Greetings new P1 students!

Attached, please find the following regarding immunization requirements:

- **2024-2025 Immunization Requirements:** This document lists the requirements, explains what documentation is needed to satisfy the requirements, and what you should do if you do not already meet the requirements.

- **Requirements Decision Tree:** Understanding some of the requirements can be complicated because of the dates for deadlines. So, I created this decision tree as a visual aid in understanding the actions you may need to take. This is not a completely comprehensive decision tree, but it should get you started. If you have questions as you venture down each branch, feel free to let me know.

- **TB Clinical Assessment by Healthcare Provider:** This form can be used in one of three ways:
  - To document a 1- or 2-step tuberculin skin test (TST or often referred to as “PPD”): We will also accept a letter from your HCP or your HCP’s form. Proper documentation must include both the day of placement and the day the test is read. If both dates are not provided, the documentation will not be accepted.
  - To document a TB assessment and chest x-ray results: If your situation (i.e., previous positive PPD or positive one now) requires you to have a chest x-ray, you also need to have a TB assessment.
  - To document the IGRA lab test: The IGRA is only indicated if you had the BCG vaccine as a child. Sometimes when students go to their doctor to have blood drawn for the varicella and hepatitis-B titers, they also have their blood tested for IGRA because it’s easier and more convenient than having to make 4 trips to the office for a 2-step PPD. Unfortunately, this is problematic at the end of your P1 year when it is time for our annual TB screening. Therefore, if you did NOT have the BCG vaccine as a child, we ask that you NOT get the IGRA now for TB screening.

Please submit all available documents to me by **July 31, 2024.** Please do not fax your documents to me (our fax machine is temperamental!) or email your information to me. Instead, you may hand deliver your information if you are in the area or mail it to me. If you are running late, please don’t waste money using an overnight delivery service. Simple email me to let me know and try to get your envelope postmarked by July 31. Once I receive your documentation, I will let you know what remains to be done and provide an estimated timeline for completing any vaccines (some take 6 months!).

