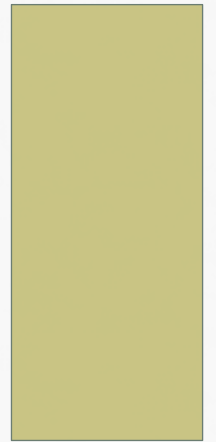


COMPLETING MUSC IMMUNIZATION FORMS



Completing MUSC Immunization Forms

Before you begin this presentation, print a copy of the immunization forms found on the Student Health website.

http://academicdepartments.musc.edu/esl/studenthealth/student_resources/forms.html

References to these forms will be made throughout the presentation.

REQUIREMENTS APPLY TO...

Web-based

ALL

Part-time

MUSC students

Full-time

Current employees

Returning

WHY?

People who work in medical settings are at an increased risk for exposure to certain diseases.



WHY?

For YOUR safety

and

The safety of our
patients



TERMS AND DEFINITIONS



Centers for Disease Control and Prevention
CDC 24/7: Saving Lives. Protecting People.™

www.cdc.gov/vaccines/vac-gen/imz-basics.htm

TERMS AND DEFINITIONS

Immunization

The process by which a person or animal becomes protected against a disease. This term is often used interchangeably with vaccination or inoculation.

TERMS AND DEFINITIONS

Vaccine

A product that produces immunity therefore protecting the body from the disease.

Vaccination

Injection of a killed or weakened infectious organism in order to prevent the disease.

TERMS AND DEFINITIONS

Titer

a measurement of the amount or concentration of a substance in a solution. Immunization titers refer to the amount of antibodies found in a patient's blood

TERMS AND DEFINITIONS

ACCEPTABLE

- ✓ Quantitative Titer - Results are a numerical value with a numerical range provided and indicating the results are in the immune range.
- ✓ Qualitative Titer – Positive or negative OR reactive or non-reactive WITH a numerical range indicating the results are in the immune range

NOT ACCEPTABLE

Qualitative Titer - Positive/Reactive or Negative/Non-reactive or Equivocal result and NO numerical range is provided

TERMS AND DEFINITIONS

Quantitative Titer = Numerical values = ACCEPTABLE

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
Rub Ab+VarAb+RubeoAb+MumIgG					
Rubella Antibodies, IgG	15		IU/mL		01
			Non-immune	<5	
			Equivocal	5 - 9	
			Immune	>9	
Rubeola Ab, IgG, EIA	4.89	High	index	0.00 - 0.90	01
			Negative	<0.91	
			Equivocal	0.91 - 1.09	
			Positive	>1.09	
	Presence of antibodies to Rubeola is presumptive evidence of immunity except when active infection is suspected.				
Mumps Abs, IgG	1.78	High	index	0.00 - 0.90	01
			Negative	<0.91	
			Equivocal	0.91 - 1.09	
			Positive	>1.09	
	Presence of antibodies to Mumps is presumptive evidence of immunity except when active infection is suspected.				
Varicella Zoster IgG	1.78	High	index	Immune >1.09	01
			Nonimmune	<0.91	
			Equivocal	0.91 - 1.09	
			Immune	>1.09	
Hep B Surface Ab	5.53		Index Value	0.00 - 0.99	01
	Status of Immunity		Anti-HBs Level		
	-----		-----		
	Inconsistent with Immunity			0.00 - 0.99	
	Consistent with Immunity			>0.99	

TERMS AND DEFINITIONS

Qualitative Titer = Positive or reactive/Negative or non reactive /Equivocal with numerical range indicating the results are in the immune range

Hep B Surface Ab			
Hep B Surface Ab, Qual	Non Reactive		01
	Non Reactive:	Inconsistent with immunity, less than 10 mIU/mL	
	Reactive:	Consistent with immunity, greater than 9.9 mIU/mL	

Equivocal	0.91 - 1.09
Immune	>1.09

DOCUMENTATION REQUIRED FOR...

