TTUHSC SHP Immunization Requirements

Copies of lab reports, immunizations and/or health records must be provided.

1. **Varicella (Chicken Pox)** Positive Varicella Titer (blood test)   Date of Test: _______________ (Attach Report)
   TTUHSC does not accept vaccine for this requirement

2. **Measles, Mumps, and Rubella (MMR)** Positive MMR titer (blood test)   Date of Test: _______________ (Attach Report)
   TTUHSC does not accept vaccine for this requirement

3. **Tuberculosis:**
   - [www.nationaltbcenter.edu](http://www.nationaltbcenter.edu)
   - **2–STEP TB skin test (within the past 3 months)**
     - **1st test** Date: _____ Result: _____ mm
     - **2nd test** Date: _____ Result: _____ mm
     - **If positive on TST**
       - Negative Chest X-Ray if (+) TST Date: __________ Result: __________
   - TTUHSC will also accept IGRA (T-SPOT or quantiFERON) testing in place of a TB test
   - Date: __________ Results: __________

4. **Hepatitis B:** Positive Hepatitis B titer: Date of Test: __________ (Attach Report)
   TTUHSC does not accept vaccine for this requirement

5. **Tetanus/diphtheria (Td):** Tetanus Diphtheria booster (required within past 10 years)
   Td Date: _______________ (Tdap will suffice)

6. **Tdap (Tetanus, Diphtheria, and Acellular Pertussis):** One time Adult Dose (these are only good for 10 years, must be good for you entire length of stay)
   Tdap date: __________

7. **Meningococcal Vaccine (MCV):** Adults 22 and younger (vaccine within the last 5 years)
   MCV date: _______________ circle exemption (age, online)

8. **Influenza Vaccine:** Influenza date: _______________ (required during FLU season October- Mar)

Recommended:

9. **Covid-19 Vaccine:** Documentation of 2 doses of Moderna or Pfizer, or one dose of Johnson and Johnson
   Dose#1_____________ Dose#2_____________

This completed form and supporting documentation should be forwarded as soon as possible to:
Office of Institutional Health- TTUHSC
3601 4th st MS 8150
Immunization Coordinator
Lubbock TX 79430
fax 806-743-2056 or email to
Mecole.campbell@ttuhsc.edu
(806-743-7455)

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