



VERA Z. DWYER COLLEGE OF HEALTH SCIENCES

INDIANA UNIVERSITY SOUTH BEND

Immunizations Policy Policy 7.31.B

About This Policy:

Effective Date: 02-24-2017

Approval Dates: Previously recorded as Policy C-17

Scope

This policy applies to all members of the university community on each campus of Indiana University.

Policy Statement

The purpose of this policy is to outline the IUSB Vera Z. Dwyer College of Health Science (IUSB-CHS)* immunization requirements for students prior to entering the clinical portion of their programs.

Procedure

It is imperative that students have required immunizations prior to entering the clinical portion of the program (or internship experience for Health Science Students) because of direct patient contact. IUSB- CHS adheres to the CDC recommended adult immunizations for all healthcare workers. Due to epidemiological changes, requirements may change abruptly and those involved in clinical will need to meet the requirements. The student's primary care provider on the immunization record form must properly record the appropriate information. Students will not be allowed in the clinical areas or allowed to participate in the internship experience unless all information is up-to-date and on file with the IUSB-CHS. **Due dates for all immunization and criminal check information are October 15, for students admitted to the Fall semester (will begin clinical in Spring); and July 15, for students admitted Spring semester (and will begin clinical in Fall).** Students are requested to make a copy of all submitted documentation for their personal files.

THE COLLEGE OF HEALTH SCIENCES WILL NOT PROVIDE COPIES FOR PERSONAL OR EMPLOYER REQUESTS.

The following immunizations/tests are required:

Tetanus Diphtheria (Tetanus/Diphtheria/Acellular Pertussis Tdap)

All students must be immunized. Immunizations must be current within the past 10 years. If it is more than 10 years, it is recommended that you receive Tdap for adults. In fall of 2005, FDA approved Tdap for adults due recent increases in pertussis outbreak among adults. The updated Tetanus/Pertussis policy states the following:

- The Advisory Committee on Immunization Practices (ACIP) has issued guidelines for tetanus toxoid, reduced diphtheria toxoid and acellular pertussis (Tdap) vaccine (Adacel) for adults. ACIP voted to recommend routine use of Tdap among adults aged 19-64 years.
- Healthcare personnel who have direct patient contact working in hospitals or ambulatory care settings should receive a single dose of Tdap as soon as possible if they have not previously received Tdap. The guidelines recommend an interval as short as 2 years from the last dose of Tdap, but shorter intervals may be used.

DCHS students shall receive this new booster vaccine prior to entering clinical / internships experiences if they have been immunized in the last two years. These students may receive this booster even if they had a tetanus booster less than two years ago. It is recommended that all CHS students have their tetanus updated with this booster as soon as possible. All students shall have the Tdap vaccine as the required tetanus vaccine.

Measles Mumps Rubella

CDC for healthcare workers is 2 doses of MMR for all healthcare workers unless born prior to 1957 (June 1, 2006).

Rubella (3 days)

2 doses of MMR or 2 doses of ProQuad or Rubella titer of 1.10 is required.

Rubella (Measles 10 days)

2 doses of MMR after their first birthday or 2 doses of ProQuad or Rubella titer of 1.11 is required.

Mumps

2 doses of MMR or 2 doses of ProQuad or Mumps titer of 1.10 is required.

Varicella (Chicken Pox)

Those who have had the disease may submit a written statement detailing approximate date of exposure. (May be provided by the student or primary care provider.) If a student has not had the disease but requires vaccines will need 2 doses of varicella or 2 doses of ProQuad or Varicella titer of 1.10.

Tuberculosis

*All students must have a tuberculin skin test (TST) upon admission (a PPD tuberculin skin test; a Tine or Heaf test are not acceptable) to determine if they have been infected with *M. tuberculosis*.*

Testing will also be required upon exposure or travel to high risk areas. Some community health placements and area agencies may require more frequent PPD documentation – you will be notified if you are affected. After the initial test, students will be required to complete the TB Questionnaire.

If you have a newly positive reaction to the skin test (called a conversion), a chest x-ray is required and results recorded on the immunization care. Your patient care provider should indicate what treatment, if any, has been prescribed for you as a result of a positive skin test or chest x-ray.

Students with a history of conversion or a positive skin test and a recent negative for TB chest x-ray should be evaluated and may be able to complete the TB Questionnaire instead of a PPD Documentation of evaluation and a copy of their chest x-ray within five years from their health care provider.

During the fall semester, each student in a clinical program is required to complete the TB Questionnaire. The questionnaire will be recorded and placed in the student folder.

Any **international student or student** whose country of origin where TB is considered endemic must be tested at the IU South Bend Health and Wellness Center. Those testing positive will be required to have a blood test confirming their TB status.

