Important Immunization Information for Dentistry Students

Please complete the attached immunization form and return it to the Student Wellness Hub before the deadlines specified below. Failure to submit your completed documents by the specified deadlines may result in your registration or placement being delayed or cancelled. Please ensure you begin the process as soon as possible, as some immunization requirements take time to complete.

The deadlines for your faculty/school are:

Newly admitted DMD students (Fall Term): July 31st
Newly admitted International Dental Graduates (Winter Term): September 16th
GPR, OMFS Program and Dental Electives: March 1st, unless instructed otherwise

The form can be reviewed and completed by your family physician, or a nurse at your local clinic (in Quebec: CLSC). Once you have a student ID number and have registered for at least one course you may also have your form completed by a nurse at the Student Wellness Hub. In any case, be sure to bring all your supporting immunization documentation (including your vaccination booklet, records of previous immunizations, etc.) to assist the provider.

McGill University enforces the immunization requirements prescribed by the Department of Public Health to ensure safety of both the patient and student. For any immunization requirements beyond those prescribed by the Protocole d'Immunisation du Québec (PIQ), you may have to pay for the extra vaccines and tests.

By the deadlines above, if you have completed the entire immunization form at a local clinic and it is signed by a healthcare professional, please forward it to the Student Wellness Hub for review along with any supporting documentation if required. If your form is incomplete, please forward all supporting immunization records for review. If your submission was incomplete, you will need to submit additional documentation to complete your review as it is obtained. All documents are to be submitted as a single PDF file using the submission webform.

Note the link above is the only means of communication to submit immunization documents. You are discouraged from submitting documents by e-mail for security reasons. Please keep all originals for your records.

The Student Wellness Hub will communicate your immunization status (complete or incomplete) to you and your unit. If you require the details of your immunization status (i.e. the complete form) you can obtain a copy from our Patient Portal or by completing an Authorization to Release Information. For more information on how to make an appointment with the McGill Student Wellness Hub, connect to https://www.mcgill.ca/wellness-hub/access-care

Student Wellness Hub
Student Services
3600 McTavish Street, Suite 3400 (West Wing)
Montreal, Quebec, Canada H3A 0G3

Pole bien-être étudiant
Services aux étudiants
3600 rue McTavish, Bureau 3400 (Aile Ouest)
Montréal, Québec, Canada H3A 0G3

T : +1 514-398-6017
F : +1 514-398-2559

Information on Specific Tests and Vaccines

1. **Tetanus, diphtheria and pertussis**
   - Provide dates of your childhood vaccines
   - If you do not have documentation for your childhood immunizations (booklets with dates), you must be revaccinated following the adapted schedule as outlined on the immunization form
   - No booster dose is required before the age of 50 if the primary vaccination is completed

2. **Polio**
   - Systematic vaccination of adults, including healthcare workers and interns, is not necessary in Quebec. The risk of exposure to the polio virus in North America is minimal.
   - Polio booster is not required unless the student is at increased risk of exposure to "wild" polio (e.g., those travelling to, or planning to work in areas that have wild polio or vaccine-derived polio outbreaks)

3. **Measles**

One of the following items is required:
   - Students born before 1970 are considered immune
   - Documented evidence of vaccination with two doses of measles containing vaccine, given at least a month a part starting on or after the first birthday
   - Documented history of the disease before January 1st, 1996
   - Documentation of positive measles serology** (attach results)

4. Mumps

One of the following items is required:
   - Students born before 1970 are considered immune
   - Documented evidence of vaccination with one dose of mumps containing vaccine
   - Documentation of positive mumps serology** (attach results)

5. Rubella

One of the following items is required:
   - Documented evidence of vaccination with one dose of Rubella containing vaccine
   - Documentation of positive Rubella serology** (attach results)

If serology results are negative to one or more of these 3 infections, a booster with a trivalent vaccine (MMR) is required.

Pre-test serological testing for measles, mumps and rubella is not recommended, nor is the cost covered in Quebec. Students without written proof of vaccination should be vaccinated. Post testing following vaccination is also not recommended.

6. **Varicella**

One of the following items is required:
   - A history of previous illness
   - Documented evidence of 2 doses of varicella vaccine (attach document)
   - Documentation of a positive varicella serology is required (attach document)

If you do not meet the above criteria, you must receive the vaccines (2 doses at least a month apart). No blood test is required after the vaccination. The CIQ recommends a total of 2 doses for interns and healthcare workers newly hired in the Quebec healthcare system.

