Sam Houston State University – School of Nursing Guidelines for Immunization Compliance

Immunizations are required by our clinical partners and may exceed the CDC recommendations. SHSU follows the Texas Administrative Code, Title 25, Part 1, Chapter 97, Subchapter B Rule 97.64 and 97.65. Proof of immunizations is **required** to remain in the nursing program. Plan, accordingly, as some vaccine series such as Hepatitis B, may require 6 months to complete. High school printouts or copy of paid receipts **are not** acceptable. **Requirements are subject to change based on clinical site.**

**Original immunization documentation MUST include: (Credentialing will decline documents submitted without the below requirements)**

1. **Patient information (name and date of birth)**
2. **Immunization administered (lot #, expiration date, injection site)**
3. **Date immunization was administered (month, day, and year)**
4. **Stamp/Signature of physician, physician designee or public health personnel**

Immunization records generated from an electronic health records (HER) system **MUST** include clinic contact information and the provider’s signature/stamp. **No exceptions.**

|  |  |
| --- | --- |
| **MMR** **(Measles, Mumps, Rubella)****(2 options)** |  2 doses, minimum 28 days between dose 1 and 2**OR**Copy of original lab report indicating positive IgG titers for Measles/Mumps/Rubella **(Titer is recommended, only if original immunization documentation showing 2 doses is unavailable)** **Titer results must be quantitative with reference ranges included and ≤ 5 years old.** |
| **Varicella (Chickenpox)****(2 options)** |  2 doses, minimum 28 days between dose 1 and 2**OR**Copy of original lab report indicating positive IgG titers for Varicella (titer is recommended only if original immunization documentation showing 2 doses is unavailable)**Titer results must be quantitative with reference ranges included and ≤ 5 years old.**History of chickenpox disease **MUST** be documented with proof of positive IgG titer for Varicella. |
| **Hepatitis B****(2 options)** | 3 dose series – Hepatitis B vaccine series requires a minimum of 6 months to complete with intervals of 1 month between dose 1 and 2; 6 months between dose 1 and 3**OR**2-dose series – Heplisav-B only; 4 weeks between dose 1 and 2 **(Immunization record MUST clearly state that Heplisav-B was received)** |
| **\*Positive Hepatitis B Surface Antibody****(anti-HBs)** | Required 1-2 months after last Hep B dose received.**Titer results must be quantitative with reference ranges included and ≤ 5 years old.****\*A titer showing non-immunity (non-reactive, negative) following the primary Hep B series will require 1 to 3 repeat doses of Hepatitis B and a repeat titer 1-2 months after the last dose of vaccine.** |
| **Tdap****(Tetanus, Diphtheria, Pertussis)** | 1 dose received as an **adult after the age of 18. (High school dose, before age 18, NOT acceptable)** |
| **Influenza** | Required annually for current season **(Fall season - anticipate July availability)** |
|  **COVID-19**  **(Optional)** | Clinical sites that partner with the SON have changed this immunization to **optional.** Full vaccination occurs two weeks after final vaccination dose.  |
| **Meningitis** | SHSU students **MUST** follow the meningitis vaccination requirement per SHSU Student Health Center. More information can be found at https://[www.shsu.edu/dept/student-health-center/meningitis.html.](http://www.shsu.edu/dept/student-health-center/meningitis.html) |
| **Tuberculosis (TB) Testing****(2 options)** | * **Two Mantoux tuberculin skin tests (TST)** are required to get a baseline.

**(SHSU Health Center is recommended for TB testing)*** + Skin test is read 48-72 hours after placement
	+ 1-3 weeks after first test is read, a second TST if performed

 **OR*** **QuantiFERON Gold** – negative TB blood test
 |

 Rev 08/2024