

ANNE ARUNDEL COMMUNITY COLLEGE

101 College Parkway | Arnold, Maryland 21012-1895 | 410-777-AACC (2222) | www.aacc.edu

SCHOOL OF HEALTH SCIENCES HEALTH EXAMINATION GUIDE

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ANNE ARUNDEL COMMUNITY COLLEGE
SCHOOL OF HEALTH SCIENCES

STUDENT HEALTH EXAMINATION RECORD REQUIREMENTS POLICY

Health Examination Record Requirements

1. Students are required to have completed the program's "Health Examination Record." This document includes a health care provider's (physician, nurse practitioner or physician assistant) statement documenting that the following requirements have been met:
 - a. The student's mental and physical health is sufficient to meet the core performance standards of the program
 - b. Immunization Screening
 - c. Tuberculosis Screening
2. Students are required to update any changes in health status as they occur during the school year on a Health Status Update Report (see student manual). Such changes could include, but are not limited to, surgery, pregnancy, medication changes (including medication-assisted treatment), or orthopedic injuries.
3. History and physical exams must be current within one year prior to program start date.

NOTE: MD/NP/PA must provide an office stamp or seal on the bottom of page 5 of the Health Examination Record under his/her signature. If no stamp/seal is available, a note on letterhead will suffice.

PRESCRIBED MEDICATION-ASSISTED TREATMENT

Students who are on medication-assisted treatment, to include but not limited to methadone, suboxone and/or medical cannabis must disclose this on their signed Health Examination Record and/or on the Health Status Update form. AACC has no control over whether a clinical site will accept a student on medication-assisted treatment to a clinical practicum. Any student testing positive for cannabis may not be accepted into a clinical rotation by Maryland hospitals or health care facilities (including veterinary facilities), regardless of a legally obtained identification card. Inability to complete the clinical/practicum components of the programs results in students being unable to complete course requirements and thus successfully complete the program.

IMMUNIZATION/SCREENING REQUIREMENTS

1. The immunity requirements are based on guidelines set forth by the Maryland Department of Health and the National Centers for Disease Control and Prevention.
2. If you are uninsured or underinsured, call your local health department to see if they offer discounted/no cost vaccinations.
3. Childhood vaccinations are acceptable if the dates are validated by a health care provider.
4. Clinical history of a disease is not acceptable as immunity.
5. Some immunizations are contraindicated during pregnancy and may be contraindicated in other circumstances. If contraindicated, the student must submit a written physician's statement validating the circumstances and those contraindicated items. (Please note notwithstanding a physician's statement a clinical site(s) may not approve site placement of non-immunized students.)
6. The immunization/screening requirements and their specifications are as follows:

RUBEOLA (Measles)

Confirmation of immunity is required and can be confirmed by either one of the following:

- a. Written laboratory results of a rubeola titer indicating immunity (equivocal results do not demonstrate immunity).
- b. Documentation of two live measles or two MMR (Measles-Mumps-Rubella) vaccinations on or after the first birthday. If no evidence of prior documentation is available, the two vaccinations are required to be no less than one month apart. Must be validated on form by physician, nurse practitioner, or physician assistant.

RUBELLA (German Measles)

Confirmation of immunity is required and can be confirmed by either one of the following:

- a. Written laboratory results of a rubella titer indicating immunity (equivocal results do not demonstrate immunity)
- b. Documentation of one dose of rubella vaccine or one MMR vaccination on or after the first birthday. Must be validated on form by physician, nurse practitioner, or physician assistant.

MUMPS

Confirmation of immunity is required and can be confirmed by either one of the following:

- a. Written laboratory results of a mumps titer indicating immunity (equivocal results do not demonstrate immunity).
- b. Documentation of two doses of live mumps vaccine or two MMR vaccinations on or after the first birthday. If no evidence of prior documentation is available, the two vaccinations are required to be no less than one month apart. Must be validated on form by physician, nurse practitioner, or physician assistant.

VARICELLA (Chickenpox)

Confirmation of immunity is required and can be confirmed by either one of the following:

- a. Written laboratory results of an immunity titer for varicella indicating immunity (equivocal results do not demonstrate immunity).
- b. Documentation of the varicella vaccination series (2 immunizations at least 4 weeks apart). Must be validated on form by physician, nurse practitioner or physician assistant.
- c. History of disease is NOT acceptable.

TUBERCULOSIS (TB)

Program-specific screening requirements will be listed in student's decision and/or compliance letter.

