HEALTH PROFESSIONS

Required Immunizations

All students enrolled in a Health Professions Program at Howard College are required to have the following immunizations and clearances.

- **Tetanus/Diphtheria (TD)**
  - One dose is required within the last ten years.

- **Measles (MMR)**
  - Two doses OR a positive titer.

- **Hepatitis B**
  - Three doses OR a positive titer. *NOTE: The student must have received the first two doses of the Hepatitis B series by the June 1 deadline.*

- **Varicella**
  - Two doses OR a positive titer OR written confirmation of the disease.
  - Annually by PPD injection OR chest x-ray with the approval of a physician.

- **Tuberculosis Clearance**
  - Recommended, not required.

- **Polio (OPV/IPV)**
  - Recommended, not required.

- **Influenza**
  - Recommended, not required.

- **Meningococcal**
  - Recommended, not required.

*NOTE: Some clinical sites may require proof of polio or Varicella.*

If a student who has no proof of any immunizations, it will take him/her 6 months to complete the above required immunizations.

If a student has documentation of childhood immunizations but has not completed the Hepatitis B series, it would take him/her 4-6 months to complete the required immunizations (depending on the clinic used).

It is the student’s responsibility to obtain and provide proof of the required immunizations and clearances. Students must complete the Record of Required Immunizations form and submit with the Student Admission Packet. Howard College will not notify students of deadlines and schedules. Proof of the first two Hepatitis B immunizations (or titer), MMR, TD and Varicella must be provided by June 1 in order to be considered for admission into any Health Professions Program.

**For EMT students**, proof of required immunizations must be made before registration in any class will be permitted. Students should start the process early in order to meet the deadline requirements.

Students should retain a copy of their immunization health records for themselves. **Howard College will not make copies for distribution to other agencies.**
HOWARD COLLEGE HEALTH PROFESSIONS
RECORD OF REQUIRED IMMUNIZATIONS

Student Name ____________________________________________________________
Date of Birth ____________________________ Social Security ____________________________

IMMUNIZATIONS

Hepatitis B Series
Three doses or a positive titer. Two doses must have been received prior to the June 1 deadline. (If proof of a titer is attached, please write Titer next to date.)

DATE RECEIVED
#1 ___________________________
#2 ___________________________
#3 ___________________________

MMR (Measles Mumps Rubella)
Two doses of MMR or a positive titer. (If proof of a titer is provided, please write Titer next to date.)

#1 ___________________________
#2 ___________________________

Varicella
Two doses or a positive titer. A parent or physician validated history of varicella (chickenpox) is acceptable in lieu of vaccine, in the form of a written statement to support the history of the disease. (Write Titer next to the date if a titer is attached or History if a written statement is attached.)

#1 ___________________________
#2 ___________________________

TD (Tetanus/Diphtheria)
Must be received within the past 10 years.

PPD Skin Test (TB Test)
Must be received within 3 months prior to admission for new students and yearly after that. A current chest x-ray may be used in lieu of the PPD with the approval of a physician.

Student Signature __________________________ Date __________________________

1. Attach a copy of all immunization records documenting the dates shown above.
2. Include copies of any positive titers.
3. Attach a written statement for Varicella if applicable.
4. Highlight dates of immunizations on the copy of your immunization record or positive titers.
5. Place this document in the Student Admission Packet to turn in with your application and transcripts.

THIS FORM DOES NOT REPLACE YOUR OFFICIAL IMMUNIZATION RECORDS

October 2007