

CENTRAL AID AGENCY

Vaccination Requirements for Personnel Regulation 12.3

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Unclassified	
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Description

Getting and maintaining vaccination against disease is strongly recommended for all personnel, but is only required for personnel that are deemed especially high risk for exposure, or that regularly operate in conditions away from reliable medical care. Some vaccines are required regardless of assignment, others may be required only if currently serving in or deploying to areas where the disease is prevalent. Personnel that are required to get and maintain vaccination include:

Medical Providers – All medical personnel engaged in direct patient care, or that interact with patients, and are recognized by and affiliated to the C.A.A. as medical personnel with a current recognized medical certification (Emergency Medical Responder (NREMT EMR) or higher).

Certain Deployable Personnel – Personnel that belong to units that are Nationally or Internationally deployable; or assigned to units that operate in areas where a disease is common.

Proof of Vaccination

Proof of vaccination can be submitted by a photo or scanned copy of a vaccine card, vaccine record, or receipt. The card, record, or receipt must contain the name/type of vaccine, and the date of administration. Vaccines that exist in a series (require more than one dose, or have boosters) must have proof of completion of the series. Personnel who are in the midst of completing a vaccine series should say so when submitting proof of vaccination. The unit Chain of Command and/or personnel admin is responsible for maintaining records of vaccination in official agency personnel files.

Vaccination Exemption – Personnel may be granted exemption from vaccination only when underlying conditions prevent vaccination. Proof of an underlying condition must be provided from a legitimate medical source, such as a primary care doctor, specialist, or medical facility; and must describe in detail the condition that prevents vaccination.

Vaccination Alternatives – Medication and natural immunity may be a suitable alternative to vaccination in specific cases where medications or immunity tests are available, reliable, and accurate; and these alternatives have been proven to be at least as effective as vaccination. Vaccination alternatives must be specifically authorized.

Falsifying Medical Records – Personnel that are found to have falsified medical records, or submitted falsified records, will face disciplinary action and may be liable for additional civil and criminal processes.

Preference – Preference for assignments will be given to personnel who have completed and submitted proof of vaccination, especially in cases where a vaccine is recommended but not required.

Required Vaccines (Required regardless of assignment)		
Vaccine	Recommendations in Brief	Who Needs It
Hepatitis B	<p>If you don't have documented evidence of a complete hepB vaccine series, or if you don't have a blood test that shows you are immune to hepatitis B (i.e., no serologic evidence of immunity or prior vaccination) then you should</p> <ul style="list-style-type: none"> • Get a 3-dose series of Recombivax HB or Engerix-B (dose #1 now, #2 in 1 month, #3 approximately 5 months after #2) or a 2-dose series of Heplisav-B, with the doses separated by at least 4 weeks. • Get an anti-HBs serologic test 1-2 months after the final dose. 	<p style="text-align: center;"><u>Required</u> for Medical Providers</p> <p style="text-align: center;"><u>Required</u> for Certain Deployable Personnel</p>
Flu (Influenza)	Get 1 dose of Influenza vaccine annually.	<p style="text-align: center;"><u>Required</u> for Medical Providers</p> <p style="text-align: center;"><u>Recommended</u> for Certain Deployable Personnel</p>
MMR (Measles, Mumps, & Rubella)	<p>If you were born in 1957 or later and have not had the MMR vaccine, or if you don't have a blood test that shows you are immune to measles or mumps (i.e., no serologic evidence of immunity or prior vaccination), get 2 doses of MMR (1 dose now and the 2nd dose at least 28 days later).</p> <p>If you were born in 1957 or later and have not had the MMR vaccine, or if you don't have a blood test that shows you are immune to rubella, only 1 dose of MMR is recommended. However, you may end up receiving 2 doses, because the rubella component is in the combination vaccine with measles and mumps.</p>	<p style="text-align: center;"><u>Required</u> for Medical Providers</p> <p style="text-align: center;"><u>Recommended</u> for Certain Deployable Personnel</p>
Varicella (Chickenpox)	If you have not had chickenpox (varicella), if you haven't had varicella vaccine, or if you don't have a blood test that shows you are immune to varicella (i.e., no serologic evidence of immunity or prior vaccination) get 2 doses of varicella vaccine, 4 weeks apart.	<p style="text-align: center;"><u>Required</u> for Medical Providers</p> <p style="text-align: center;"><u>Recommended</u> for Certain Deployable Personnel</p>

