

Phase 4 Student Check List

Phase 4 required documents: To be admitted to the Medical Assistant Program, all documents must be submitted to **Cindi Woodard, NO LATER THAN Thursday, 19 August, 2019 before 3pm** cindiw@clackamas.edu – 503.594.0691

- Copy of Criminal History & Background Check
- Copy of Urine Drug Screen
- Health History & Physical Examination form; PE occurring after 28 Feb, 2018. Form may be downloaded from website <http://www.clackamas.edu/HealthSciences/MedicalAssistant/>
- Hepatitis B vaccination series **completed** _____ date of completed series
 - _____ date of HBsAb / **Hepatitis B surface Antibody** Titer demonstrating immunity
 - _____ date of booster only if deemed medically necessary by your HCP
 - _____ Date of repeat HBV titer Results: Positive/Immune Negative
- Hepatitis B series **in process:** Follow this schedule if you have not been vaccinated for Hepatitis B
 - 1st injection completed before 20 August Date: _____
 - 2nd injection completed before 20 September Date: _____
 - 3rd injection completed before 28 February Date: _____
 - **Hepatitis B surface Antibody**, Titer due one month after last injection / **must be completed prior to spring term 2019** to be placed in externship site Date: _____
- Measles-Mumps-Rubella:
 - Titer to discern immunity Date: _____
 - 2 doses if not fully vaccinated Date: _____ Date: _____
- Varicella (chickenpox): Submit one of the following
 - Titer to discern immunity Date: _____
 - 2 doses if not fully vaccinated Date: _____ Date: _____
- Tetanus-Diphtheria-Pertussis: Tdap
 - Tdap booster within last 10 years. Must be current throughout program Date: _____
- Polio: IVP or OPV
 - 3 doses Series completion Date: _____
 - Booster at the recommendation of HCP Date: _____
- Quantiferon Gold – TB SCREEN showing *negative* results Date: _____
 - If results are positive: clear radiological report as provided by licensed healthcare provider
- Flu vaccine (Seasonal) - strongly recommended. Due by 01 December 2019 Date: _____
 - Note: most clinical sites require for student externs
- BLS CPR – American Heart Association – 2 copies Expiration date: _____
- HeartSaver First Aid - American Heart Association – 2 copies Expiration date: _____
- Photo Release Form* Date: _____
- Signed acknowledgement of receipt of 2019-2020 MA Handbook* (contained in Handbook) Date: _____
 - * May be downloaded from MA website after 01 August: <http://www.clackamas.edu/HealthSciences/MedicalAssistant/>

All items complete: _____
Cindi Woodard, CCC Allied Health Department

Date _____