

Immunization Requirements for Nutrition Program At Texas Woman's University

Immunization Compliance Inquiries to:
Immunization Program Phone: (940) 898-3825
P.O. Box 425467 (888) 898-8825
Denton, TX 76204-5467
<https://patient-twu.medicatconnect.com/>

IMPORTANT: SUBMISSION OF REQUIRED IMMUNIZATION RECORDS IS NECESSARY TO COMPLY WITH TEXAS ADMINISTRATIVE CODE TITLE 25, P1, CH97, SUBCH B, RULE §97.61 AND THE POLICY OF TEXAS WOMAN'S UNIVERSITY.

Name: _____ Student ID: _____
Date of Birth: ____/____/____ Phone #: (____) _____
Email Address: _____@_____ Alt. Phone #: (____) _____
Current Address: _____
Address City/State Zip
Sex (Male/Female): _____

PROOF OF THE FOLLOWING IMMUNIZATIONS IS REQUIRED PRIOR TO CLINICALS

**** All Vaccine/Immunization records must include full dates i.e. month/day/year & health care providers' signatures. Health care provider initials may be considered sufficient if the document is on a health care provider's letterhead including the name & address of the practice. School records will NOT be accepted. Immunization records submitted without thorough documentation will not be accepted at any clinical site and students will be required to repeat vaccines or obtain titers in lieu of vaccines if applicable. All immunization records should be uploaded to TWU Student Health Patient Portal at <https://patient-twu.medicatconnect.com/>**

Tdap – Tetanus, Diphtheria and Pertussis must be renewed every 10 years.

Flu – must be current Flu season (September –April) due annually. Record must include: Manufacturer, Flu Lot number, expiration date, injection site and provider's signature. Receipts are NOT accepted.

TB Screening – within past one year. *If you are eligible for TB Skin testing, results MUST include induration, even if the negative result is '0 mm of induration. After a positive TB Skin test, you must have a TB Blood test prior to having a Chest X-ray.*

MMR 2 doses OR Positive Titer – Measles, Mumps & Rubella Titer (must submit lab report).

Varicella 2 doses OR Positive Titer – must submit lab report for Titers. **History of disease (chickenpox) not accepted.**

Hepatitis B Series (3 doses) - dose 2 (30) days after dose 1, dose 3 (5 months) after dose 2 **or Positive Hepatitis B Titer** (Hepatitis B Surface Antibody) – 30 days or more after completion of Hepatitis B Series

Hepatitis A Series (2 doses 6 months apart) – **Denton/Dallas Nutrition and Food Science Majors only.**

**** Please note negative titer results may require a repeat of vaccine doses and additional titer screening.**

Student must sign for immunization compliance:

I certify that, to the best of my knowledge, the above information and attached copies are true and correct.

I also give my consent for the release of my immunization records to faculty/staff at Texas Woman's University. I further consent to the release of my immunization records to any clinical facility that I request they be sent to for clinical rotations or employment.

Student Signature

Date Signed

In accordance with Leg. House Bill 1922, an individual is entitled to request to be informed about the information collected about them; receive and review their information; and correct any incorrect information. Disclosure of your social security number is required in order to set up your immunization status at Texas Woman's University. Your social security number will be used as a unique number to identify you. Any further disclosure of your social security number will be governed by the Public Information Act (Chp 552 of the Texas Government Code).

Revised Fall 2023

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Testing for Tuberculosis

Criteria for TB Blood or Skin Testing is determined by the TWU Student Tuberculosis Screening and Case Management Policy;¹ substituting one type of test for another is not permitted for immunization compliance. All testing must take place in the United States at a licensed medical facility.

TB Blood Test (QuantiFERON or T-Spot) required for:

- Students who have had a positive TB skin test and have NEVER taken antibiotics for TB
- Students who were born, lived or traveled for ≥ 8 weeks in a country with high incidence of TB as designated by WHO/CDC. Visit SHS webpage for additional information.
- Students requiring periodic TB screening who were previously tested with a TB Blood Test
- Students with cancer, HIV/AIDs, an immunosuppressive condition, kidney disease or diabetes
- Students taking immunosuppressive medication – steroids (prednisone), biologics (Humira, Enbrel, etc.) or chemotherapy
- Students who have ever been diagnosed with an atypical mycobacteria infection
- Students who received BCG (Bacille Calmette-Guerin) immunization

TB Skin Test (Mantoux test) is acceptable for:

- Students who were born, lived and traveled to countries with low incidence of TB, NEVER had a positive TB Skin Test or TB Blood Test, and have NO criteria for TB Blood Test
- Low risk countries include United States, Canada, most of Europe, and others. Visit SHS webpage for more information.

