

IMMUNIZATIONS AND HEALTH MAINTENANCE POLICY

All students **MUST** be up to date with all immunizations and health maintenance requirements.

Failure to comply will result in the inability to begin the program or participate in the experiential learning components of the program which start in the didactic year. If unable to participate, students will receive an incomplete in the class and be unable to progress in the program, and thus will be dismissed. Students must keep up to date on annual requirements to continue in the program and for the clerkship experiences in the clinical year. Failure to keep up to date may delay graduation or result in dismissal from the program. Please note, some immunization requirements change, and the program will provide timely updates of the necessary requirements.

***Disclosure of Medical Information Release form must be signed and on file.

IMMUNIZATIONS AND HEALTH MAINTENANCE POLICY REQUIREMENTS:

The students are required to provide proof of their up-to-date immunizations, titers, and annual health maintenance assessments for all of the following. All documentation should be uploaded to CastleBranch. More instructions regarding CastleBranch will be provided.

1. Titer Requirements:

- Hepatitis B
- Varicella* (If applicable – see Varivax below)
- MMR* (If applicable – see MMR below)

2. Immunization Requirements

Adult Tdap	<ul style="list-style-type: none">▪ MUST have received 1 dose of Tdap in adult life. If Tdap not previously received as an adult – must obtain Tdap, regardless of date of last Td booster. Thereafter, Td every 10 years.
Td	IF Adult Tdap \geq 10 years ago
Polio Series	Complete series
Measles, Mumps, Rubella Series (MMR)	Immunization record must show: 2 doses of Measles, Mumps, Rubella (MMR) vaccinations after 1 year of age, given at least 1 month apart. <ul style="list-style-type: none">▪ State Immunization Registry is also accepted.▪ If unable to provide documented immunization record/registry, a Measles, Mumps, and Rubella titer is required.
Hepatitis A Series	Two (2) doses required
Hepatitis B Series	<ul style="list-style-type: none">▪ Childhood series and positive titer▪ IF negative titer, repeat three (3) dose series or Heplisav (2) dose series, and a repeat titer.

Varivax	<ul style="list-style-type: none"> ▪ Two (2) doses required. ▪ If you have not had 2 doses of vaccine, you must obtain a titer. ▪ History of the disease is not accepted as proof of immunity.
Meningococcal	<ul style="list-style-type: none"> ▪ Menveo or MenQuadfi

For individuals known to have an elevated susceptibility to infections (including, but not limited to, persons with anatomic or functional asplenia, persistent complement component deficiencies, or HIV), see the CDC's recommendations for Immunization of Health-Care Personnel/Recommendations of the Advisory Committee on Immunization Practices (ACIP) for additional detailed immunization recommendations.

3. Annual Requirements

TB Test Requirements	<p>Students are required to have a TB test ANNUALLY</p> <ul style="list-style-type: none"> ▪ If the Quantiferon Gold or Mantoux skin TB Test is Positive, you must provide the date the test was positive and a negative chest x-ray report. Thereafter an ANNUAL Periodic Health Assessment Form must be completed, signed by a health care provider, and uploaded to CastleBranch.
Annual Physical Examination	A Required Annual Physical Screening Form must be completed, signed by a health care provider, and uploaded to CastleBranch by the published due dates.
Annual Influenza Vaccination	To ensure adequate immune response to the vaccine prior to a community outbreak, seasonal influenza immunizations MUST be received between September 1st and November 15th . This must be obtained ANNUALLY .)
COVID-19	<ul style="list-style-type: none"> ▪ MUST be fully vaccinated ▪ MUST be compliant with CDC recommendations for annual vaccine between September 1st and November 15th.

4. 10 Panel Drug Screen

Required prior to the start of clinical year rotations, students do not need prior to matriculation.

5. Students may need to complete additional site-specific requirements as determined by clinical sites, and if applicable, the student will be individually instructed on requirements.

Note: Students are responsible for the above associated costs.

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STUDENT ACKNOWLEDGEMENT PAGE

I understand my acceptance to the Marquette Physician Assistant Studies Program is contingent upon my full compliance with the above health and immunization requirements. I will create a CastleBranch account to upload my documentation of proof of immunizations and health screening.

Name (Printed)

Date

Signature

Date

**Please email the signed form back to Erica.Galligan@marquette.edu