

# REQUIRED IMMUNIZATIONS

Graduate Medical Education (GME)  
UTHSC 2009

## UNIVERSITY HEALTH SERVICES (UHS)

910 Madison Avenue, Suite 922 (Plaza Building)  
Memphis, TN 38163  
Phone: 901-448-5630, Fax: 901-448-7255

This form is on the web at: [www.utmem.edu/univheal](http://www.utmem.edu/univheal)

*Check our website for more details about this form and \*Frequently Asked Questions\**

This form must be completed and mailed or faxed to GME by June 5, 2009. Residents must document prior immunity by validated immunization or blood titer. Residents must provide dates and documentation of immunizations, titers and TB Skin Tests. All shots and titers, with the exception of Hepatitis B, should be up to date prior to GME orientation. Any questions regarding this policy should be directed to University Health Services at the phone number and address above or e-mail Vada Singleton at vsinglet@utmem.edu.

NO RESIDENT WILL BE ABLE TO PROCEED WITH REGISTRATION UNTIL THIS FORM IS COMPLETED AND IN THE OFFICE OF UHS. UHS can give these vaccines or blood tests before admission by making an appointment.

Resident's Name (**Print**) \_\_\_\_\_  
Last First M.I.

SS# \_\_\_\_\_ Phone # ( \_\_\_\_\_ ) \_\_\_\_\_

UTHSC, GME Program \_\_\_\_\_ Date of Birth \_\_\_\_\_

**NOTE: TB skin tests will be given at orientation if no proof of a recent TB skin test (within 3 months). Those with no record of a TB skin test will get a series of TWO TB skin tests taken within the first month of residency.**

**Attach documentation or proof of immunizations or titers.** If immunization history is irretrievable by administrator, please check with the local Health Department of the city in which immunizations were performed.

Please check the appropriate box that documents immunity. Also give dates in appropriate column.	Immunization Dates			Date of Positive Titer	Proof Attached	
	#1	#2	OR		YES	NO
*MMR	#1	#2	OR			
Polio (OPV) date of completion or shot						
Tetanus shot (Td or TDAP) due every 10 years						
Hepatitis B Series & Titer (HBV)	#1					
	#2					
	#3		&			
Varicella (VAR) No date of disease. Vaccines or Titer required (chickenpox)	#1	#2	OR			
Meningitis Vaccine (Required for Pathology and Infectious Disease Residents)						
Last TB Skin Test (within the past year)	Month				Year	
TB Quantiferon Test For Residents who have had a positive TB test or who have had the BCG vaccine.	Month	Year		Result		

\*If born before 1957, one MMR or documentation of disease is sufficient. If born after 1957, a resident is required to have one MMR or the equivalent and another booster MMR in order to enroll at registration.

**The University of Tennessee Health Science Center  
Memphis, TN  
POLICY ON INFECTION CONTROL FOR MEDICAL AND DENTAL RESIDENTS**

Effective date: January 2005

**IMMUNIZATION AGAINST MEASLES, RUBELLA, MUMPS, DIPHTHERIA, POLIO, TETANUS, VARICELLA, INFLUENZA, MENINGOCOCCUS, AND HEPATITIS B FOR MEDICAL AND DENTAL RESIDENTS**

The University of Tennessee Health Science Center requires that all entering medical and dental residents document immunity to measles, mumps, rubella, diphtheria, polio, and tetanus by recorded evidence of immunization. Documentation of receipt of two doses of measles (Rubeola) vaccine after the first birthday is required unless born prior to 1957. Anyone with unknown or negative history of varicella must undergo serological testing. If serology and history are negative, the vaccine is required. University Health Services will determine whether immunization documentation is adequate. Residents who are unable to document immunity to these infections may begin work, provided required immunization is obtained within ten days of registration. Residents may be excused from this requirement if contraindications are established by a provider in the University Health Services. Annual influenza immunizations are required for all residents within 30 days of availability as indicated by University Health Services.

A waiver form will be given to all residents indicating that the institution has provided detailed information to the resident concerning meningococcal disease, the availability and effectiveness of the vaccine, and that the resident has received and reviewed the information and has chosen to be vaccinated or not to be vaccinated for meningococcal infection. Medical residents in Pathology or Infectious Disease Programs must be vaccinated with meningococcal vaccine.

Immunization against Hepatitis B virus is required for all residents. Residents who have previously received the Hepatitis B series must show proof of a positive Hepatitis B titer of equal or greater to 10 miu per CDC guidelines. The Hepatitis B series will be repeated one time if the past series had negative results. Residents known to be Hepatitis B antigen or antibody-positive (or already immune) or for whom contraindications are established by a healthcare provider or the University Health Services may be exempted from this immunization.

**IV. EARLY DETECTION OF TUBERCULOSIS FOR MEDICAL AND DENTAL RESIDENTS**

All UTHSC residents are required to receive the tuberculin skin test annually. Residents without documented testing within the prior year will have a 2-step tuberculin skin test. Residents who have been vaccinated with Bacillus Calmette-Guerin (BCG) and do not provide documentation of a past, positive, tuberculin skin test are also required to have a TB screening through a blood assay test. Persons who test positive, or have previously tested positive, are required to show proof from the Memphis/Shelby County Health department of being free of tuberculosis.

Treatment for Tuberculosis will be managed through the local Memphis/Shelby County Health Department, which will provide the authorization to return to UTHSC.