

## Student Requirements Upon Acceptance into the UAA Radiologic Technology Program

If an applicant is accepted into the UAA Radiologic Technology Program, they will be required to complete at minimum the following immunizations and other clinical requirements\* before their first clinical practicum, RADT A195A. The first practicum course is not scheduled until the second semester of the program. All of the following are required to be done. If a student can not or will not fulfill any of the following, they will not be allowed in any clinical course and can not complete the program. If you have questions, please contact [uaa\\_radiologictech@alaska.edu](mailto:uaa_radiologictech@alaska.edu).

\*A state / federal background check is required for all students. Some clinical sites will require a drug screen. Additional immunizations may be added if required by clinical site.

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| <p>Measles, Mumps &amp; Rubella (MMR)</p> | <p>One of the following is required:</p> <ul style="list-style-type: none"> <li>• 2 vaccinations</li> </ul> <p>OR</p> <ul style="list-style-type: none"> <li>• Positive antibody titer (lab report or physician verification of results required)</li> </ul> <p>If your series is in process, submit where you are in the series, and new alerts will be created for you to complete the series.</p> <p>If your titer was negative or equivocal, new alerts will be created for you to repeat the series and provide a 2nd titer.</p> |
| <p>Varicella (Chicken Pox)</p>            | <p>One of the following is required:</p> <ul style="list-style-type: none"> <li>• 2 vaccinations</li> </ul> <p>OR</p> <ul style="list-style-type: none"> <li>• Positive antibody titer (lab report or physician verification of results required)</li> </ul> <p>If your series is in process, submit where you are in the series, and new alerts will be created for you to complete the series.</p> <p>If your titer was negative or equivocal, new alerts will be created for you to repeat the series and provide a 2nd titer.</p> |

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| <p>Hepatitis B – this is an application requirement and at least the first injection or recent titer must be provided to apply</p> | <p><b>BOTH</b> of the following are required:</p> <ul style="list-style-type: none"> <li>• Vaccinations <b>AND</b> a positive antibody titer (lab report required dated within the last year)</li> </ul> <p>If your series is in process, submit where you are in the series, and new alerts will be created for you to complete the series and titer.</p> <p>If your titer was negative or equivocal, new alerts will be created for you to repeat the series and provide a 2nd titer.</p> <p>Titer must be drawn within the last year. Any titer documentation after May 15, 2020 will not be accepted.</p> |
| <p>Tuberculosis (TB)</p>   | <ul style="list-style-type: none"> <li>• QuantiFERON Gold blood test (lab report required)</li> </ul> <p>OR</p> <ul style="list-style-type: none"> <li>• If positive results, submit a clear chest x-ray (lab report required).</li> </ul> <p>The renewal date will be set for 1 year.</p>  |
| <p>Tetanus, Diptheria &amp; Pertussis (Tdap)</p>   | <p>Submit documentation of a Tetanus, Diptheria &amp; Pertussis (TDaP) vaccination, administered within the past 10 years.</p> <p>The renewal date will be set for 10 years from the date administered.</p>   |
| <p>Influenza (Flu)</p>   | <p>Submit documentation of a flu vaccine administered during the current flu season (August-May).</p> <p>The renewal date will be set for 1 year.</p>   |
| <p>BLS Certification</p>   | <p>One of the following is required:</p> <ul style="list-style-type: none"> <li>• American Heart Association BLS Provider course</li> </ul>   |

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|                  | <p><b>OR</b></p> <ul style="list-style-type: none"><li>• American Red Cross BLS course.</li></ul> <p>The front AND back of the card must be submitted at the same time and the “Holder's Signature” line on the back of the card must be signed. eCard is also acceptable and if submitted eCard does not have to be signed.</p> <p>The renewal date will be set based on the expiration of your certification.</p> |
| Health Insurance | <p>One of the following is required:</p> <ul style="list-style-type: none"><li>• Current health insurance card</li></ul> <p><b>OR</b></p> <ul style="list-style-type: none"><li>• Proof of coverage.</li></ul>  |