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The following forms can be printed from your CastleBranch Medical Document Manager:

- Health Examination Record
- Health and Drug Screen Affidavit
- Positive PPD Questionnaire
- Hepatitis B Declination Waiver Affidavit
- Criminal Background Affidavit
- N95 Fit Testing Form (RAD program only)

ANNE ARUNDEL COMMUNITY COLLEGE
School of Health Sciences
STUDENT HEALTH EXAMINATION RECORD REQUIREMENTS POLICY

Reviewed: August 2021

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 form (see student manual or contact program Academic Chair). Such changes could include, but are not limited to, surgery, pregnancy, medication changes (including medication-assisted treatment), or orthopedic injuries.
3. History and physicals must be current within one year prior to program start date.

MD/NP/or PA must provide an office stamp or seal on the bottom of page 4 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. AACCC 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. Childhood vaccinations are acceptable if the dates are validated by a health care provider.
3. A clinical history of a disease is not acceptable as immunity.
4. 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 items contraindicated. (Please note notwithstanding a physician's statement a clinical site(s) may not approve site placement of non-immunized students.)
5. 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 SCREENING—Program-specific requirements will be listed in student's Conditional Acceptance packet

Immunity may be confirmed by:

- A. A PPD test (tine test not acceptable) must be performed. Test must be given no more than nine months prior to the first day of class unless indicated otherwise for specific programs. Quantiferon blood test also will be accepted. However, if a clinical site requests the skin test, the student will be required to have that completed. The Registered Nursing, Practical Nursing, Advanced RN and Physical Therapist Assistant programs will not accept a blood test.
- B. Programs such as Registered Nursing, Practical Nursing, Advanced RN, Radiologic Technology and Paramedic, require a two-step PPD. A two-step PPD is when a student needs to have two separate PPDs, one to three weeks from each other.
- C. If the PPD result is significantly positive, in duration greater than 10mm, a chest x-ray must be performed. A copy of the report must be attached.
- D. If you have a history of positive PPD 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. Students in a Health Sciences program need to update their tuberculosis screening annually. If a student has a history of a positive PPD, they must have their physician complete a Positive PPD Questionnaire and will not be required to repeat the chest x-ray. Email healthsciencesadmissions@aacc.edu for a form.

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. Students who elect not to have the vaccinations are required to sign a declination form.
- C. Written laboratory results of Hepatitis B sab 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 (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, please 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.

Massage Therapy program students do not need tetanus vaccine documentation.

INFLUENZA AND COVID VACCINE AND OTHER VACCINES

The School of Health Sciences' Health Examination Requirements are aligned with the clinical site requirements. The 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 that the student has received 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.

Accommodations 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 an 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 as a result of such participation.

ANNE ARUNDEL COMMUNITY COLLEGE
School of Health Sciences
Frequently Asked Questions

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?

When you and your health care provider have completed the form, upload it through your CastleBranch medical document manager, which you will order from <https://aacc.castlebranch.com/NN12>. (For order instructions, review the instructions that were provided with your conditional acceptance packet.) Please note that you must upload each vaccine/titer documentation under each requirement.

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. Please provide course title as well as course number and semester on page 1 of the Health Examination Record

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 a physician assistant.

NOTE: Physician office must stamp/seal the bottom of page 4 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. 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 within the past eight months (skin test for exposure to tuberculosis) 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 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. However, the Registered Nursing, Practical Nursing, LPN, Paramedic, Veterans to RN Advanced Placement and Physical Therapist Assistant programs will not accept the Quantiferon blood test. Students in other programs 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 PPD.
- 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 waiver that you download from the CastleBranch Hepatitis requirement and upload the declination waiver with your Health Examination Record. Please note: some clinical sites may require immunization to HBV.
- 23. Who should I contact if I have questions?**
Email: healthsciencesadmissions@aacc.edu

Healthcare Personnel Vaccination Recommendations¹

VACCINES AND RECOMMENDATIONS IN BRIEF

Hepatitis B – If previously unvaccinated, give a 2-dose (Heplisav-B) or 3-dose (Engerix-B or Recombivax HB) series. Give intramuscularly (IM). For HCP who perform tasks that may involve exposure to blood or body fluids, obtain anti-HBs serologic testing 1–2 months after dose #2 (for Heplisav-B) or dose #3 (for Engerix-B or Recombivax HB).

Influenza – Give 1 dose of influenza vaccine annually. Inactivated injectable vaccine is given IM. Live attenuated influenza vaccine (LAIV) is given intranasally.

MMR – For healthcare personnel (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. Give subcutaneously (Subcut).

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. Give Subcut.

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. Give IM.

