

INSTRUCTIONS ON PRE-ADMISSION MEDICAL EXAMINATION Diploma in Nursing

Medical Examination Requirements

All applicants for the Diploma in Nursing must complete **Pre-Admission Medical Examination before the semester starts**, including a chest X-ray and vaccination for Hepatitis B, Chickenpox, Mumps, Measles & Rubella (MMR), Diphtheria, Pertussis & Tetanus (Tdap/DPT), and screening for Hepatitis B, C, and HIV.

Applicants must meet Ministry of Health (MOH) immunisation requirements within five months of the examination. Those with bloodborne diseases may enrol but will have restrictions on training and future practice (e.g., no exposure-prone procedures). Students must also be certified to perform patient care safely and effectively in accordance with the Singapore Nursing Board guidelines.

Steps for Medical Examination

Download the medical examination form and complete it before visiting a Singapore-registered practitioner

2. Choose one of the options below for the medical examination:

Option	Details	Cost
Recommendation Appointed Clinic: Healthway Medical Clinic	 Book an appointment via NP Registration Form from 1-21 Apr 2025. Refer to Annex A for the clinic locations and operating hours. Healthway Medical Clinic will submit scanned reports directly to the school. Students should keep hard/soft copies for safekeeping and for use during clinical training registration or verification 	 \$42 + GST (borne by students). Ngee Ann Polytechnic will fully cover the costs of subsequent vaccinations and post-screening serology tests.
Other Singapore Clinics	 Students to submit scanned reports via: Email: sch hs@np.edu.sg or In-person: Block 81, Level 7. 	All costs for medical examination, vaccinations, and screenings are borne by the student.

- 3. Documents to bring during Medical Examination
 - NRIC/Passport/FIN Pass
 - Vaccination records or Medical history proof of immunisations or infections against Chickenpox (Varicella), Measles, Mumps, and Rubella (MMR), Tetanus, Diphtheria, and Pertussis (Tdap/DPT), COVID-19
 - Singapore Citizens may access their immunization records via:
 - Health Booklet
 - National Immunisation Registry.

ADDITIONAL INFORMATION

- 1. All information is confidential and used solely to assess fitness for course admission.
- 2. Final acceptance is based on the medical examination results.
- 3. Deadlines and Compliance:
 - i. Complete the pre-admission medical examination before the semester starts.
 - ii. All required vaccinations must be completed within 6 months upon admission to the course.
 - iii. If you are unable to meet these deadlines, email the School at sch hs@np.edu.sg
 - iv. Failure to submit your medical report or complete requirements may result in delayed graduation or being deemed medically unfit for the course.
- Applicants with a history of psychiatric illness must provide a medical memo from a psychiatrist certifying fitness. All associated costs will be borne by the student.
- 5. Special Cases: Notify the School at sch hs@np.edu.sg via email if:
 - a. You are certified unfit for the course.
 - b. You are unvaccinated due to choice or medical reasons (e.g., ineligibility for COVID-19 vaccination).
 - c. You have declared any medical conditions listed in Part A of the medical form.



