Loyalist College Immunization Record

The following courses **require** your immunization record so you can do placement in community facilities.

Bachelor of Science in Nursing, Care of Vulnerable Populations, Child and Youth Care, Developmental Services Worker, Early Childhood Education, Fitness and Health Promotion, General Arts and Science, Massage Therapy, Practical Nursing, Occupational Therapist Assistant and Physiotherapist Assistant, Personal Support Worker, Paramedic, Pre-Service Firefighter Education and Training, Recreation Sport and Leisure, Social Service Worker

This information can be obtained from your Public Health Unit and/ or your Family Physician. Most program-required immunizations can be completed free of charge at the Loyalist College Health Centre. Your Loyalist College Immunization Record must be cleared by the Health Centre. Please contact healthcentre@loyalistcollege.com or (613) 969-1913 ext. 2374 to make arrangements.

update

| Name: | | Course: | | |
|--------------------------|----------------------------------|-----------------------|--|-----|
| Date of Birth: | | | | |
| | • | | nad a two step test, only a one hest x-ray report (within a yea | • |
| TB#1: Date given | Date read | Result | Signature | |
| TB#2: Date given | Date read | Result | Signature | |
| Td or Adacel is requi | red every ten years. | | | |
| Date given | Signature | | | |
| MMR (measles, mu | mps, rubella) two child | dhood doses needed | . If only one, a booster is need | ed. |
| #1: Date given | Signature | | | |
| #2: Date given | Signature | . <u></u> | | |
| Additional Require | ments for Nursing /PS | SW/OTAPTA/Mas | ssage/Paramedic: | |
| Hepatitis B A copy of yo | our Hepatitis B titre | | | |
| #1 Date given | Signature | . <u></u> | | |
| #2 Date given | Signature | . | | |
| A copy of your varicella | a titre (blood work to dete | ermine if you have cl | nicken pox antibodies) | |
| If no antibodies, two do | oses of <u>Varivax</u> need to b | e given. | | |
| #1 Date given | Signature | | | |
| #2 Date given | Signature | | | |