



## IMMUNIZATION Requirements

### Process for Completing the Okanagan College Immunization Record

The completed Okanagan College Immunization Record will provide the evidence of the required immunizations. It must be submitted to the Office of the Registrar, Admissions.

The student should make an appointment with their health care provider. Take a copy of all childhood or previous immunization records with you, and have the IMMUNIZATION RECORD form completed and signed by the health care provider.

If you wish to update your Immunizations, they are available from your family physician, from community health centers, or Travel Medicine & Vaccination Clinics (<http://www.tmvc.com/>).

### Influenza Vaccines (aka flu vaccine)

Influenza vaccines are not on the Immunization Record as they are an annual vaccine that is available generally in November each year.

As part of the BC Influenza Control Program Policy introduced last year, any individual covered by the policy (including unionized and excluded employees, credentialed professionals, physicians, students, volunteers, contractors, vendors and visitors) will be required to protect against influenza by either receiving a flu shot or wearing a mask while in a patient care area during the flu season. Generally the time frame for non-immunized individuals being required to wear a mask is November through to March.

All students are responsible for obtaining and keeping proof of influenza vaccination. Failure to provide proof to your clinical teacher will mean you will be required to wear a mask all shift while in patient care areas.

### Declaration

I have read the above information and I am aware of the risks and implications to me if I choose not to receive the recommended immunizations.

Name (Print Please)

\*Please list FULL dates for immunizations where required.

**DIPHTHERIA / TETANUS** MET REQUIREMENT  
*Diphtheria & Tetanus Toxoid booster dose every 10 years or a minimum of at least once during adult life.*

Immunized  
Unknown

**POLIO** MET REQUIREMENT  
*Primary course of poliovirus (OPV or IPV) or primary immunization with inactivated poliomyelitis vaccine (IPV).  
Primary Series (3 doses) in early childhood.*

Immunized  
Unknown

**MEASLES** MET REQUIREMENT  
*Documented physician-diagnosed immunity from the*

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