PART A: PERSONAL	PART	ICUL	ARS & A	CKNOWLED	GEME	ENT <	TO BE C	OMPLETED I	BY THI	E STUDE	ENTS	>
Full Name:								dentification No				
DOB (DDMMYYYY):					Gender: F / M Mobile Number:							
Home Address:	<u> </u>					Student ID:						
	Personal Medical Record Have you ever had or are you having any of these medical conditions? Tick (✓) in all the empty boxes under "Yes" or "No".											
Medical Condition	you h	aving a	any of thes Medical		Yes	No		e empty boxes Condition	under		No″. Yes	No
Active Tuberculosis			Physical		1.00	1.10	Dyslexia ³					
Uncontrolled Epilepsy			AIDS/HI\					sperger's Sync	Irome*			
Uncontrolled				Deafness				Deficit Hypera				
Hypertension							Disorder		,			
Uncontrolled Diabetes			Legal blin	dness			Hepatitis					
Uncontrolled Asthma				mpairment*				o specify):				
Psychiatric condition ¹			Vision				041010 (1	o opoony).				
*Early intervention and trans			Loss/Imp		<u>. </u>	<u> </u>						
VACCINATION HISTO		ion vo	u havo roo	aivad								
Indicate the date of the va	accinat	ion yo	u nave rec	Date of 1st do	ose	Date	of 2 nd dos	e Date of 3 rd	dose	Date of	4 th do	se
Hepatitis B												
Chicken Pox												
Mumps/Measles/Rubella	a (MMF	₹)										
Influenza												
Tetanus, Diphtheria and	Pertu	ssis (T	dap)									
COVID-19												
STUDENT DECLARATION: I hereby declare that all the information provided is true and accurate to the best of my knowledge, with no deliberate omissions. I consent to my medical examination and test results to Ngee Ann Polytechnic for application processing. I understand that false declarations may be subject to sanctions by Ngee Ann Polytechnic, including but not limited to civil action, disciplinary action, dismissal from course, forfeiture of fees, fine and other disciplinary measures. I acknowledge that I must undergo screening for Blood-Borne Diseases (BBD) i.e., Hepatitis B, Hepatitis C, HIV and undergo immunisation against COVID-19, Hepatitis B, Chicken Pox, Mumps, Measles, Rubella (MMR) and Diphtheria, Pertussis &Tetanus (Tdap/DPT) before my clinical training. I am aware that referrals may be made at the doctor's discretion, with all costs borne by me. I am aware that all prospective healthcare students must be fully vaccinated against COVID-19 with a vaccine regime recognised in Singapore. Medically- Ineligible individuals will be subjected to prevailing Ministry of Health (MOH) and Healthcare Institutions' (HCI) policies. Medically- Eligible individuals who choose to remain unvaccinated may not be able to access the healthcare and community care settings for clinical posting. This could delay the course completion. I accept that the requirements and guidelines ² applicable to healthcare staff of healthcare institutions will similarly be applicable to me as a healthcare student of Ngee Ann Polytechnic, Diploma in Nursing. I undertake to comply with such requirements and guidelines, and I understand that failure to do so may affect my ability to complete the course requirements, graduate, obtain registration and/or employment and/or fulfil my bond obligations.												
Signature of Student:								Date of Signature:				

¹ Students with history of psychiatric illnesses **must** be assessed by a psychiatrist to be mentally fit to pursue the Diploma in Nursing course and obtain a medical memo before the pre-admission medical examination.

 $^{^2\,} For\, example,\, vaccination\, requirements,\, infection\, control\, guidelines,\, workplace\, safety\, rules,\, etc.$



PART B: MEDICAL EXAM	INATION <to be<="" th=""><th>COMPLET</th><th>ED BY THE EX</th><th>AMINING D</th><th>OCTOR></th><th></th></to>	COMPLET	ED BY THE EX	AMINING D	OCTOR>	
Physical Examination Urine Analysis			Visual Acuity	<u>Visual Acuity</u>		L
Height (m)	m): Glucose:		With Glasses			
			Without Glas	ses		
Weight (kg)	: Protein:		Colour Defici	iency	Yes / No	
			Type of color			
BMI:	Blood:		(e.g., partial or full, colour deficits in red-green or blue-yellow, etc.)		ır	
(please tick "√" in the	Blood Investigatio	<u>ns</u> ng results	must be attace for Hepatitis Boty box according	, Hepatitis (
Normal	Type of Bloo		Non-	Reactive	Vaccination D	Dates /
A la	Screening		Reactive		Remarks if an	ny
Abnormal	HBs Antigen ³					
If abnormal, please specify abnormality:	HBs Antibody					
specify astronnancy.	Anti-HCV, Tot	al ³				
	Chickenpox A (Anti-VZV IgG					
	HIV Antigen ³					
	healthcare stud All students en Chickenpox, M immunity.	lents, appli rolled in Dip MR and Td	blood screening cable to all in-flio ploma in Nursino lap. An Anti-HBs	ght and new g <u>MUST</u> be v s Ab > 10mll	ly enrolled nurs vaccinated agai U/mL is accepta	ing students. nst Hepatitis B, able evidence of
	Based on the b the table below		ning results and	or vaccinati	on records, plea	ase complete
	Type of Vaccination	Number Dose/Bo Required	oster Dose	Date of 1 st Dose	Date of 2 nd Dose	Date of 3 rd Dose
	Hepatitis B	1 / 3 / N	lot Required*			
	Chickenpox	2 / Not F	Required*			NA
	*Circle wher	e appropriat	te. Not Required n	neans Preser	ice of Immunity	

³ Those who screen positive for BBD (Hep B, Hep C & HIV) should receive post-screening counselling by a registered medical practitioner. They must also accept certain restrictions to their clinical training and future practice i.e. they will not be allowed to perform or assist with exposure-prone procedures.



