HEALTH SCIENCES IMMUNIZATION PROGRAM POLICY

Effective Date: 4/1/11

Review Date: 4/1/11, 6/18/14, 4/1/15, 3/10/16, 4/18/17, 3/20/19, 2/13/20, 04/28/21, 2/17/2022

POLICY

University of Washington (UW) students in health sciences programs requiring enrollment in Health Sciences Immunization Program (HSIP) must meet immunization and TB screening compliance in accordance with this policy. Health sciences students having contact with clients, patients, community members or potential blood/body fluids in the following areas of study are currently required by their programs to enroll in HSIP:

- School of Dentistry
- School of Medicine – including Medical, MEDEX (Physician Assistant), Laboratory Medicine, Medical Laboratory Science (MLS), Genetic Counseling and Department of Rehabilitation Sciences – including Physical Therapy (PT), Occupational Therapy (OT), and Prosthetics & Orthotics (P&O) students
- School of Nursing*
- School of Pharmacy
- School of Public Health* – including Masters in Public Health, Nutritional Sciences, and Health Informatics & Health Information Management (HIHIM) students
- School of Social Work (Seattle & Tacoma campuses)*
- Speech and Hearing Sciences within the College of Arts and Sciences

*Schools determine which degree tracks require student participation in HSIP and all students within those tracks must comply regardless of practicum, clinical, or training site location or format.

Students are required to comply with immunization requirements in accordance with Centers for Disease Control and Prevention (CDC) guidelines for health care personnel and as outlined in this policy.

1. Each student who is required to participate in the Health Sciences Immunization Program (HSIP) must create a UW immunization account in the CastleBranch web-based system. Within CastleBranch is a detailed description of each HSIP requirement. In addition, a quick reference HSIP Requirements Checklist is available within CastleBranch and on the HSIP website.

2. HSIP follows CDC guidelines and recommendations for healthcare workers, which may change during a student's enrollment. Students are required to comply with updated CDC and HSIP requirements in each student's CastleBranch “To-Do List” until the completion of their degree program.
3. HSIP may discuss and share student compliance status and related information with their respective health sciences school or program or clinical training sites prior to and during placements. This includes any or all information provided to meet entry requirements and any annual or other required updates. In addition, HSIP may discuss and share student immunization status with the University of Washington's Employee Health Center in the event of an exposure to blood or body fluids. Students authorize and agree to these terms by submitting a dated acknowledgement of reading the information as a requirement within their CastleBranch To-Do List.

4. Students may be prohibited from participating in practicum, clinical or training sites if they fail to meet HSIP requirements, fall out of compliance due to an expired requirement, or fail to produce written authorization for temporary/permanent medical exemption status (HSIP approval required). Practicum, clinical, or training sites may prohibit student participation despite a student obtaining a UW HSIP approved exemption.

5. Students are responsible for any academic or financial consequences resulting from non-compliance.

BACKGROUND

Practicum sites, clinical sites, and training sites provide client, patient, and community member interaction opportunities for health sciences students. The University of Washington and the health sciences schools and programs enter into affiliation agreements with practicum, clinical, and community training sites. These agreements may be reviewed by the respective health sciences school or program, the HSIP nurse manager, and UW Assistant Attorney Generals. They are signed by the respective health sciences school dean or program director. HSIP provides guidelines to CastleBranch staff to review students' documentation to determine if students' vaccine and tuberculosis surveillance follow CDC recommendations for healthcare personnel. HSIP staff review documentation, as needed, when further assessment is required.

Students enrolled in HSIP designated degree tracks must maintain compliance with CDC immunization recommendations for healthcare workers and HSIP requirements, with updates as necessary. Students may be prohibited from participating in practicum, clinical, or training sites if they refuse required services, fall out of compliance due to an expired service, or fail to produce written authorization for temporary/permanent waiver status. Students are responsible for any academic or financial consequences resulting from failing to meet or maintain compliance.

