



UNIVERSITY of MARYLAND
MEDICAL CENTER

University of Maryland Medical Center
Volunteer Screening Form – Volunteer Services

Volunteer name: _____

Department: _____ Date: _____

Section 1: Medical History

By signing this statement, I am certifying that to the best of my knowledge, I have 1) no long-term medical or psychological condition or 2) any other reason that might prevent me from safely working as a volunteer.

Volunteer signature _____

Or

I am under a doctor’s or therapist’s care for a long-term medical or psychological condition, and have provided a letter to the volunteer office, from him/her indicating that I can safely and reliably work as a volunteer.

Volunteer signature _____

Volunteer Services Representative _____

Section 2: Vaccine and screening required for all volunteers – to be completed by Volunteer Services:

1. Measles, Mumps and Rubella: Has either:
 - Documentation of 2-shot vaccine series, or
 - Titer results for Measles, Mumps and Rubella showing immunity

2. Varicella (chickenpox): Has either:
 - Documentation of 2-shot vaccine series, or
 - Titer results for Varicella showing immunity

3. Tdap, Adult dose (Tetanus, Diptheria and Pertussis) applicable only if working in high risk area: Mother Baby Unit, OBGyn Clinic, General Peds, PICU, NICU, Pediatric ED
 - Show evidence of Tdap vaccination
 - Signed Tdap Declination form

4. Tuberculosis:
 - Previous positive TB skin test in past, requires both
 - Completion of TB Screening Questionnaire (reviewed by EHS)
 - Report of negative chest x-ray from time of conversion or later (radiology report or physician’s letter) UMMC EHS does not provide services for x-rays.
 - Referred to EHS for TB skin test or TB questionnaire
 - Evidence of negative TB skin testing (step one)
 - Evidence of negative TB skin testing (step two – can occur 1 – 3 weeks after step 1 placement)

Section 3: Additional requirements for clinical volunteers only. Clinical areas include: All inpatient units and ICU's, Psychiatry units, Emergency Departments, Bloodmobile and Pathology.

Hepatitis B:

- Documentation of 3-shot vaccine series in past, or
- documented immunity by titers (if > 18, EHS will draw titers) or physician statement,
- or
- Referred to private physician to consider vaccination. Information on Hepatitis B vaccine provided, or
- Signed Hepatitis B Declination form

Section 4: Flu Vaccination (10/1 – 3/31):

All volunteers over age 18 working in the Medical Center between October 1 - March 31, must comply with the UMMC Seasonal Flu vaccination policy (HRM-114). The policy indicates that volunteers are required to be vaccinated annually against influenza unless there is a medical reason or a religious reason for declining flu vaccination. Declination of flu vaccination occurs on the UMMC Flu-Free Zone website available on the UMMC Intranet.

The acceptable medical reasons for declining vaccination are: allergy to eggs, allergy to vaccine or vaccine component or history of Guillain-Barre Syndrome. A medical contraindication form must be completed by a treating physician to verify a medical declination. A religious affidavit form or a letter from Religious Leader (on Letterhead paper) must be completed for a religious declination. Both forms are available from the Volunteer services office or on the UMMC Intranet.

Flu vaccination is provided to volunteers free of charge by UMMC Employee Health Services. If a volunteer has been vaccinated elsewhere, they must decline vaccination using the UMMC Flu-Free Zone website and submit proof of vaccination.

Two steps for declination:

1. Go to the Flu-Free Zone website, register, create a login and decline for one of the reasons listed.
2. Submit documentation by scanning and uploading to the website or fax to 410-630-7460.

- Requests free flu vaccination from UMMC EHS (must be 18 years or older)
- Documentation of flu vaccination from source other than UMMC EHS, completed online declination & submitted proof via scan to website or fax to 410-630-7460.
- Medical contraindication, completed online declination & submitted proof via scan to website or fax to 410-630-7460.
- Religious objection, completed online declination & submitted affidavit via scan to website or fax to 410-630-7460.

DO NOT SIGN BELOW THIS LINE. FOR VOLUNTEER SERVICES.

To be completed by volunteer services representative.

Form reviewed by:

Signature/Name

Date