Immunization Requirements Policy

The following requirements are based on the California State Department of Health Services' recommendations and the clinical site's requirements. You may not be eligible for placement if the following requirements are not completed and submitted by the required due date. **You must complete the following immunizations and provide documentation to the Admission/Enrollment Office no later than the 2nd weekend for the Sterile Processing Program and the 2nd week of Term 2 for the Surgical Technology Program**. For the Sterile Processing Program, it is best to have immunizations completed before you start the course to ensure you are placed on time and do not have to repeat your program.

Background Check, Drug Test, and proof of purchase/receipt are required before the first day of class (Sterile Processing) or the 2nd week of Term 2 (Surgical Technology).

A **Titer Report (Blood Test)** must be completed, and the results must be submitted to the Admissions/Enrollment Office by the designated due date. The results must say **IMMUNE**. Suppose your Titer Report indicates that you are not immune to any of the following: Measles/Mumps/Rubella/Hepatitis B/Varicella. In that case, you must get a vaccination and take another Titer Report, which must say **IMMUNE** (30 days after the last immunization) to begin your Externship on time.**If there is no prior proof of the 3-shot series (Hepatitis B) and 2-shot series (Varicella, Measles, Mumps, Rubella), it could take up to 6 months to acquire immunity.*

Since you must complete and submit a Titer Report for Measles/Mumps/Rubella/Hepatitis B/Varicella, it is best to also request a Tuberculosis (QuantiFERON TB) Blood Test from your medical provider or doctor during your appointment.

Yellow = Blood Test

1. **Tetanus, Diphtheria, Pertussis Vaccine (Tdap)** - Must show proof of vaccination (within 10 years). If it has expired or if there is no proof of vaccination, then it is required. Also, if your vaccination is expiring while you are enrolled in the Sterile Processing or Surgical Technology Program, you must receive another vaccination.
2. **Tuberculosis (QuantiFERON TB)** - Must get a negative QuantiFERON TB test (a Blood Test, not a skin test) within 6 months of Externship. If the result is positive, then a chest X-ray must be completed to show proof that you are inactive with the disease. If your chest X-ray is clear, then testing is complete.
3. **Measles, Mumps, and Rubella (MMR)** - Must show proof on Titer Report with numerical values and within 6 months of Externship. Must be immune to all; if there is no immunity, then vaccinations are required. After vaccination, you must wait 30 days before completing another MMR titer test. If you are still not immune, you will need to complete another vaccination series.

Disclosure: Potential students are not eligible to participate in ANY programs with ANY active/contagious conditions/diseases.

4. **Hepatitis B (Hep B)** - Must show proof on Titer Report with numerical values and within 6 months of Externship. Must be immune to all; if there is no immunity, then vaccinations are required. After the vaccinations, you must wait 30 days before completing another Hepatitis B titer test. If you are still not immune, you will need to complete another vaccination series.
5. **Varicella (Chickenpox)** - Must show proof on Titer Report with numerical values and within 6 months of Externship. Must be immune to all; if there is no immunity, then vaccinations are required. After the vaccinations, you must wait 30 days before completing another Varicella titer test. If you are still not immune, you will need to complete another vaccination series.
6. **Dr.'s Note/Physical Exam/Statement of Health** - Must show proof from your physician or doctor releasing you to be in good health for Externship.
7. **Basic Life Support Card (BLS)** - Must show proof of current BLS card (**American Heart Association only**). If a student does not have a BLS card, SVSTI offers a designated class for $70.00, payable to the American Heart Association Instructor. Please email the Admissions/Enrollment Office to see when the scheduled BLS classes are.
8. **Influenza Vaccine (Flu)** - Must show proof of vaccination (all students must have it for that calendar year).
9. **COVID-19 Vaccine and Booster** - Must show proof of vaccination.
10. **HIPAA** - Must show proof of completion.
11. **Immunization Records** - Must show proof of immunization records and/or any childhood immunization records.

I have reviewed the SVSTI Immunization Requirements Policy, and I understand that **ALL IMMUNIZATIONS** must be completed by the required due date. If I have not completed the immunization requirements on time, I am subject to failing and may be required to repeat the entire Sterile Processing Program or the Surgical Technology Term, resulting in additional tuition and fees.

Proof of Titer Report/Tests/Results, proof of immunizations, and documents must be submitted NO LATER THAN _____/_____/_____

Student Name:_____ Date:_____

Student Signature:_____ Date:_____

SVSTI Official Signature:_____ Date:_____

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