

What are my health requirements as a UCSF professional student?

Who: The requirements apply to **all professional students** as they have patient care contact. This includes students enrolled to Medical, Dental, Nursing, Pharmacy, or Physical Therapy programs.

What: The diseases covered by the requirements include:

- Measles
- Mump
- Rubella
- Varicella (Chicken Pox)
- Pertussis (immunity conferred by Tdap vaccine)
- Hepatitis B
- Tuberculosis

Please submit the dates of vaccination as well if you have them.

Submit immunization data for other non-required diseases if you have them (ex: HPV).

When: All new students must meet the requirements BEFORE registering and filing a study list.

Disease	Required Data
Measles (Rubeola) Upload titer lab report.	Positive Measles IgG Antibody titer (must be a positive titer) <ul style="list-style-type: none"> • If you have a negative or indeterminate titer, obtain one dose of MMR vaccine and repeat titer in 4-6 weeks. If titer is still negative, contact Student Health. • Vaccine doses must be at least 28 days apart.
Mumps Upload titer lab report.	Positive Mumps IgG Antibody titer (must be a positive titer) <ul style="list-style-type: none"> • If you have a negative or indeterminate titer, obtain one dose of MMR vaccine and repeat titer in 4-6 weeks. If titer is still negative, contact Student Health. • Vaccine doses must be at least 28 days apart.
Rubella Upload titer lab report.	Positive Rubella IgG Antibody titer (must be a positive titer) <ul style="list-style-type: none"> • If you have a negative or indeterminate titer, obtain one dose of MMR vaccine and repeat titer in 4-6 weeks. If titer is still negative, contact Student Health.
Varicella (chicken pox) Upload titer lab report.	Positive Varicella IgG Antibody titer (must be a positive titer) <ul style="list-style-type: none"> • If you have a negative or indeterminate titer, obtain one dose of varicella vaccine and repeat titer in 4-6 weeks. If titer is still negative, contact Student Health. • Vaccine doses must be at least 28 days apart.
Pertussis	Tdap vaccine - 1 dose vaccine <ul style="list-style-type: none"> • Vaccine must be Adult Tdap (not Td or childhood Dtap). • Tdap vaccine covers: tetanus, diphtheria, pertussis

<p>Hepatitis B</p> <p>Items A, B, or C on right will meet requirements.</p> <p>Upload titer lab report if vaccine series is complete.</p>	<p>A. At least 2 of 3 doses of Hepatitis B vaccine required (all 3 doses required if you have time to complete series), provide all three dates if series complete,</p> <p style="text-align: center;">AND</p> <p>Positive Hepatitis B surface antibody (if you have completed the Hep B series, positive titer only meets requirement)</p> <hr/> <p style="text-align: center;">OR</p> <hr/> <p>B. If you have a history of Hep B infection: Hep B Core antibody & Hep B Surface Antigen titer results (these titers submitted in instance of prior infection). Only positive titers reflect history of past disease. If these titers are negative you should be immunized and obtain the surface antibody titer.</p> <hr/> <p style="text-align: center;">OR</p> <hr/> <p>C. Received vaccination and titer didn't convert to positive:</p> <p>Completed 3 vaccines and titer didn't convert: If you have completed a primary Hep B series of 3 immunizations and your titer doesn't convert to reactive/positive, you must obtain and submit the date for a 4th dose of Hep B. Also submit the date of the previous three immunizations and negative/non-reactive titer.</p> <p>Completed 6 vaccines and titer didn't convert: If you have already received two, full courses of Hep B vaccination (6 doses) submit the dates of ALL doses of vaccine and most recent negative titer.</p> <p>Notes: The Hepatitis B vaccination series requires 3 vaccinations given at minimum intervals of 0, 30 and 240 days (0, 1, and 6 months). Greater intervals are permissible. Do not restart a vaccination series if you have fewer than three doses; just pick up where you left off.</p> <p>You may obtain a Hepatitis B <i>Surface Antibody</i> titer 4 weeks after the last of three doses of vaccine, titer required if series complete.</p>
<p>TB Screening</p> <ul style="list-style-type: none"> Follow the 'Negative TB Screen' section if you have a history of negative TB screening (skin test, QFT, TSPot) <p style="text-align: center;">OR</p> <ul style="list-style-type: none"> Follow the '<i>Positive TB Screen</i>' section if you have a history of positive TB screening (skin test, QFT, TSPot) 	
<p><u>Negative TB Screen</u></p> <p>Please submit data for either A, B, or C. <i>Any</i> of the options will meet the requirement.</p> <p>NOTE: A PPD skin test must be placed the SAME day as a live virus vaccine OR at least 28 days after the administration of a live virus vaccine to be considered valid. Live virus vaccines include measles, mumps, rubella, and varicella.</p>	<p>A. Two PPD Skin Tests performed by either method below:</p> <p>Two-step PPD skin testing: Two PPD (tuberculosis skin testing) skin tests placed 7-31 days apart in the three months preceding entry into school, (Note: Do not have a TB skin test placed for 28 days following a live virus vaccine – can be placed the same day as the live virus).</p> <p>Kaiser Permanente patients may have a slightly altered PPD skin test pattern. Kaiser requests that patient have a PPD skin test placed, come back 7 days later for a read and have the second skin test placed on that same day. SHCS will accept this method.</p> <p style="text-align: center;">or</p> <p>History of regular skin testing: Documentation of a TB skin test completed within the three months prior to starting school and documentation of an additional skin test completed within one year of the more recent test. (This applies if you have had recent annual testing.)</p> <p>Required for each PPD skin test:</p> <ul style="list-style-type: none"> Placement date Reading Date MM induration (0 or higher)

	<p style="text-align: center;">OR</p> <p>B. QuantiFERON testing: Documentation of a negative QuantiFERON Gold test reported within three months of entering school, (positive test, see below)</p> <p style="text-align: center;">OR</p> <p>C. T-SPOT testing: Documentation of a negative T-SPOT.TB test reported within three months of entering school, (positive test, see below)</p>
<p style="text-align: center;"><u>Positive TB Screen</u></p> <p>(Please submit data for D, E, and F. All data must be submitted to meet the requirement.)</p>	<p>D. Results of a POSITIVE PPD skin test (reading 10 mm or > is positive) or POSITIVE QuantiFERON or POSITIVE T-SPOT:</p> <hr/> <p style="text-align: center;">AND</p> <hr/> <p>E. Chest X-ray</p> <ul style="list-style-type: none"> • Chest x-ray date • Indication of normal or abnormal finding on chest x-ray <p>Note: Date of chest x-ray report must be within 3 months of entering UCSF if INH Therapy has been taken for less than 6 months. If 6 months of INH therapy taken, chest x-ray report can be from time of positive screen.</p> <hr/> <p style="text-align: center;">AND</p> <hr/> <p>F. INH therapy taken:</p> <ul style="list-style-type: none"> • Indicate INH therapy taken on the Sign and Symptom review form. <p>-----</p> <p>Question about BCG? Students born outside the U.S. who received BCG vaccine should follow the TB screening requirements as listed above. If you have had slight reactions to a PPD skin test in the past, it is recommended you opt for QuantiFERON or T-Spot testing.</p>
<p>TB Sign & Symptom Review form</p> <p>Online form, all students required to complete</p>	<p>TB Sign and Symptom Review Form</p> <ul style="list-style-type: none"> • You will see this form on MyHealthRecord.ucsf.edu on the Home page and in the "Forms" section. • Completion required.