



The Center for Health, Wellness and Personal Counseling  
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## IMMUNIZATION POLICY/CHECKLIST FALL 2022

### To all NURSING, HEALTH PROFESSIONS and HEALTH PROFESSIONS STAFF

This information sheet is provided to assist you and your health provider with all the requirements that are now needed for all Nursing, Health Professions and Health Professions staff. **Please read it completely and carefully.**

The attached forms **must be submitted via the health professions link that was provided in your acceptance packet.** Please note our system does not open documents sent as HEIC attachments. Staff can submit via email to [healthservices@bergen.edu](mailto:healthservices@bergen.edu) **The due date is Wednesday, Aug 10th for the FALL 2022 semester.** It is understood if only a first dose of a series is being submitted. **Please make sure your physician has signed and stamped all required forms,** as it may delay your approval of submission. **ALL** your forms must be submitted **at one time.** Please follow the directions carefully from your acceptance packet. You may email any questions to [healthservices@bergen.edu](mailto:healthservices@bergen.edu) using your Bergen email address, it is highly recommended for proper notification.

Our clinical affiliate hospitals have imposed, effective immediately, the following requirements that affect all Nursing Students, Health Professions and Health Professions staff.

1. A physical form needs to be filled out by your provider no more than 6 months old. It is side 2 of the Nursing and Health Professions Immunization Requirement Form.
2. All Nursing, Health Professions students and Health Professions staff are required to have **titers drawn** for Measles (Rubeola), Mumps, Rubella, Varicella and Hepatitis B surface antibody. **Laboratory reports must be attached immune or non-immune.** If titers are non-immune/negative **you must be revaccinated.**
3. If Hepatitis B Surface Antibody blood titer is negative/non-immune and you have proof that you have receive the vaccines series, you can sign a declination (attached), **and** must attach the immunization record indicating the three prior dates.
4. If Varicella titer is negative/non-immune you may choose not to be revaccinated as long you have attached your Immunization record showing 2 dates. If prior records are not available **revaccination** is required.
5. A recent Tdap vaccine. (within 10 years) (Please note that a TD, or Dtap is not in compliance.)
6. **IF APPLICABLE,** Meningococcal vaccine 2 doses at age 11-18yrs old or 1 dose at age 19-23yrs old. Attach immunization record.
7. Flu vaccination. Consent to inject form must be attached along with Influenza Vaccine Mandatory Reporting Form.
8. Covid-19 vaccine immunization card must be submitted with your medical forms submission.
9. TB screening must be a 2-step for first year students, or a Quantiferon Gold blood test or Spot Blood test. **Copy of titer must be attached.** (Form is attached for 2-step.)
10. Respirator Medical Evaluation (OSHA) Questionnaire. Complete all 6 pages by you and your physician. **Make sure it is signed by you and your physician and the physician has stamped it with their office stamp.**
11. Drug Screening (The form is attached with specific requirements and due date)
12. Copy of Health/Medical Insurance Company/Group card. (If you do not have health insurance, you can purchase a limited policy through the Bursar's office. Please contact the Bursar's office at [bursaroffice@bergen.edu](mailto:bursaroffice@bergen.edu)

**Submission link: <https://lf.bergen.edu/forms/hs0001>**