

GROSSONT COLLEGE SCHOOL OF NURSING

IMMUNIZATION and TB testing INFORMATION

The following immunizations must be **completed** in order to submit the application packet. Please use the following pages to assist you and your healthcare provider to ensure that the correct vaccinations and/or tests are completed to the Program requirements.

MMR (Measles, Mumps and Rubella) Applicants must submit:

1. Two MMR Immunizations given at least 28 days apart.
- or**
2. A blood test/titer (test for immunity) for Measles, Mumps and Rubella.

HepB (Hepatitis B). Applicants must submit:

1. Proof of 3 vaccinations,
- or**
2. Positive / Immune Hep B titer.

Tdap (Tetanus/Diphtheria and Acellular Pertussis). Applicants must submit;

1. Tdap immunization every 10 years.

Varicella (Chickenpox) Applicants must;

1. Receive 2 vaccinations; no sooner than 30 days apart.
- or**
2. A positive Varicella titer.

TB (Tuberculosis) Applicants must;

1. Provide proof of negative test results for TB or submit the required documentation of a positive TB test. Refer to the TB Clearance Requirement Information document attached for complete instructions on TB testing for the program.

GROSSMONT COLLEGE HEALTH PROFESSIONS IMMUNIZATION REQUIREMENTS FOR ADMISSION TO NURSING PROGRAM

The following *Immunization Requirements* form is provided to the student for an aid in determining the immunizations/tests required to apply to the Nursing Program. In lieu of the attached form, you may submit forms obtained from your healthcare facility with the appropriate **signature and stamp at each vaccination and/or test completed or transcribed**. **The Immunization requirement form should be completed only by the appropriate Healthcare Professional to include;** Physician, Physician Assistant, Nurse Practitioner, Registered Nurse, or Grossmont College Health Services Nurse.

NAME: _____ STUDENT ID#: _____
Last First

<p>MMR (Measles, Mumps, Rubella)</p> <p style="color: blue;">Must include 2 vaccinations</p> <p>OR</p> <p>Laboratory Evidence of Immunity (titer)</p>	<p>Date #1: _____</p> <p>Date #2: _____ (1 mo. following date #1)</p> <p>Titer Date: _____ <input type="checkbox"/> positive(immune) <input type="checkbox"/> negative</p>	<p>_____ Signature</p> <p>_____ Signature</p> <p>_____ Signature</p>	FACILITY STAMP
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<p>Hepatitis B</p> <p style="color: blue;">Must include 3 vaccinations</p> <p>OR</p> <p>Laboratory Evidence of Immunity (titer) <small>If known past history of the Hep B infection and/or to verify immunity to Hep B. HepB Surface Antibody, <u>Quantitative (QT)</u> only.</small></p>	<p>Date #1: _____</p> <p>Date #2: _____ (1 mo. following date #1)</p> <p>Date #3: _____ (5 mo. following date #2)</p> <p>Titer Date: _____ (1 mo. following date #3) <input type="checkbox"/> positive(immune) <input type="checkbox"/> negative</p>	<p>_____ Signature</p> <p>_____ Signature</p> <p>_____ Signature</p> <p>_____ Signature</p>	FACILITY STAMP
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<p>Tetanus/ Diptheria and Acellular Pertussis (Tdap)</p> <p style="color: blue;">Must be given within the past 10 years.</p>	<p>Tdap Date: _____</p> <p>Td Booster Date: _____</p>	<p>_____ Signature</p> <p>_____ Signature</p>	FACILITY STAMP
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<p>Varicella (Chickenpox)</p> <p style="color: blue;">Must include 2 vaccinations</p> <p>OR</p> <p>Laboratory Evidence of Immunity (titer).</p>	<p>Date #1: _____</p> <p>Date #2: _____ (1 mo. following date #1)</p> <p>Titer Date: _____ <input type="checkbox"/> positive (immune) <input type="checkbox"/> negative</p>	<p>_____ Signature</p> <p>_____ Signature</p> <p>_____ Signature</p>	FACILITY STAMP
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ADDITIONAL IMMUNIZATIONS, BOOSTERS OR LABORATORY TESTS MAY BE REQUIRED UPON ADMISSION TO THE NURSING PROGRAM

GROSSMONT COLLEGE SCHOOL OF NURSING

TB CLEARANCE REQUIREMENTS

(PLEASE READ CAREFULLY)

1) INITIAL TB CLEARANCE

a) If you have **never** had a TB test OR if it has been **over 12 months** since receiving your last negative TB test, you have **two options** for initial TB clearance. TB clearance is required even if you have had prior BCG inoculation.

