

1. **Proof of CoVid Vaccine** (as of 8/1/2021 Pfizer, Moderna, Johnson & Johnson)
2. **7-year criminal comprehensive Background run within 30days of start**
3. **\*Immunizations** (\*including proof of flu vaccine between Oct 1 – Mar 31)
4. **Drug screen—12 panel within 30 days of start** (Amphetamines, Barbiturates, Cocaine, Marijuana, ethaqualone, Opiates, Phencyclidine, Benzodiazepines, Methadone, propoxyphene, Oxycodone, MDMA)
5. **Current TB** (blood test preferred –if 2 step; one w/in last 12 mos; and one w/ in 60 days of start, or annually for a clinical program)
6. **Current American Heart Association or Red Cross CPR card** (Some areas ACLS and / or PALS)
7. **Have current, unencumbered license**
8. **OIG/ EPLS/ Sex Offender / National Health care registry clearance**
9. **Non-EE Regulatory Onboarding Training:** [Non-Employee Regulatory Orientation](#)

**\*Required Immunizations/Vaccinations:****Measles, Mumps, Rubella (MMR):**

- *Acceptable Immune Status:*
  1. Date of Birth - Born before 1957 compliant with MMR requirement
  2. 2 doses of Measles (or MMR) vaccine **with** 1<sup>st</sup> dose given on or after first birthday **or** serologic immunity result
  3. 2 doses of Mumps (or MMR) vaccine **with** 1<sup>st</sup> dose given on or after first birthday **or** serologic immunity result
  4. 1 dose of Rubella (or MMR) vaccine **with** 1<sup>st</sup> dose given on or after first birthday **or** serologic immunity result

**Varicella (Chicken Pox):** (History of disease no longer acceptable)

- *Acceptable Immune Status:*
  1. 2 doses of Varicella vaccine **or** serologic immunity result

**Note:** *Medical Student Services/Programs (e.g. Medical, PA, Grad, SRNA) require documented serology. If serology result is negative, students must also provide documentation of 2 doses of Varicella vaccine.*

**Tetanus (Required for all Animal Care Workers):**

- *Acceptable Immune Status:*
  1. Documented history of Tetanus, Td, or TDaP within previous 10 years

**Note:** *Tetanus, Td, or TDaP is highly recommended for all HCWs*

**Influenza (Seasonal):**

1. Generally noted as October 1 – March 31 or as determined by WFBMC Influenza Task Force

**Tuberculosis Screening:**

- One of the following completed within the past 12 months is required:
  1. 2 step TB skin test (administered 1-3 weeks apart) One 60 days within start
  2. 2 consecutive annual tests administered 10-12 months apart, with the most recent administered within the past 12 months
  3. QuantiFERON Gold blood test (lab report required) **This is preferred**
  4. T-Spot blood test (lab report required)
  5. IGRA blood test (lab report required)
- If positive results, submit:
  1. A clear chest x-ray (lab report required) AND proof of past positive testing
  2. A Symptom Free TB questionnaire from the last 12 months.

**Recommended Immunizations/Vaccinations for 'At-Risk' HCWs:**

Recommended for individuals whose job activities or work areas may place them at high risk for certain communicable diseases.

1. Hepatitis B: 'At Risk' individuals are those who may reasonably anticipate contact of the skin, eye or mucous membrane with human blood or body fluid
2. Neisseria meningitidis: 'At Risk' individuals are those who work with the *Neisseria meningitidis* organism in microbiology laboratory areas Rabies: 'At Risk' individuals are those who work with dogs