2. Immunity status

(To verify students' immunity status by Health Booklet record or Vaccination Record downloaded from National Immunisation Registry)

Type of Vaccination	Evidence of Immunity	Number of Dose/Booster Dose Required	Date of 1st Dose	Date of 2 nd Dose
MMR ^a	Yes / No*	2 / Not Required*		
Tdap ^b	Yes / No*	1 dose of Tdap /1 Td booster* / if not required, specify the date of last Tdap received (dd/mm/yyyy)		NA
COVID-19	Yes / No*	1 / 2 / Booster / Not Required*		
Reason for not being vaccinated or partially vaccinated				

^{*}Circle where appropriate

- a. **MMR (Measles, Mumps, Rubella):** Students without documented evidence of immunity or who have received only one dose of MMR must complete two doses of the vaccine, spaced at least four weeks apart or as advised by a physician.
- b. Tdap (Tetanus, Diphtheria toxoid and Pertussis):
 - a. A Tdap vaccination is valid for 10 years
 - b. Students who have not previously received it must take one dose.
 - c. If a Tdap dose was received 8 years ago, a Td booster is required to ensure the vaccination remains valid throughout the 3-year course.
- c. **COVID-19:** A minimum of 2 doses is required to be considered fully vaccinated against COVID-19 with a vaccine regime recognised in Singapore.

PHYSICAL EXAMINATION				
Ears:	Nose:			
Throat:	Heart:			
Pulse:	Blood Pressure:			
Abdomen & Pelvis:	Hernia or Enlarged Rings:			
Back & Spine:	Haemorrhoids:			
Skin:	Injury, Operation or Illness:			
Lungs:	Mental Disposition#: (#refer to 1 under certification of fitness by the examining Doctor)			
Ears:	Nose:			
General Physique:				
Does the student have any previous medical conditions to declar	e? ☐ Yes ☐ No			
If yes, please specify:				



CERTIFICATION OF FITNESS BY THE EXAMINING DOCTOR

Healthcare professionals are required to meet specific requirements. Applicants for the Diploma in Nursing are therefore to <u>be</u> <u>certified to have the following abilities</u> to perform patient care activities in a safe and effective manner:

- 1. Mental-Cognitive ability (interpersonal-communication ability and behavioural stability) to:
 - a) provide safe care to populations, including safety to self.
 - demonstrate emotional-behavioural stability to function under the stress and pressure when performing nursing care on patients; and
 - remain calm when being observed by instructors and other health care personnel during clinical practice attachments.
- 2. Physical ability to:
 - a) move around in the clinical environment, walk/stand, bend, reach, lift climb, push and pull, carry objects; and
 - b) perform patient transfers and complex sequences of hand-eye coordination.
- 3. **Auditory ability** to hear faint body sounds, auditory alarms and normal speaking level sounds (i.e. blood pressure sounds, monitors, call bells and person-to-person report).
- 4. **Visual ability** to detect changes in physical appearance, colour and contour, read medication/ drug labels, markings on syringes and manometers, written and electronic communication accurately.

Students with history of psychiatric illnesses **must** submit a medical memo from the psychiatrist. Students suspected to have psychiatric illnesses should be referred to a psychiatrist for further assessment before certification of fitness.

In accordance with the Singapore Ministry of Health (MOH) requirements, all Nursing students must be screened for the following blood borne diseases: • Hepatitis B • Hepatitis C • HIV

Students who are screened positive for blood borne diseases may be admitted to the Nursing courses provided they accept certain restrictions to their training and future practice i.e. they will not be allowed to perform or assist with exposure-prone procedures.

The above-required abilities are stipulated in consultation with the Singapore Nursing Board and the Ministry of Education to ensure nursing students are fit to practise when they apply for registration upon graduation from the nursing programme.

All applicants applying for Diploma in Nursing <u>MUST</u> be able to receive the four types of vaccinations (Hepatitis B, Chickenpox, MMR and Tdap) mandated by the Ministry of Health.

