

Medical/Health Forms Packet INSTRUCTIONS

GRADUATES ROCKFORD, IL

Please carefully review the instructions outlining the medical/health requirements, which must be completed and submitted into your Viewpoint Screening account at least two-weeks prior to your first day of class.

All health-related questions/concerns should be directed to:

Mita Santos at mitasantos@sacn.edu

- 1. All Medical/Health Forms <u>must be completed and submitted into your Viewpoint Screening account</u>. The forms below MUST BE completed by your health care provider.
 - The cost of the Viewpoint Screening package is \$108.00, which includes Background Check, Drug Screening and Medical/Health record tracking.
 Once ordered you will be registered within 24 hours. This registration has instructions for students to complete the process. For questions, a live chat will be available to help you.
- 2. All new students are required to do a Background Check, Drug Screening and submit Medical/Health requirements which should be completed not more than six months before entering the college.
- 3. All students are expected to get the current flu/influenza vaccine as it becomes available each fall season. Influenza vaccine is not valid if given before June 30th of the coming academic year.
- 4. The COVID-19 vaccine and first booster dose are mandatory and should be uploaded to your Viewpoint Screening account.

Saint Anthony College of Nursing- Rockford, IL IMMUNIZATION RECORD

In accordance with Illinois Department of Public Health regulations, proof of immunity against preventable communicable disease is required prior to registration.

To be completed by your health care provider.

Name ______ D.O.B. _____Phone _____

Address							
Street	City	State		Zip	·		
Term Attending – Fall or Spri	ng - Year	Are you an OSF	/SAMC emp	oloyee	?		
RELEASE AUTHORIZATION	ONS						
I authorize and reque to Saint Anthony Coll		provider, to release the	he following	medi	cal records		
I authorize Saint Anth Department of Public the event of a health	Health or its de	signated representati					
I authorize Saint Anthony College of Nursing to release this immunization record to OSF Saint Anthony Medical Center Employee/Occupational Health Department for compliance audits, in the event of a health or safety emergency, and for maintenance of my medical information.							
Student Signature			Date:				
RECORD MUST BE COMPLETED BY HEALTH CARE PROVIDER MONTH AND YEAR ARE REQUIRED							
MEASLES (RUBEOLA)		Dates immunized with live measles vaccine (Measles, M/R or MMR):	1				
Students must have received two doses of live measles vaccine, with the first dose administered not earlier than 12 months of age and the second dose no less than one month later, had physician verified disease by office	modelee vac		2	D	Υ		
	,		M	D	Υ		
		Date disease confirmed by office record: Date and lab results of immunity	M	D			
			IM	D	Y		
record for measles, or laboratory evidence of	evidenced b		M	D	Y		
immunity by a detectable			Results_				
antibody titer. Immunity to Rubeola must be documente prior to admission.	d						

STUDENT - When completed, submit into your Viewpoint Screening Account.					
MUMPS Students must have received two doses of live mumps vaccine, with the first dose administered not earlier than 12 months of age and the second dose no less than one month later, had physician verified disease by office record for mumps, or laboratory evidence of immunity by a detectable antibody titer. Immunity to mumps must be documented prior to admission.	Dates immunized with mumps vaccine (Mumps or MMR): Date disease confirmed by office record: Date and results of immunity as evidenced by titer: Type of test	1			
RUBELLA (GERMAN MEASLES) At least one live Rubella vaccine must be administered not earlier than 12 months of age, physician verified disease by office record for Rubella, or laboratory evidence of immunity by a detectable antibody titer. Immunity to Rubella must be documented prior to admission.	Date immunized with rubella vaccine (Rubella, MR or MMR): Date and results of immunity as evidenced by titer:	M D Y M D Y M D Y Results			
Tdap Tetanus Diphtheria Pertussis vaccine is required prior to entering clinical sites.	Must be updated every 10 years.	M D Y			
TUBERCULOSIS A two-step TB Mantoux skin test (PPD) is required. These tests must be given at least 7 days apart, and not more than 12 months apart. Each test must be read 48-72 hours after administration. TB testing needs to be completed within 6 months of the clinical rotation. Documentation of TB blood test results also acceptable. TB testing must be repeated if the student leaves the country between TB tests.	Dates and results of PPD two-step process this year / or TB blood test. Date and results of x-ray if PPD was positive: (Chest x-ray, TB questionnaire, clearance from the student's local health department are required for a positive TB test. If the student took medication for the positive TB test, CXR in the last 12 months and TB questionnaire are required.) Must have annual update through graduation.	1			

