



UTMB INSTRUCTIONS FOR COMPLETING MEDICAL/DENTAL FORMS

|| **STEP 1 – Complete/Sign ALL forms in the PQ Packet.**

Fill out all the mandatory fields (~15 min) in the packet. Red boxes indicate required fields.

You can save the PDF packet but you **may not** email it to UTMB (see STEP 5).

Validate your information in the forms.

Print the entire packet and sign. (Sign pages 5 & 13; initial pages 12 & 13)

Note: Incomplete packets will be returned to you and may delay your deployment!

|| **STEP 2 – Schedule/Visit your Lab Collection**

Take this packet with the “Dear Lab Collection” page to your doctor appointment in STEP 3.

Have your physician administer the required lab tests and give your results to you.

Include your lab results from your physician in this packet.

|| **STEP 3 – Schedule/Visit your Physician**

Make an appointment and visit your medical provider.

Bring your medical packet (with forms populated) to your appointment.

If you have your own lab collection kit from UTMB, send it immediately to LabCorp (STEP 2).

Collect all results from the physician. Return results with the final packet (STEP 5).

|| **STEP 4 – Schedule/Visit your Dentist**

Make an appointment and visit your dentist any time after STEP 1 is complete.

Bring your packet (with forms populated) to your dental appointment.

Dentists should provide digital X-rays on a disk or film for participants to include in the final packet. (Faxed x-rays will not be accepted)

Collect all results from the dentist. Return results with the final packet (STEP 5).

|| **STEP 5 – Package ALL forms/results and return to UTMB**

Make a copy of your packet for your personal records.

DO NOT send this packet to UTMB as an email attachment because of federal security regulations. Packets and forms sent via email will be deleted without being read.

Fedex/UPS/Express Mail or FAX your packet with any additional forms and x-rays received from your care providers. Keep the tracking number for your records. Send the entire packet to UTMB:

UTMB Health Center for Polar Medical Operations | FAX: (409) 772-3600*
Levin Hall, 5th Floor, Suite 5.527, Route 1004
301 University Blvd.
Galveston, TX 77555-1004

* X-rays cannot be faxed and must be physically mailed with your name. For verification that your packet was received by UTMB, print the confirmation page showing your entire packet was transmitted.

Email your questions to UTMB: polmedpq@utmb.edu
