

## Saddleback College Medical Assistant Program Fall 2024

### Important Dates:

#### **Requirement Due Date- Thursday, July 18th**

If not ***ALL*** requirements are turned in by the 18th, you ***MUST*** attend the Clinical Compliance Day Clinical Compliance Day/Open Skills Lab- Thursday, August 8th  
Mock Interviews- TBA (September)

*Continue to check the website for updated dates.*

### Student Externship Requirements:

- Cover Letter** <https://www.saddleback.edu/jobs/Resumes-Cover-Letters>
- Resume** <https://www.saddleback.edu/jobs/Resumes-Cover-Letters>
- Thank You Letter**
- Physical** (from Student Health Center, personal provider, or clinical compliance day)
- Program Verification Clearance Letter** (you will receive this once all health requirements have been submitted to the Student Health Center.)
- Background Check** (Castlebranch) - the search will go back a minimum of seven years for county, state, and federal offenses in all counties you have lived, worked, and/or studied. Address verification, sex offender database, Office of Inspector General, and Social Security Number verification and trace will all be included.
- Drug Test** (Castlebranch)
- Malpractice Insurance** (HPSO)
- American Heart Association Basic Life Support (BLS) certificate**
- Saddleback College Student ID Card** - A name badge (student ID) is required to be worn each day of your externship
- Saddleback.edu email address** (change school of record if originally enrolled at IVC)
- Proof of Personal Health Insurance**
- FERPA Release Form**

**If any of the items above are incomplete, you will NOT be allowed to enroll in MA217. In such cases, you will need to defer to the following fall semester.**

**\*\*\*MAKE COPIES OF ALL DOCUMENTS\*\*\***

## **PHYSICAL EXAMINATION**

A physical examination is required before we will assign you to an externship site. There is a section for you to complete on the physical form BEFORE seeing a physician.

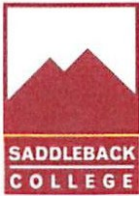
The Student Health Center must sign off on the last page even if you had your physical done at a different medical office. The Student Health Center will keep your physical information on file in their office. **MAKE AN APPOINTMENT TO HAVE YOUR FORM SIGNED AT THE STUDENT HEALTH CENTER. 949-582-4606.** *Make copies off all your documents to keep before you turn everything in to the Student Health Center.*

If you do not have your own physician, call the Student Health Center to make an appointment at **949-582-4606**. They will be happy to do your physical here on campus.

If you do not have a local physician and are unable to complete your physical examination at the Student Health Center, you may contact the following clinics for a low cost physical examination for Saddleback College students, no appointment necessary for either site.

South Coast Family Medical Center, 25500 Rancho Niguel Rd, #100 Laguna Niguel, CA 92677. 949-643-0500. M-F 8:00am-6:00, S-Su 9:00am-4:00pm. Cost for physical is approx. \$35

\*see following THREE pages



## SADDLEBACKCOLLEGE

### Student Health and Wellness Center

28000 Marguerite Parkway SSC I77 • Mission Viejo •  
92692-3635 Phone 1-949-582-4606 • Fax 1-949-582-4227  
Telehealth: <https://studenthealth.saddleback.edu>

### **MANDATORY HEALTH ASSESSMENT AND IMMUNITY STATUS REQUIREMENTS FOR HEALTH SCIENCE PROGRAMS**

#### **Instructions to Obtain a Program Verification Clearance Letter:**

- It is **necessary** for you to submit copies of **ALL** of your required medical records to the Student Health Center for review prior to uploading it Castle Branch or eValue to receive a Program Clearance Letter for admission into any health science programs. The Student Health Center secures all documentation in your electronic medical record. Allow up to 24 hours once we receive all documents to receive your program clearance.
- First make an in person or Telehealth visit at <https://studenthealth.saddleback.edu> with the RN to review requirements, your options, and answer any questions you may have. (You must apply to Saddleback College and have an active Saddleback College email and Student ID to make an appointment with the Student Health Center).
- Proof of immunity may take several months to complete depending upon your initial titer lab results so have the titers drawn immediately. You must complete the requirements by the due date provided by your Program Chair. Refer to your program Handbook for completion due dates.
- **These requirements can be completed at the Student Health Center or with your Health Care Provider. However, if you complete them with your healthcare provider you MUST make an appointment with the Student Health Center RN for the Program Verification Clearance Letter. Copies of all immunization/ titers/physical records will be required.**
- Accepted students are encouraged to review the program technical standards with their health care provider when completing this form.
- You can access your digital vaccine record on the CAIR website at [myvaccinerecord.cdph.ca.gov](http://myvaccinerecord.cdph.ca.gov)

