



Health Requirements for Rocky Vista University
Physician Assistant Program



Dear Rocky Vista University Student,

Congratulations on your acceptance to Rocky Vista University Physician Assistant Program! We know you are excited to embark on your medical education. Before you can get started, there are some important and mandatory health requirements that **MUST** be completed before you will be allowed to start your classes. **You are required to complete all the requirements by 8/16/21. Failure to complete these requirements prior to the deadline may result in the inability for you to matriculate into the program!** Rocky Vista University has contracted with Sentry MD to store and maintain their student health forms. Sentry MD is a confidential student health record service.

It is critical that you begin this process as soon as possible.

Included in this packet is information on background check registration, drug screen registration and immunization requirements that are necessary for you to participate in the PA program.

Step 1: Purchase the Health Record Management Package

- Go to www.mystudentcheck.com and type 'Rocky Vista University- Physician Assistant' in the 'School' dropdown menu.
- Select 'Physician Assistant' from the 'Program' dropdown menu. Click 'Submit' and complete all required fields as prompted, then enter your payment information.
- The price is **\$122.50**, please note that applicable tax rates will be applied for residents of Texas and New Mexico. For your records, you will be provided a receipt and confirmation page of your background check, drug screening and immunization/vaccination records through PreCheck, Inc.
- Please note this fee does **NOT** include cost of any vaccinations, PPD, or titers you may need.

Step 2: Begin gathering the Health Document Requirements detailed on the following pages

- Student Information (**Part I**)- Student to complete
- Student Consent Statement (**Part II**)- Authorization for Sentry MD to provide Rocky Vista University with information regarding your immunizations. This must be signed by the Student.
- Drug Screen information (**Part III**)
- CPR Information Part (**IV**)
- Titer and Immunization Requirements (**Part V**)- There are specific instructions on this form for each titer and immunization requirement you must submit a copy of.
- TB Test Requirement (**Part VI**)- to be completed by healthcare provider.
- Account Access (**Part VII**)- Instructions on how to view your Sentry MD account.

Step 3: Submit requirements before or by **August 16th, 2021.**

- Submit all requirements as one PDF document to the Secure Student Uploader <https://mysentrymd.com/sentrymd.html#/upload/39>.

Upon receipt of your health forms, Sentry MD will be notifying Rocky Vista University of your compliance status. Failure to provide complete health and immunization documents **may delay your entry or ability to participate** in your program. It is the responsibility of the student to make sure you always maintain compliance.

Please direct all questions regarding immunization requirements to RVU@SentryMD.com.

Please direct all questions regarding background checks and drug screenings to StudentCheck@PreCheck.com.



PART I STUDENT INFORMATION | *this must be completed by the Student.*

Last Name:	First Name:
DOB: __/__/____	Cell Phone:
Student ID (Not Required):	Email Address:

PART II STUDENT CONSENT STATEMENT | *This must be completed by the Student.*

I hereby authorize Rocky Vista University and Sentry MD to release copies of my official student record, which may include any or all the following items for the purpose of matriculation and clinical rotations.

DOCUMENTS/INFORMATION PERMITTED FOR RELEASE	
Immunization records Background check Drug Screening results BLS/ACLS/PALS Driver's License Health Insurance Malpractice Insurance	Demographic and Emergency Contact Information HIPPA Training Certification Blood Borne Pathogen Certification OSHA Certification
EDUCATIONAL RECORDS MAY BE RELEASED TO:	
<i>Clinical Rotations Sites as assigned by the Rocky Vista University PA Program</i>	

I give permission to Rocky Vista University and Sentry MD to:

- Obtain all medical information necessary to complete this form.
- Release my medical information for the purpose of fulfilling clinical requirements.
- I have reviewed the immunization history for completeness and agree to release the information provided on the Rocky Vista University Immunization Transcript to authorized members of the Rocky Vista University PA Program and staff of cooperating agencies, as may be required.

Student Signature

Date of Birth

Student Name (Print)

Date



PART III DRUG SCREEN | *This must be completed by the Student.*

Drug Screening:

You must pre-register for drug screen collections before heading to a collection lab.

- If paying by credit card, you will be rerouted to pre-register for your drug screen.
- If paying by money order, you will be emailed instructions to obtain your drug screen once payment has been received.

Note on Drug Screen Collection Pre-Registration and Appointments: This process only preregisters you for a drug screen and does not set up an appointment time with the collection site. Collection sites have different policies on setting up appointments for drug screening. For your convenience, we recommend calling the chosen collection site ahead of time to set up an appointment. It is also your responsibility to pre-register and complete the drug screen within the time frame required by the school. For most students, the Electronic Chain of Custody (ECOC) process will register them to a collection site instantly; however, the location of some students may require us to mail a paper Chain of Custody Form to get you to a collection site close to your location. We encourage you to pre-register with enough time to allow mailing time, if needed.