ROLES AND RESPONSIBILITIES

1. UW Environmental Health & Safety (EH&S) Health Sciences Immunization Program (HSIP)
   a. Manages a contract with CastleBranch, the vendor that:
i. Reviews submitted documentation for completeness based on guidelines provided by HSIP

ii. Communicates with students regarding missing information and additional information needed

iii. Enters information into a secure web-based, password-protected database

iv. Creates reports of student compliance status available to designated staff at each school/program and HSIP.

b. Reviews submitted documentation when further assessment is required, for example:

i. When students submit medical waiver requests, provider letters, or other non-standard documents

ii. When students or school/program personnel request re-review or overrides of documents previously accepted or rejected by CastleBranch reviewers

iii. As needed, to expedite release of student registration holds and to provide additional instruction to students on how to meet the requirements.

c. Provides education to students about how to meet HSIP requirements.

d. Ensures each student’s compliance status is available to their school/program through administrative access to CastleBranch and/or providing twice weekly, weekly, or every other week CastleBranch compliance reports, as needed or required.

e. Provides technical assistance to school/program staff about how to access and use the CastleBranch vendor’s web-based system.

f. Provides assistance with verifying CPNW Clinical Passport and Association of American Medical Colleges (AAMC) immunization/TB screening forms for designated schools/programs.

g. Places blocks on the registration of students who have not met the requirements for designated programs.

h. Notifies school/program of approved student medical waivers.

i. Reimburses the costs of counseling, testing, and treatment for bloodborne pathogen (BBP) exposure after a student’s insurance is billed and the amount of insurance coverage is determined.

2. UW health sciences schools and programs

a. Maintain affiliation agreements with practicum/clinical training sites.
b. Ensure student compliance with HSIP requirements throughout the program and coordinate removal of students from practicum/clinical training sites, as needed or required.

c. Ensure student's compliance status is available to their practicum/clinical training site, as needed or required.

d. Notifies practicum/clinical training sites of approved medical waivers; if possible, assists students in arranging alternative clinical experiences or alternative non-clinical work to meet comparable academic requirements.

e. Prevents students from entering or continuing practicums if they refuse to comply with immunization/TB screening requirements, fall out of compliance due to an expired requirement, or fail to produce written authorization for temporary/permanent medical waiver status.

f. Determines appropriate practicums for students with a medical waiver(s) and verifies practicum site acceptance of medical waiver(s) when granted by HSIP.

g. Places blocks on the registration of students who have not met the requirements (designated programs only).

3. Health sciences students

Upon acceptance to their school/program, students agree to comply with HSIP immunization and TB screening requirements by doing the following:

a. Purchase a CastleBranch account by their school/program deadline.

b. Complete initial immunization and TB screening requirements by their school/program deadline, or by the next designated due date in their CastleBranch account for an immunization/titer requirement in series.

c. Complete immunization renewals by the designated due date in their CastleBranch account and complete TB screening renewals, if applicable to the student's program.

d. Students receiving either permanent or temporary medical waivers for specific vaccines or surveillance tests work with their respective school and practicum, clinical, or training site to arrange alternative non-clinical work to meet comparable academic requirements, if possible.

e. Any additional practicum/site-specific requirements are the student's responsibility.

f. Students may be asked to submit documentation of health insurance coverage, or ability to pay medical fees associated with bloodborne pathogen exposures, to their training site. 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 students having contact with clients, patients, community members, or potential blood/body fluids.
4. Registrar’s Office
   a. Assists HSIP in ensuring accurate billing for HSIP services.
   b. Provides student database billing reports at least monthly and as needed.

IMMUNIZATION/TB SCREENING PROCEDURES

The following immunizations and/or immune status, along with tuberculosis (TB) screening, are required. Students must submit documentation of their immunization status three months prior to the first day of class, or by their program’s assigned deadline. Acceptable documentation is defined in each student’s CastleBranch To-Do List and on the HSIP Requirements Checklist, which is updated periodically and can be found on the HSIP webpage. Below is a summary of how students satisfy HSIP requirements.