Chest X-Ray (CXR) for TB Screening

- Most students do NOT require CXR for TB screening
- Those with positive TB Skin Tests who have not taken TB antibiotics require TB Blood Test, not CXR
 - If the TB Blood Test is NEGATIVE, students do NOT need CXR
- CXR performed in United States and TB Clearance Statement is required for:
 - Students with positive TB Blood Test results
 - Students with symptoms of active TB infection
 - Students who have taken antibiotics for TB for any length of time
 - CXR must be performed within 365 days prior to first day of classes upon entrance to TWU or *first time* periodic TB screening is required for TWU clinicals or programs
 - Subsequent periodic screening is completion of TB Clearance Statement without chest x-ray unless student has symptoms that could indicate active TB
- Students with indeterminate / borderline TB blood test results
 - A second TB blood test may be obtained, provided immunization compliance deadlines are met
 - If the second test is again indeterminate or borderline, CXR and TB Clearance Statement is required
 - Students who do not have time to repeat the test due to compliance deadlines require CXR and TB Clearance Statement

¹ TWU Policy D.02.02 Student Tuberculosis Screening and Case Management <https://servicecenter.twu.edu/TDClient/KB/ArticleDet?ID=34896>

² Tuberculosis Chest Clearance Statement. Visit SHS Immunization Compliance for more information.

³ <https://www.twu.edu/student-health-services/immunization-compliance/>

Texas Woman's University Student Health Services

Tuberculosis (TB) Screening Requirement Form for Health Profession Students

Is your country of birth listed below? Yes No

If yes, which of these is your birth country?

In the lists below, **please check the boxes to the left of ALL countries** you have **resided in** and/or **traveled to** for ≥ 8 weeks.

Afghanistan	Colombia	Iraq	Nauru	South Africa
Algeria	Comoros	Kazakhstan	Nepal	South Sudan
Angola	Congo	Kenya	New Caledonia	Sri Lanka
Anguilla	Côte d'Ivoire	Kiribati	Nicaragua	Sudan
Argentina	Dem. People's Rep. of Korea	Kuwait	Niger	Suriname
Armenia	Dem. Rep. of the Congo	Kyrgyzstan	Nigeria	Swaziland
Azerbaijan	Djibouti	Lao People's Dem. Rep.	Northern Mariana Islands	Syrian Arab Republic
Bangladesh	Dominican Republic	Latvia	Pakistan	Tajikistan
Belarus	Ecuador	Lesotho	Palau	Tanzania (United Rep. of)
Belize	El Salvador	Liberia	Panama	Taiwan
Benin	Equatorial Guinea	Libya	Papua New Guinea	Thailand
Bhutan	Eritrea	Lithuania	Paraguay	Timor-Leste
Bolivia (Plurinational State of)	Ethiopia	Madagascar	Peru	Togo
Bosnia and Herzegovina	Fiji	Malawi	Philippines	Tunisia
Botswana	Gabon	Malaysia	Portugal	Turkmenistan
Brazil	Gambia	Maldives	Qatar	Tuvalu
Brunei Darussalam	Georgia	Mali	Republic of Korea	Uganda
Bulgaria	Ghana	Marshall Islands	Republic of Moldova	Ukraine
Burkina Faso	Greenland	Mauritania	Romania	Uruguay
Burundi	Guam	Mauritius	Russian Federation	Uzbekistan
Cabo Verde	Guatemala	Mexico	Rwanda	Vanuatu
Cambodia	Guinea	Micronesia (Fed. States of)	Sao Tome and Principe	Venezuela (Bolivarian Rep. of)
Cameroon	Guinea-Bissau	Mongolia	Senegal	Viet Nam
Central African Republic	Guyana	Montenegro	Serbia	Yemen
Chad	Haiti	Morocco	Sierra Leone	Zambia
China	Honduras	Mozambique	Singapore	Zimbabwe
China, Hong Kong SAR	India	Myanmar	Solomon Islands	
China, Macao SAR	Indonesia	Namibia	Somalia	

Source: World Health Organization Global Health Observatory, Tuberculosis Incidence 2015. Countries with incidence rates of ≥ 20 cases per 100,000 population. For future updates, refer to <http://www.who.int/tb/country/en/>.