Immunity may be confirmed by:

- a. A PPD test (tine test not acceptable) must be performed. The QuantiFERON or T-Spot blood test also will be accepted. However, if a clinical site requests the skin test, the student will be required to have it completed at that time. Programs have specific time frames for the TB test so please do not complete the test until you have that information.
- b. Programs such as Registered Nursing, Practical Nursing, Advanced RN, Surgical Technology and Dental Hygiene require a two-step PPD, or one of the blood tests listed above. A two-step PPD is when a student needs to have two separate PPDs, one to three weeks from each other. That is four individual visits to the medical office. See the chart below:

Program Name	TB Testing Requirement
Advanced Placement RN	2 PPD (4 visits to the medical office, 2 separate results. 1-3 weeks between PPD's) or QuantiFERON/T-Spot Blood test
Dental Hygiene	2 PPD (4 visits to the medical office. 2 separate results. 1-3 weeks between PPD's) or QuantiFERON/T-Spot Blood test

EMS- Emergency Medical Technician	1 PPD (2 visits to the medical office, 1 result) or QuantiFERON/T-Spot Blood test
EMS- Paramedic	1 PPD (2 visits to the medical office, 1 result) or QuantiFERON/T-Spot Blood test
Human Services	N/A
Massage Therapy	N/A
Medical Assisting	1 PPD (2 visits to the medical office, 1 result) or QuantiFERON/T-Spot Blood test
Medical Coding	N/A
Medical Laboratory Assistant	1 PPD (2 visits to the medical office, 1 result) or QuantiFERON/T-Spot Blood test
Medical Laboratory Technician	1 PPD (2 visits to the medical office, 1 result) or QuantiFERON/T-Spot Blood test
Nursing- Practical Nursing	1 PPD (2 visits to the medical office, 1 result) or QuantiFERON/T-Spot Blood test
Nursing- Registered Nursing	1 PPD (2 visits to the medical office, 1 result) or QuantiFERON/T-Spot Blood test
Phlebotomy Technician	1 PPD (2 visits to the medical office, 1 result) or QuantiFERON/T-Spot Blood test
Physical Therapist Assistant	1 PPD (2 visits to the medical office, 1 result) or QuantiFERON/T-Spot Blood test
Radiologic Technology	1 PPD (2 visits to the medical office, 1 result) or QuantiFERON/T-Spot Blood test
Surgical Technology	2 PPD (4 visits to the medical office. 1-3 weeks between PPD's) or QuantiFERON/T-Spot Blood test

- c. If the TB result is significantly positive, in duration greater than 10mm, a chest x-ray must be performed. A copy of the report is required.
- d. If you have a history of positive TB tests, a chest x-ray report must be submitted. The chest x-ray must be within one year of start date of class (some programs may want them at a certain time of the year).
- e. Most programs require students to update their tuberculosis screening annually. If a student has a history of a positive TB test, they must have their physician complete a Positive TB Questionnaire and will not be required to repeat the chest x-ray. This form will be available on the platform students use for uploading health form documents.

HEPATITIS B VACCINATION

Confirmation of immunity or declination is required and can be confirmed by one of the following:

- a. Vaccination against Hepatitis B is highly recommended. If vaccine series is performed, student must provide written documentation of doses. These must be validated on the form by physician, nurse practitioner or physician assistant.
- b. There are 3 Dose Hepatitis B vaccine series as well as 2 Dose series, HEPLISAV-B.
- c. Students who elect not to have the vaccinations are required to sign a Hepatitis B declination form.
- d. Written laboratory results of Hepatitis B surface antibody titer indicating immunity.

NOTE: It is recommended to have a titer 1-2 months after vaccination to document immunity but not required. Occasionally a clinical site may require a post-vaccination titer (see attached CDC guidelines).

TETANUS, DIPHTHERIA AND PERTUSSIS (Tdap)

Tdap vaccine - tetanus, diphtheria and pertussis — immunity is required. Tdap vaccine must be validated by physician, nurse practitioner or physician assistant. Health Sciences students should then receive Td

(tetanus) boosters every 10 years thereafter; this vaccination must not expire prior to graduation. If it does, students must get an updated Td booster. Students who have not or are unsure if they have previously received a dose of the Tdap should receive a dose of the Tdap according to the CDC. Documentation of at least one dose of Tdap is required. Documentation of only a Td is not sufficient.

INFLUENZA AND COVID VACCINE AND OTHER VACCINES

The School of Health Sciences' Health Examination Requirements are aligned with the clinical site requirements. Clinical sites allow students to fulfill their program-required clinical rotations pursuant to an Affiliation Agreement with the College. Therefore, the College and its students are required to abide by and follow the clinical site requirements.

Most of the clinical sites require proof of the influenza vaccine, and some may require the COVID-19 vaccine or other vaccines. If the site requires one of these vaccines, it will not permit students on site without evidence of the vaccine. If a student does not provide documentation of receiving any vaccinations that are required by the student's assigned site, the student may not attend the clinical rotation and will, therefore, be at risk of not completing the program requirements.