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. Give MenACWY and MenB IM.

Hepatitis A, typhoid, and polio vaccines are not routinely recommended for HCP who may have on-the-job exposure to fecal material.

Hepatitis B

Unvaccinated healthcare personnel (HCP) and/or those 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 either Engerix-B or Recombivax HB 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. It is also possible that non-responders are people who are HBsAg positive. HBsAg testing is recommended. HCP found

to be HBsAg positive should be counseled and medically evaluated.

For HCP with documentation of a complete 2-dose (Heplisav-B) or 3-dose (Engerix-B or Recombivax HB) vaccine 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 physicians, nurses, paramedics, emergency medical technicians, employees of nursing homes and chronic care facilities, students in these professions, and volunteers, should receive annual vaccination against influenza. Live attenuated influenza vaccine (LAIV) may be given only to non-pregnant healthy HCP age 49 years and younger. Inactivated injectable influenza vaccine (IIV) is preferred over LAIV for HCP who are in close contact with severely immunosuppressed patients (e.g., stem cell transplant recipients) when they require protective isolation.

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 generally 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.

Varicella

It is recommended that all HCP 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 HCP should be revaccinated during each pregnancy. All HCPs should then receive Td or Tdap boosters every 10 years thereafter.

Meningococcal

Vaccination with MenACWY and MenB is recommended for microbiologists who are routinely exposed to isolates of *N. meningitidis*. The two vaccines may be given concomitantly but at different anatomic sites, if feasible.

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 IAC. 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/vaccines/hcp/acip-recs/vacc-specific/index.html or visit IAC's website at www.immunize.org/acip.

Health Sciences Students Low Cost Resources 2021-2022

AACC HEALTH SERVICES

410-777-2480 <https://aacc.sharepoint.com/sites/AACCVirtualHealthWellnessCenter>

Via your MyAACC portal, click on [Virtual Health & Wellness Center](#) under quick links to access the services and resources available, including health insurance, PPD & Low Cost Healthcare Resources.

IMMUNIZATION RECORDS

Anne Arundel County Public Schools Student Records Office

410-222-3869 studentrecords@aacps.org 8307 Grover Rd. Millersville, MD 21108

Immunization Records are part of the academic record and are maintained in your high school for 3-4 years and then transferred to the Student Records Office. If you have graduated in the last 4 years call your high school first. If they no longer have the records, contact the Student Records Office: **\$5 for copies of immunization records.**

IMMUNIZATIONS

Anne Arundel County Department of Health

[Routine immunizations approved by ACIP \(Advisory Committee for Immunization Practices\) for eligible children and qualifying adults are available at area health centers by appointment.](#)

Free **Flu vaccination** clinics, call to make a flu shot appointment at

Glen Burnie Health Center

410-222-6633 416 A Street SW, Glen Burnie, MD 21061

Parole Health Center

410-222-7247 1950 Drew Street, Annapolis, MD 21401

Baltimore City Department of Health

Immunization Program

A limited supply of adult immunizations may be available with a \$25 suggested donation for each vaccination.
410-396-4454.

Howard County Department of Health

BY APPOINTMENT ONLY The charge for this service is based on the cost of a dose of vaccine plus an administrative fee.
Columbia Health Center 410-313-7500 7180 Columbia Gateway Drive Columbia, MD 21046.

Sam's Club

Sam's Club Pharmacy offers low cost immunizations, you do not need to be a Sam's Club member to use their pharmacy.

REDUCED COST MEDICAL SERVICES

Anne Arundel Medical Center Community Clinics (two locations)

410-990-0050 <http://www.aamccommunityclinics.org/>

Forest Drive [1419 Forest Drive, Suite 100](#)

Morris Blum [701 Glenwood Street](#)

AFC Urgent Care

3059 Solomons Island RD Edgewater, MD 21037

410-956-3394 <https://www.afcurgentcareedgewater.com/>

Chase Brexton

410-837-2050 www.chasebrexton.org

200 Hospital Drive Suite 300 Glen Burnie, MD 21061

Concentra

<https://www.concentra.com/>

Family Health Centers of Baltimore

410-355-0343

4115 Ritchie Highway Brooklyn Park, MD 21225

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

410-867-4700

134 Owensville Rd. West River, MD 20778

6131 Shady Side Rd., Shady Side, MD 20764

Odenton Health Centers

410-735-5719 www.totalhealthcare.org/annearundel/

1215 Annapolis Road Odenton, MD 21113

Owensville Primary Care

410-867-4700 <http://owensvillepc.com/>

134 Owensville Road West River, MD 20778

Patient First Neighborhood Medical Center

<https://www.patientfirst.com>

Annapolis 443-603-0758	2051 West Street
Bowie 240-544-0676	15459 Annapolis Road
Glen Burnie 443-577-0277	7116 Ritchie Hwy
Laurel 301-497-1820	3357 B Corridor Marketplace
Odenton 443-351-3917	1110 Annapolis Rd
Pasadena 443-573 – 0564	8105 Ritchie Highway

REACH

443-679-6853

Anne Arundel County Department of Health COVID assistance for uninsured

<https://aahealth.org/reach-residents-access-to-a-coalition-of-health/>

Work Life Urgent Care

410-487-6052

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

(Behavioral Counseling and Medical Care)

Sliding fee scale for uninsured.