Certification of Fitness

The student is Free / Suffering* from organic and infectious disease.					
Remarks, if any:					
*Circle where appropriate.					
PART C: TO BE COMPLETED BY THE EXAMINING DOCTOR					
Name of Doctor:	Name & Address of Practice:				
Signature of Doctor:	Date:				



Annex A

List of Clinics for Pre-Admission Medical Examination

No	Clinic Address	Contact Number	Operating Hours Mon to Fri	Operating Hours Sat, Sun & PH	X-Ray Facilities (subject to changes)
1	Healthway Medical 95 Aljunied Crescent #01- 521 Singapore 380095	6016 5099	Mon & Wed 8:30am – 1:00pm 2:00pm – 5:00pm 6:00pm – 9:00pm Tues & Thurs & Fri 8:30am – 1:00pm 2:00pm – 5:00pm	Sat 8:30am – 1:00pm Sun & Public Holidays Closed	DX Imaging @ Eunos 160 Changi Road, Hexacube, #02-07, 419728
2	Healthway Medical Blk 717 Woodlands Drive 70 (Opposite Admiralty Mrt Station) #01-114 Singapore 730717	6364 7450	Mon & Tue 8:00am - 1:00pm 2:00pm - 5:00pm 6:00pm -1100pm Wed - Fri 8:00am - 1:00pm 2:00pm - 5:00pm 6:00pm -9:00pm	Sat & Public Holidays*** 8:00am – 1:00pm 2:00pm – 5:00pm 6:00pm – 9:00pm Sunday*** 8:00am – 1:00pm 2:00pm – 5:00pm	Woodlands Polyclinic 10 Woodlands St 31 Singapore 738579
3	Healthway Medical 452 Ang Mo Kio Avenue 10 #01-1787 Singapore 560452	6451 6558	Mon – Thurs*** 8:00am – 1:00pm 2:00pm – 5:00pm 6:00pm–9:00pm Fri*** 8:00am – 1:00pm 2:00pm – 5:00pm	Sat*** 8:00am – 1:00pm 2:00pm – 5:00pm Sun & Public Holiday 8:00am – 1:00pm	Medical Imaging Blk 422 Ang Mo Kio Ave 3 #01-2516 Singapore 560422 Ang Mo Kio Polyclinic Blk 723 Ang Mo Kio Avenue 8 #01-4136 Singapore 560723
4	Healthway Medical Blk 153 Bukit Batok Street 11 (Near St Luke's Hospital) #01-284 Singapore 650153	6567 9881	Mon - Sat 8:00am – 1:00pm 2:00pm – 5:00pm 6:00pm –9:30pm**	Sun & Public Holidays 8:00am – 1:00pm 2:00pm – 5:00pm	Parkway Radiology Blk 130 Jurong East St 13 #01-219 Singapore 600130 Bukit Batok Polyclinic
5	Healthway Medical 1 Jelebu Road Bukit Panjang Plaza #01-62 Singapore 677743	60165035	Mon & Thurs*** 8:30am - 1:00pm 2.00pm - 5.00pm 6:00pm - 9:00pm Tue, Wed & Fri*** 8:30am - 1:00pm 2.00pm - 5.00pm	Sat*** 8:30am – 1:00pm Sun & Public Holidays*** Closed	Bukit Panjang Polyclinic 50 Woodlands Road #03-02 Singapore 677726
6	Healthway Medical 90 Hougang Ave 10 #04-06 Hougang Mall Singapore 538766	63437620	Mon, Wed & Fri 9:00am – 1:00pm 2:00pm – 5:00pm 6:00pm – 9:00pm Tues & Thu 9:00am – 1:00pm 2:00pm – 5:00pm	Sat & Sun 9:00am – 1:00pm Public Holidays Closed	Hougang Polyclinic 89 Hougang Avenue 4 Singapore 538829
7	Healthway Medical Blk 18 Jalan Membina #02-08 Singapore 164018	6016 5138	Mon & Thurs*** 8.30am - 1:00pm 2:00pm - 5:00pm 6:00pm - 9:00pm Tue, Wed & Fri*** 8.30am - 1:00pm 2:00pm - 5:00pm	Sat*** 8.30am – 1:00pm Sun & Public Holiday*** Closed	Healthway Screening @ Downtown 6A Shenton Way, #03-11 Downtown Gallery, Singapore, 068815



