



Student Health Services
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MUSC Student Pre-Matriculation Requirements

Details About Immunizations:

All MUSC students, including full-time, part-time, distance, current employees, or returning former students, are required to submit the following information. The Mandatory Immunization Requirements Form and supporting documentation must be completed and received by Student Health Services before students will be allowed to attend classes. Maintaining these high standards is done to protect the safety of the students, staff, and patients.

1. Measles, Mumps, Rubella – proof of age-appropriate immunization **OR** immune antibody titers *.

Immunization requirements can be met by providing documentation of 2 MMR vaccines received on/after age of 12 months, and both after 12/31/1967. Students born before 12/31/1956 can submit documentation of one MMR dose given after 12/31/1967. **OR**
Immune Antibody Titers - Copy of lab report demonstrating immune antibody titers (IgG) to Measles, Mumps, and Rubella. Lab report should be quantitative and/or specify if test results are in immune range.

2. Varicella (Chicken Pox) Immunity

- Documentation of two Varicella vaccines
OR
- Copy of lab report demonstrating immune antibody titers (IgG)* to Varicella. Lab report should be quantitative and/or specify if test results are in immune range.

3. Tetanus-diphtheria-acellular pertussis (Tdap) – students are to have completed the childhood DPT series within current CDC guidelines **and** provide documentation of having received an adult **Tdap** booster on or after 5/3/2005. Once adult Tdap booster has been received, students may resume regular Td boosters every 10 years. Students with a documented allergic reaction to the pertussis vaccine need to provide a letter from their medical provider detailing the nature of their reaction and the contraindication to receiving the vaccine.

4. Meningitis Vaccine (A,C,W,Y) – initial or booster dose must be on or after 16th birthday. Documentation of vaccine or signed waiver is required.

5. Hepatitis B Vaccination – Required for students who may have exposure to blood or human body fluids during their academic coursework. Unvaccinated students should initiate the hepatitis B vaccine series prior to or during their first semester at MUSC. Previously immunized students must provide proof of the primary hepatitis B series (3 vaccines) **AND** a Quantitative Hepatitis B surface Antibody titer (preferably drawn 4-8 weeks after the final dose). Lab report should specify if test results are in the desired immune range (≥ 10 mIU/mL). If the hepatitis B titer is non-immune (negative or equivocal) immediately after completion of the primary vaccine series, then complete a second hepatitis B series followed by a repeat titer. Many who completed their primary hepatitis B series during infancy will have a negative hepatitis antibody titer when first tested as an adult, often due to waning antibody levels over time. In this population, it is acceptable to receive a fourth hepatitis B vaccine “booster” followed by a hepatitis antibody titer 4-6 weeks later. If this hepatitis B titer is immune (≥ 10 mIU/mL), then no further hepatitis vaccines are needed. If the titer is negative, then the second vaccine series should be completed, followed by a hepatitis B antibody titer. If the hepatitis B antibody titer is negative after 2 completed hepatitis B vaccine series, then testing for chronic hepatitis B infection is required (Hepatitis B surface Antigen and Hepatitis B core Antibody).

* The College of Nursing requires ALL BSN students to have MMR and Varicella Titers - regardless of immunization history. This is to satisfy the requirements of some of the affiliated clinical sites. It is still important to submit immunization documentation if available.

6. TB Screening - TB screening tests (Blood Assay or TB Skin Test) **required** of all students regardless of prior BCG. **Blood Assays (*QuantiFERON® TB Gold* or *T-SPOT*) are STRONGLY Preferred.** Do not have a TB skin test placed within 28 days of receiving a live vaccine (MMR or Varicella) – this can give a false negative result. Previous history of previous positive TB skin testing (≥ 10 mm induration) or (+) TB Blood Assay **must** be accompanied by documentation of the evaluation and treatment of this condition.

A. Negative Baseline Tuberculosis Screening Tests – persons with negative TB testing need one of the following:

- Blood Assay for Tuberculosis (Interferon Gamma Release Assay/IGRA) within 3 months of enrollment: *QuantiFERON® TB Gold* or *T-SPOT (Preferred)*
- Two (2) tuberculosis skin tests (Mantoux 5 TU Tuberculin Skin Tests) administered 1 – 3 weeks apart, and both within 3 months of enrollment.
- History of recent TB Skin Testing – persons who have had previous TB skin testing within 12 months of enrollment can submit documentation of this test, along with an additional TB skin test given within 3 months of enrollment.

B. Positive TB Testing/Latent Tuberculosis Infection – new or previous (+) TB skin test or Blood Assay with **negative Chest X-ray**. The majority of healthy persons infected with tuberculosis are able to contain the initial infection, though viable TB microorganisms will remain present in their lungs for the rest of their life (latent tuberculosis infection or LTBI). Persons with LTBI are asymptomatic, not contagious, and will have a normal chest x-ray. Their only evidence of infection will be a positive TB skin test and/or blood assay (BAMT). Therefore, **a negative chest x-ray does not rule out the presence of TB or the need for treatment.** About 5-10% will develop active pulmonary tuberculosis at some point in their life, most often during the first few years after infection. Anti-tuberculosis medication decreases the chance of developing active TB infection by up to 90%. Persons with (+) skin tests and/or blood assays for TB **are required** to have been evaluated by the health department to determine their TB status and the need for preventive treatment. Provide:

- Documentation of your TB testing (TB Skin Test or Blood Assay)
- Chest X-ray Report (done after + TB testing) *Foreign-born students with positive TB skin testing who have received the BCG vaccine, should get a Blood Assay for Tuberculosis/ BAMT (*QuantiFERON® TB Gold* or *T-SPOT*) for further evaluation. If BAMT is positive for TB, then a chest x- ray, TB Symptom Survey, and evaluation by the Health Department is required. If BAMT is negative, it may obviate the need for getting a chest x-ray.
- TB Symptom Survey
- Evaluation by the health department +/- the records of your preventive treatment. If LTBI is not treated, provide reason.

C. History of Active Tuberculosis - Required documentation includes:

- Documentation of positive TB test (TB Skin Test or Blood Assay)
- Chest X-ray Report (done after + TB test)
- TB Symptom Survey
- Health Department records of your TB treatment (Medications, Dates of Treatment, etc.).