

Medical and Dental Instruction Guide

FORM	PURPOSE	ACTION	SEND TO ASC MEDICAL
Checklist Form MA-FRM-0009	Completed by ASC Medical for each candidate, based upon age, gender, previous deployment history, and seasonal deployment needs. Additional tests/exams may be required based on information received.	Call your Doctor/Dentist: request appointment to include any/all tests indicated on checklist. Take the checklist with you to appointments, along with the "Dear Doctor" letter (MA-FRM-0002) and have required tests completed. Falsifying and/or non-disclosure of information may result in permanent disqualification from the United States Antarctic Program.	Nothing
NSF Form 1421	"Medical Risks for NSF-Sponsored Personnel Traveling to Antarctica".	Participants WILL NOT be cleared for deployment until ASC Medical receives this form.	Read, sign and date this form. Return to ASC Medical.
Medical History NSF Form 1422	Five page medical history (long form).	Long form - Complete and take with you to your Doctor's appointment.	Return completed long form to ASC Medical.
Polar Physical Examination	Two page examination form.	This is for your Doctor to complete during your appointment.	Return completed form to ASC Medical.
Lab Work Required Required Labs Form MA-FRM-0001	Provides a list of required laboratory tests. Please follow the instructions on your checklist.	Take this form with you to your doctor's appointment. All lab results should be faxed to the ASC Medical Department. Labs must be done within six months of deployment. You must fast for 10-12 hours prior to the blood draw.	Fax lab results to ASC Medical.
HIV Consent NSF Form 1424	Explains the walking blood bank procedure and the need for HIV testing.	Take it with you to your Doctor's appointment.	Read, sign and date this form. Return to ASC Medical.
Dental NSF Form 1425	Radiographs become the property of USAP and will not be returned to you or your Dentist. Instructions for digital radiographs can be found in the "Dear Dentist" letter (MA-FRM-0003).	Complete the top portion of the Dental Examination form BEFORE your appointment. Take the "Dear Dentist" letter to your Dentist.	Return the exam form and ORIGINAL radiographs.

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<p>Eyewear Policy for Antarctica</p> <p>Form MA-FRM-0005</p>	<p>Sunglasses are a requirement in Antarctica for ASC employees.</p> <p>Form (MA-FRM-0005) details all requirements.</p>	<p>If you don't have sunglasses that block 100% of sun's ultraviolet rays, purchase sunglasses that do. Be sure to take them with you when you deploy.</p> <p>As of October 1, 2013, ASC will not reimburse employees for the cost of any eyewear (e.g.: sunglasses, prescription sunglasses, prescription safety glasses).</p>	<p>Nothing</p>
<p>Immunizations</p>	<p>Current Tetanus immunization -USAP required. Influenza Vaccination – USAP required (MA-FRM-0010). Hepatitis A & B vaccines are strongly recommended for certain positions. See checklist.</p>	<p>Consult the Centers for Disease Control and Prevention International Traveler's Hotline re: immunization for international travel at http://wwwn.cdc.gov/travel/default.aspx</p>	<p>Nothing</p>
<p>Psychological Screening - Winter Over Participants</p>	<p>Required for candidates deploying to either McMurdo or the South Pole during the austral winter (March-October).</p>	<p>Call ASC Medical at 855-300-9704 to arrange an appointment. Evaluations can be conducted in Denver, CO, and Galveston, TX.</p>	<p>Nothing</p>