Accommodation or waivers may be considered by some clinical sites. If a student is unable or unwilling to have one of the vaccines, the student has the right and sole obligation to request an accommodation or waiver from the clinical site. If the student obtains an accommodation or waiver, the student may fulfill their clinical rotation at the clinical site without having been immunized for influenza or COVID-19. There is no guaranty that a clinical site will grant a request for accommodation or waiver. The student must provide a copy of the clinical site's grant of any accommodation or waiver. If the student participates in a clinical pursuant to an accommodation or waiver, the student participates in the clinical at the student's own risk and is solely responsible for any health care or treatment costs incurred or illness or injuries suffered because of such participation.

ANNE ARUNDEL COMMUNITY COLLEGE
SCHOOL OF HEALTH SCIENCES

FREQUENTLY ASKED QUESTIONS

NOTE: In this document, please note that health care provider refers to a physician, nurse practitioner (NP) or physician assistant (PA) only.

- 1. How do I turn in the completed Health Examination Record and subsequent health information?**
Once you and your health care provider have completed the form, upload it through Exxat Approve for all programs except Physical Therapist Assistant and Massage Therapy. Physical Therapist Assistant students will use DISA Healthcare Technology (formerly CastleBranch), while Massage Therapy students will submit forms through Microsoft Forms.

Students will receive submission instructions by email after selecting their seat for selective and rolling admission programs or after registering for non-selective programs.

For technical support, please see the information below:

DISA Healthcare Technology:

Call: 1-888-723-4263

Email: servicedesk.cu@disahealthcare.com

Tutorial: <https://disahealthcare.com/login/disa-cb/>

Exxat Approve:

Email: prism-support@exxat.com

MS Forms: hscompliance@aacc.edu

After contacting DISA or Exxat Approve, if you continue to have trouble, please contact the AACC's Health Sciences Admissions Office at hscompliance@aacc.edu.

For vaccine and immunization questions, contact AACC's Health and Wellness Center at hwcnurses@aacc.edu or 410-777-2480.

- 2. When is the deadline for sending in the completed Health Examination Record?**
You may upload the Health Examination Record early if it is complete, but failure to submit the form by the program deadline will result in your being dropped from the program. Each program has specific deadlines. Students will not be permitted to register for a course if the completed Health Examination Record is not uploaded and verified.
- 3. My record is complete except for a few items; should I upload anyway?**
Yes. Upload documents as you receive them from your physician's office. Remember that students will not be permitted to register for a course if the completed Health Examination Record is not submitted and verified.
- 4. Can anyone else, such as a Registered Nurse or a Paramedic, complete my Health Examination Record?**
No. You must have a physical exam and other requirements documented on the Health Examination Record by a physician, nurse practitioner or physician assistant.

NOTE: Physician office must stamp/seal the bottom of page 5 of the Health Examination Record under his/her signature. If no stamp/seal available, please have physician, NP, or PA submit a statement on office letterhead (prescription pad) that student completed a physical and has no restrictions.

5. **I had a physical exam at work recently. Will a copy of that exam be sufficient?**
No. The appropriate health care provider must document their findings on the college's Health Examination Record.
6. **I had measles, mumps, etc. as a child and still have my doctor's records to validate this information. Is that sufficient for proof of immunity?**
No. Clinical history of a disease will not be accepted as proof of immunity. The guidelines on the Student Health Examination Record Requirements Policy that specify proof of immunity must be followed. The immunity form requests that laboratory proof of immunity or the appropriate vaccinations are documented by your health care provider.
7. **I have my childhood record of immunizations. Is that sufficient for proof of immunity?**
Yes. This is sufficient if your health care provider validates that the appropriate immunizations were given according to the guidelines for the Health Examination Record and can provide the exact dates of the immunizations on the Health Examination Record.
8. **Should I attach a copy of my childhood records or other laboratory data related to the Health Examination Record?**
No. Show these records to your health care provider. Have your health care provider record and validate these records with his or her signature on the Health Examination Record.

However, please upload lab titers results to this form, if applicable. Recording of the titer results by your health care provider is sufficient and preferred.
9. **I already have had one immunization for measles (rubeola) or one MMR (measles, mumps and rubella combined vaccination). Do I really need another measles (rubeola) vaccination?**
Yes. The Health Examination Record's guidelines must be followed. You may elect to have another MMR, another measles (rubeola) vaccination, or have a titer drawn instead. If the titer shows proof of immunity, another vaccination is not required. Note that one MMR is sufficient proof of immunity for German Measles (rubella).
10. **I have had two measles immunizations (or 2 MMR's) and still my titer does not show immunity. Should I have another vaccination?**
No. The Centers for Disease Control and Prevention generally does not recommend a third MMR. Documentation of your two vaccinations will be sufficient.
11. **I had chicken pox (varicella) as a child. Do I still need a titer?**
Yes.
12. **I have completed the varicella vaccination series. Do I still need a varicella titer?**
No, the completed vaccination series may be substituted for this requirement.
13. **I had a tetanus vaccine years ago. Do I really need a Tdap?**
Yes, for all programs other than Massage Therapy, a Tdap vaccine is required. All Health Sciences students who have not or are unsure if they have previously received a dose of the Tdap vaccine should receive a dose. Then, they should receive the tetanus (td) booster every 10 years thereafter. Once you have evidence of receiving at least one dose of a Tdap, you only need to revaccinate with the Td.

14. Do I need the influenza vaccine?

Most of our clinical sites require proof of the influenza vaccine and will not permit students on site without evidence of the vaccine. If you do not show proof of an annual influenza vaccine, you may not attend clinical and will therefore be at risk of not completing your program. (See requirements on previous pages regarding Influenza, COVID and other vaccines).

15. I have a medical condition or am pregnant and my physician does not recommend certain vaccinations. What should I do?

Do not have any vaccinations that are contraindicated for a certain medical condition or pregnancy. Have your health care provider attach a written statement to your Health Examination Record addressing your specific situation. (Please note notwithstanding a physician's statement a clinical site(s) may not approve site placement of unimmunized students.)

16. My physician completed my Health Examination Record; however, I went to another agency for some of my immunizations. How should that be documented?

Have your current health care provider validate your immunization history on the Health Examination Record with their signature and title.

17. I had a PPD (skin test for exposure to tuberculosis) within the past eight months that was negative. Is that sufficient?

Yes, unless otherwise indicated by your program. Some programs have a specific time frame for receiving a PPD.

18. I have documentation of a negative QuantiFERON or T-Spot blood test. Is that sufficient for the Tb test?

Documentation of a negative QuantiFERON blood test that is done within program deadline requirements is sufficient for most programs. Students may be asked at a later date to have the PPD done in place of this blood test if a clinical site requests it.

19. I recently had a chest x-ray. Is that sufficient instead of a PPD?

No, not unless you have a history of positive TB test.

20. I have always had negative PPD's (skin test for exposure to tuberculosis). Recently I had a positive PPD. What should I do?

Do not have another PPD. Your health care provider will be required to document the chest x-ray results taken at the time of the positive PPD and complete Part C of the "Tuberculosis Screening Record" section of the Health Examination Record. If your positive PPD result was recent and you did not have a chest x-ray, you must have a chest x-ray.

21. I have a history of a positive PPD. What should I do?

Do not have another PPD. A chest x-ray is required and must be within one year of entrance into the program. The x-ray report must state that there was a previous history of a positive PPD. A second-year student is required to have a Positive PPD Questionnaire completed.

22. Are Hepatitis B vaccinations (HBV) required?

No. However, HBV vaccine is highly recommended. If you elect not to have the vaccination series, sign the declination form that you download from your medical document profile and upload the declination form with your Health Examination Record. Please note: some clinical sites may require immunization to HBV.

23. Who should I contact if I have questions?

For technical support, please see the information below:

DISA Healthcare Technology:

Call: 1-888-723-4263
Email: servicedesk.cu@disahealthcare.com
Tutorial: <https://disahealthcare.com/login/disa-cb/>

Exxat Approve:
Email: prism-support@exxat.com

MS Forms: hscompliance@aacc.edu

After contacting DISA or Exxat Approve, if you continue to have trouble, please contact the AACC's Health Sciences Admissions Office at hscompliance@aacc.edu.

For vaccine and immunization questions, contact AACC's Health and Wellness Center at hwcurses@aacc.edu or 410-777-2480.

Healthcare Personnel Vaccination Recommendations¹

VACCINES AND RECOMMENDATIONS IN BRIEF

COVID-19 – There is no specific recommendation for healthcare personnel (HCP). If not up to date, follow current recommendations.

Hepatitis B – If no previous dose, give either a 2-dose series of Heplisav-B or a 3-dose series of either Engerix-B or Recombivax HB. A 3-dose series of Twinrix vaccine, which prevents hepatitis A and B, is an option. For HCP who perform tasks that may involve exposure to blood or body fluids, obtain antibody serology 1–2 months after final dose.

Influenza – Give 1 dose of influenza vaccine annually.

MMR – For HCP born in 1957 or later without serologic evidence of immunity or prior vaccination, give 2 doses of MMR, 4 weeks apart. For HCP born prior to 1957, see below.

Varicella (chickenpox) – For HCP who have no serologic proof of immunity, prior vaccination, or diagnosis or verification of a history of varicella or herpes zoster (shingles) by a healthcare provider, give 2 doses of varicella vaccine, 4 weeks apart.

Tetanus, diphtheria, pertussis – Give 1 dose of Tdap as soon as feasible to all HCP who have not received Tdap previously and to pregnant HCP with each pregnancy (see below). Give Td or Tdap boosters every 10 years thereafter.

Meningococcal – Give both MenACWY and MenB to microbiologists who are routinely exposed to isolates of *Neisseria meningitidis*. As long as risk continues: boost with MenB after 1 year, then every 2–3 years thereafter; boost with MenACWY every 5 years.

Hepatitis A, typhoid, and polio vaccines are not routinely recommended for HCP who may have on-the-job exposure to fecal material. Polio vaccination is recommended for adults known or strongly suspected of being unvaccinated (see CDC recommended adult immunization schedule at www.cdc.gov/vaccines/hcp/imz-schedules/adult-age.html).

Hepatitis B

All HCP who cannot document previous vaccination should receive either a 2-dose series of Heplisav-B at 0 and 1 month or a 3-dose series of Engerix-B, Recombivax HB, or Twinrix at 0, 1, and 6 months. HCP who perform tasks that may involve exposure to blood or body fluids should be tested for hepatitis B surface antibody (anti-HBs) 1–2 months after dose #2 of Heplisav-B or dose #3 of Engerix-B or Recombivax HB to document immunity.

- If anti-HBs is at least 10 mIU/mL (positive), the vaccinee is immune. No further serologic testing or vaccination is recommended.
- If anti-HBs is less than 10 mIU/mL (negative), the vaccinee is not protected from hepatitis B virus (HBV) infection, and should receive another 2-dose or 3-dose series of HepB vaccine on the routine schedule, followed by anti-HBs testing 1–2 months later. A vaccinee whose anti-HBs remains less than 10 mIU/mL after 2 complete series is considered a “non-responder.”

For non-responders: HCP who are non-responders should be considered susceptible to HBV and should be counseled regarding precautions to prevent HBV infection and the need to obtain HBIG prophylaxis for any known or probable parenteral exposure to hepatitis B surface antigen (HBsAg)-positive blood or blood with unknown HBsAg status. Non-responders should be tested for HBsAg and anti-HBc to determine infection status. Infected HCP should be counseled and medically evaluated.

For HCP with documentation of a complete 2-dose (Heplisav-B) or 3-dose (other HepB-containing vaccines) series but no documentation of anti-HBs of at least 10 mIU/mL (e.g., those vaccinated in childhood): HCP who are at risk for occupational blood or body fluid exposure might undergo anti-HBs testing upon hire or matriculation. See references 2 and 3 for details.

Influenza

All HCP, including students and volunteers, in any healthcare setting should receive annual influenza vaccination. Live attenuated influenza vaccine (LAIV) may only be given to non-pregnant healthy HCP age 49 years and younger. HCP who receive LAIV should avoid close contact with severely immunosuppressed patients (e.g., stem cell transplant recipients) who require protective isolation for at least 7 days after vaccine administration.

Measles, Mumps, Rubella (MMR)

HCP who work in medical facilities should be immune to measles, mumps, and rubella.

- HCP born in 1957 or later can be considered immune to measles, mumps, or rubella only if they have documentation of (a) laboratory confirmation of disease or immunity or (b) appropriate vaccination against measles, mumps, and rubella (i.e., 2 doses of live measles and mumps vaccines given on or after the first birthday and separated by 28 days or more, and at least 1 dose of live rubella vaccine). HCP with 2 documented doses of MMR are not recommended to be serologically tested for immunity; but if they are tested and results are negative or equivocal for measles, mumps, and/or rubella, these HCP should be considered to have presumptive evidence of

immunity to measles, mumps, and/or rubella and are not in need of additional MMR doses.

- Although birth before 1957 is considered acceptable evidence of measles, mumps, and rubella immunity, 2 doses of MMR vaccine should be considered for unvaccinated HCP born before 1957 who do not have laboratory evidence of disease or immunity to measles and/or mumps. One dose of MMR vaccine should be considered for HCP with no laboratory evidence of disease or immunity to rubella. For these same HCP who do not have evidence of immunity, 2 doses of MMR vaccine are recommended during an outbreak of measles or mumps and 1 dose during an outbreak of rubella. HCP who have had 2 doses of MMR and are identified by public health authorities as being at increased risk for mumps because of an outbreak should receive a third dose of MMR to improve protection.

Varicella

All HCP should be immune to varicella. Evidence of immunity in HCP includes documentation of 2 doses of varicella vaccine given at least 28 days apart, laboratory evidence of immunity, laboratory confirmation of disease, or diagnosis or verification of a history of varicella or herpes zoster (shingles) by a healthcare provider.

Tetanus/Diphtheria/Pertussis (Td/Tdap)

All HCPs who have not or are unsure if they have previously received a dose of Tdap should receive a dose of Tdap as soon as feasible, without regard to the interval since the previous dose of Td. Pregnant HCPs should be revaccinated during each pregnancy. All HCPs should then receive Td or Tdap boosters every 10 years thereafter.

Meningococcal

Microbiologists who are routinely exposed to isolates of *N. meningitidis* should be vaccinated with both MenACWY and MenB vaccines. MenACWY and MenB vaccination may be administered on the same day. A combination MenABCWY vaccine is an option when both products are indicated at the same visit. The minimum interval between MenABCWY doses is 6 months.

REFERENCES

- 1 CDC. Immunization of Health-Care Personnel: Recommendations of the Advisory Committee on Immunization Practices (ACIP). *MMWR*, 2011; 60(RR-7).
- 2 CDC. Prevention of Hepatitis B Virus Infection in the United States. Recommendations of the Advisory Committee on Immunization Practices. *MMWR*, 2018; 67(RR1):1–30.
- 3 Immunize.org. Pre-exposure Management for Healthcare Personnel with a Documented Hepatitis B Vaccine Series Who Have Not Had Post-vaccination Serologic Testing. Accessed at www.immunize.org/catg.d/p2108.pdf.

For additional specific ACIP recommendations, visit CDC's website at www.cdc.gov/acip-recs/site.html or visit Immunize.org's website at www.immunize.org/official-guidance/cdc/acip-recs/vaccines/.



**ANNE ARUNDEL COMMUNITY COLLEGE
SCHOOL OF HEALTH SCIENCES**

STUDENT HEALTH EXAMINATION RECORD CHECKLIST

Please use this form as a guide to ensure your health form is complete. This page is to be used as a reference only.

_____ Health Care Provider has provided proof of immunity to rubeola (measles): indicate one

- Titer indicating immunity
- 2 rubeola immunizations or 2 MMR's (circle which)
#1 _____ #2 _____ (dates)

_____ Health Care Provider has provided proof of immunity to rubella (German measles): indicate one

- Titer indicating immunity
- Rubella immunization or MMR (circle which)

_____ Health Care Provider has provided proof of immunity to mumps: indicate one

- Titer indicating immunity
- 2 mumps immunizations or 2 MMR's (circle which)
#1 _____ #2 _____ (dates)

_____ Health Care Provider has provided proof of immunity to varicella: indicate one

- Varicella titer indicating immunity
- 2 varicella (chickenpox) immunizations

_____ Health Care Provider has provided my immunity status to Hepatitis B: indicate one

- HBsAb titer indicating immunity
- Vaccine doses (Recommended to have titer done -1- 2 months after 3rd dose of the 3 dose series, or 2nd dose of 2 dose series.

OR

- I have signed the Hepatitis B Vaccination Declination (if applicable) and checked DECLINE. If declining, I have signed and dated the Hepatitis B declination. **Note: some programs may require both the vaccine verification as well as evidence of a positive titer.**

_____ I have met the Tdap requirement for my program:

- I have provided documentation of Tdap vaccine, valid for the entire program.
- If Tdap is older than 10 years, documentation of a current Td tetanus vaccine is required

_____ I have met the TB requirement **for my program**: indicate one (according to what my program requires):

- Received 1 negative PPD skin test

OR

- Received negative 2 Step PPD. This includes 2 PPD placements and readings (4 visits to provider) where the second placement and reading occurs not less than 1 week after the first and no more than 3 weeks after the first.

#1 _____ #2 _____ (dates)

OR

- Had chest x-ray performed in past year and obtained lab report. And physician, NP, or PA completed the Questionnaire for positive TB Reactors.

OR

- QuantiFERON or T-spot test negative blood test result

_____ My Health Care Provider has provided:

- Signature and date under the Health Care Provider Statement
- Answers for all questions of the Health Examination Record. I have ensured that **all** yes/no boxes are checked where applicable. The personal health history chart must have an answer of yes or no for past and now columns, for every ailment listed.
- Signatures next to every vaccine/titer on the immunization requirements chart
- A stamp/seal under his/her signature

OR

- If no stamp is available, a signed statement on letterhead must be uploaded along with the complete four page health exam record to DISA or Exxat.