LOW COST TUBERCULOSIS SKIN TESTING (PPD)

CALL FOR APPOINTMENTS AND COSTS

AFC Urgent Care

3059 Solomons Island RD Edgewater, MD 21037

410-956-3394

<https://www.afcurgentcareedgewater.com/>

CONCENTRA URGENT CARE ARBUTUS 24/7

1419 Knecht Avenue Baltimore, MD 21227

410-247-9595

HEALTH INSURANCE

The Maryland Insurance Administration

Offers general information about insurance options at

<https://insurance.maryland.gov/Consumer/Pages/HealthInsuranceOptions.aspx>

PRIVATE INSURANCE COMPANIES

The most comprehensive healthcare coverage you can get is through a private company, and I believe the only two private companies, providing full coverage, are Care First and Kaiser Permanente

CareFirst

<https://individual.carefirst.com/individuals-families/plans-coverage/medical/individual-family-medical-plans-md.page>

Kaiser Permanente

<http://info.kaiserpermanente.org/healthplans/maryland/individual/summary-benefits-coverage/index.html>

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 are able to 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 & Wellness Center

3 Harry S Truman Parkway

Annapolis, MD 21401

410-222-4380 or 410-222-7381

HCAM

HealthCare Access Maryland [HCAM](#) offers in person health insurance navigators throughout Anne Arundel County

Call for hours 410-500-4710 or 855-288-3667

<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 AACC does not provide health insurance for students, the following agencies offer health insurance services specifically for international students. Please contact DSO, Emma B. Thompson at ebthompson@aacc.edu or call 410-777-2152 or 410-777-2677, for questions about international student insurance.

Health Coverage must include:

Accident on campus

Medical evacuation

Repatriation

Medical Insurance Plans:

- Compass Benefits Group www.compassbenefit.com
- Ascension Benefits and Insurance www.ascensionins.com
- Cultural Insurance Services International (CISI) cisiwebadmin@cultural.insurance.com
- HTH Worldwide Insurance Services www.hthstudents.com
- International Student Insurance www.internationalstudentinsurance.com
- International Student Protection <http://intlstudentprotection.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/f1student/> **Medical Evacuation & Repatriation ONLY plans:**
- Betins www.betins.com
- SOS International www.sosinternational.com
- HG Insurance www.hginsurance.com

International Student Dental Insurance ONLY plans:

United Health Care Student Resources www.student-resources.net

Dental Health Alliance, L.L.C. www.dha.com

International Student Insurance www.internationalstudentinsurance.com

STUDENT HEALTH EXAMINATION RECORD CHECKLIST

Please use this form as a guide to ensure your health form is complete.

Documentation must be uploaded to CastleBranch.

- _____ 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, or 2 Dose variation)
- OR**
- I have signed the Hepatitis Vaccination Affidavit (if applicable) and checked DECLINE. If declining, I have uploaded the Hepatitis declination waiver to my CastleBranch profile's Hepatitis B requirement

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, verification of a current Td tetanus vaccine is required (not required for Massage Therapy students).

- _____ I have met the TB requirement **for my program**: indicate one
- Received PPD skin test
- OR**
- 2 Step PPD. 2 PPD results conducted within a span of 1 to 3 weeks
#1 _____ #2 _____ (dates)
- OR**
- Had chest x-ray performed in past year and submitted positive PPD questionnaire to CastleBranch
- OR**
- Quantiferon or T-spot test (Not permitted for RN, PN, Advanced Placement RN, Paramedic).

STUDENT HEALTH EXAMINATION RECORD CHECKLIST

Please use this form as a guide to ensure your health form is complete.

Documentation must be uploaded to CastleBranch.

_____ 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 available, a signed statement on letterhead must be uploaded along with the complete four page health exam record to CastleBranch.

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 uploaded it to CastleBranch.
- I have ordered and submitted documentation for the COVID vaccine using the COVID Document Manager.
- I have ordered and submitted documentation for the N95 fit testing requirement (RAD students only).