- Measles, Mumps, Rubella (MMR)
- Varicella
- Tetanus, Diphtheria, Pertussis (TDAP)
- Tuberculosis screening
- Meningococcal
- Influenza (November – April)
- Hepatitis B (Required for all students except Graduate Studies and MHA, DHA students)

MEASLES, MUMPS, RUBELLA (MMR)

Three ways to demonstrate compliance

1. Copy of Immune MMR IgG Antibody Quantitative Titer report or a positive or reactive qualitative titer report with a numerical range indicating immunity
2. If you were born in 1957 or after: 2 MMR vaccines received on or after age of 12 months and both after 12/31/1967
3. If you were born before January 1, 1957- 1 MMR vaccine received after 12/31/1967

VARICELLA (VARIVAX)

Two ways to demonstrate compliance

1. Copy of lab report of Immune Varicella IgG Antibody Quantitative Titer or qualitative titer with lab cut-off values indicating immunity
2. Documentation of 2 varicella vaccines

TETANUS/DIPHTHERIA/PERTUSSIS (TDAP)

Two ways to demonstrate compliance

1. Adult Tdap on or after 6/10/2005
2. Documented pertussis allergy (Note from medical provider verifying allergy and why vaccine is contraindicated)

TUBERCULOSIS SCREENING

Three ways to demonstrate compliance

1. 2 Tuberculin Skin Tests - Intradermal PPD (Mantoux 5TU) 7 – 10 days apart within 3 months of start date at MUSC
2. Interferon Gamma Release Assay (IGRA) Blood Test (QuantiFERON-TB Gold or T-SPOT)
3. Documentation of the positive PPD (if no record, Option B required), chest x-ray taken after positive PPD date and your post-exposure treatment

MENINGOCOCCAL VACCINE

Two ways to demonstrate compliance

1. Meningococcal vaccine
2. Signed waiver

HEPATITIS B

Documentation for compliance

1. If previously immunized, provide dates of vaccines
2. Copy of lab report of immune Hepatitis B Surface Antibody Quantitative or Quantitative with numerical range identified
3. Not required for students in Graduate Studies or the MHA, DHA programs.

OTHER IMMUNIZATIONS

MUSC does not require the following immunizations; however, if you would like them to be included in your medical record, please forward to Student Health Services with your required immunization forms.

- Hep A
- Human Papilloma Virus (HPV)
- Polio
- Pneumococcal
- Typhoid

PROCESS FOR COMPLETING

- Read the information pages and frequently asked questions.
- Send (fax, email, deliver) the immunization forms to your healthcare provider as soon as possible.
- Have lab work (blood draw for titers) done if needed.
- Schedule a date and time to pickup your forms (including your lab reports) from your provider.
- Review the forms prior to leaving the office and ensure all are completed according to instructions. (See “common errors” in packet)
- Make a photocopy of your forms for your records.
- Send or deliver original forms to MUSC Student Health.
- Using the photocopy of your forms, enter your data on-line (<https://lifenet.musc.edu>) prior to sending the forms to Student Health. If you are unable to access LifeNet, please contact Education and Student Life at 843-792-4930.

TOP 10 COMMON ERRORS

- Missing lab reports
- Qualitative titer results without numerical ranges (Quantitative accepted)
- Unverified immunizations
- Incomplete dates
- Incomplete verification (initials instead of complete signature) and/or verification with ditto marks – unacceptable
- Parental signatures – not accepted as verification
- PPD (TB test) > 3 months before your start date at MUSC (must be ≤ 3 months prior to when classes begin)
- Tine test is not acceptable for PPD – must be Mantoux method
- Tdap dated prior to 6/10/2005 (Adult Tdap was not available prior to 6/10/2005)
- Incomplete series (received one of two doses; did not complete the series)

HEALTH INSURANCE REQUIREMENT

- All students are required to have health insurance
- Submit a waiver request or enroll at
<http://www.studentinsurance.com>
- Waiver information will be reviewed and approved if plan meets MUSC comparable coverage criteria
- **REQUIRED DOCUMENTATION:** A copy of the email you receive from AIG indicating your insurance plan was approved OR confirming your enrollment
- For more information visit
http://academicdepartments.musc.edu/esl/studenthealth/student_resources/healthinsinfo.html