**PA students will be required to complete an additional drug screen and criminal background check prior to the start of clinical rotations*

Please reach out to StudentCheck@PreCheck.com with questions regarding background check and drug screenings.

PART IV CPR | *This must be completed by the Student.*

BLS for Health Care Provider CPR: Only the American Heart Association BLS for HealthCare Provider Course is accepted. Please submit a copy of your CPR card (**Front and Back**) or **E-certificate with verification code**. ***Certification must not expire prior to May 31st, 2022.*** If your current certification expires before this date, you will need to take the course again (even if currently not expired).

Return your completed forms by uploading them as ONE PDF to the
Secure Student Uploader at

<https://mysentrymd.com/sentrymd.html#/upload/39>.



PART V TITER AND IMMUNIZATION REQUIREMENTS | *You will need to obtain copies of all requirements listed below and submit them to Sentry MD as ONE PDF document to the Secure Student Uploader at <https://mysentrymd.com/sentrymd.html#/upload/39>.*

The following titers (blood draw) **and** vaccines are **MANDATORY**: *Submit documentation of each item.*

The Program does not accept previous childhood immunization record as proof of meeting this requirement. You must submit a **QUANTITATIVE** lab report (with lab value and reference range) that shows you are immune (positive antibody titer) to each of the following.

Mandatory Titers:

- **HEP B Surface Antibody (NOT IgM)**- Submit a copy of your titer lab report showing the numerical result and reference range.
- **MMR IgG Titers (NOT IgM)** - Submit a copy of your 3 separate titer lab reports for Measles (Rubeola), Mumps and Rubella showing the numerical result and reference range.
- **Varicella IgG Titer (NOT IgM)** (Chicken Pox)- Submit a copy of your titer lab report showing the numerical result and reference range.

If you have a nonreactive or negative titer to any of the above, you must follow-up with your healthcare provider immediately to discuss boosters or a full repeat series before retesting the titer. You will not be considered in compliance until proof of immunity by titer has been sent into Sentry MD.

- Submit documentation of all follow-up vaccines/boosters as you complete them. Repeat titer needs to be drawn 4 to 6 weeks after the booster or completed series.

If you test as a non-converter to any of the diseases listed above, you will be required to sign a Waiver. Contact RVU@SentryMD.com for the non-converter form.

Mandatory Vaccines and Testing:

In addition to the above mandatory titer reports, you, must submit documentation of the following:

- **Tdap Vaccine**- within last ten (10) years *TD booster NOT accepted.*
- **Influenza Vaccination** (due each year during flu season).
- **Tuberculosis Screening** within 3 months of start of the program and then maintained annually.
 - **A Two-Step TB Skin test OR a Blood Test will meet the TB requirement.**
 - A Two-step skin test requires that an initial TST is administered and read within 48-72 hours, followed by a second TST that must be administered 7 to 21 days after the first test and then read 48-72 hours after.
 - There are two available blood tests: A QuantiFERON or a T-Spot. A blood test can be completed instead of the two skin tests.

*If any TB testing is **positive**, evaluation (and treatment, if indicated) must be completed in accordance with CDC guidelines.*

- **COVID-19 Vaccination:** Must be **fully** vaccinated by 8/16/21
 - Please note that the CDC recommends waiting 14 days before AND after receiving a COVID-19 dose to receive any other immunizations. TB testing can be performed at any point BEFORE COVID-19 vaccination, but at least 4 weeks AFTER COVID-19 vaccination. **It is important to keep this in mind as you plan to fulfill all requirements by the deadline.**

The Program complies with the CDC recommendations for healthcare workers.

Student Name:	DOB:	Student ID #:
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PART VI TB TEST | Please use the following form to document completion of Tuberculosis screening.

Mantoux Tuberculin Skin Test Record Form

Patient Information

Name: _____

DOB: _____

Telephone: _____

Have you ever had a positive PPD? _____ No Yes Date

Have you ever taken INH? _____ No Yes Date

Have you ever received a BCG vaccine? _____ No Yes Date

Tuberculosis (PPD/TB) Skin Test Information:

Name of administrator: _____

Manufacturer/expiration date of PPD solution: _____ LOT # _____

PPD Step One

PPD Step Two (7 to 21 days after Read Date of PPD #1).

