Required Health Documentation Checklist
Health Sciences Programs

PRINTED STUDENT NAME: _____ **STUDENT ID:** _____

HEALTH DOCUMENTATION DEADLINE: _____

Initial next to each item, sign, and submit this form to Health Sciences Secretary/Coordinator. Hard copies of health documentation- except background check and drug screen- must be submitted. Electronic copy of documentation must be submitted via ACEMAPP.

ITEM	DOCUMENTATION REQUIRED
BLS	All Health Sciences students are required to be certified as a BLS Provider in basic cardiopulmonary resuscitation (CPR) by the American Heart Association or the American Red Cross. This includes adult, child, infant CPR and AED training. CPR is current for two years from the date of issue and must remain current throughout the program. *Documentation examples:*
Background Check	Complete and clear status on criminal background check through AdvantageStudents. Background checks completed to fulfill requirements for work or other schools' programs will not be used to meet this requirement. **Background check must be accomplished upon program entrance then annually until program completion.** Individuals who non-progress and/or are not enrolled in Health Sciences coursework for more than two consecutive semesters will be required to submit a new background check when reinstated.
COVID	• Documentation of COVID vaccination **OR** • Waiver is available for those who wish to decline or are unable to receive the vaccination series. Must be updated annually.

COVID	<u>**NOTE:**</u> **Proof of COMPLETE COVID-19 vaccination is REQUIRED for students enrolled in NAS100. Students who are not fully vaccinated will not be allowed to attend clinicals and will not receive a passing grade in the course.**
CVCC Essential Functions	Essential Functions form must be signed by a physician, physician's assistant, or a nurse practitioner. In the event of serious illness, pregnancy, or child birth, a new Essential Functions form must be submitted. **The Essential Functions form is valid for the duration of the program unless program admission is inactive greater than two semesters.**
CVCC Physical	Must be completed on the CVCC Health Sciences physical form, to include signature by a physician, physician's assistant, or a nurse practitioner. Physicals completed to fulfill requirements for work or other schools' programs will not be used to meet this requirement. **The CVCC Health Sciences physical form is valid for the duration of the program unless program admission is inactive greater than two semesters.**
Driver's License or Valid Photo ID	**Clear** image of valid driver's license **OR** **Clear** image of valid state ID **OR** **Clear** image of valid CVCC student ID
Drug Screen	Complete and clear status on 11-panel drug screen. Drug screens completed to fulfill requirements for work or other schools' programs will not be used to meet this requirement. **Drug screen must be accomplished upon program entrance then annually until program completion.** Individuals who non-progress and/or are not enrolled in Health Sciences coursework for more than two consecutive semesters will be required to submit a new background check when reinstated.
Health Insurance	- Proof of current health insurance: - Letters from Tricare or insurance provider <u>*with the student's name listed*</u> **OR** - Picture of front and back of insurance card Students who do not have health insurance may contact the Health Sciences Secretary/Coordinator at 334-291-4925.

Hepatitis B	• **Individuals > 21 years of age**:
	    ○ Positive titer results (lab work) indicating immunity must be submitted.
	• **Individuals ≤ 21 years of age**:
	    ○ Documentation of immunization series (series of three doses) **OR**
	    ○ Positive titer results (lab work).
	• **Individuals whose titer results (lab work) indicate they are not immune:**
	    ○ Proof of first vaccination dose, administered after date of titer results, **and** signed Hep B Waiver must be submitted. Hep B waiver must be updated annually* **AND**
	    ○ Once received, proof of second dose, received one month after first dose **AND**
	    ○ Once received, proof of third dose, received six months after second dose.
	• Waiver is available for those who wish to decline or are unable to receive the vaccination series. Must be updated annually.
	
	Students may be in ongoing series during the course of their program, as long as Hep B waiver has been submitted and is updated annually.

Influenza	• Documentation of seasonal flu immunization for current flu season **OR** • Waivers are available for those who require religious or medical exemption; however, a mask will be required to be worn in clinical setting throughout flu season. Must be updated annually.

Measles, Mumps, & Rubella (MMR)	• **Individuals > 21 years of age**:
	    ○ Positive titer results (lab work) indicating immunity must be submitted.
	• **Individuals ≤ 21 years of age**:
	    ○ Positive titer results (lab work) **OR**
	    ○ Two doses of live measles virus vaccine (part of MMR vaccine) on or after first birthday **AND**
	    ○ Two doses of live mumps virus vaccine (part of MMR or MR vaccine) on or after first birthday **AND**
	    ○ Two doses of live rubella virus vaccine (part of MMR or MR vaccine) on or after first birthday.
	• **Individuals whose titer results (lab work) indicate they are not immune:**
	    ○ Proof of MMR booster, administered after date of titer results, **OR**
	    ○ Letter from physician, on physician letterhead, stating why vaccination or booster should not/cannot be received.

TB	• Documentation of negative PPD (Tb skin test) with lab results, which must be updated annually **OR**

TB	• Negative QuantiFERON TB Gold results, which must be updated annually **OR**
	• **Students who have ever tested positive for Tb**:
	    o Documentation of a current negative chest x-ray (x-ray is current for 5 years from date of x-ray) **AND**
	    o CVCC PPD waiver form. Must be updated annually.

Tetanus, Diphtheria, and Pertussis (TDAP)	Documentation of TDAP immunization within last 10 years. Vaccinations for only Tetanus or only TD are not acceptable.

Varicella (Chicken Pox)	• Positive titer results (lab work) indicating immunity must be submitted for **all** students, regardless of age.
	• **Individuals whose titer results (lab work) indicate they are not immune**:
	    o Proof of one dose of varicella vaccination, administered after date of titer results, if one dose of varicella-containing vaccine was previously received **OR**
	    o Proof of two doses of varicella vaccination, administered after date of titer results, 4-8 weeks apart, if varicella-containing vaccine was not previously received **OR**
	    o Letter from physician, on physician letterhead, stating why vaccination should not/cannot be received.

