



These instructions are to be used by students to fill out the Health Services' health evaluation here: <https://www.millersville.edu/healthservices/health-evaluation-facts-faqs.php>.

For questions and concerns, email the MU Health Services Department at hservices@millersville.edu or call (717) 871-5250. The entire completed packet should be sent to the email above. Be sure to include your entire name and Millersville ID number in the email.

These detailed instructions are for both you and your physician (doctor) and are specifically intended to help international students complete all of the forms as easily as possible. *Please read them carefully.*

INSTRUCTIONS

Student Health History (Page 1) – *to be completed by the student*

- A. **Personal Information:** Fill out the entire section. The MU id# is your Millersville University student number. If you do not yet know this number, leave it blank. For the emergency contact section, complete with the name and contact information of the person whom you would like Millersville to contact in the event of a medical emergency.
- B. **Family History:** Complete this section about your family. Be as specific as possible.
- C. **Personal History:** Complete this section about yourself. Be as specific as possible.
- D. **Tuberculosis Screening:**
 - Read section 1 – 4 and circle any of the risk factors that apply to you.
 - Complete the last box by checking either “No” if none of the above items apply to you, or “Yes” if any of the above items apply to you.
 - If you checked “Yes”, a TB test or chest radiography is required. Additional information is found in the Practitioner’s Report (section A, pg. 2).
 - If you receive a chest radiography, a copy of the report **must** be included with this packet.

Practitioner’s Report (Page 2) – *to be completed by your doctor according to your current health status. In order to complete this form, your doctor needs to see the Student Health History form from page 1.*

- A. **Tuberculosis Screening:** If you circled any of the risk factors in sections 1-4 of the Tuberculosis Screening section on the Student Health History (section D, pg. 1), your doctor needs to give you a Tuberculin Skin Test and record the results **or** do a chest radiography.
- B. **Mandatory Immunizations/Required Vaccinations:**
 - **Measles, Mumps, Rubella (MMR)** – must have **2** doses as indicated on form **or** MMR titer. Date of titer and copy of results must be attached. *If you must receive your MMR doses at MU, the cost is approximately \$85.*
 - **Tetanus-Diphtheria** – must have been received within the past 10 years. *If you must receive your updated tetanus vaccination at MU, the cost is approximately \$45.*
 - **Meningococcal Vaccine**
 - a. If living in the dormitories, you must have this vaccination or sign the waiver in this section.
 - b. If you sign the waiver, your doctor must provide a statement, in English, why they will not issue you the vaccination.
 - c. If living off campus, it is your choice to get the vaccination but it is highly recommended.
 - **Other Immunizations Recommended** – These are optional. You do not need to get these vaccinations; however, if you have had them, have your doctor list the details in this section.
- C. **Physical Examination:** within the past 12 months of admission for all freshman students and within 36 months of admission for all transfer and graduate students. This form must be completed by your doctor.
- D. **Doctor Information:** Your doctor (practitioner) must sign, date, and provide the requested information listed in section D.