

**New Student Pre-Entrance Immunization Requirements and Instructions:**

These requirements and instructions apply to ALL new students:

As soon as possible, gather all necessary vaccination, TB screening, and titer documentation. Please fill in all required blank lines on the Immune Status Form and return the form to JBT. Make sure to send copies of documentation for all vaccinations, TB screening results, and required titer results with the Immune Status Form. The Immune Status Form is due in alignment with your school’s new student orientation deadlines. Once you have submitted your form and JBT has processed it, you will be able to obtain your OHSU badge as long as all other orientation requirements have been met. JBT cannot guarantee that immunization forms sent in after your school’s new student orientation deadline will be processed in time to issue an OHSU badge by matriculation.

**All required pre-entrance immunizations and titers must be completed before new student orientation.** **JBT Health & Wellness Center will ONLY be able to offer assistance with the Hepatitis B requirement for those who have already initiated the series and will only have a certain number of these appointments available.** Students must establish with a JBT provider in order to obtain these services. Your insurance will be billed for these services and students will be responsible for covering any fees not covered by their insurance. A fee of $95 will be placed on accounts for those that have not completed the requirements 14 days after matriculation. A hold will be placed on accounts for those that have not completed the requirements 30 days after matriculation.

**Frequently asked questions**

Q: Where do I turn in my Immune Status Form?

A: Please be sure to keep a copy of the Immune Status Form for your own records. Mail, fax, email or drop off your form to:

JBT Health & Wellness Center, L587

3181 SW Sam Jackson Park Road

Portland, OR 97239

Fax: 503-494-2958

[askjbtRN@ohsu.edu](mailto:askjbtRN@ohsu.edu)

Q: What if I cannot find any of my records?

A: Try contacting your undergraduate school, pediatrician, or parent to see if there are any records available. If you cannot obtain documentation, titers can be obtained to check for immunity for most of the required vaccinations. As a Healthcare worker, you will need this information for the rest of your career.

Q: Where can I get vaccinations, titers, and tuberculosis screening done?

A: These services are available from a variety of community resources including your primary care provider, OHSU primary care providers, clinical pharmacists at your local pharmacy and Multnomah County Immunization Clinics. Please see a list of additional resource options on our website under forms: *Vaccine Resource List-Non JBT Clinics.*

Q: What is a titer and why do I need it?

A: A titer is a blood test that can indicate immunity to a particular disease. For example, if you believe you have been immunized against Varicella but do not have the required documentation, a titer can show that you have immunity and are not susceptible to Varicella disease.

Q: I have a negative Hepatitis B titer. Now what?

* If negative, consider giving 1 booster dose and repeat titer 1 to 2 months after booster dose OR repeat entire series of 3: 1 month between 1st and 2nd, >= 2 months between 2nd and 3rd, and >=4 months between 1st and 3rd
* Repeat titer 1 to 2 months after repeat series is completed.
* If positive, student is immune.
* If negative, student is considered a non-responder. Check HepBsAg and counsel student about potential risk of Hepatitis B if has exposure. Do NOT give more than 6 total Hepatitis B doses in one lifetime.

Q: I have a negative titer. Now what?

A: A negative titer means you are likely not immune to that disease and may require additional vaccinations and a repeat titer. Please email [askjbtRN@ohsu.edu](mailto:askjbtRN@ohsu.edu) with any questions regarding your specific negative titer.

Q: Do I need to have a Hepatitis B antibody titer drawn?

A: All OHSU students are required to have completed the Hepatitis B vaccination series. However, **NOT** all students need a Hepatitis B antibody titer. Students who will have patient contact, primate contact, or exposure to human blood, tissue or cell lines are required to complete the Hepatitis B vaccination series ***and*** have a positive titer. Students enrolled in the following OHSU programs do **NOT** need a titer; Biomedical Informatics, Biostatistics, Computer Science and Engineering, Electrical Engineering, Environmental Science and Engineering, Health Science Technology and Entrepreneurship, and Masters in Public Health.

Q: TWO Tuberculosis skin tests (also called a two-step TST) are required within 12 months of matriculation. Why?

A: Two-step testing is useful for initial skin testing in adults who are going to be retested periodically. This two-step process reduces the likelihood that a boosted reaction to a subsequent TST will be misinterpreted as a recent infection. If you wish to decline this testing you need to discuss this choice with a JBT provider per state regulations. For students without a history of a positive PPD, a two-step TST is required regardless of QuantiFERON Gold test results.

Q: Is the Polio vaccination series required?

A: Polio vaccine is not a required vaccination for matriculation. However, we strongly recommend you have completed your polio vaccination requirements.

Q: What happens if I do not submit my information by matriculation (the first day of class)?

A: In order to obtain your OHSU ID badge, submission of your Immune Status Form to the JBT Health & Wellness Center is required before your first day of class. If you have not submitted your Immune Status Form, OHSU Parking and Transportation will be unable to issue your ID badge. Please allow 24 business hours for the JBT Health and Wellness Center to update your records once the form has been submitted.

Q: What happens if I am not compliant with my immunizations?

A: A fee of $95 will be placed on your account if you have not completed the requirements 14 days after matriculation. A hold will be placed on your account if you have not completed the requirements 30 days after matriculation. This hold will prevent you from registering for the next term.

Q: What if I haven’t completed everything?

A: **All required pre-entrance immunizations, TB screening, and titers must be complete by matriculation.** Please note, JBT cannot offer these pre-entrance requirements except for those in process with their Hepatitis B vaccination series. You must plan ahead to ensure all requirements are completed by the Immune Status Form due date. If you anticipate having any difficulty meeting these deadlines, please communicate with our office at [askjbtRN@ohsu.edu](mailto:askjbtRN@ohsu.edu).

