

Policy Name: Health Sciences Students Requirements for Immunization and TB Screening Compliance
Policy ID: 3B3-HS
Effective Date: 4/1/11
Review Date: 4/1/11, 6/18/14, 4/1/15, 3/10/16, 4/18/17

Policy:

1. Health Sciences students having client, patient, community member, or blood/body fluid contact must comply with Health Sciences Immunization Program (HSIP) requirements, which are based on Centers for Disease Control and Prevention (CDC) recommendations for health care personnel regarding immunizations, immune status, and TB screening.
2. If the HSIP requirements and CDC recommendations change after the student meets initial HSIP requirements, as defined on the HSIP Required Immunizations Form and HSIP TB Screening Form(s), the student will be required to comply with the updated HSIP requirements until the completion of their degree program.
3. Students are required to give permission for their compliance status to be shared with their respective Health Science School or program, and practicum or clinical training sites. Signed permission is obtained on the upper section of the Required Immunizations Form and HSIP TB Screening Form(s).
4. The Health Sciences Immunization Program (HSIP):
 - a. Reviews all submitted documentation for completeness
 - b. Communicates with students regarding missing information and additional information needed
 - c. Enters the information into a secure occupational web-based, password-protected database
 - d. Reports each students' compliance status to their school/program and practicum/clinical training sites as needed or required.
 - e. Places blocks on the registration of students who have not met the requirements
 - f. Reimburses the costs of counseling, testing, and treatment for blood borne pathogen (BBP) exposure after a student's insurance is billed and the amount of insurance coverage is determined

Background:

Practicum sites, clinical sites, and training sites provide client, patient, and community member interaction opportunities for the health sciences (HS) student. The University of Washington (UW) and the HS schools and programs enter into affiliation agreements with practicum, clinical, and community training sites. These agreements may be reviewed by the respective health science school or program, the nurse manager for HSIP and Health Sciences Administration (HSA) attorneys. They are signed by the HSA executive director and respective Health Science school dean or program director. HSIP staff reviews students' documentation to see if students' vaccine and tuberculosis surveillance meet contracted obligations and follow the guidelines for health care personnel set forth by the Centers for Disease Control and Prevention (CDC).

Procedures

1. The following immunizations and/or immune status, along with tuberculosis (TB) screening are required of all incoming HS students. In addition, many of the training sites require documentation of a student's health insurance coverage or ability to pay any medical fees associated with blood borne pathogen exposures happening at their training site. HSIP strongly recommends that all HS students have health insurance coverage. Students must submit documentation of their immunization status 3 months prior to the first day of classes,

or by their program's assigned deadline. Acceptable documentation is defined on the HSIP Required Immunizations Form and TB Screening Form(s), which are updated periodically and can be found here: <http://depts.washington.edu/chsweb/forms>. Documentation may include copies of immunization records, PPD (skin test for tuberculosis) results, copies of lab reports for IGRA (interferon gamma release assay, the blood test for tuberculosis) and antibody tests, and copies of CXR reports and medication treatment for positive tests for latent or active tuberculosis.

