ADOM | Academy of Diagnostic & Osteopathic Medicine

IMMUNIZATION FORM - STUDENT HEALTH & IMMUNIZATION CLEARANCE CHECKLIST

Program: Diagnostic Medical Sonography & Vascular Technology with Diagnostology

Name: _____ **Phone:** _____

DOB: _____ **Email:** _____

Student ID: _____ **Program Start Date:** _____

As part of our commitment to health and well-being, we require all new students to complete this health form. Please read the instructions carefully and provide accurate information.

1. PHYSICAL EXAMINATION / HEALTH CLEARANCE – REQUIRED BY ADOM

☐ Completed physical examination/health clearance form received

Date of Examination: _____

The physical examination must be completed and signed by a licensed healthcare provider. The provider must confirm that the student is medically cleared to participate in the educational program, including classroom, laboratory, simulation, and clinical activities, with or without reasonable accommodation.

2. CONNECTICUT IMMUNIZATION DOCUMENTATION

Where applicable under Connecticut immunization requirements, documentation must be provided for the following:

MMR – Measles, Mumps & Rubella

☐ Measles – Dose 1 documented
☐ Measles – Dose 2 documented
☐ Mumps – Dose 1 documented
☐ Mumps – Dose 2 documented
☐ Rubella – Dose 1 documented
☐ Rubella – Dose 2 documented
☐ Other acceptable documentation/evidence under applicable Connecticut requirements

Varicella – Chickenpox

☐ Dose 1 documented
☐ Dose 2 documented
☐ Other acceptable documentation/evidence under applicable Connecticut requirements

Exemption/Exception, if Applicable

☐ Documentation of an applicable exemption or exception received and reviewed in accordance with current Connecticut law

3. NOT REQUIRED BY ADOM FOR GENERAL ENROLLMENT

The following are not general ADOM enrollment requirements unless required by applicable law. They may be required by an assigned clinical or externship facility:

☐ Hepatitis B vaccination/evidence of immunity
☐ Tdap vaccination
☐ Tuberculosis (TB) screening – TST or IGRA
☐ Seasonal influenza vaccination
☐ COVID-19 vaccination/testing
☐ Serologic titers
☐ Additional or updated physical/health clearance
☐ Drug screening
☐ Background screening
☐ Other clinical-site health or safety requirements

These items should not delay general enrollment unless they are otherwise required by law or are necessary for an upcoming clinical placement.

4. CLINICAL AFFILIATE REQUIREMENTS

Students are advised that hospitals, physician offices, imaging centers, and other clinical affiliates establish their own health, immunization, occupational-health, and infection-control requirements.

Clinical-site requirements may be different from or more extensive than ADOM's general enrollment requirements and may change during the student's program.

Students must satisfy the requirements of their assigned clinical affiliate before beginning clinical education at that facility. ADOM cannot waive or modify requirements established by an independent clinical affiliate.

Failure to satisfy the requirements of an available clinical affiliate may delay or prevent clinical placement and may affect the student's ability to complete required clinical education and graduate.

5. ADMISSIONS REVIEW

Required for ADOM Enrollment

☐ Physical/Health Clearance received
☐ Required MMR documentation received, if applicable
☐ Required Varicella documentation received, if applicable
☐ Applicable exemption/exception documentation reviewed, if applicable

Status:

☐ COMPLETE – Health/Immunization Requirements Satisfied

☐ INCOMPLETE – Additional Documentation Required

☐ REFER TO PROGRAM ADMINISTRATION FOR REVIEW

Missing Documentation/Notes:

_____

_____

_____

Reviewed By: _____

Title: _____

Date: _____