STUDENT - When completed, submit into your Viewpoint Screening Account.					
HEPATITIS B Hepatitis B vaccine is available at OSF Saint Anthony Center- Employee/Occupational Health Department.	Dates of completed vaccine series:	1 2 M D Y 3			
	Date of titer:	M D Y Results			
VARICELLA (CHICKENPOX) 1. Written documentation of 2 doses of varicella vaccine one month apart. 2. Laboratory evidence of	Dates of completed vaccine series: OR Date and result of immunity as	1 2 M D Y			
immunity or confirmed disease by detectable lab titers. 3. Physician / Provider verified disease by office record. 4. Physician / Provider verified diagnosis of herpes zoster	evidenced by titer Date Chicken Pox disease verified via documentation from provider: Date Herpes Zoster disease verified via documentation from	M D Y Results M D Y			
Meningitis Vaccine Written documentation of the Meningitis Vaccine for students under 22 years of age.	Date of completed vaccine Needs booster if 1st dose received prior to age 16.	M D Y			
Address		Phone			
Additional Health Care Provi		DatePhone			
Signature		_Date			

VIEWPOINT PSCREENING





- **Background Check**
- Drug Test
- Health Portal

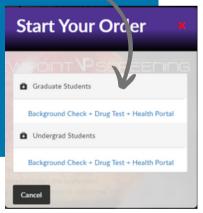


GO TO the School's Landing Page on Viewpoint Screening's Website: https://www.viewpointscreening.com/sacn

Click on "Start Your Order"



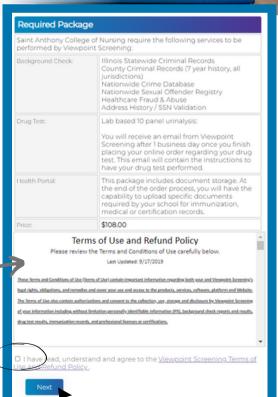
When you click on your program, it will expand to show you available packages. Click on the option "Background Check + Drug Test + Health Portal" UNDER YOUR PROGRAM.





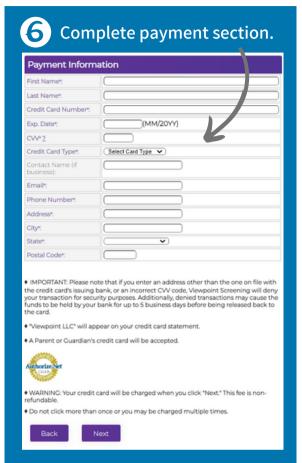
Once you click on the link, you will be taken to a package summary screen. After you review your package and the disclaimer/ refund policy, click the button to acknowledge and hit NEXT.

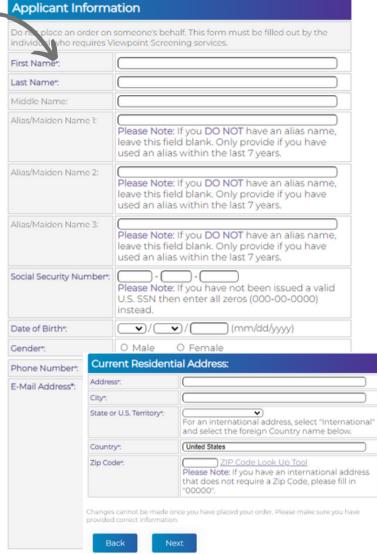


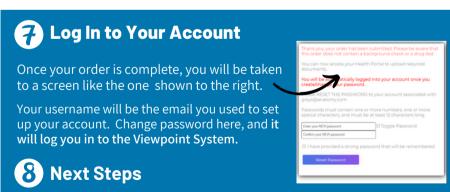




Complete the APPLICANT INFORMATION and address sections as prompted.

