



Student Health Services
 Student Faculty Center, Lower Basement Rm. 43
 3340 N. Broad Street
 Philadelphia, PA 19140

Phone: (215) 707-4088
 Fax: (215) 707-2708
 Web: <https://studenthealth.temple.edu/>

Dear Health Science Campus Student,

Welcome to Temple University! This letter provides information and instructions regarding the Student Health Services requirements for our Health Sciences Students. Included with this letter are two forms: an **Immunization Record** and a **Physical Form**. Please take these forms to your healthcare provider for careful review and completion as soon as possible and send them, with a copy of your childhood immunization forms, **in English**, to the address listed at the bottom of this letter. Please note that **laboratory reports are required with quantitative titer/antibody results**. If your insurance will not cover the titer/antibody testing, they can be drawn at Student Health after you arrive on campus (please see our website for pricing information.) If you are unable to get a physical, you can schedule one at SHS once you arrive on campus (please see our website for pricing information.)

In addition, you are also asked to provide the date of your last Tetanus/Diphtheria/Pertussis (TDAP) booster, which must be within the past ten years. Finally, you are required to have a Tuberculin Skin Test (PPD). If you have a history of a positive PPD, please provide all relevant documentation, including a copy of your most recent IGRA blood test and/or chest X-Ray results.

Meeting these requirements is an important first step before you matriculate at Temple University to protect your health and the health of your patients. If you have any questions or concerns, please call John Thomas, RN at (215) 707-4088. **Please complete these forms fully, with appropriate documents attached, and submit them to the address below by AUGUST 7, 2022. Keep a copy for your records.**

Once again, **WELCOME TO TEMPLE UNIVERSITY!** We look forward to assisting you in this new endeavor!

You can use the below checklist to keep track of your requirements.

<u>Requirement</u>	<u>Completed</u>
Completed Pre-Matriculation Physical Form	_____
Childhood Immunization Records	_____
TDAP Booster (within the past 10 years)	_____
Tuberculin skin test (PPD)	_____
<u>Lab Reports with Quantitative Results for:</u>	
**Hepatitis B Antibody Titer	_____
**Measles Antibody Titer	_____
**Mumps Antibody Titer	_____
**Rubella Antibody Titer	_____
**Varicella Antibody Titer	_____

****ALL TITER RESULTS MUST BE QUANTITATIVE; QUALITATIVE RESULTS WILL NOT BE ACCEPTED****

Please send all of the attached forms to:

John Thomas, RN
 Temple University Student Health Services – HSC Campus
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 Philadelphia, Pa 19140