

Volunteer Health Review Form Frequently Asked Questions

1. Where do I send my completed Health Review Form, and what formats are accepted?

Volunteers should submit their completed Health Review Form and proof of immunizations and testing to Occupational Health Services (OHS) via HealthReviews@lhsc.on.ca in PDF Format. Images (pictures) of forms are not accepted. Adobe has smartphone apps that can create pdfs from images that greatly improve the document's quality. More information is available on the Adobe Mobile Scanner-App.. Alternatively, you can fax your documents to 519-685-8374 or submit your form in-person by visiting the OHS offices. Offices are located at Victoria Hospital (VH) room E1-505 and University Hospital (UH) room B3-107.

2. Do I need to complete the health review requirements before my start date?

Yes. Volunteers must submit their LHSC Health Review Form, proof of required immunizations and immunity, and Tuberculosis (TB) Screening **prior** to their start date. Therefore, it is advised that the health review process be started as soon as possible to complete any outstanding requirements.

3. What happens if I am missing immunizations, proof of immunity or TB skin tests, or do not submit a Health Review Form prior to my start date?

You will not be cleared to start volunteering at LHSC until all of the requirements outlined on the Health Review Form are completed, and proof of these is submitted. Your start date may be delayed to provide time to complete your outstanding requirements.

4. How will I know if I am missing requirements on my Health Review Form?

An Occupational Health Nurse will review your Health Review Form and contact you if there are any outstanding requirements. Once you have submitted all the required documentation, you and Volunteer Services will receive an email from Occupational Health Services (OHS) indicating you are cleared.

5. Where can I obtain documentation of my previous immunizations, proof of immunity and TB skin test results?

Immunization records, proof of immunity and results of TB skin tests are available from your primary care provider (physician or nurse practitioner), local public health unit, universities and college health services, immigration records, and occupational health services at a previous employer.

6. Where can I have immunizations, serology testing for proof of immunity, or a TB skin test done before my start date?

Your primary care provider (physician or nurse practitioner), community clinics, local public health units, student health centers at educational institutions (i.e. college or university), occupational health services at your current place of employment/placement and OHS at LHSC are all potential options where immunizations, serology and TB skin tests may be accessed. We encourage volunteers to book an appointment with Occupational Health at LHSC. Contact one of the OHS offices to inquire about this option as soon as possible.

7. Do you accept the combined MMRV vaccine (e.g. Proquad)?

If MMR and Varicella vaccines are both required, these must be administered as separate vaccine doses, as the combined MMRV vaccine is not valid for individuals over the age of 13 years and will not be accepted.



8. What is a TB skin test and why do I need one?

A Tuberculosis (TB) skin test is a standard screening test to check for previous exposure to tuberculosis, an infection that mainly affects the lungs and can be transmitted in healthcare settings. In Ontario, hospitals require this test for staff to ensure both patient and employee safety and to prevent the spread of TB. If you are employed in a hospital or healthcare facility, the TB skin test is an important part of ensuring a healthy, safe environment for everyone.

9. How is the TB skin test performed?

A TB skin test, also called the Mantoux test, checks if someone has been exposed to tuberculosis. The test looks for an immune response to the TB bacteria. A small amount of a substance derived from the TB bacteria is injected just under the skin on your forearm. After 48 to 72 hours, you return to have the site checked for a reaction (a raised, red bump). The size of the bump is measured, and a larger bump usually means you've been exposed to the TB bacteria, either from past infection or vaccination. A bump greater than 10mm is considered positive, but a bump greater than 5mm will be considered positive if you meet certain criteria. This includes:

- HIV infection
- Contact with infectious TB in the past 2 years
- Fibronodular disease on chest x-ray
- Organ transplant
- TNF alpha inhibitors
- Treatment with immunosuppressive drugs (equivalent to 15 mg/day of Prednisone for 1 month or more)

10. What's involved in a 2 step TB Skin Test?

Two-Step TB Skin Test is a series of 2 separate TB skin tests administered at least 1 week, and no more than 1 year apart. Both TB skin tests need to be read 48-72 hours after being administered by a qualified professional and documented to reflect the level of induration (bump or firm swelling). In total, 4 visits to a health care provider are required to complete the two-step TB skin test. The minimum interval that a 2 step TB skin test can be completed is 9 days. All staff, regardless of their role at LHSC, are required to have a 2 step TB skin test.

11. Do I need an annual (1 step) TB skin test if I have already had a 2 step?

Maybe. If the two-step has been completed more than 1 year ago, then an annual (1-step) is also required.

12. I had a chest X-ray and it was normal. Do I still need a TB skin Test?

Yes. In hospitals, TB skin tests are used for surveillance purposes and to identify cases of Latent TB Infection (LTBI), whereas chest X-rays are used to rule out active or previous TB infection. LTBI can be activated by many factors, or could stay silent (latent) life-long and therefore would not appear on an X-ray. TB skin tests are the cornerstone of hospital TB surveillance. Without knowing each person's baseline TB skin test status, it is impossible to know if, following an exposure, the person was exposed at LHSC.

13. I had BCG vaccination as a child. Should I still get a TB skin test done?

Yes. BCG vaccination is not a contraindication to the TB skin Test. BCG vaccination given before the age of 2 is an unlikely explanation for a positive TB skin test in adulthood, since immunity from BCG vaccination wains after about 10 years. Therefore, a TB skin test is still needed to screen for latent or active Tuberculosis infection.

14. My TB Skin test is positive and I am told I need to have a chest X-ray. I had a chest X-ray done for immigration purposes a few years ago. Do I need another one?

The chest x-ray must be completed **after** the TB skin test was read. Therefore, if your positive TB skin test was completed after the immigration chest x-ray, then another chest X-ray is required.



15. I had a positive TB skin test in the past. Do I need another one?

No. Once you have had one positive TB skin test, you should avoid having another one in the future. There are two reasons for this: to prevent having a severe blistering reaction; and once positive, always positive, therefore there is no value in completing another one. You are required to submit proof of your previously positive TB skin test.

16. My TB skin test is positive. Is there anything else I need to do?

Yes. All LHSC staff and volunteers who have a history of a positive TB skin test must complete **Section C: Tuberculosis Questionnaire** of the Health Review Form. A nurse practitioner will review the TB Questionnaire and your chest X-ray and determine if any other steps need to be taken to clear you for volunteering related to TB. Once this step is completed, a nurse practitioner will schedule a health teaching appointment with you to review.

17. I had chicken pox as a child. Do I still need to have 2 vaccinations for varicella?

Volunteers who have a history of chicken pox may be immune to varicella. However, a serology test is required to demonstrate immunity. If not immune, two varicella vaccinations given 4 weeks apart are required.

18. My serology tests show that I am immune to measles and mumps but not Rubella. How do I receive vaccination for Rubella?

Typically, Measles, Mumps & Rubella are given together as MMR. If you are immune to one or two components of MMR, receiving another MMR is safe and often provided since it is challenging to obtain measles, mumps and rubella as individual vaccines.

19. I have a latex allergy. What steps do I need to take to ensure my safety while volunteering? The first step is to add this information to your health review form in **Section A: Health History**. An Occupational Health Nurse will follow up with you to gather more information about your allergy and explain the accountabilities of LHSC, your leader, and you as the volunteer regarding avoiding latex in the workplace.

20. This is all very confusing. Can I talk to someone for assistance with my Health Review Form?

Of course! You can speak with an Occupational Health Nurse Monday to Friday 8 am to 4 pm by contacting one of the OHS offices via telephone.

Victoria Hospital: 519-685-8500 Extension: 52286
University Hospital: 519-685-8500 Extension: 33201