

Northwestern University

REQUIRED IMMUNIZATIONS

PHYSICIAN ASSISTANT STUDENTS



Students are required by Northwestern University and Illinois State Law to submit proof of immunizations. Please submit copies of immunization records which provides all of the requirements listed below. All records must be submitted in English — a translation by a certified translator with copies of the original records is acceptable.

SPECIAL CIRCUMSTANCES — Measles doses before 1/1/1968 are not accepted. If you have no immunization records, you have the option to complete blood tests to prove immunity to Measles, Mumps and Rubella or be revaccinated. Revaccination is the only option for the Tetanus/Diphtheria/Pertussis requirement and an extension may be granted to complete the three dose series after the deadline, when necessary.

Submit your documentation online to the immunization health portal at https://www-healthy.nuhs.northwestern.edu/login_directory.aspx or send in email to HIMS@northwestern.edu.

MEASLES (Rubeola), MUMPS, RUBELLA (German Measles) IMMUNITY — MMR TITER (IGG)

- A **positive lab report confirming immunity to all three diseases** **MUST** be submitted to meet this requirement.
- Please submit all MMR vaccination dates if known.
- If your titer did not prove immunity (negative or equivocal) or you just started the vaccination series, submit the dates of all MMR vaccinations completed to date along with the negative/equivocal lab results.

TETANUS/DIPHTHERIA/PERTUSSIS — 3 doses of DTP, DTaP, DT, Td, or Tdap are required .

- The first 2 doses **MUST** be at least 28 days apart.
- One dose **MUST** be a **Tdap** completed within **10 years** prior to entrance into Northwestern University and at least 6 months after the last primary series vaccination.
- Brand names for **Tdap** are : **Boostrix®**, **Adacel®**, **Repevax®**, or **Refortrix®**

TUBERCULOSIS TESTING: Complete **ONE** of the following:

- **QuantiFERON® TB Gold blood test:** Must be **completed in the USA on or after April 1st** of the year you enter the program. A copy of the lab report must be submitted.
 - If the QuantiFERON® TB Gold blood test result is **positive**, a chest x-ray **performed in the USA** must also be completed and attached to the result — once on campus, a visit with a Student Health Service physician is needed.
- OR**
- **History of positive QuantiFERON TB Gold blood test:** Submit chest x-ray **performed in the USA on or after April 1st** of the year you enter the program — If available, also include the historical positive Tuberculosis test result and if applicable, any TB treatment records.
 - ❖ **STUDENTS ARRIVING FROM OTHER COUNTRIES** in need of a TB test and/or chest x-ray have until 30 days after the start of classes to complete without incurring penalty.

HEPATITIS B IMMUNITY — HEPATITIS B SURFACE ANTIBODIES TITER (IGG)

- A **positive lab report confirming immunity** **MUST** be submitted to meet this requirement.
- Please submit all HepB vaccination dates if known.
- If your titer did not prove immunity (negative or equivocal) or you just started the vaccination series, submit the dates of all HepB vaccinations completed to date along with the negative/equivocal lab results.

VARICELLA (Chicken Pox) IMMUNITY — VARICELLA TITER (IGG)

- A **positive lab report confirming varicella immunity** **MUST** be submitted to meet this requirement.
- Please submit all varicella vaccination dates if known.
- If your titer did not prove immunity (negative or equivocal) or you just started the vaccination series, submit the dates of all varicella vaccinations completed to date along with the negative/equivocal lab results.

COVID-19 Vaccinations: At least 2 vax dates from primary series **MUST** be submitted — please submit all vaccine dates known.