

University of South Dakota Health Affairs

IMMUNIZATION AND TUBERCULOSIS POLICY

For the protection of the health of our students and because of the risks of exposure to infectious diseases to which students are subjected in the course of clinical work, certain tests and immunizations are required. Entering and visiting students are required to provide documentation of all required immunizations to USD Student Health prior to matriculation or visit. Immunization records are maintained by USD Student Health. As these immunizations are part of the School(s) on-going affiliation agreements with our clinical sites, students will not be allowed to register or participate in any clinical activities until documentation is provided. Students are responsible for maintaining copies of their immunization records and titer reports, etc. and keeping these records updated.

Health Affairs Requirements:

- Students are required to follow the Immunization Compliance Policy of their specific program.
- The USD Health Affairs Immunization Policy, the immunization form must be completed with the appropriate signatures. Include copies of titer reports and other medical records when applicable.

1. **Measles (Rubeola), Mumps, Rubella.** One of the following is required:

- All students are required to have medically signed proof of TWO properly administered immunizations.

OR

- Titers for measles (rubeola), mumps, and rubella that indicate immunity (copy of titer report must accompany immunization form);

2. **Hepatitis B immunization.** All students are required to have documentation of HBV vaccination. This can be completed through a 3-dose vaccine (0, 1, and 6 months) or through the 2-dose series of Heplisav-B (0 and 1 month). If a 3-dose vaccine product is used, the first two doses are required prior to the start of classes. A positive hepatitis B surface antibody (HBsAb) without proof of vaccine administration dates is acceptable if the student is unable to obtain the dates.

AND

Hepatitis B titer.

- Test for anti-HBs or HbsAB (HBV surface antibodies). Recommended 1-2 months after completion of the vaccination series.
- Students admitted with *documented* prior vaccination history must also provide immune status documentation. If that is not available, current immune status will be determined by the titer.
- A copy of the titer report must accompany immunization form or be provided as soon as it is available.

- Those who do not seroconvert when the titer is done 1-2 months following the series should be revaccinated with a full series with the titer repeated 1-2 months after the last immunization. Those who do not seroconvert when the titer has been delayed greater than 12 months since the initial series may choose to obtain one additional booster dose of the vaccine with the titer repeated 1-2 months after the last immunization. If the second titer remains below 10mIU/mL, the person will complete the series followed by another titer. If, after a second series, titers remain below 10mIU/mL, the person is considered at risk for acquiring HBV. Students should be counseled about the occupational risk and the need to obtain HBIG prophylaxis for any known or probable parenteral exposure to HBsAg-positive blood. No further vaccine series are recommended. However, it is recommended the student consult with their health care provider about being tested for HBsAg to make sure that chronic HBV infection is not the reason for vaccine non-response (assuming the 2nd negative HbsAb titer was performed 1-2 months following the last hepatitis B vaccine of the second series).
3. **Varicella/Chicken Pox immunity.** One of the following is required.
- Varicella titer if the student has had the chicken pox that indicates immunity (copy of titer report must accompany immunization form);
OR
 - Two doses of varicella immunization is indicated if there is no history of the disease or if the varicella titer is negative. Recommended interval is 4-8 weeks between doses.
4. **Tdap (tetanus, diphtheria, acellular pertussis).** One life time dose of Tdap is required. Tdap vaccine can be administered without concern for the length of time since the most recent Td vaccine. If it has been longer than 10 years since the Tdap, a Td or Tdap booster is required.
5. **Upon admission: TB Skin Tests or Interferon Gamma Release Assay (IGRA)**
- Each student will be required to do a risk review with USD Student Health. This includes an individual baseline risk assessment and symptom evaluation. Initial testing of students without prior TB or latent TB infection (LTBI) will be done by either of the following methods:
 - **Two-Step TB Skin Test:** For this method, documentation of two TB skin tests is required. If the first is negative, a second TB skin test will be given in 1-3 weeks. The second negative will confirm lack of infection (any two documented TB skin tests completed within a 12 month period can meet this requirement.)
 - *History of BCG vaccine is NOT a contraindication for tuberculin testing. TB skin test reactivity caused by BCG vaccine generally wanes with time. If more than 5 years have elapsed since administration of BCG vaccine, a positive reaction is most likely a result of M. tuberculosis infection.*
- OR**
- **Interferon Gamma Release Assay (IGRA)**
Note this is available through USD Student Health at a substantial discount.

Students with a positive TB skin test or positive IGRA:

Are required to provide documentation from their health care provider including the following:

- Result of the positive TB skin test (date placed, read, measurement in mm) or IGRA report, signed by a health care provider.
- Chest x-ray report, ruling out pulmonary TB disease.
- Determination by the health care provider if this a latent TB infection or active TB disease.
- Treatment including medication and dose, when started, when completed, etc.
- **Students who have active TB disease:**
Will be restricted from school and patient contact until they have provided USD Student Health Services with documentation that Student Health Services confirms will satisfy the infection prevention policies of USD and the health care facilities where the student trains.

6. During enrollment:

- **Annual TB Screening:**
 - Students are not routinely required to have annual TB testing. In special circumstances such as a known TB exposure or untreated latent TB, the student's program in coordination with the training facility's infection prevention and employee health services and/or Student Health will determine if testing is necessary.
 - All USD Health Affairs students will complete the USD Health Affairs Annual TB Symptom Checklist & Attestation of TB Education form and submit it to USD Student Health Services by November 1 during each year of enrollment. Failure to comply with annual TB requirements may preclude registration for classes, receipt of financial aid, and placement into a clinical setting.
- **Annual TB Education:**
 - During enrollment, all USD Health Affairs students are required to complete annual TB education which includes information on TB risk factors, signs and symptoms of TB disease, and infection control policies and procedures. Students will sign an attestation annually that they have reviewed and understand the information.
- **Annual Influenza Vaccination:**
 - The influenza vaccine is required by November 1st annually. Failure to comply with annual influenza requirements may preclude registration for classes, receipt of financial aid, and placement into a clinical setting.

Recommended Immunizations:

- **Meningococcal (meningitis) vaccine.** Recommended for students living in college dormitories who have not been immunized previously or for college students under 25 years of age who wish to reduce their risk. Students should consult with their physician about the appropriate vaccine for their specific risk.
- **Childhood DTP/DTaP/DPT and polio vaccines.**