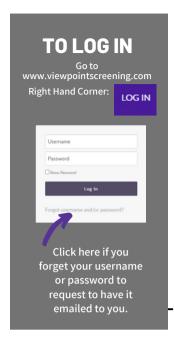






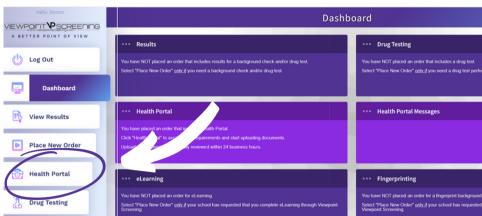
- <u>HEALTH PORTAL</u>: Follow instructions on the following pages to view your Health Portal requirements (to upload documents).
- <u>DRUG TEST</u>: You will receive an email from Viewpoint Screening in 1-2 days with your registration information and your testing location.



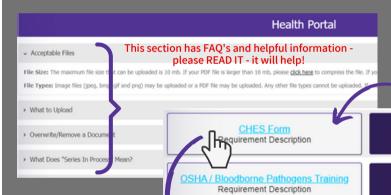


View your HEALTH PORTAL REQUIREMENTS

Now you are logged into your Viewpoint Screening Account. This is your **Dashboard**. Click "**Health Portal**" to VIEW requirements.

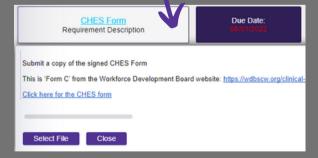


HOW TO SEE REQUIREMENTS & UPLOAD DOCUMENTS



To VIEW YOUR GUIDELINES (what to do) for a particular requirement, click on that item's "Requirement Description."





Guideline Description Box

- From here, you can:

 View the guidelines for what to upload

 See important instructions

 View & download school forms

 - Upload a file to correspond with this requirement

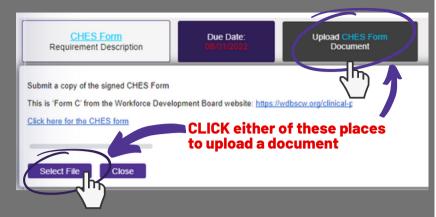
TIPS



- READ the full quideline to make sure you provide the right documentation.
- Viewpoint Screening does not create your requirements. The school communicates requirements to us. Our role is to verify documentation.
- Make sure your name is visible on the document (before and AFTER upload).

HOW TO UPLOAD A DOCUMENT

When you have the correct document available, you are ready to upload it to your Health Portal.



Once the document has been successfully uploaded, a new button will appear in the Row of the item with the DATE UPLOADED.

date upload column document status column action date column

Hepatitis B Requirement Description

Requirement Description

Click to view the document(s) you have uploaded

Upload New Hepatitis B Document

Upload New MMR Document

Uploaded On 04/07/22

Document Not-Approved 04/08/22 Next Action Da

proved 0

Is my document approved or not approved?

Documents are reviewed in 24 hours, or in 1 business day if submitted on weekends. Once reviewed, every document is either APPROVED (and marked green), or NOT APPROVED (and marked red), with a date stamp of review.



How can I see what I uploaded?

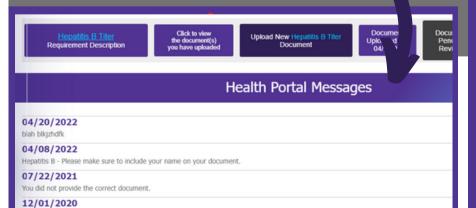
Click to view the document(s) you have uploaded

Always CHECK what you uploaded.

✓ Is it the right doc?

✓ Is my name visible?

If a document is NOT APPROVED, you will receive an email notifying you with the reason for the rejection. This information can also be located at the bottom of your Health Portal listings under "HEALTH PORTAL MESSAGES."



CPR Certification - You have provided a non-BLS (Basic Life Support) certificate. Please submit a BLS certificate in order to gain approval.

You will receive a general reminder email once weekly until you have reached full compliance for all of your documents.

Support



Email us at: studentsupport@viewpointscreening.com



Instant Chat - bottom right hand corner at ViewpointScreening.com Monday - Friday 9 am - 5pm EST.