ENTERING YOUR IMMUNIZATIONS ONLINE

Please obtain any needed immunizations, complete this form with your medical provider (*keep a copy for your records*) and follow the instructions below to electronically enter your immunization record. **PLEASE NOTE YOU WILL ONLY BE ABLE TO ENTER IMMUNIZATION INFORMATION AFTER YOU HAVE REGISTERED FOR CLASSES.** Go the Student Health Center Web site (<u>www.american.edu/healthcenter</u>)

- 1. Find the yellow "Schedule Your On-line Appointment or Enter Your Immunization Information" Link
- 2. Click on Register. You will be asked to read and agree to the Terms of Use and check that you understand that the on-line system is not monitored 24 hours a day and is not to be used for emergencies. Click "Next" to continue.
- 3. Enter your 7 digit AUID and birth date and click next to continue. (Please remember you will not be able to register for the system until you have registered for classes).
- 4. Create a user ID and password that is between 6-12 characters long. You cannot use special character. Click "Next" to continue.
- 5. Update and verify your campus address, permanent address, and emergency contact information. Click Update to verify all information is accurate. If you find any discrepancies, go Back to make corrections.
- 6. Click on Immunization Records (Please note your status will show that you are Not Compliant until you submit the necessary documentation to prove your immunizations to the Student Health Center.)
- 7. To add a new immunization select "Add New". You will enter immunizations for Hepatitis B Dose 1, Hepatitis B Dose 2, Hepatitis B Dose 3, MMR Dose 1, MMR Dose 2, Varicella 1, Varicella 2 (or titer results proving immunity) and Tetanus (or Tdap) and Meningitis.
- 8. Select the immunization you wish to enter from the drop down list.
- 9. Enter the month, day, and year when you received the immunization.
- 10. For result, select "No Result Required."
- 11. Indicate whether the immunization was received within or outside the United States.
- 12. When you have finished entering the details of the immunization, click "Enter".

If you do not have the dates that you have been immunized, but have titer results proving your immunity you will follow the same steps as above, except you will select the titer that corresponds with the immunization. For result, you will select "Positive."

IF YOU HAVE NOT RECEIVED THE VACCINATION FOR VARICELLA, BUT HAD THE DISEASE YOU WILL BE REQUIRED TO SUBMIT TITER RESULTS.

If you have not received the Meningitis vaccination and wish to submit a waiver stating that you are aware of the risks associated with the disease, please complete the Waiver for Meningococcal Vaccination (included in this packet) and enter the following on-line:

- 1. Select "Add New".
- 2. Click on the bubble marked "Waiver"
- 3. Select Meningoccocal from the Immunization Drop Box
- 4. Select "Signed Waiver" from the Waiver Drop Box.
- 5. Select "No" from the Has Expiration Drop Down Box.
- 6. Click on "Add"

Once you have completed entering all of the required immunizations, please keep a copy of the attached form for your records, and mail the completed form to the address below. Please do not fax the records as they often become illegible during fax transmission.

American University
Student Health Center
4400 Massachusetts Avenue, NW
McCabe Hall
Washington, DC 20016-8036

The Student Health Center WILL NOT accept copies of immunization forms. The Mandatory Immunization Form is the only form that will be accepted as proof of vaccination.

If you have any questions, please contact the Student Health Center at 202.885.3380.