

# Information for Incoming Health Science Students & Their Healthcare Providers

Yale School of Medicine, Yale School of Nursing, Yale Physician Assistant Program

## INSTRUCTIONS FOR COMPLETING VACCINATION REQUIREMENTS

*Please read this information carefully and start this process as soon as possible.*

1. Print the vaccination record form and these instructions **now** and take them to your healthcare provider (physician, nurse practitioner, physician assistant, etc.) for completion.
2. Certain vaccinations require a series over time. Delay in getting your vaccinations may prevent registration for classes.
3. Note that all documentation must be **in English or translated into English** before upload.
4. Please visit <https://yale.medicatconnect.com>, Yale's Vaccine Portal when you have completed your forms.
  - a. Enter your Yale NetID and password to log in.
  - b. Enter the dates of all vaccinations.
  - c. Scan or take a photo of the vaccination form and all supporting documents (e.g. laboratory tests) and upload.
  - d. Verification takes 1-5 business days.
  - e. Medicat will send weekly reminders to complete the process until you are verified and off health hold. If you are unable to determine what information remains incomplete, email [complianceservices@medicat.com](mailto:complianceservices@medicat.com).

## REQUIRED VACCINATIONS/TITERS:

### MMR (Measles, Mumps & Rubella)

- **Two** measles, mumps and rubella vaccinations administered AFTER your FIRST BIRTHDAY and administered at least 28 DAYS APART.  
**OR**
- TITER - Blood test results that show that you have immunity to each of the components of the vaccine: measles, mumps and rubella. If any of these tests are negative, revaccination is required. **Upload the lab report with your completed vaccination record.**

### Varicella (chickenpox)

- **Two** varicella vaccinations administered AFTER your FIRST BIRTHDAY and administered at least 28 DAYS APART.  
**OR**
- Documentation of date of disease as witnessed/treated by your healthcare provider.  
**OR**
- TITER - Blood test results that show that you have immunity to varicella. If this test is

negative, revaccination is required. **Upload the lab report with your completed vaccination record.**

### **Meningitis**

- **If you will be living in on-campus housing\*** (dormitory only), you are **required** to document the administration of two quadrivalent (ACWY) meningitis vaccinations with the last dose having been administered within the past five years.
- If your last dose was not within the past five years, a booster dose is required.
- The only vaccines accepted are: Menveo, Nimenrix, Menactra, Mencevax, Menomune. If you do not have access to any of these vaccines in your home country, contact [immunization@yale.edu](mailto:immunization@yale.edu) for guidance.

*\*On-campus dormitories include all the undergraduate residential colleges and the following graduate dormitories: 254 Prospect Street, 272 Elm Street, 276 Prospect Street, Baker Hall, Harkness Dormitory (Medical School), and Helen Hadley Hall. On-campus apartments do not apply.*

### **Tuberculosis Screening**

- Documentation of PPD screening or Quantiferon lab test within the **past 6 months** is **required**. If you have ever had a positive PPD reading or Quantiferon lab test, instead supply documentation along with dates of your completed medication regimen.
- Chest X-ray within the past 5 years for any positive PPD or Quantiferon lab test. Please supply information regarding all evaluation and treatment information including a chest X-ray reading report completed by a radiologist. **(Upload radiologist's report: Do not send chest Xray films.)**

### **Influenza**

- All students are required to have **flu vaccination** in the fall when it is made available to them by Yale Health.

### **Hepatitis B Series**

- Dates of three hepatitis B vaccinations administered at the following intervals:  
First vaccination, second vaccination administered 30 days later, and third vaccination 6 months after the first  
**AND**
- Laboratory report from a **quantitative** hepatitis B surface antibody titer, drawn at least 30 days after last hepatitis B vaccination. This titer result must have a numeric value.

### Secondary Hepatitis B Series:

1. If your first **quantitative** hepatitis B surface antibody titer value is **less than 10**, see your healthcare provider now, for a hepatitis B vaccination booster.
2. Wait 30 days and have the **quantitative** hepatitis B surface antibody titer repeated.
3. If the test result is still less than 10, get another hepatitis B vaccination.
4. Wait 5 months and get another hepatitis B vaccination.
5. Wait 30 days and have the **quantitative** hepatitis B surface antibody titer repeated.
6. Continue to document all of these vaccinations and titer results in Medcat and upload all titer results/vaccination documentation until the process has been completed.

### Tdap: Tetanus-diphtheria and Pertussis

- Documentation of one Tdap vaccination, administered within the past ten years, is required.

### COVID-19\*

- One bivalent dose administered after September 2, 2022, is required
- Primary series documentation is optional
- If you have undergone an unusual primary series, please email [immunization@yale.edu](mailto:immunization@yale.edu) to discuss.
- Upload of CDC vaccination card or other record required as part of the completed vaccination record.
- Note that antibody tests for SARS CoV-2 and a previous infection are **NOT** considered an alternative to COVID-19 vaccination.

#### \*Important notes regarding COVID-19 vaccine

- Students should plan to complete the required vaccination **at least 2 weeks before coming to campus** for the fall semester. Vaccination will be available on campus in limited circumstances or for international students unable to access bivalent boosters.
- Requests for medical exemption will require approval by Yale Health
- Vaccination may be **postponed** with documentation of a positive test within the past 90 days, certain medical conditions, planned treatments, or pregnancy. This may be requested through the exemption process.

## OTHER VACCINATIONS

Hepatitis A, HPV, meningitis B, yellow fever, and typhoid vaccination information may be submitted to complete your medical record; you are not required to provide this information.

## REQUESTING MEDICAL OR RELIGIOUS EXEMPTIONS

If you are requesting an exemption for vaccination, you must follow these steps:

### **Non-COVID Vaccine Exemption Requests**

1. For medical exemption requests, complete the appropriate [Connecticut State Department of Public Health Exemption Form](#). NOTE: religious exemption requests for non-COVID vaccines are not available per CT state law.
2. Although written for minors, you may sign it as it applies to you.
3. **Attach a letter** from your physician explaining the reason for the medical exemption.

### **COVID-19 Vaccine Exemption Requests (Applicable to Health Science Students ONLY)**

Those requesting a medical or religious exemption for COVID-19 vaccination MUST complete **COVID-19 vaccine-specific** forms:

1. Medical exemption for COVID-19 vaccination: submit BOTH the [COVID-19 Medical Exemption Request Form](#) **AND** the medical provider form. The medical provider form must be completed by an MD, NP, PA, or DO.
2. To request a religious exemption, submit the [COVID-19 Religious Exemption Request Form](#).