



### Student Health Mandatory Requirements For School of Nursing Students

Students are responsible for maintaining current mandatory requirements throughout enrollment. Incoming students must complete and submit all Student Health mandatory requirements to the Student Health Portal one week before the beginning of the semester. All students must ensure mandatory requirements are current through each semester of enrollment.

[Student Health FAQ](#)

### Requirements

- Varicella quantitative titer positive (i.e., immune) AND 2 varivax immunizations
- MMR quantitative titer positive (i.e. immune) AND MMR vaccines must after 1957 (two in series)
- Hepatitis B quantitative titer positive AND Hepatitis B vaccination at 0, 30, and 180 days
- Immunization History and Lab Work
- TB/PPD skin test or blood testing annually
  - Chest x ray is required only if test is positive. INH therapy is strongly encouraged for latent TB for 9 months. Treatment of active TB is required.
- Tetanus/diphtheria test within past 10 years
- Meningococcal Vaccine given at age 16 or older, or Waiver
- Initial COVID Vaccine Series Information, or Waiver
- Influenza (Flu) vaccination annually, or Waiver

### Required Documentation to Upload to Student Health Portal

	Required Documentation	Additional Information
Varicella	Quantitative Titer AND Copy of original lab with reference range*	AND Proof of Varicella immunizations
Measles (roseola) Mumps and Rubella (MMR)	Quantitative Titer AND Copy of original lab with reference range**	AND Proof of MMR immunizations
Hepatitis B titer (Hep B)	Quantitative titer AND Copy of original lab with reference range***	AND Proof of Hepatitis B Immunizations
Immunization History and Lab Work	<a href="#">Immunization History and Lab Work</a> Form; 2-page document to be completed by student.	
TB/PPD or blood testing	+ or - result AND Notation of # of m.m. of induration. BCG recipients should receive blood testing only <a href="#">Annual TB Skin Test</a> Form	If positive screen, complete the <a href="#">TB Screen for Positive TB Test</a> Form.

Tetanus/Diphtheria	Proof of vaccination within the last 10 years	
Meningitis Vaccine	Date of Immunization	OR <a href="#">Refusal of Vaccination</a> Form
COVID-19 Vaccine	Dates of initial Immunization with Brand Name	OR <a href="#">Refusal of Vaccination</a> Form
Influenza (Flu) Vaccination annually	Dates of initial Immunization with Brand Name	OR <a href="#">Influenza Waiver</a> Form

\*If the varicella titer is negative, repeat the series (2 vaccines). Upload immunizations in the student health portal.

\*\*If one of the three MMR titers are negative, then submit proof of an MMR booster. If 2 or more titers are negative, repeat the MMR series (2 vaccines), Upload immunizations in the student health portal.

\*\*\*If your hepatitis B titer is negative, you have the option of receiving a hepatitis B booster vaccine, or repeating the hepatitis B series. Upload immunizations in the student health portal.