

Occupational Assessment Screening and Vaccination Against Specified Infectious Diseases

11.1. Appendix 1: Evidence of protection

11.1.1. Evidence for Diphtheria, Tetanus and Pertussis

Position risk category	Category A workers
Vaccination Evidence	One adult dose of diphtheria, tetanus and pertussis (dTpa) vaccine within the last 10 years.
Serology Evidence	N/A. Serology will <u>not</u> be accepted.
Other Acceptable Evidence	Nil.
Notes	dTpa booster is required 10-yearly. DO NOT use ADT vaccine .

11.1.2. Evidence for Hepatitis B

Position risk category	Category A workers
Vaccination Evidence	History of age-appropriate hepatitis B vaccination course in accordance with the Australian Immunisation Handbook.
Serology Evidence	AND Anti-HBs ≥ 10mIU/mL.
Other Acceptable Evidence	OR Documented evidence of anti-HBc, indicating past hepatitis B infection, and/or HBsAg+.
Notes	An incomplete accelerated hepatitis B vaccination schedule must not be accepted.
	A completed <u>Hepatitis B Vaccination Declaration</u> are acceptable if all attempts fail to obtain the vaccination record. The assessor must be satisfied that a reliable history has been provided and the risks of providing a false declaration or providing a verbal vaccination history based on recall must be explained.
	All workers who are fully vaccinated according to the appropriate schedule, but who have no evidence of adequate hepatitis B immunity as indicated by their serology tests (non-responders to a primary hepatitis B course) are required to provide documented evidence of their hepatitis B vaccinations and serology results. A verbal history or hepatitis B vaccination declaration must not be accepted.
	Positive HBcAb and/ or HBsAg result indicate compliance with this Policy Directive.
	A further specialist assessment is required for HBsAg+ workers who perform Exposure Prone Procedures.