8	Healthway Medical Blk 690 Jurong West Central 1 (Opposite Jurong Point Shopping Centre next to Boon Lay MRT station) #01-193 Singapore 640690	6792 1812 /6791 5719	Mon - Thurs*** 8:30am - 12:30pm 2:00pm - 5.00pm 6:00pm - 9:00pm Fri*** 8:30am - 12:30pm 2:00pm - 5.00pm	Sat, Sun & Public Holiday*** 8:30am – 12:30pm	Drs Lim, Hoe & Wong Radiology (Jurong Point) 1 Jurong West Central 2, JP1, #B1A-19C, Jurong Point Shopping Centre, Singapore 648886
9	Healthway Medical 10 Sinaran Drive #09-36 Novena Medical Centre Singapore 307506	6352 8696	Mon 8.30am - 1.00pm 2.00pm - 6.00pm Tue - Fri 8.30am - 1.00pm 2.00pm - 5.30pm	Sat 9.00am – 1.00pm Sun & Public Holidays Closed	Life Scan 10 Sinaran Dr, #08-02 Novena Medical Center, Singapore 307506 DX Imaging
10	Teo Clinic & Surgery Blk 352 Clementi Avenue 2, #01-111 Singapore 120352	6776 0216	Mon – Fri*** 8:30am - 12:30pm 2:00pm - 4:30pm	Saturday*** 8:30am - 12:30pm Sundays & Public Holiday*** Closed	Advance Medicine Imaging #01-02/03 Amnios, 1 Biopolis Dr, 138622 Clementi Polyclinic
11	Healthway Medical Blk 139 Tampines St 11 #01-16 Singapore 521139	6781 2281	Mon – Fri** 8:30am – 12:00pm 2:00pm – 4:30pm 6:45pm – 8:30pm	Sat & Sun 8:30am – 12:30pm Public Holiday Closed	Tampines Street 11 X-Ray Clinic (Medical Imaging) 138 Tampines St. 11, #01- 130, Singapore 521138
12	Healthway Medical Blk 101 Yishun Ave 5 #01-15 Singapore 760101	6755 1345	Mon 8:30am – 1:00pm 2:00pm – 5:00pm 6:00pm – 9:00pm Tue - Fri 8:30am – 1:00pm 2:00pm – 5:00pm	Sat 830am – 1:00pm Sun & Public Holidays 9:00am – 12:00pm	Yishun Polyclinic 30A Yishun Central 1 Singapore 768796

^{**}X ray facilities listed are the usual vendor which is tagged to the clinic. Assignment to which x ray vendor will be done by clinic, subject to availability.



Annex B

Screening and Vaccination Requirements for Nursing students in accordance with the prevailing MOH guidelines

Infectious Disease	Previous recommendations for vaccination	Latest recommendations for vaccination
Mumps, Measles and Rubella (MMR)	 2 doses; minimum interval of at least 4 weeks apart 	 If students do not have documented evidence of immunity, 2 doses; minimum interval of at least 4 weeks apart Students who only received one dose of MMR during childhood should be vaccinated with a second dose of MMR
Tetanus, Diphtheria and Pertussis (Tdap)	1 dose of Tdap, irrespective of the interval since the last dose of tetanus or diphtheria containing vaccine	 1 dose of Tdap, if students have not previously received it, followed by Td booster once every 10 years If students have previously received 1 dose of Tdap, Td booster is recommended once every 10 years
Hepatitis B	 Primary vaccination consists of 3 doses at 0, 1 and 6 months. Students with anti-HBs concentrations of <10 mlU/mL should be revaccinated with a second 3-dose series, followed by anti-HBs testing. 	 Primary vaccination consists of 3 doses at 0, 1 and 6 months All students who do not have evidence of immunity should be vaccinated with a primary 3-dose vaccination series, followed by post-vaccination serology test (anti-HBs testing) within 1-2 months after completion of the primary 3-dose vaccination series to determine the level of protective antibodies (i.e. anti-HBs ≥10 mIU/mL). Students with post-vaccination anti-HBs concentrations of <10 mIU/mL should be revaccinated with a single booster dose (followed by 2 more booster doses if there is no immune response) or a second 3-dose series, followed by anti-HBs testing within 1 to 2 months If there is still no immune response after two cycles of vaccination (i.e. primary 3-dose series followed by serological testing and an additional 3-dose series or 3 booster doses followed by serological testing), refer the non-responder to an Occupational Health physician for counselling If an immune response has been documented (i.e. anti-HBs≥10 mIU/mL), further serological testing and booster doses are not required
Varicella (Chickenpox)	2 doses; minimum interval of 4-8 weeks apart	All students should be immune or vaccinated. Documented proof of vaccination with 2 doses of varicella vaccine given at least 4 weeks apart; or Serological evidence of immunity; or Diagnosis or verification of history of varicella disease by a physician or laboratory