

The UC San Diego Health System Aerosol Transmissible Disease Policies (ATD) 611.3 and Title 22 mandate individuals working in a healthcare area (including faculty, staff, students, contractors, volunteers, observers, vendors) must demonstrate immunity to the communicable diseases listed below, prior to beginning their work, rotations or assignment.

**Please have your immunization records and T.B. screening status REVIEWED and this form signed by a licensed medical provider.
Return this document to your sponsoring department or agency. For questions, please call COEM at 619-471-9210.**

- Tuberculosis Screening**
 - Negative** Tuberculin Skin Test (TST) performed within the last 3 months **OR**
 - Negative QuantiFERON®-Gold (QFT)** within the past 3 months **OR**
 - Negative** chest xray results within past 12 months if history of positive TST or QFT
- Immunity to Measles, Mumps, Rubella**
 - Two (2) documented MMR vaccines **OR**
 - Positive** laboratory report (blood titers)
- Immunity to Varicella** (history of chicken pox is not sufficient)
 - Two (2) documented varicella vaccines **OR**
 - Positive** laboratory report (blood titers)
- Hepatitis B Screening** (direct patient care position only)
 - Proof of three (3) Hepatitis B vaccines and **Positive** blood test for Hepatitis B Surface Antibody
- Tdap vaccine (Tetanus, diphtheria, acellular pertussis)** – current within last 10 years
- Influenza (Flu) vaccine** (for the current flu season)

CLINICAL USE ONLY: To be completed by licensed medical provider

Date: _____

I attest that _____ is meets the above listed immunity requirements.
First Name Last Name

Clinician Name/Title

Clinician Signature

Clinic address

City

Zip code

Clinic Phone: (_____) _____