

# **IMMUNIZATION CHECKLIST**

**Please check to be sure your health care provider recorded all dates/results on your immunization record:**

\_\_\_\_\_ Two Step PPD – test done prior to May 2019 are not acceptable (if PPD is positive, please include (1) date (2) results of current chest x-ray (taken year of matriculation), (3) date and whether or not medication was taken, and (4) name of medication and the (5) dates of therapy, if applicable. If BCG immunization was received 5 or more years ago, PPD is still required.

\_\_\_\_\_ 2018-2019 Influenza season vaccine

\_\_\_\_\_ Tetanus/Diphtheria/Pertussis-Initial Series **and Tdap** vaccine within last 10 years required

\_\_\_\_\_ Polio-Initial Series (3 immunization series) **and** Booster (one after age 4)

\_\_\_\_\_ MMR (two immunizations required after January, 1968)

\_\_\_\_\_ Measles- Rubeola positive serology \*

\_\_\_\_\_ Mumps- Positive serology \*

\_\_\_\_\_ Rubella- Positive serology \*

\_\_\_\_\_ Varicella- Positive serology \*

\_\_\_\_\_ Hepatitis A – **Series** (2 immunization series) **Highly recommended** \*

\_\_\_\_\_ Hepatitis B – **Series** (3 immunization series) and **positive serology** \*

**\* You must submit a photocopy of lab reports for these tests.**

**NOTE: If any of your serology results are negative or equivocal, you are required to re-immunize for the virus(es) and obtain repeat serology(ies).**

Questions may be directed to Valerie Melket, Valerie Hegwood, or Julie Hales at (808) 469-4980 or [JABSOMMR@ucera.org](mailto:JABSOMMR@ucera.org). For more information, please see our webpage at <https://uhphawaii.org/index.php/jabsom-immunizations/>