VMI INFIRMARY INSTRUCTIONS FOR MEDICAL REQUIREMENTS

FOR CONDITIONALLY APPOINTED APPLICANTS

Please DO NOT upload medical forms to VMI Admissions. All medical forms MUST BE uploaded through the Medicat Portal at https://vmi.medicatconnect.com for the VMI physician to review.

STEP 1: REGISTER YOURSELF IN THE MEDICAT PORTAL

- Click the REGISTER button to create your username.
 - a. Once you've clicked SUBMIT, you will receive an email with a link to create your password.

IMPORTANT NOTE: The email to set up your password will be sent to the email you used to apply to VMI. If you do not receive an email within 24 hours, please check your junk or spam folders first and then contact the VMI Infirmary at 540-464-7218 or infirmaryadmin@vmi.edu if you need further assistance.

- Create your password. Your password MUST include:
 - A minimum of 5 characters
 - A special character
 - A mix of letters and numbers
 - A mix of upper and lower case

STEP 2: COMPLETE REQUIRED FORMS ACCORDINGLY

All required medical forms can be found on the <u>Required Forms After Appointment webpage</u> on VMI.edu, and these forms will also be mailed to each conditionally appointed applicant.

IMPORTANT NOTES:

- Submission of all VMI medical forms is required before a medical decision can be rendered and a full reservation obtained. Do not delay on setting up an appointment with your health care provider to complete the required forms. Completed medical forms are reviewed by the VMI physician for a medical decision.
 - o If it is determined that you do not meet VMI fitness standards, your \$300 deposit will be refunded.
- Each item on ALL forms MUST be completed, and any positive answer on the online "VMI Health History" or "Physical Examination Form" must be fully explained. This is necessary not only for evaluation of your ability to meet VMI fitness standards, but also to assist our Infirmary Staff should you become ill or injured during your cadetship.
- Failure to report previous physical ailments or defects will be grounds for termination
 of your cadetship with forfeiture of appropriate tuition and fees. Additionally, a cadet
 who, because of a recurrence of a pre-cadetship disorder, is not able to participate fully,

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safely, and successfully in all aspects of cadet life will be re-evaluated to determine his or her suitability to continue as a cadet.

- Similarly, providing inaccurate or misleading information on any medical form is a basis for denial of admission at matriculation, and termination of your cadetship if discovered in later years.
- It is your responsibility to report any new illness or injury that occurs AFTER submitting your medical forms.
- Medical Forms that need to be completed by Health Care Provider:

A signature from the health care provider is required on **EACH** form below.

- ✓ Physical Examination Form
- ✓ Body Fat Measurement Form
- ✓ Immunization Record
- ✓ Medical Release (Certificate of Understanding) Form
- **▶** Medical Forms Completed by Conditionally Appointed Applicant:
 - ✓ Online VMI Health History (Complete within Medicat Portal.)
 - ✓ Cadet Health Insurance Form

(More details about each form in the Medical Records Checklist - Page 3)

IN THE MEDICAT PORTAL

https://vmi.medicatconnect.com

Once logged in:

- 1. Select "Forms" to complete your Online VMI Health History
- 2. Select "Immunizations" and manually enter the dates from the immunization Form completed by your health care provider.
 - a. **IMPORTANT NOTE:** This step is required in addition to uploading the **Immunization Record**
- 3. **Upload** your completed medical forms (from Step 2):
 - a. Physical Examination Form
 - b. Body Fat Measurement Form
 - c. Immunization Record
 - d. Medical Release Form
 - e. Cadet Health Insurance Form
- 4. Select **Insurance**, enter your insurance company information and upload copy (or photo) of both sides of your health insurance card.

VMI INFIRMARY MEDICAL RECORDS CHECKLIST

FOR CONDITIONALLY APPOINTED APPLICANTS

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MEDICAL FORMS THAT NEED TO BE COMPLETED BY HEALTH CARE PROVIDER: A signature from the health care provider (MD/DO/NP/PA) is required on **EACH** form below. □ Physical Examination Form o ALL SECTIONS MUST BE COMPLETED (INCLUDING VISION) Blood pressure and pulse MUST be recorded o Physical MUST be preformed within six (6) months prior to submission of this form Health care provider signature required **Body Fat Measurement Form** Required for ALL conditionally appointed applicants There is a male and female measurement illustration available online Health care provider, Certified Fitness Professional or High School Athletic Trainer signature required Immunization Record o Immunizations MUST be recorded on VMI form o Tdap MUST be within last 10 years COVID Vaccines are highly recommended o Health care provider signature required ☐ Medical Release (Certificate of Understanding) Form Every signature required: Conditionally appointed applicant Parent/Guardian (even if applicant is over 18) Health care provider MEDICAL FORMS COMPLETED BY CONDITIONALLY APPOINTED APPLICANT: □ Online VMI Health History o Complete within Medicat Portal; not a paper form Follow instructions from page 2 under IN THE MEDICAT PORTAL section □ Cadet Health Insurance Form • Parent/Guardian signature required (even if applicant is over 18) Copy (or photos) of the front and back of current health insurance card required as well. Upload with completed form **RECOMMENDATIONS:**

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while you are at VMI.

ARE NOT covered by your parent's health insurance policy.

1. It is strongly recommended that you purchase a personal health insurance policy if you

2. If you ARE covered by your parent's policy, check to make sure your current plan provides coverage while you are at VMI. Frequently, HMO type plans require referrals from.

Primary Care Physicians or care from an in-network provider which may not the possible