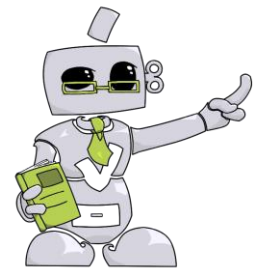




## Complio – Review Standards



***WARNING: Please make sure to review this document carefully. Failure to submit documentation that meets the required criteria may result in rejection and delay your overall compliance.***

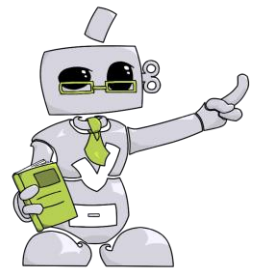
ADB Standardized Information/Documentation:

- Typeset/Stamped name of provider (Not required on Chamberlain-specific forms)
- Student name
- Service/Immunization name
- Service date
- Provider signature/stamp if document has a signature Field

Item Type	Must Include
<b>PPD</b>	- ADB Standardized Information/Documentation <ul style="list-style-type: none"> <li>• Read Date</li> <li>• Document lists positive/negative result</li> </ul>
<b>Quantiferon TB Gold Test</b>	- ADB Standardized Information/Documentation <ul style="list-style-type: none"> <li>• Document lists positive/negative result</li> </ul>
<b>T-SPOT</b>	- ADB Standardized Information/Documentation <ul style="list-style-type: none"> <li>• Document lists positive/negative result</li> </ul>
<b>Chest X-Ray</b>	- ADB Standardized Information/Documentation <ul style="list-style-type: none"> <li>• Document indicates normal OR no evidence/no active disease</li> </ul>
<b>TB Clearance Note or TB Questionnaire</b>	<ul style="list-style-type: none"> <li>• Student Name</li> <li>• Date</li> <li>• Statement which references TB symptoms OR TB Clearance OR TB Screening</li> </ul>
<b>Shots</b>	- ADB Standardized Information/Documentation <ul style="list-style-type: none"> <li>• Combined shots can be used to fulfill requirement of individual diseases as long as number of required shots does not vary</li> <li>• Separate instances of the following diseases: Measles, Mumps, Rubella may be used to fulfill an MMR shot requirement if all three shot dates were given on the same date</li> <li>• A shot listed as Tetanus, Diphtheria (acellular) Pertussis may be used as a Tdap</li> </ul>
<b>Titers</b>	- ADB Standardized Information/Documentation <ul style="list-style-type: none"> <li>• Must include results (Immune, reactive, positive, quantitative)</li> <li>• If quantitative must have a reference range OR qualitative result</li> <li>• For Hepatitis B, the Titer must be an IGG Titer</li> </ul>
<b>CPR</b>	<ul style="list-style-type: none"> <li>• Issuing Agency Match</li> <li>• Type Match</li> <li>• Student Name</li> <li>• Issuance Date</li> </ul>
<b>Certifications</b>	<ul style="list-style-type: none"> <li>• Matches Client Provided Certification</li> <li>• Student Name</li> </ul>
<b>Health Insurance Card</b>	<ul style="list-style-type: none"> <li>• Provider</li> <li>• Student Name or Surname</li> <li>• Front and Back of Card</li> </ul>



## Complio – Review Standards



Item Type	Must Include
<b>Card</b>	<ul style="list-style-type: none"><li>• Document borders appear to be in a 54:85 ratio</li><li>• Document has a logo</li></ul>
<b>Basic Certification</b>	<ul style="list-style-type: none"><li>• Document Lists service name</li><li>• Document Lists Student name</li></ul>
<b>Chamberlain-Specific Form</b>	<ul style="list-style-type: none"><li>• Matches Chamberlain-Provided Form</li><li>• Student Name</li><li>• All fields on the form are complete</li></ul>