Hepatitis A - Hepatitis A is a serious liver disease caused by the hepatitis A virus (HAV). HAV is found in the stool of people with hepatitis A. It is usually spread by close personal contact and sometimes by eating food or drinking water containing HAV. A person who has hepatitis A can easily pass the disease to others within the same household.

Hepatitis A can cause:
- “flu-like” illness
- jaundice (yellow skin or eyes, dark urine)
- severe stomach pains and diarrhea (children)

People with hepatitis A often have to be hospitalized (up to about 1 person in 5).
Adults with hepatitis A are often too ill to work for up to a month. Sometimes, people die as a result of hepatitis A (about 3-6 deaths per 1,000 cases). Hepatitis A vaccine can prevent hepatitis A.

Hepatitis B Vaccination - Individuals who may have occupational exposure to human or NHP blood, tissue or other potentially infectious materials while working on animal research, will be offered the Hepatitis B vaccination.

Measles, Mumps, and Rubella Vaccination - Since students, faculty, and health care and other workers in colleges and other post-high school educational institutions are at increased risk of acquiring measles and mumps, they should receive two doses of Measles, Mumps, and Rubella (MMR) vaccine or provide other evidence of measles immunity (physician diagnosis or laboratory evidence).

Personnel working with NHP are required to have proof of MMR vaccination or have a measles titer assayed. Personnel will be required to have a MMR vaccination booster if their titer assay is below the required level.

Persons who have documentation of receiving LIVE measles vaccine in the 1960s do not need to be revaccinated. Persons who were vaccinated prior to 1968 with either inactivated (killed) measles vaccine or measles vaccine of unknown type should be revaccinated with at least one dose of live attenuated measles vaccine. This recommendation is intended to protect persons who may have received killed measles vaccine, which was available in 1963-1967 and was not effective.

Personnel working with NHP that do not have proof of MMR vaccination will be required to have two doses of MMR vaccine. These two doses have to be separated by at least 28 days. Since 2%-5% of persons do not develop measles immunity after the first dose of vaccine, the second dose is to provide another chance to develop measles immunity for persons who did not respond to the first dose. There is no evidence that adverse reactions are increased when MMR is given to a person who is already immune to one or more of the components of the vaccine.
Rabies Vaccination - Individuals who have contact with dogs, cats, and certain wild animals or who work in wilderness areas will be offered the rabies vaccination. This is a pre-exposure vaccination consisting of a series of three injections given on days 0, 7, and 28. Every two years a rabies titer may be drawn to check for immunity against rabies. A rabies booster will be administered if necessary.

Tetanus Vaccination - A tetanus vaccination will be administered to all vertebrate animal users at ten-year intervals. Tetanus is normally associated with wounds contaminated with dirt or the feces of some animals. All bite wounds carry the risk of tetanus and should be reported to the Director of Animal Care and the Principle Investigator. If a contaminated wound occurs (including all animal bites or cuts and/or scratches in contact with dirty surfaces) and it has been five or more years since vaccination, a booster may be administered at the time the person is seen for evaluation.

Tuberculin testing - Personnel who contact non-human primates should receive a tuberculin skin test and/or a chest x-ray every six (6) months. The disease can be transmitted to and from non-human primates and humans. The purpose of tuberculin testing is to detect the disease in humans. Undetected tuberculosis in humans can result in severe illness, and can be transmitted to others through close personal contact.

Respirator Use - Questionnaire and Physical Examination
The purpose of the respirator use physical exam and questionnaire is to determine your capacity to wear respiratory protection while conducting your research. A pulmonary function test typically accompanies the respirator use physical exam and questionnaire.

Toxoplasmosis Screening
Toxoplasmosis infection during pregnancy can result in miscarriage, still-births, or severe disease in the newborn. It is thought that an important mode of transmission is by human exposure to oocyst (a host of the infectious agent) in cat feces. The purpose of providing a blood sample for toxoplasmosis screening is to determine if you have had a prior exposure to the agent. Pregnant women or those planning a pregnancy who have had no prior exposure should be informed of the risks involved with exposure to cats since contraction of toxoplasmosis could seriously affect the fetus during early stages of development.