1. A baseline "Two-Step" TB skin test (PPD)
 - i. The dates "tested" and "read" with results reported in "mm" induration must be included for all skin tests.
 - ii. A two-step series will take a minimum of 9 days to complete from the step-one "test" date to the step-two "read" date.

OR

2. A blood test for TB (Interferon-Gamma Release Assay (IGRA) test such as QuantiFERON-TB Gold). This test will take the place of the 2-step TB skin test.

b) If you have a history of a positive TB test, or if any of your initial TB tests are positive, please refer to the section below addressing positive TB tests.

2) ANNUAL TB CLEARANCE - Your TB must be in compliance throughout each semester. It cannot expire in the middle of a semester.

a) You have two options for annual TB testing.

1. A TB skin test which needs to be done **PRIOR** to the expiration of the previous TB skin test. If the interval between the testing is greater than 364 days, the two-step must be repeated.

OR

2. A blood test for TB (Interferon-Gamma Release Assay (IGRA) test such as QuantiFERON-TB Gold). This test will take the place of the annual TB skin test.

3) POSITIVE TB TEST

a) If you previously have had a **positive** TB PPD skin test, you must provide the following:

1. The positive TB skin test report, with the induration measured in "mm". If the student cannot provide a test indicating positive results, a baseline skin test must be done.
2. Copy of the clear chest x-ray report to exclude a diagnosis of TB disease. Once you are admitted to the nursing program, you may be required to repeat the chest x-ray prior to specific clinical rotations.
3. TB Questionnaire (you can obtain a copy on the nursing website or in the admission packet). This TB Questionnaire must be done annually.

b) If a TB skin test converts from negative to positive, students may not be on campus or attend class or clinical until submitting a negative chest x-ray report, completing a TB questionnaire, and following up with the Grossmont Student Health Services office to be cleared to be on campus.

c) Medical evaluation for possible treatment of Latent Tuberculosis Infection (LTBI) is recommended for those individuals with a recent conversion to a positive TB test.

GROSSMONT COLLEGE SCHOOL OF NURSING MANTOUX TUBERCULIN SKIN TEST

NAME: _____
Last First

All Health Profession students are required to have a 2-step (two separate tests) INTRADERMAL TST (MANTOUX) prior to program start, unless previously positive. A TB test or Questionnaire for positive results, is due yearly for all accepted students. See the preceding pages for more information.

If **positive**, to be cleared for the Nursing Program, supporting documentation of a positive TB test result must accompany this form for any TB test previously completed. **The size of indurations must be measured in mm and a copy of a clear chest x-ray is required to be on file in the program office. Once admitted to the nursing program, a current chest x-ray completed within 6 months of the first day of classes must be submitted.**

On this form, a signature and stamp will only be accepted from the following: Physician, Physician Assistant, Nurse Practitioner, Registered Nurse, or Grossmont College Health Services Nurse.

Step #1		
Date: _____ Time Given: _____	Manufacturer: _____ Dose: <u>0.1mL</u> Exp. Date: _____ Lot#: _____ Given By: _____ signature	
Date: _____ Time Read: _____	Results: _____ mm Read By: _____ signature	
If Mantoux Positive: Chest X-Ray Required Date: _____	Results: <input type="checkbox"/> Negative <input type="checkbox"/> Positive (a copy of the report must be submitted with this form to the Program office)	

Step #2 (No sooner than 7 days after Step #1)		
Date: _____ Time Given: _____	Manufacturer: _____ Dose: <u>0.1mL</u> Exp. Date: _____ Lot#: _____ Given By: _____ signature	
Date: _____ Time Read: _____	Results: _____ mm Read By: _____ signature	
If Mantoux Positive: Chest X-Ray Required Date: _____	Results: <input type="checkbox"/> Negative <input type="checkbox"/> Positive (a copy of the report must be submitted with this form to the Program office)	

