Influenza (flu) is a significant public health issue. For vaccine-preventable diseases such as influenza, the most effective way to reduce transmission is immunization. According to the Centers for Disease Control Advisory Committee on Immunization Practices, everyone six months of age and older should get an influenza vaccine every season, with rare exception.

This policy is intended to maximize influenza vaccination rates among all faculty, staff, trainees and students of Washington University, as well as non-employed personnel who provide services on-site, with the goal of protecting patients, employees, students and others affiliated with the University and the broader community from influenza infection. This policy is inclusive of all faculty, staff and trainees.

Policy

As a condition of employment, enrollment and/or access to Washington University facilities, all Washington University faculty, staff, trainees (including postdocs, residents and fellows) and students, who are working or studying on campus or any other Washington University work location for any length of time, must receive an annual influenza vaccination by the annual deadline, unless granted an exemption for medical contraindications or religious beliefs. All other Washington University faculty, staff, trainees are strongly encouraged to receive an influenza vaccination. The deadline for vaccinations will be announced on an annual basis dependent upon community conditions. Individuals who assume positions after the annual deadline but before March 31 (or a later date as determined by Occupational Health Services/Student Health Services) will be required to meet the standard stated above or to be granted an exemption within 10 days of commencing such roles. These standards also apply to independent contractors, temporary agency personnel, non-appointees, volunteers, and vendors.

Influenza vaccination will be provided free of charge to all University faculty, staff, trainees and students. Those who obtain influenza vaccination through other providers will be required to provide documentation of vaccination that is acceptable to the University in its sole discretion.

In advance of the annual onset of influenza season and when the most current vaccination recommendations are published by the Centers for Disease Control and Prevention, the University will inform personnel about (1) vaccination requirements; (2) dates when vaccination is available; (3) procedures for receiving vaccination; (4) procedures for submitting written documentation of vaccination obtained outside of the University; (5) procedures for requesting an exemption; and (6) consequences of failing to obtain vaccination.

For safety reasons, individuals covered by this policy who contract influenza will be expected to remain home.

Supervisors and managers are to ensure that all personnel meet the standard stated above unless an exemption has been granted. In particular, supervisors and managers are responsible for
ensuring that any faculty, staff, trainees and students who report to campus for any length of time have received their required influenza vaccination and this has been appropriately reported.

This policy is not intended to cover non-affiliated visitors whose presence on campus is only incidental.

**Exemptions**

**Medical:** Exemptions to mandatory vaccination may be granted based on certain medical contraindications, including history or documented test indications of severe allergy to the vaccine or its components and history of Guillain-Barré syndrome. Individuals seeking a medical exemption must submit an exemption request form and documentation of medical contraindications (see Appendix 1) by deadline. Unless otherwise determined by the University, medical exemptions are valid only for the flu season in which they are granted. If individuals who have received a medical exemption subsequently choose to receive the vaccination, they must provide acceptable medical certification before receiving vaccination from the University.

**Religious:** Exemptions to mandatory vaccination may be granted based on sincerely held religious beliefs, practices or observances. Individuals seeking a religious exemption must submit an exemption request form and any requested documentation (see Appendix 2) by deadline. Unless otherwise determined by the University, religious exemptions are valid only for the flu season in which they are granted.

**Infection control procedures:** For the safety of patients and others during influenza season, individuals who are granted an exemption may be required to wear a surgical or isolation mask on campus and may be denied access to certain areas.

**Denial of exemption:** In certain circumstances, it may be necessary to deny a requested exemption where performance of the individual’s duties without vaccination would pose a risk to others, an undue hardship or require substantial alterations to essential job or program requirements.

**Compliance**

Individuals who fail to obtain an influenza vaccination or exemption by the announced deadline may be subject to an unpaid suspension or academic suspension for a period of up to 45 days and/or a suspension of their ability to access Washington University facilities.

If an influenza vaccination or exemption has not been obtained by the end of the 45-day period, or by the deadline, individuals may be subject to further remedial and disciplinary action, including but not limited to denial of access to University facilities, referral to the appropriate Associate Dean and/or Committee on Academic and Professional Evaluation of Students, suspension or dismissal from applicable programs, and/or termination of employment or service contract.

