

Placement Immunization Requirements

Last name: _____ First name: _____
Date of Birth: _____ Program: _____
Name of Placement Coordinator: _____

This placement pass needs to be filled out by a health care professional (nurse, nurse practitioner, doctor). The last section needs to be stamped ONLY when all requirements are met. Please submit this form along with all your documentation to your placement coordinator. Loyalist College Health Centre can complete this form free of charge. Please contact healthcentre@loyalistcollege.com providing your full name and date of birth to book an appointment.

Tuberculosis

Students require an annual TB skin test. Students need proof of a previously completed 2-Step TB test. If it was done over 12 months ago, student needs a 1-step TB update done in the last 12 months. If you previously had a positive TB skin test, please submit a chest X-ray completed in the last 2 years.

	Date inserted	Lot number/exp	Date read	Measurement/result
TB 1				
TB 2				
TB update				
Chest x-ray				

Signature: _____

Influenza

It is strongly suggested to get influenza vaccine every year as some placement would deny access to unvaccinated people in case of an outbreak.

Name of vaccine	Date administered	Lot number

Signature: _____

Completed by:

Provider's name and title: _____

Signature: _____

Provider's name and title: _____

Signature: _____

I hereby confirm that this student meets all immunization requirements.

Stamp: