

Butler University Health Services

Freshman and Transfer Student Entrance Physical Examination Record

**To be completed by a health care provider within the last 12 months.
You may use this form, or a similar form provided by your health care provider.
Please complete in English**

Date: _____ **DOB:** _____

Full Name of Student: _____

Height (inches): _____ **Weight (pounds):** _____

B/P: _____/_____ **Pulse:** _____ **Resp. Rate:** _____ **Temperature:** _____

ROS	Normal	Abnormal
HEENT		
Neck		
Lungs		
Heart		
Abdomen		
Skin		
Genitourinary		
Musculoskeletal		
Neurological		
Other		

Medically verified diagnosis of Varicella (Chicken Pox), date? _____

Medical conditions? _____

Medications? _____

Special dietary requirements? _____

Other special needs? : _____

Allergies? : _____

Describe any abnormalities or other pertinent information? _____

Signature of MD, PA-C, NP, DO: _____

Please print or stamp MD, PA-C, NP, DO name: _____

Address: _____

Phone: _____ Fax: _____

***The immunizations listed below are Mandatory * for attendance at Butler University.
A copy of your original immunization record is required for verification.***

***Mandatory**

***DPT primary series completed (5)**

- ✓ TD or Tdap Adult booster dosage must be within last ten years.

*** Tdap, One is required prior to coming to campus. (1)**

***Hepatitis B, series required (3)**

- ✓ A series of three shots is required -- must have *started* series prior to arrival on campus.
- ✓ May provide proof of serum immune titers

***Varicella (Chicken Pox) (2)**

- ✓ Must provide dates of immunizations (a series of two injections).
- ✓ If the date of the actual illness is provided it must be verified by medical professional.
- ✓ May provide proof of serum titer immune results.

***MMR (Measles, Mumps and Rubella) (2)**

- ✓ Dates for 2 doses.
- ✓ Proof of confirmed disease, with verified date provided by medical professional.
- ✓ May provide proof of serum titers immune results.

***TB Questionnaire required, available online MyHealth.Butler.edu Portal**

***TB Skin Test (Tuberculin) for International students**

- ✓ TB skin test may be required based upon responses to TB Questionnaire (if required, our staff will contact you).
- ✓ If you are an International student.
- ✓ **NOTE:** If you have had a positive TB skin test in the past we will need a copy of the TB test result and a copy of the chest x-ray report if completed as a part of a TB work up/evaluation/treatment.

***Meningitis (2)**

- ✓ This is a requirement for all incoming freshmen students or transfer students.
- ✓ Two doses

Recommended

Polio provide dates of primary series (3-5), would have been required, important for students that may be traveling abroad

Hepatitis A, students traveling abroad

- ✓ Requires 2 immunizations.

HPV for men and women

- ✓ Requires 3 immunizations.

Flu

- ✓ Annually

COLLEGE OF PHARMACY AND HEALTH SCIENCE (COPHS) STUDENTS

- ✓ You will be required to have a two-step TB skin test prior to your clinical rotation, followed by annual screening.
- ✓ You will be required to have a Flu shot annually during clinical rotations.
- ✓ Up to date immunizations, including a Tdap. <http://www.immunize.org/catg.d/p2017.pdf>
- ✓ You may be required to have a serum titer to check your immune status for Varicella, Rubella, Rubeola, Mumps and Hepatitis B and Hepatitis C Antibodies prior to clinical rotations.
- ✓ If you are currently working in an health care environment please check and see what has already been required as an employee, obtain those records and provide to BUHS

NEXT FOR ALL STUDENTS

- You can complete your Health History, TB screening questionnaire, find other forms and schedule appointments using the online student health portal <https://myhealth.butler.edu>
- Should you have any questions or concerns, please feel free to call (317) 940-9385.
- Your immunization record and physical exam can be faxed or mailed to the address below.
- You can also scan your records and email to healthservices@butler.edu
- If you need a physical exam you can schedule when you get to campus, schedule an appointment and our medical providers can complete this at Health Services.
- If you need immunizations many of these can be provided at Health Services.
- Be sure to complete your medical history and TB screening questionnaire on the <https://myhealth.butler.edu>

Health Insurance is Mandatory go to <http://www.butler.edu/health-services/student-health-insurance/> for information.

Thank You

**Butler University Health Services, HRC
530 W. 49th Street, Suite 110, Indianapolis, Indiana, 46208
Telephone: (317)-940-9385 Fax (317)-940-6403
BU Be Well
<http://www.butler.edu/wellness/>**

Butler University immunization requirements are based on Indiana State Law requirements, recommendations from the American College Health Association, and the Center for Disease Control.