#### **Required Laboratory Tests:**

You **MUST provide documentation of immunity** to the following diseases by blood testing (positive titer) results - titer results do not have an expiration date:

- Measles (Rubeola)
- Mumps
- Rubella
- Yaricella
- Hepatitis B

#### **Required Tuberculosis (TB) Screening- (Either TST, IGRA or Chest X-ray): \*** **Health Science Programs are required to provide current Annual Negative TB Proof.**

- Two-step TST (tuberculin skin test) = (2 TST's minimum of 1 week apart, which is 4 visits): is required if you have not had a TST skin test within the past year.  
OR
- One-Step: Proof of two negative TST's *in the past 2 consecutive years*  
OR
- Proof of a current negative QuantiFERON Gold or T-Spot blood test  
OR
- Proof of a current negative TB chest X-Ray

#### **Immunization with the following vaccines are required.**

- TDAP, COVID & Seasonal Flu Vaccines

Hospitals require the seasonal flu shot. IF you decline, you must wear a mask at all times while providing patient care from Oct 1st through March 31st. Any declination will result in a not-cleared status and will require you to meet with the department chair/dean to determine if you can be placed and proceed in the program.

Physical exams are required by a licensed health care professional. You must provide documentation of immunity to the following diseases by blood test (titer) results. If you are in need of any immunizations or titers you may obtain them at the Student Health Center. The costs are listed below. A checklist is also included for you to use as a guide.

Vaccines		Blood Tests	
Tuberculin Skin Test (TST)	\$20	QuantiFERON gold	\$55
TDAP I dose in the past 10 years (8 years for RN students)	\$75/dose	None	<b>NIA</b>
MMR (2 doses in lifetime, minimum of 30 days apart)	\$85/dose	MMR titer	\$50
Varicella (2 doses in lifetime, Minimum of 30 days apart)	\$175/dose	Varicella titer	\$20
Hepatitis B (3 doses over a 6- month period in lifetime)		Hepatitis B titer	\$15
Hepatitis B (2 doses over a 2 month period in lifetime)	\$135/dose Heolisav-B		
Seasonal flu shot	\$20		
Physical exam	\$20		

**Checklist for Required Documentation:**

- Physical exam completed by a licensed healthcare provider.
- TST: 2 current negative TST within the past year OR 2 negative TST in the past 2 consecutive
- years OR a negative QuantiFERON Gold/T-Spot blood test
- D OR current negative TB chest x-ray
- (\*Has to last through the current semester, except RN and MLT students-has to last through the full year).**
- D Measles (Rubeola), Mumps, Rubella (MMR): Proof of immunity via blood test (titer).
- D Varicella: Proof of immunity via blood test (titer).
- Hep B: Proof of immunity via blood test (titer).
- TDAP: I dose in the past 10 years (\*8 years for RN students).
- Seasonal flu vaccine
- COVID vaccine (Primary Series with Booster OR Bivalent only OR current Monovalent only)

Some financial costs may be available through the Financial Aid office if you have completed a FAFSA and/or through Saddleback College C.A.R.E. Center by contacting them at 1-949-348-6410.

**Attention Veterans:** If you are using your G.I. Bill education benefit, the VA will pay for your required health assessment and vaccines at the Saddleback College Student Health Center. Contact the Veterans Office at 1(949) 582.4870 **prior** to scheduling your appointment. You will not be reimbursed if you pay for the health assessment or vaccines before contacting the Veterans Office.