7. Hepatitis B
   - Proof of vaccination: Complete series of 2-3 vaccines. If no documented proof of vaccination, proceed with the vaccination series. Serology before vaccination is not recommended nor it is covered in Quebec.
   - Serology is required if most recent dose was given in the last 1-6 months. It is <u>not required</u> if last dose of Hepatitis B vaccine was given more than 6 months ago.
   - In a case of accidental exposure to blood and/or body fluid a post exposure, evaluation is recommended.
   - Serology for Hepatitis B surface Antibody must be drawn 1 to 6 months after the last dose and show protective levels (anti-HBs ≥ 10 mIU/ml).
   - If anti-HBs is ≤ 10 mIU/ml or absent, revaccinate with a single dose AND recheck for Hepatitis B surface Antibody and antigen 1 to 2 Months post vaccination. If anti- HBs ≥ 10 mIU/ml no further action is required. If anti-HBs is ≤ 10 mIU/ml or absent continue with the second and third dose with the appropriate schedule AND recheck for Hepatitis B surface Antibody 1 to 2 months post vaccination.
   - Students found to have a chronic hepatitis B infection or to be a carrier (hepatitis B surface antigen positive - HBsAg) must consult their faculty's program coordinator.
   - Students found to be a non-converter after the second series of vaccines must consult their faculty's program coordinator.

8. Tuberculosis:

A two-step Mantoux is required ONLY for students answering YES to one of the following:

1. Born In Canada before 1976
2. Received the BCG vaccine
3. Known exposure/ contact with active tuberculosis
4. Has spent a cumulative period of 3 months or more in a country or countries with a high incidence of tuberculosis (≥30 cases/100,000 inhabitants/year). List of countries can be found at: https:// www.inspq.qc.ca/sante-voyage/guide/risques/tuberculose/situation

---

- All TST must be read 48-72 hours after administration by a trained healthcare worker. Self-reading of TST is not accepted
- The second TST is to be performed 7 days to 1 year after the first step provided there was no exposure to Mycobacterium tuberculosis during the past year.
- The reading must be recorded in millimeters of induration NOT "positive" or "negative".
- If you have a documented previous 2-step TST and have had a known exposure/contact with active tuberculosis, OR you have travelled for 3 months or more cumulative time in a country with a high incidence of tuberculosis, you will only require a 1-step TST.
- If the first test is positive or you have had a positive test in the past, do not proceed with another test. Instead, you should be referred for a chest x-ray and for a consultation with a respirologist. Be sure to include a chest x-ray and report with your forms.
- An Interferon-gamma released assay (IGRA), either QuantiFERON or T-SPOT.TB assay, performed within the year will be accepted instead of a TST.

The seasonal influenza vaccine is highly recommended if clinical placement is during the influenza season, between November and March.

Student Wellness Hub
Student Services
3600 McTavish Street, Suite 3400 (West Wing)
Montreal, Quebec, Canada H3A 0G3

Pole bien-être étudiant
Services aux étudiants
3600 rue McTavish, Bureau 3400 (Aile Ouest)
Montréal, Québec, Canada H3A 0G3

T : +1 514-398-6017
F : +1 514-398-2559

McGill | Student Wellness Hub / Pôle bien-être étudiant

Name:			
DOB:		**ID#:**	
Program:	Faculty of Dentistry		

1-2. PRIMARY SERIES DPT-POLIO

		Date
2 months	☐ Sabin ☐ Salk ☐ Other	
4 months	☐ Sabin ☐ Salk ☐ Other	
6 months	☐ Sabin ☐ Salk ☐ Other	
18 months	☐ Sabin ☐ Salk ☐ Other	
4-6 years	☐ Sabin ☐ Salk ☐ Other	
D2T5 or Tdap 14-16 years	☐	
Booster	☐	

3. MEASLES

One of the following items is required for evidence of immunity

☐ Measles Vaccine (2 doses, min. 1 mth apart)	Date: _____	Date: _____
☐ Documented history of the disease before Jan 1st 1996		
☐ Documentation of positive measles serology (attach report)		
☐ Born prior to 1970		

4. MUMPS

One of the following items is required for evidence of immunity

☐ Mumps Vaccine (1 dose)	Date: _____
☐ Documentation of positive mumps serology (attach report)	
☐ Born prior to 1970	

5. RUBELLA

One of the following items is required for evidence of immunity

☐ Rubella Vaccine (1 dose)	Date: _____
☐ Documentation of positive rubella serology (attach report)	

OR

ADAPTED VACCINATION SCHEDULE FOR STEPS 1-5

If no vaccination records are available, vaccinate according to this schedule

FIRST VISIT (NOW)		**SECOND VISIT (in 1-2 months)**		**THIRD VISIT (in 8 months)**	
VACCINE	**DATE**	**VACCINE**	**DATE**	**VACCINE**	**DATE**
TdaP		D2T5		D2T5	
MMR		MMR			