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Acceptable immunizations/titers/screening</th>
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</thead>
<tbody>
<tr>
<td><strong>Childhood vaccinations</strong></td>
<td>Either attestation or documentation of childhood series of polio vaccine and diphtheria, tetanus, and pertussis (DTP/DT/Td) OR, if not vaccinated as a child for polio and/or DTP/DT/Td: One dose of IPV as an adult and an adult series of DTP/DT/Td, including a one-time adult dose of tetanus, diphtheria, pertussis (Tdap).</td>
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<tr>
<td><strong>Tetanus, diphtheria, pertussis (Tdap)</strong></td>
<td>Either a Tdap vaccine within the past 10 years OR Documented evidence of a Tdap vaccine (after 2005) AND a Td-containing vaccine within the past 10 years</td>
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<tr>
<td><strong>Measles (rubeola), mumps, rubella (MMR)</strong></td>
<td>Either two MMR vaccines, with the first dose on or after age 12 months and the second at least 28 days after the first dose OR Positive Immunoglobulin G (IgG) titers to measles (rubeola), mumps, and rubella</td>
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<tr>
<td><strong>Varicella (chickenpox)</strong></td>
<td>Either two varicella vaccines, with the first dose on or after age 12 months and the second at least 28 days after the first dose OR A positive varicella IgG titer</td>
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<tr>
<td><strong>Hepatitis B</strong></td>
<td>BOTH a complete Hepatitis B vaccine series satisfied by one of the following: o Hepatitis B (recombinant) three-dose vaccine series, 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 at least 8 weeks after the 2nd</td>
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dose. If the series was given as an infant, the 3rd dose must be given no younger than age 6 months.

- Heplisav B (recombinant adjuvanted) two-dose series is an acceptable vaccine alternative. The doses must be spaced at least four weeks apart.

- Twinrix (hepatitis A & hepatitis B combined vaccine) three-dose series is an acceptable vaccine alternative with the second dose at least 28 days after the first dose, and the 3rd dose at least 5 months after the 2nd dose.

AND

Proof of immunity with a quantitative hepatitis B surface antibody test at least four weeks after last hepatitis B vaccine. If more than two years has passed since the dose, one additional hepatitis B vaccine (booster) is recommended, followed by a quantitative hepatitis B surface antibody test four to eight weeks later.

NOTE: Students who are “non-responders” or who have had hepatitis B disease should follow the instructions on the HSIP Requirements Checklist for specific documentation requirements.

<table>
<thead>
<tr>
<th>Influenza</th>
<th>An annual influenza vaccine administered after August of the current flu season</th>
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<tbody>
<tr>
<td>COVID-19</td>
<td>Refer to the HSIP COVID-19 Policy Addendum (PDF).</td>
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<tr>
<td>Initial tuberculosis (TB) screening</td>
<td>Either the interferon gamma release assay (IGRA) blood test (recommended especially for students with a history or BCG vaccine) OR A two-step purified protein derivative (PPD) skin test OR Students who test positive or have a history of a positive PPD or IGRA must submit a copy of the positive test result, a current chest x-ray report, and a TB symptom survey (TBSS) form, followed by subsequent annual TBSS submission. Students who provide medical documentation showing medication treatment (including name of anti-tuberculosis drug/s, and duration of treatment) may include a previous chest x-ray report. NOTE: TB testing schedule may vary depending on which school/program the student is attending and which quarter the student is beginning their practicum/clinical experience. Entering students should follow instructions and deadlines provided by their school/program.</td>
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</tbody>
</table>
*It is recommended that students complete their hepatitis B vaccine series prior to contact with patients (or body fluids) in practicum/clinical settings.

