

Child Care Infection Prevention and Control

Pre-Employment Immunization Form for Childcare Staff

Daycare Operators should ensure that, before commencing employment, each person employed in the child care centre has an up to date immunization record. All information on the form is to be collected and kept by the employer.

NAME: _____

DATE OF BIRTH: _____ DATE OF HIRE: _____

REQUIRED IMMUNIZATIONS

TETANUS, DIPHTHERIA, PERTUSSIS (Tdap) *one adult dose followed by Td every 10 years*

DATE (Tdap): _____ DATE (Td): _____

MEASLES, MUMPS, RUBELLA (MMR) *two doses required if born in or after 1970. Adults born before 1970 can be considered immune. Recommendations to get blood work for titres.*

DATE: _____ DATE: _____

or laboratory evidence of immunity to measles, mumps, rubella (bloodwork) Lab attached

RECOMMENDED IMMUNIZATIONS

VARICELLA (CHICKENPOX) - *two doses or laboratory evidence*

DATE: _____ DATE: _____

or laboratory evidence of immunity to varicella (bloodwork) Lab attached

HEPATITIS B - *Two adult doses (given as a school based program to adolescents) OR three dose series OR lab immunity*

DATE: _____ DATE: _____ DATE: _____

or laboratory evidence of immunity to hepatitis (bloodwork) Lab attached

INFLUENZA (flu shot) - *annually*

DATE: _____ DATE: _____ DATE: _____

Signature of Employee: _____ Date: _____

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Renfrew County and District Health Unit
"Optimal Health for All in Renfrew County and District"