UofL Campus Health Services

Immunization Program Health Sciences Center 502-852-2708

Immunization Compliance Form for Graduate Medical Education Programs

Name:				DOB:/
	Last	First	Middle	
Day Telephone: ()	Email:		
Residency/Fellowship Program Name:				
In addition to completing this form, you MUST upload it and all supporting documentation to the MedHub site.				
Required Immunizations and Testing				
Tetanus-Diphtheria Acellular Pertussis (Tdap)				
Requirement: 1 Dose of vaccine within the last 10 years			Tdap Date:	/
Measles-Mumps-Rubella (MMR) Requirement:			MMR Dose 1:	//
			MMR Dose 2:	//
·				OR
Measles Mumps	2 doses of vaccine or positive titer 2 doses of vaccine or positive titer 1 dose of vaccine or positive titer		Measles Titer:	/
Rubella			Mumps Titer:	//
			Rubella Titer:	//
Hepatitis B Vaccine (Hep B) Requirement:Hepatitis B QUANITATIVE Surface Antibody after three doses of vaccine			Hepatitis B Dose 1:	1 1
			Hepatitis B Dose 1:	
			Hepatitis B Dose 3:	
			AND	
		(REQUIRED)	1 1	
			Hepatitis B Titer:	
Varicella (Chickenpox) Vaccine			Varicella Dose 1: Varicella Dose 2:	//
Requirement:				OR
2 doses of vaccine or positive antibody titer			Maria alla Titari	
		Varicella Titer:		
Tuberculosis Screening	Quantiferon Gold TB Blood testing University of Louisville. Submission of a Quantiferon Gold months of your start date is accep	or T-Spot lab report within 3	IGRA (Quantiferon or T Spot	t)/
Respirator Fit Testing	Fit testing for 3M 1860 or 1860S N95 residency start date.		Fit Testing:	/
Covid-19	CHECK WITH YOUR RESIDENCY COORDINATOR FOR SCHEDULING 2 doses of Pfizer/Moderna Vaccine		O-vid 40 D 4	1
Vaccination	OR		Covid-19 Dose 1: Covid-19 Dose 2:	//
	1 dose J&J Vaccine Covid-19 Booster vaccinations are hid	white recommended	Covid-19 Booster	/
	Covid- 19 booster vaccinations are nig	уну гесопппенаеа.		