

Student Health Screening Form

The following form must be forwarded to Staff Health at least 1 week prior to commencement of your placement. All students are required to provide evidence of protection against the specified infectious diseases below and the vaccination for HCW requirements as per Department of Health Regulations outlined in Gippsland Southern Health Services' Staff Health Policy.

Placement will be suspended if all information is not received prior your commencement date. If you are unsure how to answer the below screening questions please contact the Education Department on (03) 5667 5502 or email education@gshs.com.au. All information provided is confidential and Education will contact you if any follow-up is required before your placement begins.

Name:	
Address:	Postcode:
DOB:	Telephone:
Allergies:	University:
Placement commencement date: Length of Placement (weeks):	

Hepatitis B Requirement:				
Documented 3 doses of Hepatitis B or combination HepA/HepB vaccination	Attach Evidence			
AND				
Documented Hepatitis B antibody levels post vaccination	Yes	No	HBsAb Level:IU/L	Attach Evidence

Measles Mumps Rubella (MMR) Requirement:				
Documented 2 doses of MMR Vaccination	Yes	No		Attach Evidence
OR				
Serological evidence of immunity	Attach Evidence			

Varicella (Chickenpox) Requirement:					
Have you had Chickenpox?	Yes	No	Unsure	Year:	Attach Evidence
OR					
Documented 2 doses of VZV Vaccination	Attach Evidence				
OR					
Serology to confirm immunity to VZV	Attach Evidence				

Influenza:					
Previous Influenza Vaccination	Yes	No	Unsure	Date:	Attach Evidence

Pertussis (Whooping Cough):					
Previous Boostrix Vaccination	Yes	No	Unsure	Date:	Attach Evidence