_____ I have completed:

- The demographic information on page one and have signed and dated the Health Examination Record where indicated.

I have read and signed the Health and Drug Screening Affidavit and Criminal Background Check Affidavit which are part of my Health Examination Record and uploaded them with my Health Examination Record.

- I have read and signed my health form where indicated.

NOTE: Please make sure that you have uploaded everything from above to your program specific Medical Document profile platform.

DENTAL SERVICES

Chase Brexton
410-837-2050

www.chasebrexton.org

200 Hospital Drive Suite 300 Glen Burnie, MD 21061

University of Maryland, Baltimore College of Dental Surgery

General Dentistry

410-706-7063

<https://www.dental.umaryland.edu/patients/general-dentistry-adult/>

Urgent Care Dental Clinic (Monday-Friday)

First-come, first-served. Patients begin to arrive very early in the morning. There is a \$197 fee (subject to change and due at time of service), which includes exam, X-ray and one simple extraction.

410-706-2716

<https://www.dental.umaryland.edu/urgentcare/>



MEDICAL SERVICES

Chase Brexton
410-837-2050

www.chasebrexton.org

200 Hospital Drive Suite 300 Glen Burnie, MD 21061

Bay Community Health and Behavioral Health Services (formerly Owensville Primary Care)

134 Owensville Road West River, MD 20778 | 410-867-4700

6131 Shady Side Road, Shady Side, MD 20764 | 410-867-4700

5408 Southern Blvd., Lothian, MD 20711 | 410-867-4700

Work Life Urgent Care

Behavioral Counseling and Medical Care

Sliding fee scale for uninsured.

410-487-6052

7954 Baltimore-Annapolis Blvd., Suite 2C Glen Burnie, MD 21060

Patient First Neighborhood Medical Center

<https://www.patientfirst.com>

Annapolis 443-603-0758 | 2051 West St.

Bowie 240-544-0676 | 15459 Annapolis Road

Glen Burnie 443-577-0277 | 7116 Ritchie Highway

Laurel 301-497-1820 | 3357 B Corridor Marketplace

Odenton 443-351-3917 | 1110 Annapolis Road

Pasadena 443-573-0564 | 8105 Ritchie Highway

CRISIS AND EMERGENCY SERVICES

▶ CALL 911 IMMEDIATELY ABOUT ANY PHYSICAL OR MENTAL HEALTH EMERGENCY.

211

Dial 2-1-1 for assistance with:

- COVID
- Housing and shelter
- Food
- Utility assistance
- Crisis and emergency

MENTAL HEALTH AND SUBSTANCE USE

▶ CALL 911 IMMEDIATELY ABOUT ANY PHYSICAL OR MENTAL HEALTH EMERGENCY.

National Suicide Prevention Hotlines

988

800-273-TALK (8255)

