### Nursing Department Required Records

**BACKGROUND CHECK**  **MUST use Nursing Department Background Check Agency ONLY**

**10 PANEL DRUG SCREENING**  **MUST use Nursing Department Drug Screening Agency ONLY**

<table>
<thead>
<tr>
<th>TITERS = blood tests (not shots).</th>
<th><strong>Even if you have immunization/shot records, we still require proof of immunity through a blood test for surface antibodies (titer) for #1-3.</strong></th>
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</thead>
</table>
| 1. **RUBELLA** (German Measles), RUBEOLA (Regular Measles) AND MUMPS | Positive titer (immune) required for **ALL THREE SEPARATELY.** Test for IgG antibody.  
**If titer is negative**, provide proof of **two** live virus MMR vaccinations received after the date of the negative titer at least **one month apart.**  
**Must get another titer after shot series is complete.** |
| 2. **VARICELLA** | Positive titer (immune) required. Test for IgG antibody.  
**If titer is negative**, provide proof of **two** doses of live virus received after the date of the negative titer at least **one month apart.**  
**Must get another titer after shot series is complete.** |
| 3. **HEPATITIS B** | Positive titer (immune or “reactive”) required. Test for Hep B surface antibody.  
**If titer is negative**, provide proof of **three** doses of live vaccination series received after the date of the negative titer.  
(Second shot must be **one month** after first shot and third shot must be **six months** after second shot).  
**TWO months after 3rd shot in series – must get another titer as proof of immunity.** |
| 4. **FLU VACCINE** | Please get flu vaccine (influenza) between September 1 and October 15 of this academic year.  
Proof must contain the shot date and the lot number of the vaccine. |
| 5. **DIPHTHERIA-TETANUS-PERTUSSIS (Tdap)** shot within ten years. | **This is an “adult” shot, not DTaP or DTP (childhood versions).**  
**A Td shot (Tetanus-Diptheria only) does NOT cover this requirement.** |
| 6. **PPD (Tuberculosis Skin Test) - 2 NEGATIVE results satisfy this requirement.** | - **If you have NOT had a TB skin test within the last 12 months:**  
Submit a Negative two-step within 3 weeks of each other (4 doctor visits total)—**OR—**  
Submit 1 negative QuantiFERON Gold blood test or T Spot test within 1 year.  
- **If you have ONE TB skin test result within the last 12 months**  
Submit ONE MORE TB test result within 12 months of your most recent one (one-step result).  
- **If you have TWO TB skin test results within the past 2 years**  
Submit both PPD results. The 2nd result must be within 12 months of right now. The 1st result must be no more than 12 months before your 2nd result. If MORE THAN 12 months passed between your first and second results, you need to get ONE MORE TB test (one-step).  
**PPD Results last for 12 months – they must NOT expire before the end of the school year (JUNE 20)!!**  
**If POSITIVE PPD**, then a Chest X-Ray REPORT within 3 years is required **AND** negative symptom screen. (Use Nursing Department Annual TB Symptom Screen Form if your PPD is positive). |
| 7. **OTHER REQUIREMENTS** |  
| | **LATER:** Student Handbook Affirmation Page |
| | Physical Exam (after June 1)  
| | N95 Mask Fitting Physical Clearance Form (Hayward only) |