Saddleback College Health Science and Human Services  
Physical Evaluation and Recommendation

Applicant Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

**To the Applicant - Complete the Medical History below BEFORE your appointment:**

Have you ever had or do you currently have?	NO	Yes (explain)
Impaired hearing		
Impaired vision		
Shortness of breath on exertion		
Pain, pressure or tightness in the chest		
Fainting spells, dizziness or blackouts		
Excessive weakness or fatigue		
Epilepsy or seizures		
Severe depression and/or anxiety		
Addiction to narcotics, alcohol or other illegal drugs		
Low back pain or a "slipped disc"		
Joint pain		

**Medical Documentation: To Be Completed by Medical Provider ONLY**

Vision: OD 20/\_\_\_\_ OS 20/\_\_\_\_

Check one:  Corrected  Uncorrected

Areas evaluated	Normal	Abnormal/Findings
Eyes		
Ears, Nose, Throat		
Heart, Lungs		
Spine		
Range of Motion: Back/Extremities		
Neurological Status		
Emotional Status		

**Check one:**

- I certify this student meets the physical standards described in the attached Program's Technical Standards and Instructions for Physician or other Licensed Healthcare Provider and is qualified for participation in the Saddleback College Health Science and Human Services Program.
- I recommended the following disability related accommodations: \_\_\_\_\_
- Conditionally qualified for program placement. Student must obtain written medical clearance from a private Licensed Healthcare Provider or specialist for the following reasons: \_\_\_\_\_
- Not qualified for program placement for the following reasons: \_\_\_\_\_

**\*\*Provider's Signature and Date\*\***

I hereby authorize release of all records of my examination to the Health & Wellness Center at Saddleback College

Provider's Office Stamp

Applicant's Signature

**DO NOT FORGET THE LAST STEP OF THE HEALTH CLEARANCE**

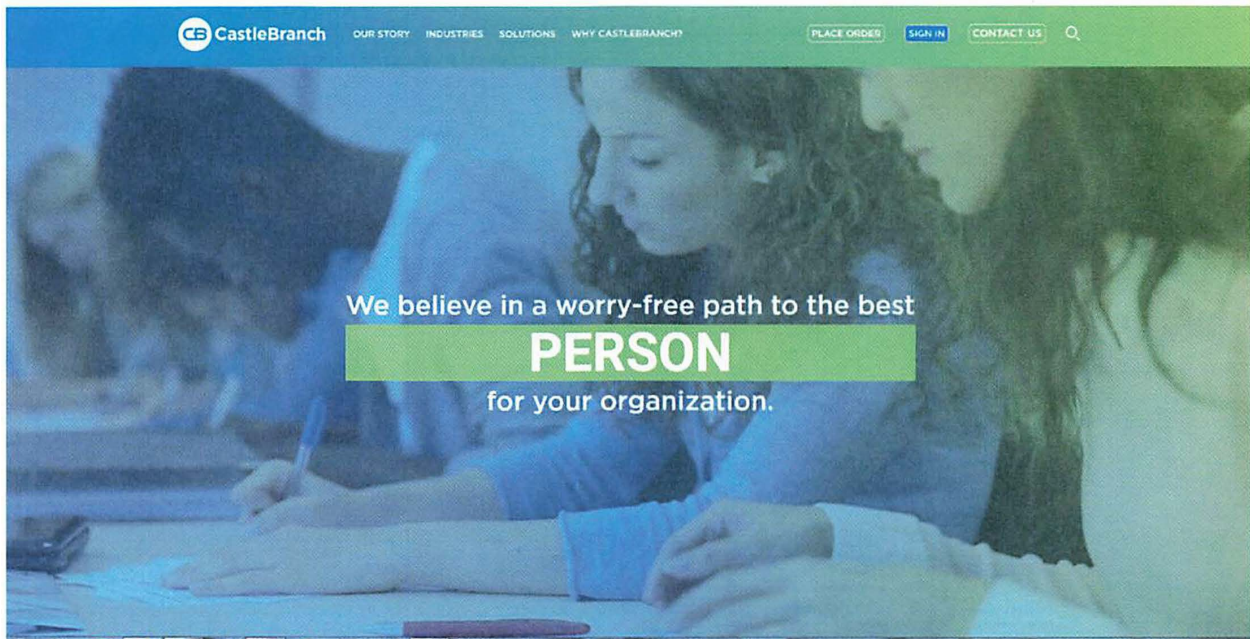
Once the preceding three pages are completed and signed by your provider, schedule an appointment with the [Student Health Center](#) to submit the paperwork and obtain your Program Verification Clearance Letter. The health clearance process is only finalized upon receipt of the program verification. Make sure to upload both the program verification and all required health documents to Castlebranch.