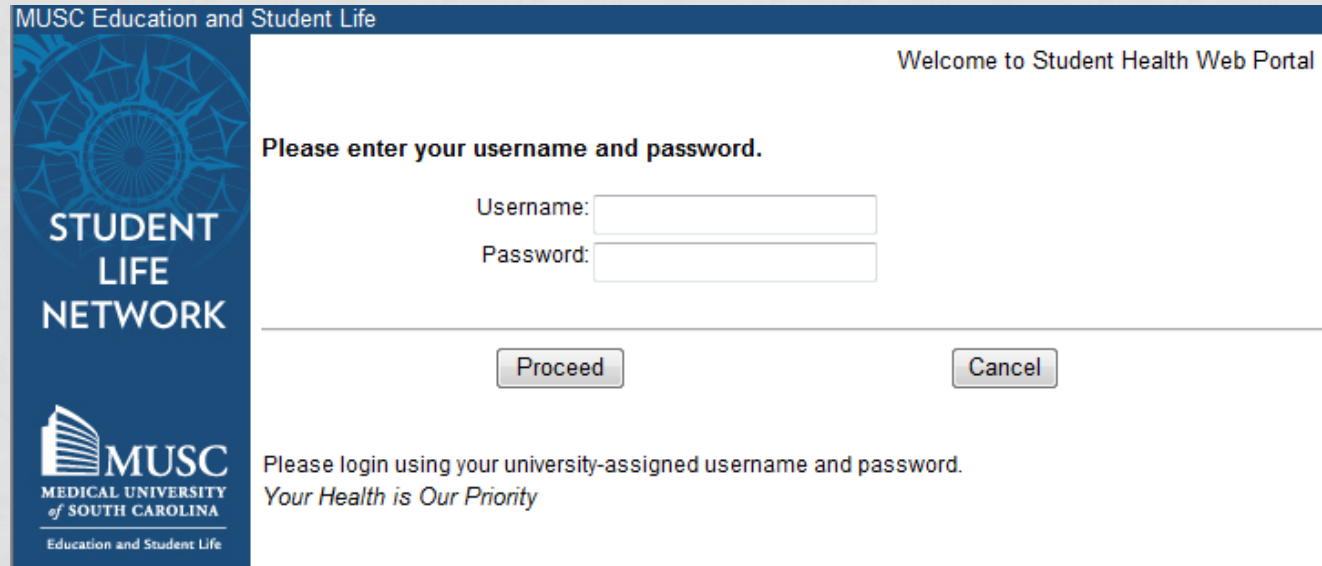
ENTERING DATA IN LIFENET

Complete this process when you have the following:

- ✓ Your MUSC netID and password
- ✓ All completed forms from your health care provider including copies of your lab reports
- ✓ Time to enter the information (you will not be able to save and return once you begin)

ENTERING DATA IN LIFENET

1. Go to <https://lifenet.musc.edu>
2. Log in with your MUSC netID (username) and MUSC password (password)




MUSC Education and Student Life

Welcome to Student Health Web Portal

Please enter your username and password.

Username:

Password:

 **MUSC**
MEDICAL UNIVERSITY
of SOUTH CAROLINA
Education and Student Life

Please login using your university-assigned username and password.
Your Health is Our Priority

The message “no record found” is usually due to a difference in the date/time your netID is assigned and the date/time when your information is entered in the Student Health Services system. If you see this message, please wait 72 hours and attempt to log in again. If after 72 hours you are still unable to log in, please contact Student Health Services at 843-792-3664.