- Measles, mumps, rubella (MMR) — satisfied by:
 - 2 MMR vaccines with the first dose on or after age 12 months and the second spaced by at least 28 days from the first dose; OR,
 - Positive titers to rubeola (measles), mumps, and rubella.
- Varicella (chickenpox) — satisfied by:
 - 2 varicella vaccines with the first dose on or after age 12 months and the second spaced by at least 28 days from the first dose; OR,
 - A positive varicella titer.
- Hepatitis B vaccine (series of 3) and proof of immunity (quantitative blood antibody test):
 - 3 hepatitis vaccines, with the second dose at least 28 days after the first dose, and the 3rd dose at least 16 weeks after the 1st dose and 8 weeks after the 2nd dose.
 - If series was given as an infant, the 3rd dose must be given no sooner than age 6 months.
 - It is recommended that students complete their 3-dose series prior to patient (or body fluid) contact in practicum/clinical settings.
 - Quantitative Hepatitis B surface antibody (HBSAb) test at least 4 weeks after 3rd Hepatitis B vaccine. If more than 2 years has lapsed since 3rd dose, one Hepatitis B vaccine is recommended, followed by a quantitative HBSAb test 4 to 8 weeks later.
 - Students who are “non-responders” or who have had Hepatitis B disease should follow the instructions on the HSIP form for specific documentation requirements.
- Primary childhood or adult series of diphtheria, tetanus, and pertussis (DTP/DT/Td) and a one-time dose of adult tetanus-diphtheria-pertussis vaccine (Tdap). A dose of Td-containing vaccine (Td or Tdap) must have been received within the past 10 years.
- Seasonal influenza vaccine — satisfied by:
 - Annual vaccine between August and November each year; OR,
 - Annual submission of valid waiver request form documenting medical contraindication (available from HSIP's website), signed by provider. Note: egg allergy is no longer a contraindication for most. Egg-free vaccine is available.
 - Social Work, Public Health, and Dentistry Schools ONLY: students who began their degree program in 2014 or earlier may choose to opt out of the flu vaccine requirement for personal reasons.
- Primary childhood series of polio vaccine or a dose of IPV as an adult.
- Tuberculosis screening satisfied by:
 - Screening for tuberculosis (PPD or IGRA) prior to the first day of classes. Schedule will vary depending on which school/program the student is attending and which quarter the student is beginning their clinical/practicum experience. Four different TB screening forms are available on the HSIP website. Entering students should follow specialized instructions and deadlines provided by their specific school/program.
 - For a positive IGRA or positive PPD, a copy of a current CXR report plus current and annual TB symptom surveys are required. Students who provide medical notes giving medication treatment (including name of anti-tuberculosis drug(s), and duration of treatment) may include a previous CXR report.
- Students may be asked to submit a copy of the front and back of their insurance card to their school or program, as clinical training sites may require this. Students without

- health insurance may need to sign a statement that they assume personal responsibility for all costs. HSIP strongly recommends health insurance coverage for all HS students.
2. HS students participating at practicum, clinical, or community sites are not able to waive any vaccine or TB surveillance requirement for personal reasons.
 3. Waivers are only granted for documented medical conditions for which there is a vaccine contraindication.
 - Students must submit to HSIP a signed statement from a medical doctor (MD) stating what vaccine is contraindicated, the reasons with documentation for the contraindication, and the duration for which the vaccine is contraindicated. This information must be submitted by the program-specific deadline or at least 3 months prior to the first day of classes.
 - The HSIP medical director will review and determine if the standard for medical contraindication is valid, based on the standards of care at the University of Washington.
 - If the standards for a vaccine waiver are not met, the student will need to comply with the vaccine requirements as listed in Section 1 above.
 - If the standards for a vaccine waiver are met, HSIP will notify the student's program of the waiver status, and the student and HS school/program will follow the process for temporary or permanent waiver in Sections 4 and 5 below.
 4. Waivers may be granted for students who cannot receive live attenuated vaccines (MMR, varicella) and who have negative titers (blood antibody tests) to the respective diseases (measles, mumps, rubella, varicella).
 - Temporary Waivers
 - Pregnant students: During the months of gestation, waivers are given for the two live attenuated MMR and varicella vaccines.
 - Students on temporary immunosuppressive medications
 - Students with CD4 counts less than 200 for a specified duration of time
 - These live vaccines can be completed post-partum or once the temporary period of immune suppression is over.
 - Permanent Waivers are granted on a case-by-case basis for:
 - Students with documentation of a severe allergy to the particular vaccine or its vaccine components;
 - Students with a documented allergy to PPD will need to submit an IGRA (interferon gamma release assay) test result.
 - Students who have permanent immune suppression.
 5. Students receiving either permanent or temporary waivers for certain vaccines or surveillance tests will be required to work with their respective school and practicum, clinical, or training site to arrange, *if possible*, alternative non-clinical work to meet comparable academic requirements.
 6. HS students having client, patient, and/or body fluid contact must maintain their immunization and annual TB surveillance compliance, with updates as necessary. They will not be able to enter practicum or clinical sites if they refuse required services, fall out of compliance due to an expired service, or fail to produce written authorization for temporary waiver status for participation by the respective practicum, clinical, or training site.
 7. HSIP staff will send notification to the HS school or program for any student who is out of compliance and place a BLOCK on the respective student's registration.

Process Owner:

Natalie Conner, MS, RN-BC

Date:

4/18/17