## BACKGROUND CHECK & DRUG SCREENING

Your results will be good for 12 months; for some reason if you pass that expiration point you will need to redo this. We CANNOT accept any other background/drug test you may have recently done. Allow 5-7 days for electronic results.

You will need to complete your background check & drug screening on-line at [www.castlebranch.com](http://www.castlebranch.com). Follow the steps provided for you in this packet.

1. CastleBranch.com
2. Click "Place Order"
3. Enter package code "DJ15" AND "DJ15im" (\$135)
4. Agree to Terms and Conditions
5. Enter Personal Information and click "next"
6. Create Username and Password and click "create account"
7. From here, you will follow prompts for steps 3 through 8





Saddleback College – Medical Assisting  
Instructions for Order Placement

## Welcome to myCB!

When you place your initial order, you will be prompted to create your secure myCB account. From within your myCB, you will be able to:

- ✓ View your order results
- ✓ Upload and store important documents and records
- ✓ Manage requirements specific to your programs
- ✓ Place additional orders as needed.
- ✓ Complete tasks as directed to meet deadlines

To place an order, go to [mycb.castlebranch.com](http://mycb.castlebranch.com)

In the “Place Order” field, enter the following package code specific to your organization:

Username Password Login  
Forgot Password?  
Place Order Package Code

**DJ15** – Background Check & Drug Test \$94.74  
~~DJ15bg~~ – Background Check Only \$52.75  
~~DJ15dt~~ – Drug Test Only \$42.00  
**DJ15im** – Compliance Tracker Only \$38.00

During order placement you will be asked for personal identifying information needed for security or compliance purposes. Supplying accurate and comprehensive information is important to the speed in which your order is completed.

The email address you use when placing your order will become your username for your myCB and will be the primary form of communication for alerts and messages. Payment methods include: MasterCard, Visa, debit card, electronic check, money order, and installment payment.

### TO-DO LISTS

You can respond to any active alerts or To-Do List items now, or return later by logging into your myCB. You will receive alerts if information is needed to process your order. Access your myCB anytime to view order status and completed results. Authorized users at your organization will have access to view your compliance status from a separate CastleBranch portal.

Your myCB Service Desk is available to assist you via phone, chat and email  
Monday-Thursday 8:00 a.m.-8:00 p.m. & Friday 8:00 a.m.- 6:30 p.m. & Sunday 10:00 a.m.- 6:30 p.m.  
888-723-4263 or [servicedesk.cu@castlebranch.com](mailto:servicedesk.cu@castlebranch.com)



# WE'RE HERE FOR YOU!

We know your schedule is packed and your time is **valuable**, so we offer several ways for you to **get in touch with us**.



## FAQ VIDEOS/PDFs

Our **video FAQ library** covers a range of topics designed to pinpoint students' most frequently asked questions. Each video is a 30-second snippet, quickly giving you the information you need. The most frequently watched videos sort to the top of the list, making them easy to find.

**Not a fan of videos?** Instead you can read our FAQs in a written format.

## SUBMIT SUPPORT INQUIRY

You can log into your **myCB** account to submit an inquiry. Log into your **myCB** account and select "**Need Help**" in the upper right corner, then choose "**Submit Support Inquiry**" from the drop-down menu. Our student help desk will reply within two days, including on Sundays. *(Yes, we're here on Sundays, too!)*



## EMAIL

Email our student help desk at **studentservices@castlebranch.com**. We'll respond within two business days, including Sundays.