Anyone testing positive for tuberculosis will require treatment.

IUSB Dwyer College of Health Sciences generally follows ACHA guidelines:

ACHA is pleased to announce and release its most recent updated ACHA Guidelines, "Tuberculosis Screening and Targeted Testing of College and University Students." The Guidelines Statement can be found at <http://www.acha.org/topics/tb.cfm>

These updated Guidelines include TB Screening and Risk Assessment Appendices. Accordingly, those changes have been incorporated into another of our ACHA Guidelines,

“Recommendations for Institutional Pre-Matriculation Immunizations” (RIPI) under Part II. K, of the Sample Immunization Record. The updated RIPI can be found at the above link.

ACHA provides several other position statements and recommendations. All are available to download in pdf format at http://www.acha.org/Publications/Guidelines_WhitePapers.cfm

Influenza Immunization

The CDC has identified Healthcare Workers in the high risk category in prioritizing who should receive the vaccine; therefore, the CHS requires all students receive their annual immunization against the flu. Many clinical agencies require this of their employees to reduce the spread of this illness. If an unvaccinated student is exposed to a patient/client with the flu, the student may be removed from clinicals and required to begin treatment against the flu.

The absence must be made up according to the make-up policy. The student is responsible for the costs related to the treatment against the flu. The influenza immunization documentation is due by December 1, unless it is required sooner by the clinical site.

Hepatitis B Immunization

All healthcare providers with regular exposure to blood products are required by the Occupational Safety and Health Administration, Department of Labor to have the Hepatitis B vaccinations. Consistent with this requirement, the Hepatitis B vaccination is required for students in the CHS. The series must be initiated by the immunization deadline. Evidence of the first vaccination must be in your record by that time. The second vaccination is due 1-2 months after the first vaccination. The third vaccination is due 4-6 months after the first vaccination.

Students who currently work in a health care setting may want to contact their employer regarding arrangements to receive their vaccination. You may also contact the St. Joseph County Health Department for vaccination information. The IUSB Health & Wellness Center also offers the vaccines at a reasonable cost.

Policy: Prior to registration in any clinical course and at the student’s expense, every full-time or part-time, graduate or undergraduate student of the College of Health Sciences must undergo HBV vaccination and vaccine response evaluation unless the student is shown to be immune, the vaccine is contraindicated for medical reasons, or a declination is signed.

Procedures: Evidence of receipt of the HBV vaccination and vaccine response, immunity to HBV, or declination will be filed with the student's program director/dean prior to registration in a clinical course. When the vaccine is contraindicated for medical reasons, a declination form must be signed. Evidence of the receipt of the HBV vaccination series including vaccine response should be in the form of a signed statement from the student's healthcare professional (HCP) and evidence of declination can be submitted on the CHS form. Evidence of immunity to HBV, medical risk from the vaccine, or receipt of a booster(s) should be in the form of a signed statement from the healthcare provider.

Students who have completed the HBV series prior to entry into any clinical course are governed by the CDC guideline on vaccine response evaluation

CDC Guidelines for Nonresponders

HCW should be tested for antibody to HBsAg (anti-HB's) 1 to 2 months after completion of the 3- dose vaccination series (CDC Immunization 1997).

Persons who do not respond to the primary vaccine series should complete a second 3-dose vaccine series or be evaluated to determine if they are HBsAg-positive. Revaccinated persons should be retested at the completion of the second vaccine series. People who prove to be HBsAg-positive should be counseled regarding how to prevent HBV transmission to others and regarding the need for medical evaluation. Nonresponders to vaccination who are HBsAg negative should be considered susceptible to HBV infection and should be counseled regarding precautions to prevent HBV infection and the need to obtain HBIG prophylaxis for any known or probably parenteral exposure to HBsAg positive blood.

Declination Form should be stated as follows (source: FR Doc. 91-28886, December 6, 1991):

I understand that, due to my occupational exposure to blood or other potentially infectious materials as a student in a healthcare program, I may be at risk of acquiring hepatitis B virus (HBV) infection. I have been given the opportunity to be vaccinated with the hepatitis B vaccine at my own expense. However, I decline hepatitis B vaccination at this time. I understand that by declining this vaccine I continue to be at risk of acquiring hepatitis B, a serious disease. If in the future I continue to have occupation exposures to blood or other potentially infectious materials and I want to be vaccinated with the hepatitis B vaccine, I can receive the vaccination series at my own expense.

Additions

Due to frequent changes in the national standards and recommendations for adult immunizations, it may be necessary for the IUSB-CHS to request additional documentation beyond what is listed here prior to clinical admission. Students will be notified if they are affected, and it is the responsibility of the student to provide this information prior to the deadline.

*This policy applies to Health Science majors at the point of internship or community course specific.