

OUHSC-Program Student Immunization and TB Screening Requirements Reference Guide For HSC-program students in OKC, Tulsa & Remote Sites

Name: _____ Student ID#: _____

<p>1. TB Screening¹ - Complete a or b</p> <p>a. Provide documentation of negative two-step TB skin tests (TST) or IGRA test (e.g. T-SPOT or QuantiFERON) obtained within the last 12 months. Date(s): _____</p> <p>OR</p> <p>b. Provide documentation of Positive TB Skin Test or Positive IGRA. Date: _____</p> <p>i. Also, provide documentation of previous treatment and/or assessment for Latent or Active TB including chest x-ray report. (<i>Students with history of positive TB test will need further assessment and clearance by Student Health.</i>)</p>						
<p>2. COVID-19² - Complete a</p> <p>a. Provide documentation of completion of a WHO-approved COVID-19 immunization. Dates: 1) _____ 2) _____</p>						
<p>3. Hepatitis B - Complete a or b</p> <p>a. Provide documentation of 1st, 2nd, and 3rd Hepatitis B immunization or 1st and 2nd HepB-CpG (Heplisav-B®) immunizations. Dates: 1) _____ 2) _____ 3) _____</p> <p>OR</p> <p>b. Provide documentation of a positive quantitative Hepatitis B IgG blood titer (Anti-HBs / HBsAb) Date: _____</p>						
<p>4. MMR (Measles [Rubeola], Mumps, Rubella) - Complete a or b</p> <p>a. Provide documentation of two (2) MMR immunizations received at least 4 weeks apart. Dates: 1) _____ 2) _____</p> <p>OR</p> <p>b. Provide documentation of positive IgG blood titers for each of the following:</p> <table><tr><td>Measles (Rubeola) IgG titer</td><td>Date: _____</td></tr><tr><td>Mumps IgG titer</td><td>Date: _____</td></tr><tr><td>Rubella IgG titer</td><td>Date: _____</td></tr></table>	Measles (Rubeola) IgG titer	Date: _____	Mumps IgG titer	Date: _____	Rubella IgG titer	Date: _____
Measles (Rubeola) IgG titer	Date: _____					
Mumps IgG titer	Date: _____					
Rubella IgG titer	Date: _____					
<p>5. Tetanus, Diphtheria, Pertussis³ - Complete a and b</p> <p>a. Provide documentation of three (3) childhood Diphtheria-Tetanus-Pertussis (DTaP/DTP) immunizations. Dates: 1) _____ 2) _____ 3) _____</p> <p>AND</p> <p>b. Provide documentation of one (1) Tdap immunization within the last 10 years. Date: _____</p>						
<p>6. Varicella (Chickenpox) - Complete a or b</p> <p>a. Provide documentation of two (2) Varicella immunizations received at least 4 weeks apart. Dates: 1) _____ 2) _____</p> <p>OR</p> <p>b. Provide documentation of a positive Varicella IgG blood titer. Date: _____</p>						
<p>7. Other Vaccinations - conditionally required</p> <p>a. Annual Influenza vaccination</p> <p>i. Required for those students with patient contact.</p> <p>b. Meningitis vaccination</p> <p>i. Required for those OKC students residing in the <i>University Village</i> apartments.</p>						
<p>Footnotes</p> <p>¹ - Two baseline TB skin tests placed 1-3 weeks apart (two-step TB skin test) or one baseline IGRA test upon matriculation. Annual TB Screening Questionnaire thereafter. Those with either test resulting in a positive should report to Student Health for evaluation.</p> <p>² - Required for all students that will be patient-facing at some point during the completion of their degree program.</p> <p>³ - Td or Tdap required every 10 years.</p>						

For questions or to inquire about vaccination declination processes:
Tulsa-based HSC students - contact OU-Tulsa Student Health at (918) 660-3102
OKC and remote site students - contact OUHSC Student & Employee Health at (405) 271-9675