## LIVE CHAT

From **8 a.m. to 3:45 p.m. ET, Monday through Friday**, our student help desk experts are available through live online chat.



## CALLBACK

When you reach our **student help phone line**, you have the option to leave your phone number, entering it into a call-back queue. One of our help desk experts will call you back before the end of the day. No need to wait on hold.

## LIABILITY INSURANCE

Go to [www.HPSO.com](http://www.HPSO.com) to apply immediately online. I need a copy of your Certificate of Insurance. The annual cost is approx. \$25.00. HPSO.COM

1. Click "Apply Now"
2. Click "Professional Liability Insurance Quick Quote"
3. Select "Individual"
4. Enter "California," "Medical Assistant," select "Student"
5. Select "Complete Online Application" and follow prompts

**HPSO** 1-800-882-8491 [Apply Now](#) [Renew Now](#) | [My Account](#) | [Contact Us](#)

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### Quick Quote for Individual Professional Liability Insurance

[Home](#)  
➤ [Quick Quote](#)

#### Quote Details

Total Due (Annual premium + fees)	<b>\$25.00</b>
State:	California
Profession/Area of study:	Medical Assistant
Employment Status:	Student
Recent graduate:	No
Limits of liability:	\$1,000,000 / \$3,000,000
Annual Premium:	\$20.00
Healthcare Providers Service Organization Purchasing Group Membership Fee <small>(3)</small>	\$5.00

[Read more about the coverage offered](#)  
(This link opens in a new window, so you will not need to re-enter your information if you want to continue to apply.)

- Do you have all the coverage that you need for your non-medical activities? [Click here](#) to learn more.

◆ Healthcare Providers Service Organization is proud to have been selected as the preferred provider of professional liability insurance by more than 30 associations.

#### Two Ways To Apply

[Complete Your Online Application](#)

**Processing Time:** If you choose our online application process, you can receive your Certificate of Insurance (proof of coverage) within one business day of your application approval.

**Payment:** To use this option, payment via credit or debit card, in your name, is required at the time of the application. (Because this online transmission does not allow for your actual signature, your credit card acts as your signature. Therefore, the credit or debit card used for payment MUST be in your name.)

[Click here](#) to read about secure transactions with HPSO.

[Complete Your Paper Application](#)

Complete the application online, then print a copy and submit it to our office via mail or fax.

**Processing Time:** Your application will be processed within 7 - 10 days of receipt. If you need to receive proof of coverage in a more timely fashion, select the Online option above and e-billing on the application that follows.

**Payment:** You can submit a check or credit/debit card information with your application, or receive a bill after your application is processed. (Bill Me Later option not available for students.)

Rates, limits and coverage may vary based on state, profession, and employment status.

## HEALTHCARE PROVIDER CPR CARD

Only the "Healthcare Provider" card through the American Heart Association is accepted.

Meets from: 4/22/2024 to 5/5/2024

TICKET	SEAT COUNT	DAY	TIME	LOCATION	INSTRUCTOR	INFO
21110 <span>OPEN</span> ADD TO CART	Open Seats: 26	TBA	8.30 hrs/week	HS 112	M. Wolff	DETAILS BOOKS

**LOW TEXTBOOK COST** Total textbook cost is \$40 or less.

Hybrid: Asynchronous Online & Face to Face on Campus. (On campus for 1 Saturday, from 8:30 - 5:00 pm on 5/4 in HS 112)

If you do not already have your CPR card and you cannot get into the class here at Saddleback, we recommend Lifeline Healthcare Education.

Location:

Lifeline Healthcare Education  
27601 Forbes Road  
Suite #20  
Laguna Niguel, CA 92677

Phone: (949) 247-0247

Email: [lifeline@lifelinecpr.com](mailto:lifeline@lifelinecpr.com)

<http://www.lifelinecpr.com/>

*There are multiple locations all around Orange County. The one listed above is the closest one to the college.*