**SVSTI**

**EXTERNSHIP – Immunization /Medical Screening Requirements**

*These requirements are based on the California State Department of Health Services recommendations and Externship facility requirements. You MUST complete the following immunizations and provide documentation to the Enrollment Coordinator OR the Program Director. Titers MUST be drawn (#3, #4, #5) and test results submitted to SVSTI BEFORE your program start date. If your TITER report indicates that you are no longer immune, you must receive a booster or the required immunization series to begin your Externship on time.*

***Proof of all titers, titer results / report, and proof of immunizations must be submitted at ENROLLMENT***

1. **Tetanus/Diphtheria/whooping cough (TDaP)** –Must show proof of vaccination (dated within 10 years). If no proof is available - a booster is required
2. **Mantoux (Tuberculous) Test (PPD**)- **Gold Interferon** blood test **(*best option – 1 step*)**

**OR**

**TWO TEST / Two-step PPD SKIN test**

PPD antigen is injected; student must have area read **3 days after injection**.

If negative, a second PPD antigen is injected under the skin 4 days later

The 2nd test must be read **3 days after injection** - If negative, testing is complete

**If positive for TB**, a chest x-ray must be taken **(Within 1 month of first day of class)**

1. **Measles/Mumps/Rubella**- **TITER is required**, with numerical lab values. Titer results must be turned in to the Enrollment Coordinator or Program Director. If no immunity, immunization is required
2. **Hepatitis B** - **TITER is required**, with numerical lab values. Titer results must be turned in to the Enrollment Coordinator or Program Director

If no immunity, immunization is required - *Students must complete the required series (3 immunizations) and show proof of an additional Titer before start of externship –* ***THIS CAN TAKE UP TO 6 MOS***

1. **Varicella (chicken pox) -** **TITER is required**, with numerical lab values. Titer results must be turned in to the Enrollment Coordinator or Program Director. If no immunity, immunization is required
2. **Physical -** a physical may be done - Or a simple note from your physician releasing you to be in good health for Externship
3. **BLS -** Submit proof of current BLS (American Heart Association – **B**asic **L**ife **S**upport) **BEFORE** Sterile Processing classes begin
4. **Influenza** – Proof of Vaccination is required during flu season (Sept – April) or per site request
5. **COVID –** Copy of COVID Vaccine Card