

Screening and Immunization Requirements

REQUIRED SCREENING

☐ Tuberculosis (TB) Screening

Time Frame: Annual

ONE of the following screening tests is required each year

Tuberculin Skin Test (TST): If screening using the Mantoux tuberculin skin test, the CDC's two-step protocol *must* be used for the initial screening as noted below. Subsequent annual screening can then be performed using the one-step protocol.

QuantIFERON-TB Gold Plus (QFT-Plus) Test

T-SPOT.TB Test (T-Spot)

A two-step TST involves an initial TST that is placed and reviewed within 48-72 hours of placement followed by a repeat TST that is placed 1-3 weeks later and reviewed within 48-72 hours of placement. The TST must be performed and read by a licensed healthcare provider. Only the TST requires two-step testing; neither of the TB blood tests require two-step testing. Initial TB screening should be valid for the majority of the first year after matriculation and must be updated regularly to remain in compliance. Please note that TB blood tests are not affected by the BCG vaccine. Prior BCG vaccination does not preclude the need for testing. If you have a history of a positive TB test, you must submit a chest x-ray report. Chest x-rays are valid for 3 years and must be valid for the duration of the program. Information about how to perform and interpret the above tests can be found on the CDC website at <https://www.cdc.gov/tb/topic/testing/healthcareworkers.htm>.

REQUIRED PROOF OF IMMUNITY

☐ Hepatitis B

Time Frame: Every 5 years

Proof of adequate serological immunity to Hepatitis B is required. This must be provided through submission of a *positive quantitative surface antibody (anti-HBs) titer* for hepatitis B.

The following must be completed for any individual who cannot demonstrate immunity to Hepatitis B through a positive titer (i.e., non-immune or equivocal titer):

- Receive a 2-dose series of Heplisav-B with the doses separated by at least 4 weeks (preferred) or a 3-dose series of Recombivax HB or Engerix-B (given at 0, 1, and 6 months).
- Obtain a quantitative hepatitis B surface antibody (anti-HBs) titer 1-2 months after the final dose

REQUIRED PROOF OF IMMUNITY (CONT.)

☐ **Measles (Rubeola), Mumps, Rubella****Time Frame: Every 5 years**

Proof of adequate serological immunity to measles, mumps, and rubella is required. This must be provided through submission of a *positive quantitative IgG titer* for measles, mumps, and rubella.

The following must be completed for any individual who has not received the MMR vaccine or who cannot demonstrate immunity to measles or mumps (i.e., non-immune or equivocal titer):

- Receive 2 doses of the MMR vaccine at least 28 days apart
- Obtain a quantitative IgG titer 1-2 months after the final dose

The following must be completed for any individual who has not received the MMR vaccine or who cannot demonstrate immunity to rubella (i.e., non-immune or equivocal titer):

- Receive 1 dose of the MMR vaccine
- Obtain a quantitative IgG titer 1-2 months after vaccination

☐ **Varicella****Time Frame: Every 5 years**

Proof of adequate serological immunity to varicella is required. This must be provided through submission of a *positive quantitative IgG titer* for varicella.

The following must be completed for any individual who has not had chickenpox (varicella), has not received the varicella vaccine, or who cannot demonstrate immunity to varicella (i.e., non-immune or equivocal titer):

- Receive 2 doses of the varicella vaccine at least 28 days apart
- Obtain a quantitative IgG titer 1-2 months after the final dose

Documentation of immunization for measles, mumps, rubella, varicella, or hepatitis B will not fulfill this requirement. Submission of vaccination dates only is NOT acceptable documentation of immunity. Although the CDC may consider prior vaccination as acceptable evidence of immunity in some cases, clinical sites still require that students provide proof of immunity through a positive titer as outlined above. Titers are valid for 5 years from the date that they are drawn and must be valid for the entire duration of the program. Any titer that will expire during either the didactic or clinical years should be redrawn prior to the start of the program.

REQUIRED VACCINES

☐ **Tetanus/Diphtheria/Pertussis****Time Frame: Every 10 years**

A Tdap booster must have been received within the last 10 years. A copy of the vaccination record with administration date is required. The vaccine must be Tdap (Td will not be accepted to fulfill this requirement).

☐ **Influenza****Time Frame: Annual**

Must receive one dose annually for the current flu season. A copy of the vaccination record with administration date is required.

Certain clinical sites may have requirements that are site-specific, including additional vaccinations, drug screens, background checks, etc. Please note that failing to obtain or provide documentation for any additional required vaccines may delay graduation.

OPTIONAL VACCINES

☐ **COVID-19****Time Frame: As directed**

SCU highly encourages, but does not require, students to receive the SARS-CoV-2 vaccination. Clinical students should note that, per California law, clinical sites may require SARS-CoV-2 vaccination. If a clinical site requires SARS-CoV-2 vaccination and a student opts not to receive it, the student may not be able to complete the program. Regardless of SARS-CoV-2 vaccination status, all students are required to follow SCU's Site-Specific Protection Plan

Please note that a failure to provide the above information by the deadline may result in rescission of an offer of admission. If at any time throughout the program the required information expires, students may be unable to participate in didactic and clinical activities, which may delay or prevent program completion. It is the student's responsibility to ensure that all requirements remain up-to-date at all times while enrolled in the program. Failure to do so may result in referral to the Physician Assistant Student Progress Committee (PA SPC).