



## Health Information Synopsis EMSB/AEMT

Health Sciences

Phone: (931) 540-2849 Fax: (931) 560-4103

Email: healthrecords@columbiastate.edu

---

All students entering any Health Sciences Program at Columbia State must submit evidence of good health. Students will upload individual health records to myRecordTracker. Additional information regarding accessing myRecordTracker will be sent to your Columbia State email.

- A. **2-Step TB Skin Test** - You will have a TB skin test placed, go back to have it read 48-72 hours later. You wait (for example) 1 to 3 weeks then go back and have another TB skin test placed and read.
- B. **Chest X-ray** - **A chest X-ray is required if you show a positive TB skin test result.**
- C. **IGG Titer Labs** - You must have titer labs drawn for:  
a. **MMR (Measles, Mumps and Rubella)\***  
b. **Varicella (Chicken Pox)\***  
c. **Hepatitis B\* (series of three (3) shots followed by titer lab**  
\*Depending on your titer lab results you may have to show records of previous immunizations and/or take additional immunizations followed by having another titer lab drawn. **Copies of titer lab reports are required!**
- D. **(Tdap) Tetanus/Diphtheria/Pertussis Immunization** (within the past 10 years)
- E. **Influenza Immunization** - Influenza season runs October 1 thru April 1 each year. It is now mandatory for all Health Sciences Program students to have an influenza immunization. Documentation of having received a flu shot for 2018-2019 will be due by September 24<sup>th</sup>, 2018. **Proof of flu shot is not needed for summer clinical attendance.**
- F. **Background Check/Drug Screen** - A minimum **10 panel urine drug screen** with urine alcohol will be required for students after acceptance into health science programs as a condition for beginning clinical education.  
  
Since multiple facilities utilized for clinical experience require a drug screen of all applicants for employment, students rotating in the clinical environment are subject to the same standards.
- G. **State Physical Form and Immunity Verification Form** Required forms provided to you. Can be completed by MD or Nurse Practitioner.
- J. **Health Insurance** Student must provide proof of health insurance coverage (front and back copy of your insurance card). If your name is not on the insurance card please provide some type of documentation stating or showing that you are covered as a dependent on the insurance policy. This is in addition to providing a copy of the insurance card and only if your name does not show on the insurance card.