

**Bolivar Technical College**  
**Immunization Guidelines for students admitted to a cohort**  
**Effective 11/17/2020**

**Note:** The following vaccinations are required for students admitted to a cohort. This policy for immunization is developed based on [CDC recommendations](#) and per our clinical facility partner's policies. Failure to meet requirements will result in student being prohibited from attending clinical rotations and skills/simulation experiences and could result in rescinded admission or termination from the program. See [BTC Catalog](#) or appropriate [program handbook](#) for more information.

#### **Tuberculosis Testing**

- Students must complete a **two-step** tuberculosis skin test (Mantoux) or a single blood test (IGRA) before and annually while attending school.
  - The **two-step** tuberculosis test requires the following steps:
    - (1) TB skin test is applied.
    - (2) 48-72 hours after applying the first skin test, the result is read and recorded.
    - (3) 1-3 weeks after the reading of the first skin test, the second TB skin test is applied.
    - (4) 48-72 hours after application of the second TB skin test, the second test is read and recorded.
    - (5) Both tests must be submitted with appropriate dates.
  - Students who have had only a single TB test done will be required to have a **two-step** TB done within the abovementioned time parameters.
  - Students may have an Interferon Gamma Release Assay (IGRA) done once annually in place of the two TB skin test. There are two types of IGRA blood tests:
    - (1) T-Spot
    - (2) QuantiFERON Gold
- The date the second TB skin test is administered or the date that the IGRA test is drawn becomes the annual renewal date while in the program.
- A chest x-ray will be required if there is a history of positive test.

#### **Diphtheria/Tetanus Booster**

- Minimum: 1 dose Tdap, then Td or Tdap every 10 years
- Routine schedule: One dose at each of these ages: 2 months, 4 months, 6 months, 15 through 18 months, and 4 through 6 years. Give adolescents a single dose of Tdap, preferably at 11 to 12 years of age. Tdap or Td booster every 10 years.

#### **Measles/Mumps/Rubella (MMR)**

- Students are required to show proof of immunity to measles, mumps, and rubella. Acceptable proof:
  - (1) Laboratory evidence of immunity or disease (titer)
  - (2) **Born in 1957 or later with no evidence of immunity to measles, mumps, or rubella:** Vaccination 2-dose series at least 4 weeks apart
  - (3) **Born before 1957 with no evidence of immunity to measles, mumps, or rubella:** Consider vaccination 2-dose series at least 4 weeks apart for measles or mumps or 1 dose for rubella

#### **Hepatitis B (HBV) series**

- We recommend all students enrolled in healthcare programs receive the HBV vaccination due to increased risk by exposure to blood pathogens.
- Students must submit documentation of initiation and/or completion of the vaccine series or laboratory confirmation of immunity.
- If the student does not choose to receive the Hepatitis B series, a declination form (from admissions office) must be submitted before entering the clinical areas.

#### **Influenza**

- Students are required to receive annual influenza vaccination.

**Varicella**

- 2-dose series 4–8 weeks apart if previously did not receive any varicella-containing vaccine
- Additional dose if only received 1 dose of varicella-containing vaccine, for a total of 2 doses
- Laboratory evidence of immunity or disease (titer)

**NOTE:**

- If you require an MMR (measles, mumps and rubella) immunization and also need a two-step TB test, have the first TB test done by itself, then, have the second TB test done. When you return to have the second TB test read, have your MMR immunization given. Otherwise, the MMR can invalidate the results of the second TB test, and you will have to wait six weeks to repeat it.
- Immunizations may be obtained at your local health department for a reduced fee or from your private health care provider at the individual's expense.

Revised 11/17/2020

Student Signature: \_\_\_\_\_

By signing you agree that you have received the immunization guidelines for the healthcare programs at BTC and will abide by requirements set forth by BTC and its clinical partners.