# Instructions and directions for infection control in Okayama University Hospital

To visit Okayama University Hospital, exchange student must submit his/her certificate of infection control (with doctor's signature) to satisfy the requirements (1~4) as directed in "The instructions and directions for infection control in Okayama University Hospital". If the following requirements are not satisfied, our hospital may limit the authorization to enter specific areas of the hospital facilities or rescind the permission to accept the student.  $\diamond$  Please read this instruction carefully and submit (Form 1) with required additional documents as follows:

### 1. Pediatric viral infections (measles, mumps, varicella and rubella)

 $\rightarrow$  Proof of the past vaccination history more than 2 times after 1-year of age:

- Submission of vaccination record (copy of MCH handbook\*, certificate of vaccination w/ doctor's signature, etc... which include date/year of vaccination) of 4 childhood viral disease (measles, mumps, varicella and rubella) is required.
- If a visitor submits a copy of his/her MCH handbook which is stated in neither Japanese nor English, submission of translation (English or Japanese) prepared by university or medical staffs is required.
- If a visitor had only one dose of vaccination, he/she must receive ONE MORE DOSE of vaccination and submit the record.
- Please refer to the flow chart for infection control of pediatric viral infections (Annex 1).
- If a visitor has vaccine allergy, doctor's certificate might help him/her to be exempted from having vaccination. In this case, please contact us ASAP.

\*Note: MCH handbook: Maternal and child health handbook

## 2. Hepatitis B

- $\rightarrow$  Proof of 1 series\* of previous vaccination or having POSITIVE immunity for HBV:
- Submission of vaccination record or result of antibody test is required.
- A visitor with NEGATIVE antibody titer must complete 1 series of vaccination (total 3 doses) prior to his/her visit. For the detail, please refer to the flow chart for infection control of Hepatitis B infections (Annex 2).
- If a visitor has vaccine allergy, doctor's certificate might help him/her to be exempted from having vaccination. In this case, please contact us ASAP.

\*Note: 1 series of vaccination (3 dose) must be usually done at 0, 1 and 6 months.

### 3. Tuberculosis

→ Proof of NOT having tuberculosis:

- Submission of the following 2 points are required (Annex 3).
  - 1)History of infection and treatment of tuberculosis
  - 2) Result of blood test (IGRA test: either T-spot®.TB test or QuantiFERON®-TB test)
- PPD Skin Test (Tuberculosis Test) is not accepted. If it is difficult to take IGRA test in your country, please make early contact with us.

(1) History of tuberculosis

- None→No problem
- Has past history → Treatment history will be verified, and the presence of active tuberculosis must be ruled out (medical certificate must be issued )

#### (2) IGRA (QFT or T-spot)

Essential principle: Performed at his/her local place

- (a) When testing was performed at his/her local place
  - Negative → No problem
  - · Positive  $\rightarrow$  Detailed testing required
    - < Detailed testing in the event that the IGRA is positive >
      - 1 Chest CT
      - ② Sputum acid-fast bacillus smear (3 times)
        - (PCR for detection of Mycobacterium tuberculosis: once)
          - Medical certificate must be issued by a physician
- (b) When testing cannot be performed at his/her local place
  - An IGRA will be verified upon arrival in Japan (until the results are obtained, the trainee must not make any contact with patients) If the aforementioned IGRA is positive, detailed testing will performed.

#### 4. Influenza

→Proof of having flu shot\*: 2 Submission of the proof of vaccination (date of vaccination, doctor's signature) is required

\*Note: This is required only to visitors from October 1st through the end of February.