I’m ready to answer any questions you may have so please email me at scarbo@presby.edu as needed.
<table>
<thead>
<tr>
<th>Requirement</th>
<th>How Do I Meet the Requirement?</th>
<th>What If I Don’t Meet the Requirement?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Measles, Mumps, Rubella (MMR)</td>
<td>Submit documentation of the 2-dose series or documentation of positive titers</td>
<td>Two-dose vaccine series never completed: Start the 2-dose series by July 1, 2024.</td>
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<td></td>
<td>History of disease is not acceptable proof of immunity</td>
<td>Series completed but documentation is not available: Titer may be drawn; however, if titer is negative, 2-dose series must be started by July 1, 2024.</td>
</tr>
<tr>
<td>Varicella/Chickenpox (positive titer)</td>
<td>Requirement met with positive titer</td>
<td>Two-dose series completed previously but titer never drawn: Titer should be drawn by June 15, 2024. If titer is negative, you must repeat the 2-dose series with the first vaccine given before July 1, 2024, with the second vaccine administered at least 30 days later. Then another titer should be drawn 4-6 weeks later.</td>
</tr>
<tr>
<td></td>
<td>History of disease is not acceptable proof of immunity</td>
<td>Two-dose series never completed: Start the 2-dose series by July 1, 2024. When the series has been completed, titer should be drawn 4-6 weeks later.</td>
</tr>
<tr>
<td>Tuberculosis (TB)</td>
<td>Requirement met with positive titer</td>
<td>Two- or three-dose series completed previously but titer never drawn: Titer should be drawn by June 15, 2024. If titer is negative, you must restart the series before July 1, 2024. The schedule will vary depending upon which vaccine you receive. Hep-B is available in both 2-dose and 3-dose vaccines.</td>
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<tr>
<td>(2-step TST, negative IGRA, or negative</td>
<td>For 2-dose series, Heplisav-B vaccine is accepted.</td>
<td>Two- or three-dose series never completed: Start the series by July 1, 2024. When the series has been completed, titer should be drawn 4-6 weeks later. If titer is negative, student must continue with CDC-recommended protocol of additional vaccines/titers.</td>
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<tr>
<td>assessment/CXR)</td>
<td>For 3-dose series, Engerix-B, Recombivax HB, or Twinrix vaccines are accepted.</td>
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<td></td>
<td>The specific lab test to have is the hepatitis-B surface antibody (anti-HBs)</td>
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<tr>
<td>Hepatitis B</td>
<td>Requirement met with positive titer</td>
<td>No previous TST or last test before August 1, 2023: 2-step TST between May 1-July 1, 2024.</td>
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<tr>
<td>(positive titer)</td>
<td>For 2-dose series, Heplisav-B vaccine is accepted.</td>
<td>TST between August 1, 2023-April 1, 2024: 1-step TST between May 1-July 1, 2024.</td>
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<td></td>
<td>For 3-dose series, Engerix-B, Recombivax HB, or Twinrix vaccines are accepted.</td>
<td>Previous positive TST or positive result now: TB assessment completed by healthcare provider, then chest x-ray between August 1, 2023, and July 1, 2024.</td>
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<tr>
<td></td>
<td>The specific lab test to have is the hepatitis-B surface antibody (anti-HBs)</td>
<td>History of BCG vaccine: negative IGRA or TB assessment and negative chest x-ray between August 1, 2023, and July 1, 2024.</td>
</tr>
<tr>
<td>Tuberculosis (TB)</td>
<td>Requirement met with 2-step tuberculin skin test (TST), negative IGRA, or assessment by your</td>
<td></td>
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<tr>
<td>(2-step TST, negative IGRA, or negative</td>
<td>healthcare provide with a negative chest x-ray,</td>
<td></td>
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<tr>
<td>assessment/CXR)</td>
<td>Notes:</td>
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<td></td>
<td>• 2-step TST requires 4 visits: 1 to place and 1 to read for each step; the 2nd step should be administered 1-3 weeks after the 1st step.</td>
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<td>• Interferon-gamma release assay (IGRA) is a blood test to determine TB infection; we accept the QuantiFERON-TB Gold In-Tube (QFT-GIT) test.</td>
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<td>• Students who received the BCG vaccine as a child should consider the QFT blood test.</td>
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<td>• If a student’s TST or QFT test is positive, a TB assessment and negative chest x-ray will be required at the time of matriculation and annually thereafter.</td>
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<tr>
<td>Tetanus, Diphtheria, and Pertussis (Tdap)</td>
<td>Requirement met with Tdap/Td received after July 2018</td>
<td>Vaccine in progress or pending: All doses completed by July 1, 2024.</td>
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<tr>
<td>or Tetanus (Td)</td>
<td>Tdap/Td provides protection for 10 years. Your vaccine should not expire before your planned graduation date.</td>
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<td>Medical exemption: A letter from your healthcare provider describing the reason for your request for medical exemption is required.</td>
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<td>COVID-19</td>
<td>Requirement met if fully vaccinated</td>
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<td></td>
<td>At this time, booster vaccines are not required; however, if you have had the booster, please provide documentation.</td>
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</table>

All documentation must be mailed (or hand delivered) to the PCSP Office of Experiential Education, 307 North Broad Street, Clinton, SC 29325, by July 31, 2024.