Q: What if I am in the process of completing my Hepatitis B vaccination series and titer draw?

A: Exceptions may be made for students in the process of completing their Hepatitis B series and obtaining a Hepatitis B antibody titer. JBT has a limited number of appointments available to assist students in completing their Hepatitis B vaccination series and titer for those students who are already in process. Students must establish with a JBT provider in order to obtain these services. Your insurance will be billed for these services and students will be responsible for covering any fees not covered by their insurance. If students fail to complete their subsequent Hepatitis B vaccinations and titer draw on time, the above mentioned 14 day fee and 30 day hold will apply.

Q: This seems like a lot of work. Why do I need it?

A: Our goal is to keep the students and patients safe from potential exposures to communicable diseases. We follow the recommendations of the CDC and the requirements of any of the facilities where you might train or work.

Q: I still have questions and/or concerns. Who should I contact?

A. Please reach out to the JBT Health & Wellness Center at [askjbtRN@ohsu.edu](mailto:askjbtRN@ohsu.edu) for any questions and/or concerns you might have.

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| OHSU_H_3C_POS_RGB  Oregon Health & Science University  Joseph B. Trainer Health & Wellness Center  **IMMUNE STATUS FORM**  Mail, Email or Fax to:  JBT Health & Wellness Center, L587  3181 SW Sam Jackson Park Road  Portland, OR 97239-3098  FAX: 503.494.2958  [askjbtRN@ohsu.edu](mailto:askjbtRN@ohsu.edu) | **\***Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \*U#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **\***DOB & Place: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Email address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Email address that you would like communication about your compliance sent    OHSU program:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­  (medical, dental, pharmacy, etc.)  Matriculation date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­  **REQUIRED IMMUNIZATIONS -Dates must include MM/DD/YYYY if available. Please write clearly and fill in all requirements, or we will be unable to process your form. If you have any questions, please email askjbtrn@ohsu.edu**  Requirements still incomplete and not in process 2 weeks after matriculation will incur a $95 fee.  Requirements still incomplete and not in process 4 weeks after matriculation will have a hold placed on the account. | **\*\*\*By sending in this form, you agree to allow JBT Health and Wellness Center to share compliance-only information with your academic program during the entirety of your academic schooling at OHSU.\*\*\*** |

1) TETANUS/DIPHTHERIA Required:

1) Primary series of 5 Date of completion: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

2) 1 Tdap booster >=11 years old Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**AND** 3) Td booster **IF** Tdap was >= 10 years ago Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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2) MEASLES/MUMPS/RUBELLA Required:

1) Two MMR vaccinations Date #1: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date #2: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**OR**  2) Immunity confirmed by blood titer **(Attach copy of lab report):**

Measles (Rubeola) Date of titer: \_\_\_\_\_\_\_\_\_\_ Result: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mumps Date of titer: \_\_\_\_\_\_\_\_\_\_ Result: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Rubella Date of titer: \_\_\_\_\_\_\_\_\_\_ Result: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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3) HEPATITIS B

**In your role at OHSU, will you have direct patient contact, or are you expected to handle human or primate blood or body fluids, or sharps/instruments contaminated with human or primate blood or body fluids?** Yes: \_\_\_\_\_\_\_\_\_\_\_\_ No:\_\_\_\_\_\_\_\_\_\_\_\_

**Required**

3 doses AND positive Hepatitis B surface AB titer for all with potential for blood or body fluid exposure. If no patient/animal exposure, vaccine required but titer not needed

Dose #1\_\_\_\_\_\_\_\_\_\_ Dose #2\_\_\_\_\_\_\_\_\_\_ Dose #3\_\_\_\_\_\_\_\_\_\_

**AND** Immunity confirmed by Hepatitis B surface AB blood titer **IF** you will have patient or animal exposure **(Attach a copy of lab report)**

Date of titer:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Result \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**If your titer comes back as non-reactive, please review our FAQ for next steps**

Dose #4 \_\_\_\_\_\_\_\_\_\_ Dose #5 \_\_\_\_\_\_\_\_\_\_ Dose #6 \_\_\_\_\_\_\_\_\_\_\_\_

Date of repeat titer: \_\_\_\_\_\_\_\_\_\_\_\_ Result \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Attach a copy of report)

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4) VARICELLA Required:

1) Two Varicella vaccinations Date #1: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date #2: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**OR**  2) Immunity confirmed by blood titer **(Attach copy of lab report):** Date of titer: \_\_\_\_\_\_\_\_\_\_ Result: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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5) TUBERCULIN STATUS Required:

1) Two step TB skin testing, which consists of two PPD tests, both negative, at least a week but not more than a year apart, with the second completed less than 12 months before entry to OHSU.

TST #1: Date: \_\_\_\_\_\_\_\_\_\_ Result: \_\_\_\_\_\_\_\_\_\_\_ mm if known \_\_\_\_\_\_\_\_\_\_

TST #2: Date:\_\_\_\_\_\_\_\_\_\_ Result: \_\_\_\_\_\_\_\_\_\_\_ mm if known \_\_\_\_\_\_\_\_\_\_

**OR**  2) QuantiFERON TB Gold blood test: Date \_\_\_\_\_\_\_\_\_\_\_\_ Result \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Attach a copy of lab report)

If you have a history of latent tuberculosis verified either by positive QTFG or positive PPD, submit a chest x-ray report done within last 12 months and treatment history, if any. If you had BCG vaccine, please obtain a Quantiferon TB Gold test and submit a copy of the lab report.