



# Doctor of Pharmacy Student Immunization Form

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Reference	Vaccine	Dates				Titer		Disease
1	Hepatitis B	/ / MM/DD/YYYY	/ / MM/DD/YYYY	/ / MM/DD/YYYY	<b>OR</b>	/ / MM/DD/YYYY <b>Immune:</b> Yes No	<b>OR</b>	/ / MM/DD/YYYY
2	MMR (Measles, Mumps, Rubella)	/ / MM/DD/YYYY	/ / MM/DD/YYYY		<b>OR</b>	/ / MM/DD/YYYY <b>Immune:</b> Yes No	<b>OR</b>	/ / MM/DD/YYYY
3	Polio Circle Type: IPV or OPV	/ / MM/DD/YYYY	/ / MM/DD/YYYY	/ / MM/DD/YYYY	<b>OR</b>	/ / MM/DD/YYYY <b>Immune:</b> Yes No	<b>OR</b>	/ / MM/DD/YYYY
4	Tdap Tetanus/Diphtheria/Pertussis	/ / MM/DD/YYYY						
5	Varicella (Chicken Pox)	/ / MM/DD/YYYY	/ / MM/DD/YYYY		<b>OR</b>	/ / MM/DD/YYYY <b>Immune:</b> Yes No	<b>OR</b>	/ / MM/DD/YYYY

Physician Office Stamp

Physician Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**OR**



## Doctor of Pharmacy Student Immunization Schedule

Vaccine	Schedule				Explanation
Hepatitis B	Day 1		30 Days Later	6 Months Later	Hepatitis B vaccinations are administered on a 0, 1, 6 month schedule *
MMR (Measles, Mumps, Rubella)	Day 1		4 weeks Later		MMR vaccinations are administered 4 weeks apart
Polio	Day 1		30 Days Later	6 Months Later	Polio vaccinations are administered on a 0, 1, 6 month schedule for adults *
Tdap Tetanus/Diphtheria/Pertussis	Day 1				Tdap vaccination is given once, however a Td booster is required every 10 years
Varicella (Chicken Pox)	Day 1		4-8 weeks Later		Varicella vaccinations are administered 4-8 weeks apart

- Vaccinations are due no later than June 15
- Vaccination is due no later than July 1
- Vaccinations are due no later than July 15
- Vaccinations are due no later than January 15
- Vaccination must be read within 72 hours after vaccination

All **Green** vaccinations can be given on the same day  
 All **Blue** vaccinations can be given on the same day  
 All **Red** vaccinations can be given on the same day

\* 0 refers to the start date of immunizations

**NOTE:**  
 The Two Step Mantoux (PPD –Tuberculosis Test) will be administered on campus during orientation. If you have had a positive test in the past or had a BCG vaccine as a child you will need to provide a chest x-ray and complete a PPD screening. For more information please see the reference area on the next page.

