



HEALTH SCIENCES IMMUNIZATION PROGRAM (HSIP) REQUIREMENTS CHECKLIST

This document provides a summary of the Health Sciences Immunization Program (HSIP) requirements and acceptable documentation for each item. Full instructions will be available in the Med+Proctor/CastleBranch account students purchase to submit documentation. Please refer to the [HSIP webpage](#) for [vaccine, titer, and TB screening resources and tips for locating old immunization records](#).

DOCUMENT SUBMISSION PROCESS

Students submit their immunization and test result documentation to a web-based system called CastleBranch or Med+Proctor. Once you are accepted, your program sends instructions for creating your immunization account along with deadlines for meeting requirements. Documentation is required for each item (listed below), which you must upload to the verification vendor. This checklist helps you keep track as you obtain your health records. You can use [vaccine, titer, and TB screening resources and tips for locating old immunization records](#). You will also find detailed instructions for meeting each required item in your CastleBranch account. Due to the nature of health professions training programs, exemptions are rarely granted and only in alignment with CDC recommendations and University policy and practice.

CHILDHOOD IMMUNIZATIONS

The Childhood Immunization requirement is an attestation confirming receipt of a primary childhood Tetanus, Diphtheria, Pertussis (DTaP/DTP/DT/Td) AND Polio (IPV/OPV) vaccine series. Documentation is not required. You will attest "Yes" if you have received BOTH childhood vaccine series. You will attest "No" if you have not received either or have received only one of the series. Contact HSIP at myshots@uw.edu if you answer "No."

TETANUS-DIPHTHERIA-PERTUSSIS

One adult dose of **Tdap** completed within the last 10 years is required. **Titers are not accepted in lieu of Td/Tdap vaccine.** You can complete the requirement through the following:

- ☐ Documentation of an adult Tdap vaccine within the past 10 years; **OR**
- ☐ Documentation of an adult Td within the past 10 years **AND** a Tdap vaccine after 6/1/2005 (when adult vaccine became available).

MMR: MEASLES (RUBEOLA), MUMPS AND RUBELLA

Two doses of the MMR vaccine are required (other vaccine types are not accepted) **OR** positive Measles, Mumps, and Rubella IgG antibody titers (Note: IgM titer is not acceptable). You can complete the requirement through the following:

- ☐ Two doses of MMR vaccine dated January 1971 or later and given on or after 12 months of age. Doses must be at least 28 days apart. Live vaccines may be given on the same day otherwise they must be spaced at least 28 days apart (e.g., MMR and varicella); **OR**
- ☐ Lab reports showing positive IgG antibody titer results for Measles (Rubeola), Mumps, and Rubella

VARICELLA

Two doses of Varicella-containing vaccine are required, **OR** positive Varicella IgG antibody titer (Note: IgM titer is not acceptable). **History of disease is not accepted.** You can complete the requirement through the following:

- ☐ Two doses of Varicella vaccine dated March 1995 or later and given on or after 12 months of age. Doses must be at least 28 days apart. Live vaccines may be given on the same day otherwise they must be spaced at least 28 days apart; **OR**
- ☐ Lab report showing positive Varicella IgG antibody titer result.

ANNUAL INFLUENZA VACCINE

An annual fall seasonal Influenza vaccine is required **after** August of your entry year and each year thereafter. An influenza vaccine to-do action will populate in your CastleBranch or Med+Proctor account each fall with a due date set by your program.

TB SCREENING (NOT A VACCINE)

An initial (entry year) screening of an **IGRA blood test (QuantiferON-TB Gold or T-Spot lab test)** is **strongly preferred and should be used for individuals who previously received a BCG TB vaccine**. Refer to the [HSIP website](#) for an acceptable screening time frame and due date.

TWO separate TB skin tests (PPD) are also acceptable. The second PPD must be placed between 1-3 weeks after the first read date. PPD documentation must be from a verifiable medical source and include full name, dates placed, dates read, and results in millimeter (mm).

Previous or current positive TB screening requires a copy of the positive TB screening, an updated chest x-ray completed the year of entry into your program **after** the positive screening, and completion of the HSIP TB symptom questionnaire.

DOCUMENTATION TIPS

Tips to ensure documentation is accepted during the submission process:

- All records must be from a medically verifiable source and include full student name.
- Vaccine records must clearly indicate vaccine type, and exact dates (month/day/year) for each dose. Pharmacy printouts, provider/clinic-verified childhood records/cards, chart notes, and state immunization information/registry records are all acceptable proof of immunization. Handwritten records are acceptable **ONLY** if the vaccine listed is stamped or signed by a medical professional
- Lab results require a full lab report and must include the date of collection. A healthcare employee immunization summary will be accepted for MMR & Varicella titers only. IGRA TB screening and Hepatitis B surface antibody titer require a **FULL** lab report. A numeric reference range must be included for the Hepatitis B titer.

HEPATITIS B

BOTH documentation of a fully completed Hepatitis B vaccine series spaced appropriately per standards set by the Centers for Disease Control and Prevention (CDC) **AND a POST-vaccination positive Quantitative Hepatitis B Surface Antibody Titer** is required.

- ❑ **Step 1:** Documented Hepatitis B vaccine series (Recombivax HB, Energix-B, Twinrix, or other three dose vaccine series) **OR** Heplisav-B 2-dose vaccine series. Students unable to locate past Hepatitis B vaccine records should complete the HepB vaccine series. If completing a series, upload documentation of each vaccine dose into CastleBranch as it is received.
- ❑ **Step 2:** A positive Quantitative Hepatitis B Surface Antibody Titer (HBsAb-QN/CONC/Index titer) drawn at least 1 month **after** completion of a documented vaccine series. A full lab report is required (see [Documentation Requirements section](#)).

Negative/Non-Reactive Hepatitis B Surface Antibody Titer indicates you do not have proven immunity to Hepatitis B. Proceed with getting a single additional vaccine dose followed by a repeat Quantitative Hepatitis B Surface Antibody Titer 1 month after the additional vaccine dose. If the repeat titer is still negative, complete the remaining vaccine doses in the 2nd series **AND** another titer 1 month after the final dose.

Hepatitis B non-responders – Individuals with a negative Quantitative Hepatitis B Surface Antibody titer, following TWO documented Hepatitis B vaccine series, are considered non-responders to the vaccine. Proceed with getting a Hepatitis B Antigen Titer and contact HSIP at myshots@uw.edu to obtain a form for your provider to complete.

Hepatitis B Infection (acute, chronic, or resolved) – Contact HSIP at myshots@uw.edu.

Questions?

- **Email:** myshots@uw.edu
- **Call:** 206.616.9074
- **Web:** <https://wellbeing.uw.edu/husky-health/immunity/hsip/>