

# OUHSC-Program Student Immunization and TB Screening Requirements Reference Guide

## For incoming HSC-program students in OKC, Tulsa & Remote Sites

Name: \_\_\_\_\_ Degree Program: \_\_\_\_\_ Student ID#: \_\_\_\_\_

1.	<b>TB Screening<sup>1</sup> - Complete a or b</b>	
	a. <b>Provide documentation</b> of negative two-step TB skin tests (TST) <b>or</b> IGRA test (e.g. T-SPOT or QuantiFERON) obtained within the last 12 months.	Date(s): _____
	<b>OR</b>	
	b. <b>Provide documentation</b> of Positive TB Skin Test <b>or</b> Positive IGRA.	Date: _____
	i. Also, <b>provide documentation</b> 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> )	
2.	<b>COVID-19<sup>2</sup> - Complete a</b>	
	a. <b>Provide documentation</b> of completion of a WHO-approved COVID-19 immunization.	Dates: 1) _____ 2) _____
3.	<b>Hepatitis B - Complete a or b</b>	
	a. <b>Provide documentation</b> of 1 <sup>st</sup> , 2 <sup>nd</sup> , and 3 <sup>rd</sup> Hepatitis B immunization or 1st and 2nd HepB-CpG (Heplisav-B®) immunizations.	Dates: 1) _____ 2) _____ 3) _____
	<b>OR</b>	
	b. <b>Provide documentation</b> of a positive quantitative Hepatitis B IgG blood titer (Anti-HBs / HBsAb)	Date: _____
4.	<b>MMR (Measles [Rubeola], Mumps, Rubella) - Complete a or b</b>	
	a. <b>Provide documentation</b> of two (2) MMR immunizations received at least 4 weeks apart.	Dates: 1) _____ 2) _____
	<b>OR</b>	
	b. <b>Provide documentation</b> of positive IgG blood titers for each of the following:	
	Measles (Rubeola) IgG titer	Date: _____
	Mumps IgG titer	Date: _____
	Rubella IgG titer	Date: _____
5.	<b>Tetanus, Diphtheria, Pertussis<sup>3</sup> - Complete a</b>	
	a. <b>Provide documentation</b> of one (1) Tdap immunization within the last 10 years.	Date: _____
6.	<b>Varicella (Chickenpox) - Complete a or b</b>	
	a. <b>Provide documentation</b> of two (2) Varicella immunizations received at least 4 weeks apart.	Dates: 1) _____ 2) _____
	<b>OR</b>	
	b. <b>Provide documentation</b> of a positive Varicella IgG blood titer.	Date: _____
7.	<b>Other Vaccinations - conditionally required</b>	
	a. Annual Influenza vaccination	
	i. Required for those students with patient contact.	
	b. Meningitis vaccination	
	i. Required for those OKC students residing in the <i>University Village</i> apartments.	
<b>Footnotes</b>		
<sup>1</sup> - 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.		
<sup>2</sup> - Required for all students that will be patient-facing at some point during the completion of their degree program.		
<sup>3</sup> - Td or Tdap required every 10 years.		
<b>**Individual HSC Colleges/Programs may have additional requirements; the above list represents minimum requirements**</b>		

**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**