Date/time placed:

Date/time placed:

Arm placed:

Arm placed:

PPD #1 Date/time read:

PPD #2 Date/time read:

Finding: _____ mm induration

Finding: _____ mm induration

Name of reader:

Name of reader:

Signature of reader/provider: _____

TB QuantiFERON gold Date (Blood test): *Submit copy of lab report*

T-Spot Date (Blood test): *Submit copy of lab report*



Student Checklist

- Student Information is complete ([Part I](#))
- Authorization Consent form is signed by Student ([Part II](#))
- You have registered for your Drug Screen ([Part III](#))
- Submit copy of BLS card (front/back) or E-certificate with verification code ([Part IV](#))
- Submit copy of HepB Titer Quantitative Lab report ([Part V](#))
- Submit copy of MMR Titers Quantitative Lab reports ([Part V](#))
- Submit copy of Varicella Titer Quantitative Lab report ([Part V](#))
- Submit copy of Tdap Vaccine ([Part V](#))
- Submit copy of Influenza Vaccine ([Part V](#))
- Submit copy of TB Test and TB Test Form ([Part VI](#))
- Submit your completed forms by 8/16/21** as ONE PDF to the Secure Student Uploader at <https://mysentrymd.com/sentrymd.html#/upload/39>.

Please email any questions you may have to RVU@SentryMD.com

PART VII- ACCOUNT ACCESS

Please note your account will only be available after you have registered and sent Part I of this packet into Sentry MD. Your account allows you to see your status and download/print documents that have been processed by Sentry MD. Please make sure to submit document requirements to the Upload link <https://mysentrymd.com/sentrymd.html#/upload/39> as you are not able to upload directly to your account, all documents are reviewed and processed prior to showing in your account (*Processing can take 24 to 48 hours*).

Link to Sentry MD system:

<https://mysentrymd.com/sentrymd.html#/home>

1. Enter your User ID: (email address in all lowercase)
2. Click on Set Password
3. Enter your email address (your User ID will be the email address you registered with in all lowercase)
4. You will be sent a token to your email address
5. Enter Token from email onto site
6. Create a Password
7. Click link to go to login screen.

Once you are logged into your account, you will note on the landing page how easy it is to see if you are compliant or not with the requirements for your program. A blue checkmark next to each of the requirements means you are compliant. Requirements without the blue checkmark indicate you are missing documentation these items need your attention.

In addition to viewing your status at any time, you can download and print your landing page checklist and any or all the documents you have submitted by clicking the Documents Button. Only documents that have completed processing will appear in your account, please note processing can take 48 business hours. We hope these tools help you stay on top of your status and keep you compliant with your program requirements.



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FREQUENTLY ASKED QUESTIONS:

1. **Does PreCheck need every street address where I have lived over the past 7 years?** No. Just the city and state.
2. **Do I get a copy of the background report?** Yes. Log into www.mystudentcheck.com and click on "Check Status" and enter your SSN and DOB. If your report is complete, you may click on the application number to download and print a copy.
3. **Do I get a copy of the Drug Screen results?** Results are not always returned to PreCheck, and sometimes a school may designate that results be returned directly to them, or to the clinical site. If you wish to receive a copy you may contact us at StudentCheck@PreCheck.com and we will determine if we have results on file. We will need your name as provided on your drug screen order, the last four digits of your SSN, and the School and Program for which you underwent the screening.
4. **I have been advised that I am being denied entry into the program because of information on my report and that I should contact PreCheck. Where should I call?** Call PreCheck's Adverse Action hotline at 800-203-1654. Adverse Action is the procedure established by the Fair Credit Reporting Act that allows you to see the report and to dispute anything reported.

Immunization Frequently Asked Questions

1. **Can I present my forms directly to my program administrator?** No, you should submit your forms via the secure Sentry MD Uploader: <https://mysentrymd.com/sentrymd.html#/upload/39>.
2. **My program administrator contacted me to tell me that my forms are deficient. What do I do now?** Contact a Sentry MD representative by emailing your questions to: RVU@SentryMD.com
3. **How do I know my documentation was received?** A confirmation email will be sent immediately if your upload was successful. Within 3 business day your compliance will be emailed to you from a representative at Sentry MD.
4. **How do I access my file?** After you have submitted your documentation to Sentry MD, you will receive an email with login instructions on how to access your Sentry MD account.
5. **Since Student Check and Sentry MD are partners who should I call?** After receiving your confirmation, if you have immunization tracking questions please contact Sentry MD directly at RVU@SentryMD.com. If you have issues during the initial ordering process email StudentCheck@PreCheck.com.