If you have any questions about your immunizations, the requirements, or proper documentation, contact Mrs. Susi Carbonneau in the PCSP Office of Experiential Education at scarbo@presby.edu, 864-938-3902.
Tuberculosis Screening

Never had tuberculin skin test (TST)
- Complete 2-step between 05/01/24 & 07/01/24

Had last TST before 08/01/23
- Complete 2-step between 05/01/24 & 07/01/24

Had TST between 08/01/23 & 04/01/24
- TB assessment by HCP and CXR between 08/01/23 & 07/01/24

If previous positive TST or positive TST now
- Complete 1-step between 05/01/24 & 07/01/24

If history of BCG vaccine
- Negative IGRA lab test* or TB assessment by HCP and CXR between 08/01/23 & 07/01/24

MMR, Varicella, and Hepatitis-B Vaccines/Screening

No documentation of MMR series**
- Start series by 07/01/24

If varicella or hepatitis-B series started but not completed
- Draw titer by 06/15/24

If varicella or hepatitis-B series completed but titer never drawn
- If titer negative
  - Requirement met
- If titer positive
  - Requirement met

*IGRA lab test is normally done if history of BCG vaccine

Tetanus, Diphtheria, & Pertussis (Tdap) or Tetanus (Td) Vaccine

If last Tdap/TD was before July 2018
- Get Tdap/Td vaccine by 07/01/24

If last Tdap/TD was after July 2018
- Requirement met

**Although titers can be drawn for MMR, if negative, the MMR series is not repeated, therefore, documentation of MMR series is all that’s required.
1. Patient History:
   • History of a positive TB skin test? ☐ Yes ☐ No
   • History of BCG vaccination? ☐ Yes ☐ No  (If yes, please consider IGRA instead of TST or CXR)

2. TB Symptom Check:
   • Does the student have signs or symptoms of active pulmonary tuberculosis disease? ☐ Yes ☐ No
   • If yes, indicate signs and symptoms below:
     ☐ Cough (especially if lasting for 3 weeks or longer) with or without sputum production
     ☐ Shortness of breath
     ☐ Coughing up blood (hemoptysis)
     ☐ Chest pain
     ☐ Loss of appetite
     ☐ Unexplained weight loss
     ☐ Increased fatigue
     ☐ Night sweats
     ☐ Fever

3. Method of Testing:
   a. Mantoux Tuberculin Skin Test (TST)
      TST result should be recorded as millimeters of induration, transverse diameter; if no induration, write “0.”
      1st-step PPD/Date Given: ______________ Date Read: ______________ Result: _______mm induration
      Interpretation: ☐ Positive ☐ Negative
      2nd-step PPD/Date Given: ______________ Date Read: ______________ Result: _______mm induration
      Interpretation: ☐ Positive ☐ Negative
      Please note that IAW CDC guidelines, the 2nd PPD should be administered at least 1-3 weeks after the 1st.
      We cannot accept a 2nd step placed within 1 week of the 1st.

   b. Interferon Gamma Release Assay (IGRA)
      IGRA should be considered for students with history of BCG vaccination instead of TST or CXR; if appropriate, it is
      required before matriculation and annually thereafter while in school. We accept the QuantiFERON-TB Gold test
      Date Obtained: ___________________ Method: ☐ QFT-GIT
      Result: ☐ Positive ☐ Negative ☐ Indeterminate
      Please provide a copy of the laboratory report.

   c. Chest X-Ray
      A chest x-ray is required before matriculation for students with a positive TB skin test or IGRA blood test and annually
      thereafter while in school. (Please note an annual CXR is still required by some of our clinical sites; thus, we too must require it.)
      Date of chest x-ray: ______________ Result: ☐ Normal ☐ Abnormal
      Please provide a copy of the radiology report.

4. Treatment:
   Recommendation for follow-up: ☐ None ☐ Repeat annually ☐ Treatment for latent TB infection
   Other recommendation: ______________________________________________________________

5. Certification by Healthcare Professional:
   Name ___________________________________________ Title/Credentials __________________________
   Address ___________________________________________ Phone ________________________________
   ________________________________________________________________ __________________________
   Signature Date

This form—along with a copy of any testing performed (CXR, labwork, etc.)—must be sent to the
PCSP Office of Experiential Education, 307 North Broad Street, Clinton, SC  29325 by July 31, 2024.