

## Rabies Vaccination Requirement for Fish & Wildlife Students entering Sept.'12 or Jan.'13

Dear Incoming Student:

Your chosen program includes experience that places you at increased risk of exposure to Rabies i.e handling mammal carcasses, so for health and safety reasons it is a **mandatory requirement** of this program that you show proof of a protective Rabies antibody level (a blood test) measured after April 20/13. You must then maintain this protective level.

The cost is approx. \$660 (subject to change). A portion of the cost of the vaccination is covered by the Student Health Plan for students who have been accepted full-time into the Fish & Wildlife Program. Alternatively, some private health insurance plans do provide coverage. **The Student Health Plan coverage starts after the commencement of your program and is for the full year.**

There are 2 options for obtaining your rabies vaccination (a series of 3 doses over 4 weeks).

### Option 1:

You can obtain vaccination through your family physician/walk-in-clinic and your local pharmacy.

Two types of Rabies vaccine are approved for use in Canada: Rabavert DIN 02267667  
and Imovax Rabies DIN 01908286.

You will need a physician's prescription for 3 doses of vaccine; take this form with you to explain your program requirements.

- Have your physician complete the form on the next page (Rabies Immunization & Titre Record).
- The Rabies antibody level (measured after April 20/13), can be completed through the Frost Student Health Office.
- Mail, Fax or deliver the completed form to: Betty McNeely, RN, Student Health Services,  
Frost Campus, Fleming College, Box 8000, Lindsay, ON  
K9V 5E6

Or Fax to: 1-705-878-9316

### Option 2:

Vaccination will be offered at Student Health Services, Rm 254. The 'Mandatory Rabies Session' is scheduled for the first week of school and **must** be completed prior to receiving vaccination through the Student Health Office. No obligation is incurred by attending. Vaccine clinics are scheduled for Nov.'12.

**Proof of a protective level of Rabies antibodies ('Rabies Titre' blood test) is to be measured after April 20/13.**

**If you are entering 2<sup>nd</sup> or 3<sup>rd</sup> year, proof of a protective titre is to be measured after April 20/12. If titre confirmation is received after July 22/12, there may be an availability issue with your courses due to start up registration processes.**

**As a Fish and Wildlife student you must maintain a protective level while in the Program by repeating your titre every 6 or 12 months, as indicated by your antibody level. You will not be allowed to continue in the courses requiring Rabies antibody protection if you do not meet this requirement.**



For more information, contact Student Health Services @ 1-866-353-6464 Ext. 3232,  
or the Fish and Wildlife Coordinator @ 1-866-353-6464, Ext. 3210 or email [davwood@flemingc.on.ca](mailto:davwood@flemingc.on.ca)



## RABIES IMMUNIZATION & TITRE RECORD

(for Fish and Wildlife program students)

**Student's Name:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_  
**Mailing Address:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_  
**Program: Fish & Wildlife** **Start date:** \_\_\_\_\_ **Student ID # :** \_\_\_\_\_  
(Month / Year)

The Fish and Wildlife program includes experience that places students at increased risk of exposure to Rabies i.e handling mammal carcasses, so for health and safety reasons it is a **mandatory requirement** of this program that they show proof of a protective Rabies antibody level after April 20/13; for those entering 2<sup>nd</sup> or 3<sup>rd</sup> year, after April 20/12. All must maintain a protective level for the duration of their program.

	Date Given	Vaccine Name	Signature
Day 0			
Day 7			
Day 21 or 28 <small>(Rabavert can be given @ day 21 or 28)</small>			
Booster <small>(if required to acquire a protective titre)</small>			

I, \_\_\_\_\_, declare this to be verification of the immunization of:  
 \_\_\_\_\_  
 Physician/Nurse's Name



**Clinic Stamp:**

\_\_\_\_\_  
 Student's Name



<b>Date of Rabies Titre:</b> <small>-to be measured after April 20/13</small> _____	<b>Titre Results:</b> _____ IU/ml <small>(An adequate response after immunization, is &gt; or = 0.5 IU/ml)</small> _____ <small>Signature of verifying Health Professional.</small>	<b>Next Titre Due:</b> _____ <small>* _____</small> <b>Recommend:</b> _____ <b>Client Advised:</b> _____ <small>( Date / Signature )</small>
<b>Date of Rabies Titre:</b> <small>( 2-4 wks. after a booster )</small> _____	<b>Titre Results:</b> _____ IU/ml <small>(An adequate response after immunization, is &gt; or = 0.5 IU/ml)</small> _____ <small>Signature of verifying Health Professional.</small>	<b>Next Titre Due:</b> _____ <small>* _____</small> <b>Recommend:</b> _____ <b>Client Advised:</b> _____ <small>( Date / Signature )</small>
<b>Date of Rabies Titre:</b> _____	<b>Titre Results:</b> _____ IU/ml <small>(An adequate response after immunization, is &gt; or = 0.5 IU/ml)</small> _____ <small>Signature of verifying Health Professional.</small>	<b>Next Titre Due:</b> _____ <small>* _____</small> <b>Recommend:</b> _____ <b>Client Advised:</b> _____ <small>( Date / Signature )</small>

**\* Current F & W students should repeat Rabies Titre 2 ½ months prior to due date to allow time for a booster, if needed.**

### CONSENT FOR RELEASE OF INFORMATION:

I understand and agree that my Rabies immunization status will be released to my program instructors, the departments responsible for access to the College labs, and the Public Health Dept., as required.

**It is the responsibility of the individual to maintain a protective Rabies antibody level while in the Fish and Wildlife Program.**

I hereby agree to be informed via my Fleming Email Address of my Rabies immunization/antibody status.

**Signature of Student:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Mail, Fax or deliver the completed form to: Betty McNeely, RN, Frost Campus, Student Health Services,  
 Fleming College, Box 8000, Lindsay, ON K9V 5E6  
 Or Fax to: 1-705-878-9316