NOTE: The UW Immunity Verification Program (IVP), managed through Hall Health Center, requires all entering students under the age of 22 on the first day of their first quarter to meet the meningococcal vaccine requirement, effective autumn quarter 2019. This requirement applies to health sciences students. Instructions for submitting meningococcal vaccine requirements is on the IVP webpage. The UW IVP program places registration holds, as applicable, for students who are not in compliance with the meningococcal vaccine requirement. The IVP program is not associated with HSIP.

STUDENTS RETURNING FROM A LEAVE OF ABSENCE (LOA)

1. Students returning from a LOA must update any overdue immunizations/TB screening requirements prior to registration.
2. Students returning from a LOA of one year or less who have already completed their initial TB screening, are not required to complete a TB screening renewal unless an annual TB screening is required by their program.
3. Students returning from a LOA greater than 1 year are required to complete a TB screening renewal prior to registration. If an initial TB screening was not completed prior to LOA, then the initial TB screening will need to be submitted prior to registration.

RETURNING STUDENTS WITH PRIOR UW HSIP CASTLBRANCH ACCOUNTS

1. Students returning within two years after completion of an undergraduate degree for enrollment in a graduate degree within the same program may continue to use their existing CastleBranch account as long as their initial degree's matriculation date was not prior to 2019 and no changes to HSIP requirements have been made (e.g., a BSN student returning for a DNP degree or an SPH HIHIM student returning for an MPH degree). Tacoma BASW students returning for an MSW degree in Seattle will be allowed to switch to the Seattle CB tracker and do not need to purchase a new CastleBranch account. Students must contact HSIP to reactivate their account.
2. Returning UW students with a previous CastleBranch account who are enrolling in a different program (e.g., MD student enrolling in an MPH program) will be required to purchase a new CastleBranch account.

MEDICAL WAIVERS

1. Medical waivers are granted rarely and only in alignment with CDC recommendations for documented medical conditions for which there is a vaccine contraindication.
2. Medical waivers are granted on a case-by-case basis for anaphylactic or severe allergy to the particular vaccine or vaccine components. Note: Egg allergy is not a contraindication for the influenza vaccine. Egg-free influenza vaccine is available; supervised administration may be advised.

3. Medical 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, and varicella).
   a. Temporary MMR/varicella waivers are granted for:
      i. Pregnant students (during the months of gestation)
      ii. Students on temporary immunosuppressive medications
      iii. Students with CD4 counts less than 200 for a specified duration of time

      Live vaccines can be completed post-partum or once the temporary period of immune suppression is over.
   b. Permanent MMR/varicella waivers are granted on a case-by-case basis for:
      i. Students with documentation of a severe allergy to the particular vaccine or its vaccine components
      ii. Students who have permanent immune suppression

4. Students with a documented allergy to PPD will need to submit an IGRA (interferon gamma release assay) test result.

5. Medical waiver procedures
   a. Medical waiver forms are available by contacting HSIP at myshots@uw.edu.
   b. Students must submit a signed statement from a licensed medical provider (e.g., MD, ARNP, PA, DO, or ND) indicating what vaccine is contraindicated, the medical rationale for the contraindication (including a description of side effects, if applicable), and the duration for which the vaccine is contraindicated. This information must be submitted to HSIP by the school/program-specific deadline for immunizations and TB screening.
   c. The HSIP medical director will review the waiver documentation and determine if the standard for medical contraindication is met, based on CDC recommendations.
   d. If the standards for a medical vaccine waiver are met, HSIP will notify the student's program of the waiver status. Programs will work with students to determine appropriate practicum placement and acceptance of medical waiver(s) by practicum site. Practicum sites may limit or prohibit participation due to a medical waiver.
e. If the standards for a vaccine waiver are not met, HSIP will notify the student, who will be required to comply with the vaccine requirements as listed under procedures above.

6. HSIP is not permitted to waive any vaccine or TB surveillance requirement for a student’s personal, religious, philosophical or other non-medical reasons.