<https://suicidepreventionlifeline.org>

Annapolis Vet Center

410-605-7826

Anne Arundel Community College

Personal Counseling Services

410-777-7111

AACC.EDU and search **COUNSELING SERVICES**

Anne Arundel Community College Substance Abuse

Education Office and Collegiate Recovery Center

410-777-2480 | <https://www.aacc.edu/resources/>

Anne Arundel County Department of Health, Mental Health and Addictions

<http://www.ahealth.org>

Road to Recovery North Addictions Clinic | 410-222-0100

Road to Recovery South Addictions Clinic | 410-222-6001

Crisis Warmline and Addictions Helpline

410-768-5522, 24 hours a day, 7 days a week

Maryland Poison Control Center

800-222-1222 | <http://www.mdpoison.com>

24 hours a day, 7 days a week

Provides poisoning triage, treatment, education and prevention services

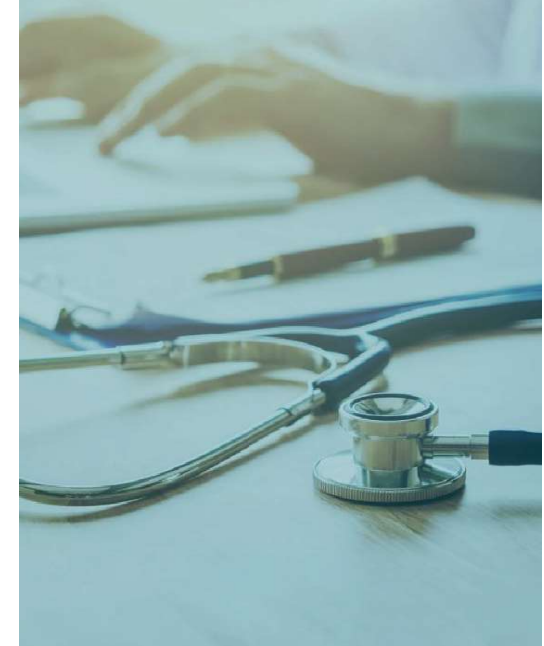
AACC

Anne Arundel Community College prohibits all types of discrimination, harassment, sexual misconduct, and retaliation on the basis of race, including hair style and hair texture, color, religion or creed, ancestry or national origin, sex, age, marital status, physical or mental disability, sexual orientation, gender identity, veteran status, citizenship, and genetic information. To file a complaint of discrimination, harassment, sexual misconduct, or retaliation, please contact the chief compliance and fair practices officer Title IX coordinator at 410-777-1239 or complianceofficer@aacc.edu. Students and members of the public who need a reasonable accommodation should contact Disability Support Services at DSS@aacc.edu or 410-777-4111. Employees and job applicants should contact Human Resources at humanresources@aacc.edu or 410-777-4245 regarding reasonable accommodations. Requests for most accommodations must be made at least seventy-two (72) hours prior to the event or activity; however, requests for sign language interpreters, live captioning, alternate format books, or assistive technology need to be submitted at least thirty (30) days prior to the event or activity. 5/25

AACC

Health &
Wellness Center

HEALTH INSURANCE AND HEALTH CARE RESOURCE INFORMATION



HEALTH INSURANCE

Health Insurance General Information

The Maryland Insurance Administration has some general information about insurance options. Scan the QR Code or call **855-642-8572**.



They also produce a Health Insurance Shopping Tool to help you compare your options.

Private Insurance Companies

The most comprehensive healthcare coverage you can get is through a private company. Two private companies provide full coverage: Care First and Kaiser Permanente.

Scan the QR Codes to learn more!

CareFirst



Kaiser Permanente



The Maryland Health Connection

Maryland's official health insurance marketplace is Maryland Health Connection. It is an avenue for exploring all of your options and learning about possible cost assistance. <https://www.marylandhealthconnection.gov/>

The resources below have Maryland Health Connection "Navigators," health insurance specialists who can speak with you one-on-one to help you understand your options and work through the enrollment process.

Anne Arundel County Department of Health

Health Choice Ombudsman/Care Coordination Unit
Bureau of Family Health and Wellness Center
3 Harry S Truman Parkway
Annapolis, MD 21401
<https://aahealth.org>
410-222-4380
410-222-7381

HCAM

HealthCare Access Maryland, HCAM, offers in-person health insurance navigators throughout Anne Arundel County. Call 410-500-4710 or 855-288-3667 for hours. <http://www.healthcareaccessmaryland.org/>

International Student Insurance

All F1 students and their dependents (F2) at Anne Arundel Community College are required to have health insurance. Although AACCC does not provide health insurance for students, the following agencies offer health insurance services specifically for international students. Contact Emma B. Thompson at ebthompson@aacc.edu or 410-777-2152 if you have questions about international student insurance.

Health coverage must include:

- Accident on campus
- Medical evacuation
- Repatriation

Medical Insurance Plans:

- Compass Benefits Group
www.compassbenefit.com
- Cigna HealthCare
<https://cignaglobal.com>
- International Student Insurance
www.internationalstudentinsurance.com
- International Student Protection
<http://intstudentprotection.com/>
- ISO Student Health Insurance
www.isoa.org
- Maryland Insurance Market place Affordable Health Care for Immigrants
<https://www.healthcare.gov/immigrants/coverage>
- Tips for buying health insurance for F-1 visa students
<http://www.internationalstudentinsurance.com/ffstudent/>

Medical Evacuation and Repatriation ONLY plans:

- Betins
www.betins.com
- SOS International
www.sosinternational.com

International Student Dental Insurance ONLY plans:

- Dental Health Alliance, L.L.C.
www.dha.com
- International Student Insurance
www.internationalstudentinsurance.com

PRESCRIPTION RESOURCES

Discount Programs

Partnership for Prescription Assistance

Pharmacy assistance program.
888-477-2669 <http://www.pparx.org>

Anne Arundel County Department of Health

Prescription Savings Program
800-347-5985 <http://www.scriptsave.com>
Use Group #586

Good Rx

Stop paying too much for your prescriptions. Drug prices vary wildly between pharmacies, and GoodRx finds the lowest prices and discounts.
www.goodrx.com

Low-Cost Generic Prescription Programs

Walgreens

RX Savings Finder
<http://walgreens.rxsense.com>

Walmart

\$4 (subject to change) Generic prescriptions
[https://www.walmart.com/cp/\\$4-prescriptions/1078664](https://www.walmart.com/cp/$4-prescriptions/1078664)