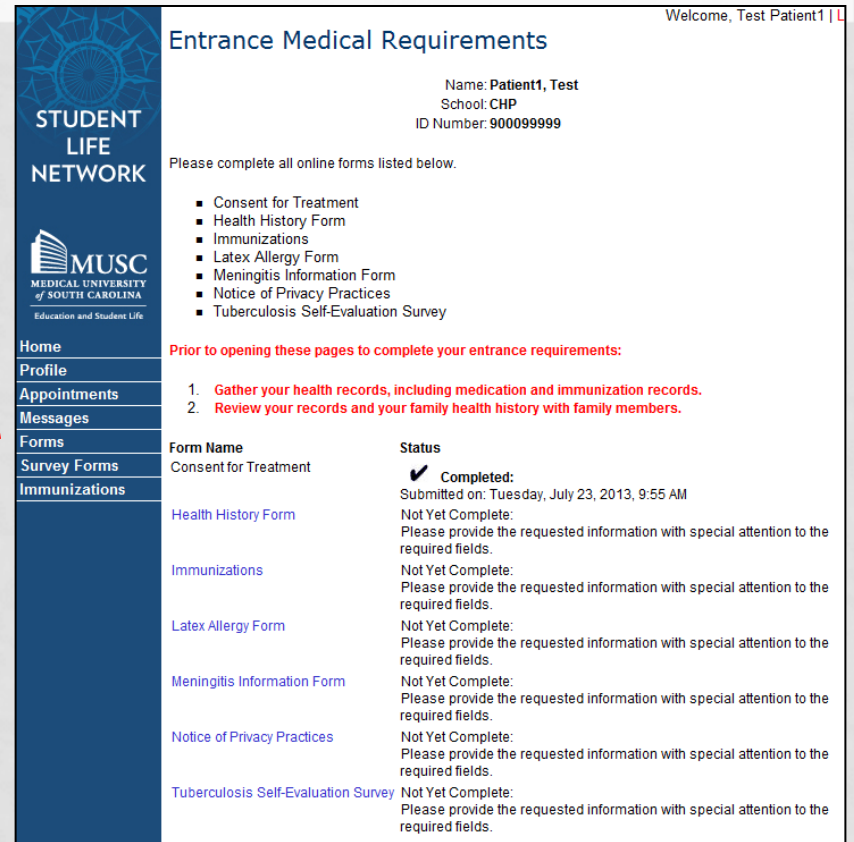
ENTERING DATA IN LIFENET

Go to “Forms”

- Consent for Treatment
- Health History
- Notice of Privacy Practices
- Latex Questionnaire
- Meningococcal Questionnaire
- Tuberculosis Questionnaire
- Immunizations

Forms can be completed individually and submitted; however, you will not be able to save and return to a form.

You can cancel a form but the information will not be saved.



Welcome, Test Patient1 | L

Entrance Medical Requirements

Name: Patient1, Test
School: CHP
ID Number: 900099999

Please complete all online forms listed below.

- Consent for Treatment
- Health History Form
- Immunizations
- Latex Allergy Form
- Meningitis Information Form
- Notice of Privacy Practices
- Tuberculosis Self-Evaluation Survey

Prior to opening these pages to complete your entrance requirements:

- Gather your health records, including medication and immunization records.
- Review your records and your family health history with family members.

Form Name	Status
Consent for Treatment	✔ Completed: Submitted on: Tuesday, July 23, 2013, 9:55 AM
Health History Form	Not Yet Complete: Please provide the requested information with special attention to the required fields.
Immunizations	Not Yet Complete: Please provide the requested information with special attention to the required fields.
Latex Allergy Form	Not Yet Complete: Please provide the requested information with special attention to the required fields.
Meningitis Information Form	Not Yet Complete: Please provide the requested information with special attention to the required fields.
Notice of Privacy Practices	Not Yet Complete: Please provide the requested information with special attention to the required fields.
Tuberculosis Self-Evaluation Survey	Not Yet Complete: Please provide the requested information with special attention to the required fields.

LIFENET

- Access off-campus, 24 / 7
- Print immunization record
- Schedule certain types of appointments at SHS
- Check appointment dates and times

QUESTIONS?

Call Student Health Services
843-792-3664