SECTION 1

- | | | |
|--|-----|----|
| • Did you select any of the countries above? | Yes | No |
| • Are you enrolled in Nursing (Dallas or Houston), Dental Hygiene (Denton), or Nutrition (Denton)? | Yes | No |
| • Have you ever had a BCG vaccine (Bacillus Calmette-Guerin)? | Yes | No |
| • Have you ever had a positive TB SKIN Test (PPD) and did NOT take antibiotics for it? | Yes | No |
| • Have you EVER had a TB BLOOD Test (IGRA, QuantiFERON, T-Spot)? | Yes | No |
| • Do you have cancer, HIV/AIDS, kidney disease or any immunosuppressive condition? | Yes | No |
| • Do you take immunosuppressive medication such as steroids, biologics or chemotherapy? | Yes | No |
| • Have you ever had an atypical mycobacteria infection? | Yes | No |

Any YES answer requires TB BLOOD Test with T-Spot or QuantiFERON Gold; TB Skin Test is NOT accepted.

SECTION 2

- | | | |
|---|-----|----|
| • Have you ever had a positive TB Blood Test? | Yes | No |
| • Have you ever taken antibiotics for tuberculosis? | Yes | No |

A YES answer in Section 2 requires you to have a Chest X-Ray and Tuberculosis Clearance Statement the *first time* TB documentation is submitted. Subsequent screening requires only Tuberculosis Clearance Statement if there are no symptoms of active TB.

Student Name

TWU Student ID #

Date of Birth

Student Signature _____

Date

This form and TB result record must be uploaded to TWU Patient Portal <https://patient-twu.medicatconnect.com/default.aspx>. For questions or help completing this form, please contact TWU Student Health Services Immunization Compliance at (940) 898-3825, message using the TWU Patient Portal, or email Immunization@twu.edu.

TWU Student Tuberculosis Screening and Case Management Policy Requirements

New International Students and those considered to be international by TAC §21.25(c) (formerly, HB 1403) or TEC 54.052 due to birth or residence outside of the U.S.

- Must complete the TB screening process prior to the first day of class.
- Must submit the TWU Tuberculosis (TB) Screening Requirement Form for New Students
 - Individuals who answer YES to any risk factor for TB are required to have a TB Blood Test
 - Individuals born, resided in, or traveled to countries at low risk for TB who also answer NO to all risk factor questions submit only the completed Form (TB Blood Test not required)
- **Tuberculin Skin Testing is NOT accepted for screening for these students**

Tuberculosis Testing Procedure for those answering YES to any question on the Screening Form

- TB Blood Testing using T-Spot or QuantiFERON Gold required
 - Testing must be done in the United States within 365 days prior to the first day of classes upon entrance into TWU
 - Acceptable sites for TB screening include TWU Student Health Services, TWU subcontracted health clinics in Dallas and Houston, US licensed private physicians, and US licensed medical clinics
 - Students who have previously taken antibiotics for TB do not need a TB Blood Test, see below for alternate requirements
- Students with negative TB Blood Test results submit test results with Form; no additional testing required
- All students with positive TB blood test results must submit BOTH of the following:
 - Chest x-ray results from x-ray obtained in the U.S. within 365 days prior to the first day of classes upon entrance to TWU
 - Completed Tuberculosis Clearance Statement signed by a U.S. licensed medical professional
- Students treated with antibiotics for TB infection (active or latent) in the past must submit ALL of the following:
 - Chest x-ray results from x-ray obtained in the U.S. within 365 days prior to the first day of classes upon entrance to TWU
 - Proof of antibiotic treatment, including duration of therapy
 - Completed Tuberculosis Clearance Statement signed by a U.S. licensed medical professional
 - New TB blood testing is not required
- Chest x-ray submission requires the following to meet compliance requirements
 - Positive TB Blood Test results AND/OR proof of antibiotic treatment for TB with duration of therapy
 - Completed Tuberculosis Clearance Statement signed by U.S. licensed medical professional
 - Chest x-ray and Statement without test results or proof of antibiotics is NOT accepted
- Non-compliance with this policy will prevent students from registering for classes.

For additional information, please refer to the TWU Student Tuberculosis Screening and Case Management Policy <https://servicecenter.twu.edu/TDClient/KB/ArticleDet?ID=34896>

For questions, please call TWU Student Health Services at 940.898.3825 or visit TWU SHS website <https://www.twu.edu/student-health-services/tuberculosis-screening/>