

## Student Health Checklist for Medical Clearance

Dear Incoming Physician Assistant Student,

There are several forms which must be completed by your healthcare provider (HCP) prior to matriculation. Completion of these forms will ensure that you meet all state, university, and program health requirements for enrollment. The checklist below will help you to keep track of the requirements. **Do not submit the checklist**, it serves only as a guide for you. **All associated completed forms should be uploaded to EXXAT**. We will not accept paper copies, although we recommend you retain a copy for your own records.

Declination forms are NOT ACCEPTED for any vaccine.

☐ **Physical Exam**

Must be completed within six months of beginning the program. Attached form must be signed, dated, and stamped by your healthcare provider.

☐ **TB Test**

Must have baseline screening with QuantiFERON-TN Gold testing. Testing must have been done within six months of beginning the program. Must have baseline screening with 1 Quantiferon Gold (QFT) test with negative results. If a student has a positive result on this test, proof of treatment and negative chest-film and clearance by a licensed health care provider is needed. Initial testing must have been completed within 6 months of beginning the program.

☐ **Varicella (Chicken Pox)**

2 documented vaccinations OR positive titer (lab report is required). Low/negative/equivocal titer must repeat a series of 2 vaccinations and a repeat titer is required. History of disease is NOT acceptable.

☐ **Hepatitis A**

3 documented vaccinations OR positive titer (lab report is required). Low/negative/equivocal titer must repeat the series of 2 vaccinations and a repeat titer is required.

☐ **Hepatitis B**

Documentation of completed 3-dose series or blood test with antibody reactive results. Documentation of 6-dose series with a *non-reactive* blood test will also be accepted, if the individual is considered a *non-responder*.

☐ **MMR**

2 documented vaccinations OR positive titer for all 3 components (lab report is required). Low/negative/equivocal titer must repeat the series of 2 vaccinations or booster as per HCP recommendation. Repeat titer is required.

☐**Tdap Vaccination**

Must be within 10 years. Must include pertussis, Td not accepted.

☐**Polio**

3 documented vaccinations (primary series) OR a positive titer (lab report is required). Childhood immunizations are accepted. If negative titer, contact the program.

☐**Influenza**

Documented flu vaccination for current flu season. Date and site administered should be on the document. Prescriptions/receipts are NOT accepted.

☐**Upload all Documentation related to the requirements above to EXXAT:**

1. Incoming PA Student Medical Clearance Form
2. Immunization records
3. Lab reports for any titer you had done
4. TB results document