Student Wellness Hub
Student Services
3600 McTavish Street, Suite 3400 (West Wing)
Montreal, Quebec, Canada H3A 0G3

Pole bien-être étudiant
Services aux étudiants
3600 rue McTavish, Bureau 3400 (Aile Ouest)
Montréal, Québec, Canada H3A 0G3

T : +1 514-398-6017
F : +1 514-398-2559

McGill | Student Wellness Hub / Pôle bien-être étudiant

Name:			
DOB:		**ID#:**	
Program:	Faculty of Dentistry		

6. VARICELLA (CHICKEN POX)

One of the following items is required for evidence of immunity

☐ A history of previous illness	Date: _____	
☐ Documentation of positive varicella serology (attach report)		
☐ Varicella Vaccine (2 doses)	**VACCINE**	**DATE**

7. HEPATITIS B

PRIMARY VACCINATION SERIES	**VACCINE**	**DATE**
FIRST DOSE	☐ Hep B ☐ Twinrix	
SECOND DOSE	☐ Hep B ☐ Twinrix	
THIRD DOSE (if indicated)	☐ Hep B ☐ Twinrix	
SEROLOGY (if primary vaccination series completed in the last 6 months)		
Anti-HBs (attach report)	Value: _____ ☐ POS ☐ NEG	
If serology not indicated, please specify why: _____		
BOOSTER VACCINATION SERIES	**VACCINE**	**DATE**
FIRST HEP B BOOSTER		
SECOND HEP B BOOSTER		
THIRD HEP B BOOSTER		
SEROLOGY (1-2 MONTHS FOLLOWING A BOOSTER DOSE (IF APPLICABLE)		
Anti-HBs (attach report)	Value: _____ ☐ POS ☐ NEG	
Anti-HBs (attach report)	Value: _____ ☐ POS ☐ NEG	
HepB Surface Antigen	☐ POS ☐ NEG	

Student Wellness Hub
Student Services
3600 McTavish Street, Suite 3400 (West Wing)
Montreal, Quebec, Canada H3A 0G3

Pole bien-être étudiant
Services aux étudiants
3600 rue McTavish, Bureau 3400 (Aile Ouest)
Montréal, Québec, Canada H3A 0G3

T : +1 514-398-6017
F : +1 514-398-2559

McGill | Student Wellness Hub / Pôle bien-être étudiant

Name:			
DOB:		**ID#:**	
Program:	Faculty of Dentistry		

8. TWO-STEP TUBERCULOSIS SKIN TEST (TST)

A two-step Mantoux is required ONLY if YES is selected for one of the following:

Born in Canada before 1976	☐ Y ☐ N
Known exposure/contact with active tuberculosis	☐ Y ☐ N
Received the BCG vaccine (if yes, specify date: _____)	☐ Y ☐ N
Has spent a cumulative period of 3 months or more in a country or countries with a high incidence of tuberculosis (≥30 cases/100,000 inhabitants/year). List of countries can be found at: https://www.inspq.qc.ca/sante-voyage/guide/risques/tuberculose/situation.	☐ Y ☐ N

If a TST is indicated, and a two-step test is already documented then only a one-step test is required

TST Test	**Date Planted**	**Date Read (within 48-72 hours)**	**Result in mm (Induration)**
Test #1			
Test #2			
One-Step Test			

An IGRA within the last year can replace a TST

Date: _____	☐ QuantiFERON ☐ T-SPOT.TB assay	Result: _____

If the induration Is ≥ than 10 mm (or if a significant TST result is already documented) a chest x-ray and a consultation with a respirologist is required. Be sure to attach a copy of the x-ray and respirologist report to this form)

Date	Name of Specialist	Result	Period of INH Treatment

ATTESTING SIGNATURE

I hereby attest that this document has been completed to the best of my knowledge based on information and supporting documentation provided for review.

Clinician's Name: _____ Date: _____

Clinician's Signature: _____ License Number: _____

Clinic Name: _____ Clinic Phone Number: _____

Clinic Address: _____

Student Wellness Hub
Student Services
3600 McTavish Street, Suite 3400 (West Wing)
Montreal, Quebec, Canada H3A 0G3

Pole bien-être étudiant
Services aux étudiants
3600 rue McTavish, Bureau 3400 (Aile Ouest)
Montréal, Québec, Canada H3A 0G3

T : +1 514-398-6017
F : +1 514-398-2559