Clinical Site Regulatory Forms	**MAT and Nursing students only.** Regulatory forms for clinical sites must be electronically signed and submitted, annually, in ACEMAPP. The forms are electronic and will appear when students signs into ACEMAPP. Forms may include, but are not limited to: • Columbus Regional Confidentiality Form • Columbus Regional Health Requirements Checklist • Columbus Regional Statement of Responsibility • St. Francis Confidentiality Agreement It is the student's responsibility to log into ACEMAPP regularly to ensure that forms are up to date.
Clinical Site Modules and Assessments	**MAT and Nursing students only.** Modules and assessments for clinical sites must be electronically submitted, annually, in ACEMAPP. The forms are electronic and will appear when students signs into ACEMAPP. Modules and assessments may include, but are not limited to: • Columbus Regional- Controlled Substance Management • Columbus Regional Nursing Orientation It is the student's responsibility to log into ACEMAPP regularly to ensure that modules and assessments are up to date.

How & where do I submit my health documentation?

- **Nursing students** are required to submit health documentation by established deadline, communicated in acceptance letter or information e-mail.
  - Health Sciences Secretary/Coordinator will create student ACEMAPP account.
  - Student will receive an e-mail containing log in information from ACEMAPP.
    - Student will create profile and upload health documents in ACEMAPP.
    - Documents will appear as "PENDING" until approved by the Health Sciences Secretary/Coordinator.

- **Medical Assisting students** will be required to submit health documentation by the last day of class, of their first semester of Medical Assisting coursework:
  - Health Sciences Secretary/Coordinator will create student ACEMAPP account.
  - Student will receive an e-mail containing log in information from ACEMAPP.
    - Student will create profile and upload health documents in ACEMAPP.
    - Documents will appear as "PENDING" until approved by the Health Sciences Secretary/Coordinator.

- **Nursing Aide (CNA/NAS100) students** are required to submit a hard copy of their health documentation to the Health Sciences Secretary/Coordinator by established deadline. Student must keep a copy of submitted documents for their own records.

Required Health Documentation FAQs

Where may I obtain my Health Documents?

- **Health Sciences Physical***:* The Health Sciences Physical Form may be completed by a physician, a nurse practitioner or a physician's assistant at any one of the following:
  - Physician's office.
  - An occupational medicine clinic.
  - An acute care clinic which provides physicals.
  - A Health Department which provides physicals.
- **Immunization or Shot Records***:* Immunization or shot records may be obtained at any one of the following:
  - Physician's office.
  - Health Department.
  - High School Health Office
- **Titers***:* If titers are required for proof of immunity, this lab work may be obtained at any one of the following:
  - Physician's office.
  - Health Department.
  - An acute care or occupational medicine clinic which provides lab work.
- **TB***:* A TB skin test (PPD) may be obtained at any one of the following:
  - Physician's office.
  - Health Department.
  - An acute care or occupational medicine clinic which administers PPD.

- **Chest X-Ray***:* If a student has a history of tuberculosis or a positive PPD and needs to obtain a chest x-ray, they may obtain a chest x-ray at any one of the following:
  - Physician's office, if they provide x-rays.
  - The hospital or an imaging service, with a doctor's order.
- **Background Check***:* Background check will be completed by AdvantageStudents once student pays and provides required information. Health Sciences Secretary/Coordinator will provide information pertaining to background check.
- **Drug Screen***:* Drug screen will be completed at the site selected by each student when submitting Background check and drug screen order to AdvantageStudents.
- **BLS (Basic Life Support) Certification:** Locations for students to obtain American Heart Association OR American Red Cross BLS Provider certification include, but are not limited to, the following:
  - Local American Heart Association or American Red Cross Office
  - Local hospital providing community education for BLS provider
  - CVCC enrollment in EMS100

Who are some recommended providers?

- **STAT Medical**
  2 Bradley Park Court
  Columbus, GA 31904
  706-685-6074

- **Auburn Urgent Care**
  2638 Enterprise Drive
  Opelika, AL 36801
  334-749-9191

- **Russell Co. Health Department**
  1850 Crawford Road
  Phenix City, AL 36869
  334-297-0251

- **Lee Co. Health Department**
  1801 Corporate Drive
  Opelika, AL 36801
  334-745-5765

- **Columbus Department of Public Health**
  2100 Comer Avenue
  Columbus, GA 31901
  706-321-6300

Acknowledgement of Required Health Documentation Checklist

Students enrolled in health sciences coursework at Chattahoochee Valley Community College will be required to submit the health documents listed in the ***Required Health Documentation Checklist.*** A physical copy of these items must be submitted to the Health Sciences Secretary/Coordinator by the established deadline. Individuals enrolled in Medical Assisting or Nursing coursework will also be required to submit documentation electronically, via ACEMAPP.

Students who fail to submit all documentation by the established deadline will not be approved to complete clinical rotations, which may result in failing course grade. **Please submit this form to the Health Sciences Secretary/Coordinator with appropriate signatures by the deadline listed below:**

- **NAS100- This form must be submitted by the <u>second week</u> of class.**
- **Medical Assisting- This form must be submitted with other required acceptance documents.**
- **Nursing- This form must be submitted with other required acceptance documents.**

By submitting a signed copy of this form, I am stating that I have received the Required Health Documentation Checklist and understand that all health documentation must be submitted by the established deadline. The established deadline for all health documentation is _____.

_____
Student Printed Name

_____   _____
Student Signature   Date

_____   _____
Parent/Guardian Signature   Date
(Required for students under 18 years)