<b>Reference</b>	<b>Vaccine Type</b>	<b>Instructions</b>
1	<b>Hepatitis B</b>	Three doses of Hepatitis B vaccine. A positive titer result is required unless it has been >one year since your third dose. Wait 28 days after the 3 <sup>rd</sup> dose of vaccine before getting a titer-it is important to have a titer done within a few months of vaccine completion in order to get accurate information. If negative titer results after three doses of vaccine, additional doses of vaccine will be required. It may take up to a year to complete the required vaccine and titer.
2	<b>MMR Measles, Mumps, Rubella</b>	<i>Measles component:</i> adults born before 1957 can be considered immune to measles. Adults born during or after 1957 should receive $\geq 1$ dose of MMR unless they have a medical contraindication, documentation of $\geq 1$ dose, history of measles based on health-care provider diagnosis, or laboratory evidence of immunity. A second dose of MMR is recommended for adults who 1) were recently exposed to measles or in an outbreak setting; 2) were previously vaccinated with killed measles vaccine; 3) were vaccinated with an unknown type of measles vaccine during 1963--1967; 4) are students in postsecondary educational institutions; 5) work in a health-care facility; or 6) plan to travel internationally. <i>Mumps component:</i> 1 dose of MMR vaccine should be adequate for protection for those born during or after 1957 who lack a history of mumps based on health-care provider diagnosis or who lack laboratory evidence of immunity. <i>Rubella component:</i> administer 1 dose of MMR vaccine to women whose rubella vaccination history is unreliable or who lack laboratory evidence of immunity. For women of childbearing age, regardless of birth year, routinely determine rubella immunity and counsel women regarding congenital rubella syndrome. Do not vaccinate women who are pregnant or who might become pregnant within 4 weeks of receiving vaccine. Women who do not have evidence of immunity should receive MMR vaccine upon completion or termination of pregnancy and before discharge from the health-care facility
3	<b>Polio</b>	Three doses of vaccine recommended. If more than three were received, list the last three doses and dates. Please indicate type of vaccine received if known: Oral Polio Vaccine (OPV) or Inactive Polio Vaccine (IPV)
4	<b>Tetanus/Diphtheria/Pertussis (Tdap)</b>	One adult booster required. Td booster is required every 10 years. A Tdap can only be given if it has been 2 years since your last Td.
5	<b>Varicella (Chicken Pox)</b>	Two doses of varicella vaccine (at least 4 weeks apart) are required if the vaccine was given after the age of 13, one dose if given at or before age 13 <b>or</b> laboratory evidence (titer) of immunity <b>or</b> reliable history of chickenpox. Vaccination with this live viral vaccine may be waived if there is medical contraindication. Each situation will be assessed on an individual basis.
<b>Reference</b>		
**	<b>BCG</b>	BCG, or bacille Calmette-Guerin, is a vaccine for tuberculosis (TB) disease. Many foreign-born persons have been BCG-vaccinated. BCG vaccination may cause a false-positive reaction to the Tuberculin Test , which may complicate decisions about prescribing treatment.
**	<b>Tuberculin Test</b>	The two-step Mantoux PPD vaccinations are administered 1-3 weeks apart and each vaccination must be read within 48-72 hours after administered. A PPD is required annually. If a positive PPD is received a chest x-ray and screening must be conducted. A chest x-ray is required every 5 years unless symptoms emerge and a checklist screening is required annually.

The major source of this information comes from the Centers for Disease Control and Prevention. Immunization of Health Care Workers: recommendations of the Advisory Committee on Immunization Practices (ACIP) and the Hospital Infection Control Practices Advisory Committee (HICPAC). MMWR 1997: 46 (RR-18). The complete guidelines are available on the line at <http://www.cdc.gov/mmwr/preview/mmwrhtm/00050577.htm>.

KEEP A **COPY** OF THE **COMPLETED** IMMUNIZATION RECORD FORM FOR YOUR RECORDS AND RETURN THE **ORIGINAL** VERSION.

## IMMUNIZATION POLICY

Students on rotations and or clerkships in a health care facility are at higher risk than the general population for acquiring communicable disease such as measles, mumps, rubella, chicken pox, and tuberculosis. A pharmacy candidate who has one of these diseases may, in turn, infect other personnel and patients. Such infections established in any health care facility are serious in their potential for medical and possible legal complications. Prior to enrollment in the College of Pharmacy, students are required to obtain a history of their immunizations and vaccinations. Documentation of immunizations and vaccinations must be provided by written documentation of a health care provider (physician, nurse, or pharmacist), and must include the type of immunization/vaccination received, the date, and the signature of the health care provider who administered the immunization/vaccination.

If immunization records are not available, candidates may meet these requirements by submitting serologic confirmation of immunity for hepatitis B, mumps, measles, rubella, varicella or receive repeated immunizations for these diseases.

Candidates not meeting these requirements will not be allowed to participate in rotations and or clerkships or any course that requires patient care. Failure to obtain required immunizations may lead to failure of a course. During registration periods, all students are required to have current health records in order to be allowed to register. Holds are placed on the student record when a student health record is not current.

### Religious Exemption:

Any student who objects on the grounds that administration of immunizing agents conflicts with his or her religious tenets or practices shall be exempt from the immunization requirements unless an emergency or epidemic of disease has been declared by the Board of Health. An affidavit of religious exemption must be submitted on a Certificate of Religious Exemption (Form CRE-1) which may be obtained at the Virginia Department of Health's website at [www.vdh.state.va.us](http://www.vdh.state.va.us) or any local health department.