

- MyChart is a secure, online portal that allows Employees and Students to access their health information from anywhere, at any time and at no cost.
- Questionnaires have been built in MyChart to assist providers with getting answers to historical health information.

## ANNUAL MEDICAL SCREENING FOR STUDENTS AND EMPLOYEES.

First, you must complete the TB Training Video in **Workday.** This annual requirement will be sent to your UAMS email address. You will click on the link to the Workday course and watch the first lesson, which is the TB training video. You will then be directed to your MyChart account where you will complete the corresponding Annual Medical and TB Questionnaire.

## **Completing a Questionnaire in MyChart**

- 1. Log into MyChart using the app or the website <u>mychart.uamshealth.com</u>
- 2. On the right-hand side of the screen, you can complete the following actions:
  - a. If you are an **Established User**, enter in your **Username** and **Password**, and then click **Sign-In**.
    - i. If you forgot your username or password, click the Forgot Username? or Forgot Password? Links under the Sign-In button to reset them.



Questionnaires in MyChart

- 3. After logging into **MyChart** click on the **Menu icon** on the **home screen**.
- 4. Search "Questionnaire" within the search field.

J	Menu	5			
Q ques		×			
5 results for your search					
Questionnaires					

- 5. Navigate to the Optional Questionnaires section.
- 6. Select the Annual Medical Screening for Students and Employees.
- 7. Users will be prompted to answer " Has your position or training program changed since your last annual medical screening?"

MyChart					
😑 Menu 💼 Visits 🖂 Messages 👗 Test Results 🔕 Medications					
Annual Medical Screening for Students and Employees only					
*Has your position or training program changed since your last employee medical screening?					
Yes No					
Continue Finish later Cancel					

8. Answer the question and click **Continue** 



■ MyChart					
Annual Medical Screening for Students and Employees only					
*Indicates a required field.					
*Do you now have possible contact with blood/body fluids?					
Do you now have exposure to Neisseria Meningitides?					
* Do you now work in areas where animals are utilized or handle animals or animal samples?					
Yes No					
*Are you now exposed to loud equipment or working in an area that requires hearing protection?					
Yes No					
*Are you now in one of the following testable positions: Clinical lab tech, MA, CCT, Nurse, Physician or Resident?					
Yes No					
Continue Back Finish later Cancel					

9. **Complete each page of the questionnaire**, clicking continue as you go. Answer the following PPE quesitons.

■ MyChart				
*Asthma, bronchitis, or COPD:				
Yes No				
*Have you been treated by a PCP for these problems?				
Yes No				
*Are you/have you taken medication (prescribed or over the counter) for any of the above problems?				
Yes No				
*Please list current medications. If none, please list N/A.				
n/a				
*Do you have any medical condition which would prohibit you from wearing PPE or working in isolated areas with restricted access?				
Yes <u>No</u>				
Continue Back Finish later Cancel				

10. Answer the **TB related questions** and when prompted, veriy that they have completed the TB training in Workday. **Click Submit**.



MyChart						
[	Unexplained cough >2 weeks?	No	🖍 Edit			
	Excessive night sweats?	No	🖍 Edit			
	In the last year, have you received a positive TB skin/blood test?	No	🖍 Edit			
	Diabetes?	No	💉 Edit			
	Chemo/Steroid Therapy?	No	🖍 Edit			
	HIV Positive?	No	🖍 Edit			
	Gastrectomy?	No	🖍 Edit			
	Cancer?	No	🖍 Edit			
	Please verify that you have completed the TB training in Workday.	Yes	🖍 Edit			
	Submit Back Finish later Cancel					

11. After hitting submit, you will **navigate back to Workday** to complete **lesson 3** to give your attestation acknowledging you completed your Annual Medical TB screening.

