



Immunisation Compliance Certificate Information

Students - Please read and follow the instruction below, present this information to your medical practitioner with your immunisation compliance certificate at every visit.

The Immunisation Compliance Certificate sets out the immunisation requirements for students and identifies acceptable evidence of immunity for each disease. The Immunisation Compliance Certificate must be completed by an immunisation provider, this can include General Practitioners (GPs) or Registered Nurses (RNs).

- Students must present the immunisation compliance certificate at each appointment to be updated. On the initial visit students should take evidence of all previous vaccinations for medical practitioner to review.
- Medical Practitioners should note **ALL** previous vaccinations on the certificate. This helps us identify where in the process the student is and allow them the appropriate time for follow-up appointments if required.
- If students are unable to produce evidence of Polio vaccinations but are certain they have received these vaccinations they can complete the [Polio Statutory Declaration](#)
- Students are to be signed as commenced if they have at least one of every vaccination or a combination of boxes ticked, and vaccinations commenced in each section.
- Forms are to be signed as complete once students have completed all vaccinations and confirmed Hepatitis B immunity.

Hepatitis B Requirements

- As per the [Australian Immunisation Handbook](#) all students are required to have a serology to confirm Hepatitis B immunity. If after a primary course (3 doses) the student has not converted a booster course is required.
- Where a booster schedule has been commenced – after the 1st vaccination a blood test is to be administered to confirm if immunity has been reached. If the student does not meet the serological levels required, they must complete the remaining 2 doses in the vaccination schedule.
- As per the [Australian Immunisation Handbook](#) vaccinations are to be administered as follows to ensure the correct serological response
 - 1st dose day 0 (day of vaccination)
 - 2nd dose 1 month after the first dose
 - 3rd dose 6 months after the first dose
 - Serology 4 weeks after 3rd dose.
- After the booster schedule if student has not converted, they are to be classed as a non sero convertor.
- Students are to be provided copies of their serology.

Acceptable evidence of immunity to specific VPDs for students

VPD	Acceptable evidence of immunity
Chickenpox (Varicella-Zoster)	Documented serological evidence of varicella antibody (IgG) <u>or</u> documented evidence of age-appropriate varicella vaccination. Confirmation of immunity post-vaccination not required.
Diphtheria Tetanus Pertussis	Documented evidence of booster dose of diphtheria/tetanus/pertussis-containing vaccine in the last 10 years. Confirmation of immunity post-vaccination not required.
Hepatitis B	Documented serological evidence of Hepatitis B surface antibody (>10mIU/ml) following completion of course of hepatitis B vaccine or documented evidence of hepatitis B core antibody. <u>Confirmation of immunity post-vaccination is required</u> for all students after completion of vaccination course. All students who have lived in a hepatitis B endemic country for at least 3 months are required to have serology including hepatitis B surface antigen prior to vaccination.
Measles Mumps Rubella	Documented serological evidence of measles/mumps/rubella antibody (IgG) <u>or</u> documented evidence of 2 measles/mumps/rubella-containing vaccines at least one month apart <u>or</u> born before 1966 <u>or</u> documented laboratory evidence of past infection. Confirmation of immunity post-vaccination not required.
Poliomyelitis	Historical evidence of at least 3 doses of polio vaccine (IPV or OPV). If documented evidence of vaccination not available, a statutory declaration stating student has had a full vaccination will be accepted. Confirmation of immunity post-vaccination not required.
Hepatitis A	Documented serological evidence of hepatitis A antibody (IgG) <u>or</u> documented evidence of completed course of hepatitis A vaccine <u>or</u> documented laboratory evidence of past infection. Confirmation of immunity post-vaccination not required.

This form ensures compliance with SA Health Immunisation for Health Care Workers in South Australia Policy Directive and must be completed by an Australian immunisation provider.

STUDENT NAME _____ STUDENT ID _____

Instructions for Practitioners: Update this Certificate at every appointment when vaccination is administered and any indicated blood test results are available for each Vaccine Preventable Disease (VPD): If confirmed by blood test, provide the student a copy of the supporting serology. If confirmed by vaccination record, record all retrospective dates, and update as subsequent doses are administered.

Disease	Date of vaccination	Vaccine given by	Immunity confirmed by (to be completed by GP)			
Diphtheria, Tetanus and Pertussis	Dose 1:		<input type="checkbox"/> Confirmed by vaccination record, booster dose in last 10 years			
Measles, Mumps and Rubella	Dose 1:		<input type="checkbox"/> All 3 confirmed by blood test result			
	Dose 2 or booster:		<input type="checkbox"/> Confirmed by Vaccination Record <input type="checkbox"/> Confirmed by birth before 1966			
Chickenpox (Varicella-Zoster)	Dose 1:		<input type="checkbox"/> Confirmed by blood test result			
	Dose 2:		<input type="checkbox"/> Confirmed by vaccination record			
Poliomyelitis	Dose 1:		<input type="checkbox"/> Confirmed by vaccination record			
	Dose 2:		<input type="checkbox"/> Confirmed by Statutory Declaration			
	Dose 3:					
Hepatitis B - Students must have a full primary course before commencing a booster course *Booster Course: If Hep B Immunity is not evident from primary Hep B course, continue with Booster course until Immunity confirmed by blood test - (>10IU/L) If Immunity is not confirmed after Booster Dose 3, then GP to indicate non responder	Hep B (Primary Course) Date	Vaccine given by	Blood test results (Primary Course)	*Booster Course Date	Vaccine given by	Blood test result (Booster Course)
	Dose 1:		Blood test Administered:	Dose 1:		Blood test Administered:
	Dose 2: (1 mos. after dose 1)		<input type="checkbox"/> Confirmed by blood test result (>10IU/L)	Dose 2: (1 mos. after dose 1)		<input type="checkbox"/> Confirmed by blood test result (>10IU/L)
	Dose 3: (6 mos. after dose 1)		<input type="checkbox"/> Not Confirmed (<10IU/L) Booster doses required	Dose 3: (2 mos. after dose 1)		<input type="checkbox"/> non-responder - no further doses recommended
Northern Territory Placements (Strongly Recommended)						
Disease	Date of vaccination	Vaccine given by	Immunity confirmed by			
Hepatitis A	Dose 1:		<input type="checkbox"/> Confirmed by blood test result			
	Dose 2:		<input type="checkbox"/> Confirmed by vaccination record			

Authorised Australian Immunisation Provider Declaration

COMMENCED
The above-named person
has commenced a
vaccination schedule for all
required VPDs listed above.
Provider No:

Practice Stamp
or Address Here

Date: _____ Print Name: _____

Signature: _____

COMPLETED
The above-named person has
acceptable evidence of immunity
to all the required VPDs listed
above.
Provider No:

Practice Stamp
or Address Here

Date: _____ Print Name: _____

Signature: _____