

Immunization Requirements

Vaccine	Description
<p>Varicella (Chicken Pox)</p>	<p>Documentation of one of the following:</p> <ul style="list-style-type: none"> • 2 vaccinations • Positive antibody titers for all 3 components (lab reports required) • Medical documentation of history of chicken pox
<p>TB Skin Test</p>	<p>One of the following is required:</p> <ul style="list-style-type: none"> • Negative PPD skin test administered within 3 months of the order date (test MUST be read 48-72 after OR • Negative IGRA Blood Test within 3 months of order date <p style="text-align: center;">OR</p> <ul style="list-style-type: none"> • If PPD skin test or IGRA Blood Test is Positive, ALL of the following are required: <ul style="list-style-type: none"> ◦ Positive PPD skin test OR Positive IGRA Blood Test AND ◦ Negative chest X-Ray dated on or after the Positive skin test result or positive IGRA Blood Test <p><i>For Chest X-Rays: lab report is required, or documentation must be signed or stamped by a physician to be acceptable.</i></p>
<p>Titers</p>	<p>A lab report is required, or documentation must be signed by a physician to be acceptable</p>
<p>International Immunizations</p>	<p>Documents in the original foreign language AND the English translation are required. Translated documents must be signed or stamped by a physician to be acceptable.</p>