Prior to working at a health care facility you will need to meet the below health screening requirements. History of disease is not accepted as proof of immunity.

**Tuberculosis (TB) Screening Requirements**
You can fulfill the TB requirements by completing one of the options below:
- Document of two negative tuberculosis skin tests (TST) in millimeters < 12 months of start date
- Document of one negative Interferon-Gamma Release Assays (IGRAs) < 12 months of start date
- Document of one positive TST in millimeters (anytime period) and a negative chest x-ray at or after the TST
- Document of one positive IGRAs (anytime period) and a negative chest x-ray at or after the IGRA
- Document of adequate treatment for latent/active TB infection/disease and a negative chest x-ray at or after the treatment

**Evidence of Immunity to measles (rubeola)**
You can fulfill the measles requirements by completing one of the options below:
- Document of two vaccinations of MMR at least 28 days apart
- Document of serological immunity (laboratory report)

**Evidence of Immunity to mumps**
You can fulfill the mumps requirements by completing one of the options below:
- Document of two vaccinations of MMR at least 28 days apart
- Document of serological immunity (laboratory report)

**Evidence of Immunity to rubella (German measles)**
You can fulfill the rubella requirements by completing one of the options below:
- Document of one vaccinations of MMR
- Document of serological immunity (laboratory report)

**Evidence of immunity to varicella (chicken pox)**
You can fulfill the varicella requirements by completing one of the options below:
- Document of two vaccinations of varicella at least 28 days apart
- Document of serological immunity (laboratory report)

**Tdap/Td: pertussis (whooping cough)**
You can fulfill the Tdap/Td requirements by completing one of the options below:
- Document of Tdap/Td vaccination less than 10 year of start date
- Signed declination

**Evidence of immunity to hepatitis B**
Only applicable for staff that have reasonable exposure risk to blood and body fluids.
You can fulfill the hepatitis B requirements by completing one of the options below:
Los Angeles County - Department of Health Services
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Employee Health Services

☐ Document of hepatitis B series and positive titer to hepatitis B surface antibody
☐ Signed declination
☐ Non-applicable (job duty does not involve potential exposure risk)

Influenza (flu vaccine)
You can fulfill the influenza requirements by completing one of the options below:
☐ Document of flu shot for current influenza season
☐ Signed declination (mandated to wear mask in patient care areas)

Respiratory Fit Testing
Only applicable for staff whose job duty involves airborne precautions
You can fulfill the respiratory fit testing requirements by completing one of the options below:
☐ Document of a completed fit test on a Kimberly-Clark N95 respirator < 12 months of start date
☐ Non-applicable (job duty does not involved airborne precaution patients/rooms)

Color Vision
Only applicable for staff whose job duty involves Point of Care testing, pathology or electrical.
You can fulfill the color vision requirements by completing one of the options below:
☐ Pass on color screening
☐ Non-applicable (job duty does not involved Point of Care testing, pathology or electrical)

Still have questions regarding health clearance requirements? Contact your local Employee Health Services.

LAC+USC Medical Center
   Office (323)409-5236 FAX (323)226-4253/6769
   Email: lacusc-ehs@dhs.lacounty.gov

Harbor-UCLA Medical Center
   Office (310)222-2360 FAX (310)222-2360
   Email: humc-ehs@dhs.lacounty.gov

Olive View-UCLA Medical Center
   Office (747)210-3403 FAX (747)210-4725
   Email: DEHS@dhs.lacounty.gov

Rancho Los Amigos National Rehabilitation Center
   Office (562)385-6016 FAX (562)385-7833
   Email: rancho-ehs@dhs.lacounty.gov

Martin Luther King, Jr. Outpatient Center
   Office (424)338-2200 FAX (310)764-5274
   Email: mlk-ehs@dhs.lacounty.gov

High Desert Regional Health Center
   Office (661)471-4342 FAX (661)524-2974
   Email: hdesert-ehs@dhs.lacounty.gov

Correctional Health Services
   Office (213) 974-9966 FAX (323) 415-7729
   Email: ARGonzal@lasd.org   AQSanche@lasd.org

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