

<b>Learner Information</b>	
Name:	Date of Birth:
Institution:	E-mail Address:

The Employee Health Clinic of The Houston Methodist Hospital requires all educational trainees to provide documentation of immunizations or other proof of immunity to hepatitis B, measles, mumps, rubella and varicella. Baseline screening for Tuberculosis (TB) is required for all trainees. This consists of a TB screening test which would be a TB Skin Test (PPD), T-Spot (IGRA), or QuantiFERON® (IGRA) within the previous 12 months or documentation of a previously positive TB screening. If there is documentation of a positive TB skin test, a chest x-ray report must be provided. Previous BCG vaccination does not contraindicate receiving a TB skin test. Houston Methodist Hospital also requires that all students with direct patient contact or contact with blood or body fluids be immunized for protection against Hepatitis B.

To prevent any delay in the appointment process, please submit a complete immunization record. Include dates of immunizations requested in all fields, and attach all applicable lab reports and x-rays. Only completed Houston Methodist Hospital forms will be accepted. All incomplete forms will be returned to the trainee.

### **Frequently asked questions**

#### **What should I do if I don't have immunization records?**

You can either repeat the vaccinations or have your medical provider obtain a blood sample to test for serological confirmation of immunity. (Please send lab reports with your immunization record.)

#### **I have had varicella (chicken pox), but I don't have any record. What should I do?**

Employee Health will not accept a verbal self-report of varicella.

Immunization	Vaccine Date
<b>1. Influenza</b> During Flu season only From September through the following March	#1. _____
<b>2. Tdap</b> (one dose within the past 10 years)	#1. _____
<b>3. Measles (Rubeola)</b> (2 are required if born after January 1, 1957) or serologic confirmation by rubeola titer (attach positive lab report)	#1. _____ #2. _____
<b>4. Mumps</b> vaccine or serologic confirmation by mumps titer (attach positive lab report) ©	
<b>5. Rubella</b> vaccine or serologic confirmation by rubella titer (attach positive lab report)	
<b>6. Varicella</b> vaccine series (2 injections) or Positive history of chicken pox disease from physician or Serologic confirmation by varicella titer (attach positive lab report)	#1. _____ #2. _____
<b>7. Hepatitis B</b> vaccine series (3 injections) or Positive hepatitis B surface antibody titer (attach lab report) Hepatitis B vaccine is required if student /trainee will have patient contact and/or contact with human blood or body fluids	#1. _____ #2. _____ #3. _____
<b>TB Screening is Required within the last 12 months, unless documentation of a past positive. This can be completed with a Tuberculin skin test (PPD) or an Interferon-Gamma Release Assays (IGRAs)</b>	
Tuberculin skin test (PPD)	
Date:	_____ <input type="checkbox"/> Neg. <input type="checkbox"/> Pos. _____ (mm)
Interferon-Gamma Release Assays (IGRAs)	
Date:	_____ <input type="checkbox"/> Neg. <input type="checkbox"/> Pos.
If positive, did you take isoniazid (INH) prophylaxis? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Chest x-ray findings if PPD is positive, completed after positive skin test (attach x-ray report) ©	
Date of chest x-ray: _____	Result: <input type="checkbox"/> No evidence of active tuberculosis <input type="checkbox"/> X-ray consistent with active tuberculosis <input type="checkbox"/> Abnormal x-ray, but not due to tuberculosis ©