

# **AS-SLP-09-A Immunizations Policy**

Faculty Approval: 5/31/23 Effective Date: 8/15/2023

# **Policy Statement:**

The purpose of this policy is to outline the immunization requirements for students enrolled in the MS-SLP program in accordance with clinical placement requirements.

# **Policy:**

It is imperative that students have required immunizations prior to entering the program to eliminate delays in obtaining clinical clock hours for direct patient care. IUSB-DCHS 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-DCHS. Students are requested to make a copy of all submitted documentation for their personal files.

# The following immunizations/tests are required:

- Tetanus Diphtheria (Tetanus/Diphtheria/Accelular Pertussis Tdap) within 10 years
- Measles Mumps Rubella 2 doses unless born prior to 1957.
- **Rubella (3 days)** 2 doses of MMR or 2 doses of ProQuad or Rubella titer of 1.10.
- Rubeola (Measles 10 days) 2 doses of MMR or 2 doses of ProQuad or Rubeola titer of 1.11.
- Mumps 2 doses of MMR or 2 doses of ProQuad or Mumps titer of 1.10

- Varicella (Chicken Pox) 2 doses of varicella or 2 doses of ProQuad or Varicella titer of 1.10 or a written statement detailing approximate date of having the chicken pox.
- **Tuberculosis** PPD tuberculin skin test upon admission and upon exposure or travel to high risk areas. After an initial negative test, students will be required to complete an annual TB Questionnaire. A newly positive reaction to the skin test requires a chest x-ray and documentation of counseling by a patient care provider regarding future treatment. Students with a history of a positive skin test require a negative chest x-ray within five years. Thereafter, students will be required to complete an annual TB Questionnaire.
- Influenza Immunization Annually before November 1.
- Hepatitis B Immunization 3-dose vaccine series, the first shot is required before program due date unless the student is shown to be immune, the vaccine is contraindicated for medical reasons, or a declination is signed (see below). Following the series of 3 vaccines, an evaluation of vaccine response will be completed within 2 months. 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. If no response to the primary vaccine series, the 3-dose vaccine series will be repeated and vaccine response evaluated. or be evaluated to determine if they are HBsAg-positive. Revaccinated persons should be retested and counseled by a healthcare provider. The program cannot determine or modify the requirements for participation at external locations. Some sites may require this vaccination series.
- **Covid-19 Vaccine-**2 dose vaccine series, preferably with boosters as indicated by age and history of infection. While IUSB cannot and does not mandate the Covid-19 vaccine, it is *highly* recommended as most of our clinical sites require it. IUSB MS-SLP cannot determine or modify the requirements for participation at external locations. It also does not intentionally or proactively identify sites that do not require the Covid-19 vaccine. Students should read and be familiar with policy SLP-CL-12A regarding the process for obtaining clinical sites.

### **Regarding Hepatitis B:**

Students have the right to decline the Hepatitis B series, but need to read the following Declination statement carefully:

**Declination Statement:** 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.

### Note:

Due to frequent changes in the national standards and recommendations for adult immunizations, it may be necessary for the IUSB-DCHS 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.

# Procedure:

Prior to start of the clinical program, students will be required to upload copies of their immunization history to the clinical compliance tracking system. The program director and/or clinical director review this documentation to ensure compliance. It is the student's responsibility to update their documentation as new vaccines are received (I.e. flu shot).