

# ST. JOSEPH'S COLLEGE OF NURSING

## SJCON IMMUNIZATION REQUIREMENTS.

The following are required by **New York State** for attendance at a post-secondary institution in accordance with PHL Section 2165 **MMR (measles, mumps and rubella)**, PHL Section 2167-**Meningitis** (meningococcal disease), and Title 10 New York Codes, Rules and Regulations Subpart 66-2 (10 NYCRR Subpart 66-2). (Documentation of proof of immunity/immunization records is required by all students who are taking 6 or more credits.

All proof of immunizations or immunity (positive titers) **MUST** be uploaded to your **Castle branch account** according to the following dates or you **will be excluded** from the program until compliance is met:

July enrollment: June 1<sup>st</sup>

Fall enrollment: July 15<sup>th</sup>

Spring enrollment: December 15<sup>th</sup>

**“Exclusion”** is the process whereby noncompliant students are not permitted continued attendance at the institution; where as, "attendance" means the student's physical presence on campus (i.e., exclusion from classes, dorm residence and other curricular and extra-curricular campus activities).

**Proof of vaccination or immunity to Measles, Mumps & Rubella (MMR)** through **one** of the following:

- 1. Two doses** of MMR vaccine. The first dose of MMR vaccine must have been received on or after the first birthday. The second dose must have been received at least 28 days (4 weeks) after the first dose but after 15 months of age to be considered valid.
- 2. Two doses** of Measles (1<sup>st</sup> dose after 12 months of age and second dose after 15 months of age. Both doses separated by at least 28 days), **Two doses** of Mumps (1<sup>st</sup> dose after 12 months of age, and second dose after 15 months of age. Both doses separated by at least 28 days), **and one dose** of Rubella (administered after 12 months of age.
- 3. Serologic Blood titers showing immunity (Positive titers). Official lab reports of titer results.**

**If insufficient vaccine record, then antibody titers are required. Booster vaccine documentation is required if antibody titers are negative or equivocal.**

## **MENINGITIS**

- New York State PHL Section 2167 requires post-secondary institutions to distribute information about meningococcal disease and immunization to the students, or parents or guardians of students under the age of 18, accompanied by a response form. The institution is required to maintain appropriate documentation for each student. Acceptable documentation includes any of the following:
  - A vaccine record indicating at least 1 dose of meningococcal ACWY vaccine within the last 5 years or a complete 2- or 3-dose series of Men B without a response form; or
  - A signed response form with a vaccine record (If a student submits a response form selecting this option, a vaccine record must be attached); or
  - A signed response form indicating that the student will obtain meningococcal vaccine within 30 days; or
  - A signed response form indicating that the student will not obtain immunization against meningococcal disease.

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- If the student has not received meningococcal vaccine within the past 5 years, then he/she must submit the signed response form.

[Meningococcal Disease Fact Sheet.pdf](#)

[Meningococcal response form 2024.pdf](#)

**St. Joseph's College of Nursing recognizes medical exemptions as defined by New York State Public Health Law 2165.**

**Medical exemption:** A letter must be written by a physician, physician assistant, or nurse practitioner and state that a valid contraindication to vaccination exists. The exemption must specify which immunizations are contraindicated and why. Medical exemptions will require approval from St. Joseph's Hospital Health Center Health Office.

*However, in the event of an outbreak of measles, mumps, rubella, or meningitis, students with medical exemptions will be excluded from campus and classes to protect them from exposure for as long as they could be at risk.*

*Documentation for request of medical exemptions must be received prior to the start of classes.*

## Religious Exemptions

St. Joseph's Hospital Health Center **does not** allow for any religious exemptions for **ANY** immunizations.

**St. Joseph's Hospital Health Center (SJHHC) and/or SJCON require** Varicella, Hepatitis B, TDAP, and TB screening to attend clinical.

**TDAP-**Tetanus, Diphtheria and Pertussis (TDAP) vaccine within last 10 years

**Hepatitis B:** Documented official record of 2 dose series **or** 3 dose series Hepatitis B vaccines **or** positive titer results.

**If insufficient vaccine record, then antibody titers are required. Booster vaccine documentation is required if antibody titers are negative or equivocal.**

**Varicella:** Documentation of **Two** varicella vaccines, or positive titer result

**If insufficient vaccine record, then antibody titers are required. Booster vaccine documentation is required if antibody titers are negative or equivocal.**

## TUBERCULOSIS SCREENING

Students **must** undergo baseline testing for tuberculosis with a blood test (Interferon Gamma Release Assay [IGRA]) or a 2-step Tuberculin Skin Test (TST).

IGRA: (**Preferred**) Two IGRAs are currently endorsed by CDC for initial screening and surveillance of HCP, QuantiFERON-Gold, and T-Spot TB.

**2-Step Tuberculin Skin Test (TST)** is performed by intradermal injection of PPD (purified protein derivative) with the student returning in 48-72 hours to record induration and interpretation. If negative, a second TST is placed on the opposite forearm **7-21 days** after initial negative results and again returning in 48-72 hours to record induration and interpretation.

This 2-step version will result in **four total visits** to your provider. You **must** also submit a TB questionnaire when uploading TB results. Questionnaire is available on CastleBranch.

Results must be uploaded to Castle branch and must be **negative**.

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**If you have positive test results, you must upload a clear chest x-ray within last 3 years.**

Every student must also submit an initial **TB questionnaire** when uploading results, and annually thereafter. The renewal date is set for 1 year. **Questionnaire is available for download from CastleBranch.**

**Please submit TB results and questionnaire at same time for approval.**

**Seasonal flu (Influenza) vaccine:** SJHHC strongly recommends an annual influenza vaccine. If you are not vaccinated against influenza annually, you are required to wear a mask in clinical settings.

**COVID 19 Vaccination:** SJHHC does not require though strongly recommends following the CDC guidelines with regard to COVID-19 vaccinations.

**This policy is subject to revisions should modifications of the laws or St. Joseph's Hospital Health Center add immunization requirements or make modifications to currently required immunizations.**