Tdap (Tetanus, Diphtheria, Pertussis)	<p>Get a one-time dose of Tdap as soon as possible if you have not received Tdap previously (regardless of when previous dose of Td was received). Get either a Td or Tdap booster shot every 10 years thereafter.</p> <p>Pregnant Health Care Workers need to get a dose of Tdap during each pregnancy.</p>	<p>Required for Medical Providers</p> <p>Required for Certain Deployable Personnel</p>
COVID-19	<p>The full series of any fully FDA approved COVID-19 vaccine is preferred. However the full series of any vaccine authorized under FDA Emergency Use Authorization is also accepted. Booster may be required for Certain Deployable Personnel prior to deployment, if longer than 6 months from completing original vaccine series.</p>	<p>Required for Medical Providers</p> <p>Required for Certain Deployable Personnel</p>

<p align="center">Assignment-Specific Vaccines (May be required depending on specific assignment)</p>		
Vaccine	Recommendations in Brief	Current Status
Hepatitis A	Vaccine will take at least one to two weeks to provide substantial immunity.	Required for any personnel deploying outside the Continental United States
Typhoid	One dose is recommended at least 2 weeks before travel. Repeated doses are recommended every 2 years for people who remain at risk. Live typhoid vaccine is administered orally (by mouth). It may be given to people 6 years and older.	Required for any personnel deploying to areas with known outbreaks or where outbreaks are common
Cholera	Vaxchora® has been reported to reduce the chance of severe diarrhea in people by 90% at 10 days after vaccination and by 80% at 3 months after vaccination. The safety and effectiveness of Vaxchora® in pregnant or breastfeeding women is not yet known, and it is also not known how long protection lasts beyond 3 – 6 months after getting the vaccine. Side effects from Vaxchora® are uncommon and may include tiredness, headache, abdominal pain, nausea and vomiting, lack of appetite, and diarrhea.	Required for any personnel deploying to areas with known outbreaks or where outbreaks are common

<p>Meningococcal</p>	<p>MenACWY vaccine for adults is recommended if they:</p> <ul style="list-style-type: none"> • Have a rare type of immune disorder called complement component deficiency • Are taking a type of medicine called a complement inhibitor (for example, Soliris® or Ultomiris®) • Have a damaged spleen or their spleen has been removed • Have HIV • Are a microbiologist who is routinely exposed to Neisseria meningitidis • Are traveling to or residing in countries in which the disease is common • Are part of a population identified to be at increased risk because of a serogroup A, C, W, or Y meningococcal disease outbreak <p>MenB vaccine for adults is recommended if they:</p> <ul style="list-style-type: none"> • Have a rare type of immune disorder called complement component deficiency • Are taking a type of medicine called a complement inhibitor (for example, Soliris® or Ultomiris®) • Have a damaged spleen or their spleen has been removed • Are a microbiologist who is routinely exposed to Neisseria meningitidis • Are part of a population identified to be at increased risk because of a serogroup B meningococcal disease outbreak <p>Talk to your clinician to find out if, and when, you will need MenACWY or MenB booster shots.</p>	<p>Required for any personnel deploying to areas with known outbreaks or where outbreaks are common</p>
<p>Rabies Series</p>	<p>(the full series is required for protection). Persons who are exposed to potentially rabid animals should be evaluated and receive standard post-exposure prophylaxis, as clinically appropriate.</p>	<p>Required for any personnel deploying to areas with known outbreaks or where outbreaks are common</p>
<p>Other vaccines as determined by operational environment</p>	<p>Areas with specific disease outbreaks or where outbreaks of specific diseases are common (such as Ebola, malaria, etc.) may require additional vaccination and/or medication.</p>	<p>Required for any personnel deploying to areas with known outbreaks or where outbreaks are common</p>