



## INFLUENZA VACCINATION EXEMPTION REQUEST PROCESS AND FORM

The University of Toledo Medical Center (UTMC) requires all associates, students, contracted employees, volunteers, Licensed Independent Practitioners and faculty to receive an annual influenza (flu) vaccination during the “flu season” as defined by UTMC. Refer to the Policy #3364-109-EH-603, Immunization, Healthcare Workers for policy language and requirements for Influenza Vaccination. **You may request an exemption to this requirement for one of the following reasons:**

1. The Influenza Vaccination is medically contraindicated for you, or
2. You sincerely hold a religious belief that prohibits vaccination.

**If you are granted an exemption, you will not be required to be vaccinated. Under the direction of the Infection Control Committee, you will be required to take other measures to reduce the risk of flu transmission during the designated flu season. This will include being required to wear a surgical mask while performing your duties.**

To request an exemption, you must complete and submit the appropriate **“Exemption for Declination of Influenza Vaccine Administration Form”** along with all supporting documentation to the Infection Prevention Department as soon as possible, **but no later than the end of the calendar day on November 15, 2017 (23:59).**

### EXEMPTION BASED UPON MEDICAL CONTRAINDICATION

If an influenza vaccination is medically contraindicated due to a known medical condition, you must submit a completed **Request for Medical Exemption Form**, along with a completed **Medical Exemption Request Form Part B**, signed by your primary healthcare provider, describing the nature, duration, and severity of your medical condition, and an explanation as to why your condition prevents you from receiving the flu vaccine; alternatively, submit a completed Request for Exemption for Influenza Vaccine Administration Form, along with medical documentation that supports the rationale for granting the exemption (i.e., results of an allergy test, etc.). If necessary, you may be asked for additional information. **Please note: Egg – Free vaccine is available, therefore, allergy to Egg/Egg products will not be accepted as a medically justified exemption.**

### EXEMPTION ON THE BASIS OF RELIGIOUS BELIEF

If you are seeking an exemption on the basis of your religious practices, you must submit the completed **Request for Religious Exemption Form**. You must also submit a statement from your religious leader or spiritual advisor (minister, Imam or other religious leader), a formal statement published by a religious body, or your own statement describing the religious belief or practice that prevents you from receiving the flu vaccine. Any other information you believe demonstrates your sincerely held religious belief should also be submitted at this time.

**RETURN ALL REQUIRED FORMS AND SUPPORTING MEDICAL OR RELIGIOUS DOCUMENTATION TO THE DESIGNATED OFFICE NO LATER THAN THE END OF THE CALANDAR DAY ON NOVEMBER 15, 2017 (23:59).** Please note: Unless new evidence is presented to the review committee, exemption decisions are final; failure to comply with the committee decision will result in disciplinary action.

**Send completed Request for Exemption, along with supporting evidence/documentation to: Infection Prevention Dept., Dowling Hall Room 2102, Mail Stop 1103 or fax to: 419-383-3124**

Note: Exemption to Influenza Vaccination Requests will be reviewed by one of two expert committees: the **Medical Exemption Committee** or the **Religious Exemption Committee**, all decisions are final.