**Vaccine Shortage Contingency**
In the event of an influenza vaccine shortage, the University will determine an appropriate distribution plan for the available vaccine. Influenza vaccine will be offered to individuals based on risk to patients or other University populations, job function, and risk of exposure to influenza. Priority will be given to those at highest risk after consultation with relevant medical experts. Those who are prioritized to receive vaccine will be held to the mandatory standard of this policy, while others will be excused from that standard for the duration of the vaccine shortage period.
Appendix 1: Medical Exemption Form

REQUEST FOR MEDICAL EXEMPTION FROM INFLUENZA VACCINATION

Please print the following information and provide this form to your personal care physician:

Name: __________________________ Employee/student ID number: __________________________

Date of request: __________________

Email address: __________________________ Phone No.: __________________________

Department/School/Company: __________________________

Position/Title: __________________________ Supervisor/Manager: __________________________

Physician Name: __________________________

Physician Phone No.: __________________________

I agree that Occupational Health Services/Student Health Services may contact the physician completing this form to obtain clarification of the information provided by the physician.

Signature: __________________________

Dear Nurse Practitioner, Physician or Physician Assistant:

Washington University requires individuals who work or study on campus to receive an annual influenza vaccination. Leading healthcare authorities and organizations recommend influenza vaccination because it has been shown to be effective in minimizing the incidence and adverse effects of the illness.

Your patient is requesting a medical exemption from this vaccination requirement. A medical exemption is allowed only for certain recognized contraindications (www.cdc.gov/flu/protect/whoshouldvax.htm). Please complete this form if you conclude that the above-named person requires a medical exemption.

Thank you.

Sincerely,
Washington University Occupational Health Services/Student Health Services
I certify that ______________ should not receive the following [check appropriate selection(s)]:

_____ Influenza vaccine shot (QIV)
_____ Influenza vaccine shot (Flublok)
_____ Influenza vaccine nasal spray (LAIV)

Note: Information concerning the differences between vaccines can be found at
https://www.cdc.gov/flu/professionals/vaccination/index.htm

The above-named person should not receive the vaccination(s) identified above for the following reason(s) [check all that apply]:

_____ History or documented test indications of severe allergy to the vaccine or its components (this does not include a sore arm, local reaction or subsequent upper respiratory tract infection).

_____ History of Guillain-Barré syndrome

_____ Other medical contraindication. [Please provide detailed information below or on separate page as necessary; request will be reviewed on a case-by-case basis]:

________________________________________________________
________________________________________________________
________________________________________________________
________________________________________________________

Nurse Practitioner, Physician, Physician Assistant Signature: ______________________________
Date: _________________

Medical License No.: ______________________________

* * * * * * * *

Students: Please submit this completed form by November 16 to Student Health Services as follows:

- **WUSM Campus**: 4525 Scott Avenue, East Building, Room 3420, St. Louis, MO 63130; or email to studenthealthservice@wusm.wustl.edu
- **Danforth Campus**: Campus Box 1201, One Brookings Drive, St. Louis, MO 63130; fax to (314) 935-8515

All others: Please submit this completed form by the annual deadline to Occupational Health Services (4525 Scott Avenue, East Building, Room 3420 or email to WUSMflushots@wustl.edu).
Appendix 2: Religious Exemption Form

REQUEST FOR RELIGIOUS EXEMPTION FROM INFLUENZA VACCINATION

Please print the following information:

Name: _________________________ Date of request: ________________ EMPL ID: __________________

Email address: __________________ Phone No.: __________________

Department/School/Company: __________________

Position/title: __________________ Supervisor/Manager: __________________

Washington University requires individuals who work or study on campus to receive an annual influenza vaccination. Leading healthcare authorities and organizations recommend influenza vaccination because it has been shown to be effective in minimizing the incidence and adverse effects of the illness.

To apply for an exemption from the required influenza vaccination based on a sincerely held religious belief, practice or observance, please (1) identify the religious belief practice or observance, and (2) explain why it precludes you from receiving the influenza vaccination.

_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________

In some cases, Washington University will need to obtain documentation or other authority regarding your identified religious belief, practice or observance. The University may need to discuss the nature of the religious belief, practice or observance with a spiritual leader or scholar of your religion (if applicable) to address your request for an exemption. If requested, can you obtain documentation or other authority to support the need for a religious exemption?

Yes _______ No _______
If no, please explain why:

_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________

Signature: __________________________  Date: __________________________

**Students:** Please submit this completed form by November 16 to Student Health Services as follows:

WUSM Campus: 4525 Scott Avenue, East Building, Room 3420, St. Louis, MO 63130; or email to studenthealthservice@wusm.wustl.edu

Danforth Campus: Campus Box 1201, One Brookings Drive, St. Louis, MO 63130; or fax to (314) 935-8515

**All others:** Please submit this completed form by the annual deadline to Human Resources (One Brookings Drive, Campus Box 1184, St. Louis, MO 63130), or email employeerelations@wustl.edu