

MSAT PROGRAM

HEALTH AND WELLNESS POLICY

Immunization

Students must provide a legible copy of the Certificate of Immunization that also documents the student's name. Series immunizations must be documented in chronological order with the most recent immunizations in the farthest right spots. The Certificate must be completed by their health care provider, which meets the following requirements:

- **Measles, Mumps, Rubella:** Two (2) MMR's (or written evidence of laboratory tests showing titers of all three immunities: measles, mumps and rubella). This is not required if student was born before January 1, 1957.
- **Tetanus:** Td/DT injection or tetanus booster within the last 5 years. Based on recent concerns about a resurgence of Pertussis, it is **STRONGLY RECOMMENDED** that students requiring tetanus update immunization receive a:
 - Tdap (ADACEL) immunization. Students are strongly encouraged to receive a one-time dose of ADACEL if they previously received either Td or Dtap more than 2 years prior for maximum protection of their health and the health of their clients.
- **Hepatitis B** While OSHA does not require you to be vaccinated against HBV, it is strongly recommended due to the potential exposure to bloodborne pathogens during your clinical education experience. MSAT students are required to provide proof of a Hepatitis B vaccination series, documentation indicating initiation of the series, OR a signed declination at the time of admission.
 - The three-injection series takes four months to complete. A student must initiate the series before starting MSAT (or decline), and complete the series by the end of the first semester of the MSAT. The schedule for the Hepatitis B series is as follows: Injection 1, wait 1 month, Injection 2, wait three months, Injection 3.
- **Varicella (Chicken Pox):** Students must have a documented history of a two-injection varicella immunization series OR a documented laboratory result indicating immunity to varicella.
- **Influenza (Flu):** Annual flu vaccination is **STRONGLY RECOMMENDED** prior to the start of flu season. Students should receive this immunization annually, per provider recommendations OR provide a signed declination form at time of admission. Students without a flu vaccination may be prevented from completing a clinical education experience or required to wear a mask at certain sites based on site policy.
- **COVID-19:** COVID-19 vaccination is **STRONGLY RECOMMENDED** prior to the start of the program. Students should receive this immunization as recommended by the CDC or their provider, OR provide a signed declination form at the time of admission. Students without COVID-19 vaccination may be prevented from completing a clinical education experience or required to wear a mask at certain sites based on site policy.

The Certificate of Immunization must be kept properly updated as new immunizations and tests are received. The student will provide documentation of required immunization history to the MSAT PD via Typhon upon admission to the program. Pertinent information will also be shared with relevant clinical sites.

Tuberculosis Screening

1. **Baseline testing:** Students will complete baseline testing for Mycobacterium tuberculosis infection. Baseline testing consists of:
 - A TB skin test: Mantoux tuberculin skin test (TST), OR
 - A single blood assay for mycobacterium tuberculosis (BAMT), OR
 - Documentation of previous positive testing for tuberculosis

Two-step TST— The TST consists of an initial TST, read 48–72 hours after placement, with results recorded in mm of induration. Documentation of a negative TST within the previous 12 months can be substituted for the initial TST. A positive test will result in additional testing to determine if the person has latent TB infection or TB disease.

BAMT—Blood assays for Mycobacterium tuberculosis used in the United States are the QuantiFERON®-TB Gold In-Tube test and the T-SPOT® TB test. A single BAMT is sufficient for baseline testing. BAMT's are helpful in persons' who have received BCG (bacille Calmette-Guèrin) vaccine, as BCG does not cause a false-positive BAMT. Documentation of previous positive—Students who provide documentation of a previously positive TST or BAMT or documentation of completed treatment for latent tuberculosis infection or tuberculosis disease do not need to undergo further baseline testing for tuberculosis. Students who have received BCG vaccine and have a history of a positive TST may wish to consider having a BAMT.

2. **Positive Tests:** Any student who has a positive (current or previous) TST or BAMT must complete the TB Symptom Screen form and be evaluated by a primary care provider to rule out active tuberculosis disease. The primary care provider should complete the Primary Care TB Screen form.
3. **Serial Follow-up Testing:** Students with negative baseline testing must have a single TST or BAMT every year to rule out tuberculosis infection. Students who have positive follow-up testing must be evaluated as above. Students with previous positive tests must complete TB Symptom Screen form annually. Students with symptoms consistent with tuberculosis must be evaluated by a health care provider and provide TB Primary care TB Screen form documentation of the evaluation.