

## **Health Clearance Checklist**

Please use the following checklist to organize documents to be submitted for health clearance. Upload all documents, including this checklist, to Medicat. Upload documents by the deadline indicated in the email from a member of the health clearance team.

Name	Pr	ogram		Date	
FORM	AS TO BE COMPLETED				
☐ Hist	History and Physical Examination Form – completed by student		Attached as one file		
☐ Phy	sician's Form – completed by physician				
☐ Aut	☐ Authorization to Release Medical Information Form – completed and signed by student				
☐ Mer	Meningitis Vaccination Response Form – completed and signed by student				
<u>IMM</u>	UNIZATION RECORDS & LA	B RESULTS			
Provid	e official immunization records and l	ab slips.			
	Quantiferon – provide documentation of results (dated within $\underline{1}$ year). If results are positive, provide an official adiologist report of chest X-Ray (must be within $\underline{5}$ years).				
	☐ Measles, Mumps, Rubella and Varicella – provide documentation of vaccination administration <u>AND</u> results of titers. Titers must be <b>quantitative/numerical</b> values.				
☐ TD	or Tdap – provide vaccination documentati	on (must be within 1	<u><b>0</b></u> years).		
☐ Flu	- provide vaccination documentation of cu	rrent season (docume	entation must	include lot number and expiration	
□ Нер	Hepatitis B – provide vaccination documentation of the Heplisav 2-dose or Engerix 3-dose series.				
□ Нер	atitis B Surface Ab Quantitative (HBs) Tito	er – provide documen	ntation which	includes numerical values.	
□ Нер	atitis B Core (Hbc) Ab Titer – provide docu	Ab Titer – provide documentation of test results.		If Hep B Core and Hep B surface	
□ Нер	atitis B Surface Antigen Titer – provide do	cumentation of test r	esults.	Antigen are positive, you need health clearance by your physician.	
•	☐ Hepatitis C Ab – provide documentation of results. If results are positive, provide documentation of GI clearance.				
☐ CO	VID – provide vaccination documentation.				
	Meningitis – submit completed Meningitis Response Form (found on Medicat). Depending on your response, provide vaccination documentation (must have been administered less than 5 years ago).				
□ Poli	- provide vaccination documentation if a	vailable			