity to varicella by titer (blood test).Date of Vaccine # 1Date of Vaccine # 2Date of TiterTiter Results

	Date of Vaccine # 1	Date of Vaccine # 2	Date of Titer (Blood Test)	Titer Results (POS + /NEG -)
Varicella				

<u>Hepatitis B Vaccine Documentation</u> (only for staff who will have contact with blood, body fluids or cells) Documentation of a complete Hepatitis B series <u>and</u> a positive Hepatitis B titer (Hepatitis B surface antibody)

	Vaccine Manufacturer	Date of Vaccine # 1	Date of Vaccine # 2	Date of Vaccine # 3
Hepatitis B				

	Date of Titer (Blood Test)	Titer Results (POS + /NEG -)
Hepatitis B Surface Antibody		

Influenza Vaccination (Seasonal)

The influenza vaccine is mandatory for all staff at Dana-Farber Cancer Institute.

	Date of Vaccine
Influenza Vaccine	

COVID-19 Vaccine Required

Documentation of all COVID-19 vaccines received. OHS will determine if additional vaccination is needed based on CDC guidance.

Date of COVID-19 Vaccine	Vaccine Manufacturer
1.	
2.	
3.	
4.	
5.	
6.	

Dana-Farber Cancer Institute - Occupational Health Services

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Email: occhealthservices@dfci.harvard.edu