

Morningside Graduate School of Biomedical Sciences Health Clearance Checklist

The checklist below is to be used as a guide for submitting official immunization and lab documentation to complete the health clearance requirements. Please review the checklist carefully and allow enough time, as it can take up to 2 months to complete. All requirements must be met prior to your start date to be medically cleared. Please upload all official documentation to the Peoplesoft portal. Any medical clearance questions are to be asked through the Student Health section of the Peoplesoft portal. Once all requirements have been met your startus will be approved. Student health clearance documentation will be held in a secure electronic medical record at UMASS Memorial Health Care (UMMHC) in Epic.

MMR Requirement (2 options)

____ Documentation of 2 valid doses of MMR vaccine (first dose given on or after 1 year old)

OR

Copy of lab documentation of **positive** measles, mumps and rubella IGG titers

Tdap

____ Documentation of a Tdap vaccine on or after age 11 is required

_____ A Td or Tdap booster is required if it has been greater than **8 years** since your last dose

Varicella

____ Documentation of two doses of Varicella vaccine **OR** copy of lab report for **positive** Varicella IGG titer

HEPATITIS B (2 options)

____ Documentation of 3 dose series of Hepatitis B vaccine or 2 dose series of (Heplisav-B)

OR

____ Copy of a positive Hepatitis B surface antibody titer

IGRA/TST

Copy of lab report for a QuantiFERON Gold or T-spot after May 1st of current year

_____ If you do not have access to the lab test above you will need to provide documentation of **two** Tuberculin Skin Tests (TST). Second test to be completed 1-3 weeks later. One TST must be completed on or after May 1st of the current year.

If you have a history of a positive TST or IGRA

_____ Provide documentation of the positive result as well as any treatment received

_____ Copy of a chest x-ray written report dated any time after the date of your positive result

_____ If the date of your chest x-ray was not completed within the current year, complete the TB symptom review section of the TST form sign and date (found on the SHS website form section)

Physical

Please submit proof of wellness visit/ physical exam. (Please note that physical exam is required within the past 2 years) This can be in the form of a visit summary indicating the date of the last physical exam. (Physical exam details not required)

Disclosure of PHI form

_____ Sign and date agreement (allows Student Health to release records for compliance and experiences throughout your education at UMCMS as indicated on the form)