Newark, NJ 07103

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Healthcare provider and student checklist (REQUIRED ITEMS)

Flu	Flu vaccination is required for clinical rotations from October -May
MMR	 ☐ 2 doses of Measles, Mumps, and Rubella vaccine OR ☐ MMR IgG titers showing immunity – attach lab report LabCorp test #058495 Quest Diagnostic test #85803A
Meningitis ACYW	Meningitis ACYW (required for students under 19, first year college students in housing, those with asplenia, sickle cell, N meningitidis lab work, complement deficiency or complement inhibitor use, HIV, and travelers to/residents of areas with endemic meningitis) with at least 1 dose since age 16
Meningitis B	Meningitis B (required for students with asplenia, sickle cell, <i>N meningitidis</i> lab work, complement deficiency or complement inhibitor use)
Нер В	Hepatitis B Surface Antibody QUANTITATIVE titer (the result must be a number) attach lab report. LabCorp test # 006530 Quest Diagnostic test # 51938W Please draw a Hepatitis B Surface Antigen as well since it will have to be submitted if the student fails to demonstrate immunity. Hepatitis B Surface Antigen - attach lab report LabCorp test # 006510 Quest Diagnostic test # 265F
	Please document all doses of Hepatitis B vaccine received on the immunization form
	Options if a student is not immune: 1. Booster dose, followed by titers one month after, or 2. Repeat the series, followed by titers one month after These are CDC recommendations for all healthcare workers. The student will not be permitted to matriculate without these tests.
PPD	 2-step PPD* (1-3 weeks apart) regardless of history of BCG Please include date placed and date read in millimeters of induration For a PPD ≥10 mm now or in the past, you must submit documentation of the PPD reading and a chest x-ray report within the last 12 months OR an FDA approved blood test for TB (such as Quantiferon Gold)
Tdap	Adult Tdap (tetanus/diphtheria/acellular pertussis) (Adacel/Boostrix) (one-time administration) after age 19
Varicella	2 doses of Varicella vaccine, at least 1 month apart <i>OR</i> Varicella IgG titer showing immunity- attach lab report LabCorp test # 096206 Quest Diagnostic test # 54031E
Flu	☐ Annual flu (list vaccination for the current flu season)

^{*} Students working in healthcare with documented annual PPDs may submit that documentation to fulfill this requirement.

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