



These directions will help you navigate through Vanguard School's new nursing software.

Getting Started

- Login to Magnus
- View a tutorial video
- Access [Front Desk](#) section of the site
- View and print your child's emergency medical information
- Access Magnus support through the [Need help?](#) link

Student Health Tracker

- This is your starting point
- The directions below will guide you through each step

You will then proceed through the following sections of the Student Health Tracker to complete all necessary documentation

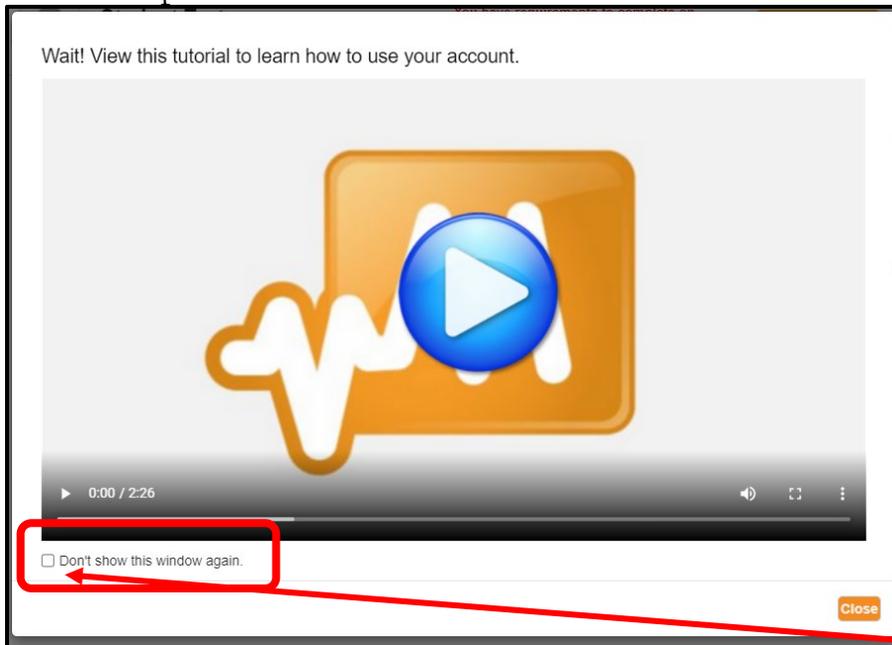
- Vital Health Record
- Annual Physical Exam Form
 - Required for students new to Vanguard School and those entering 6th and 11th grades
- Immunization Form
- Over-The-Counter Medication Form
- Asthma Action Plan Form
 - Only visible if you answered YES in Conditional Questions
- Allergy Action Plan Form
 - Only visible if you answered YES in Conditional Questions
- Diabetes Action Plan Form
 - Only visible if you answered YES in Conditional Questions
- Seizure Action Plan Form
 - Only visible if you answered YES in Conditional Questions
- Do you request that your child carry and self-administer their own prescribed medication?
- Private Hearing Screening
- Private Vision Screening Form
- Private Dental Examination
 - Required for students new to Vanguard School and those entering 3rd and 7th grades

Getting Started

1. Go to <https://secure.magnushealthportal.com/>
2. Enter your **Username** and **Password**. Click **Login**.
 - a. You will receive your username and password via email from service@magnushealthportal.com



3. Once you are logged in to Magnus, you will see a tutorial video. It is a short overview of the steps you need to complete.

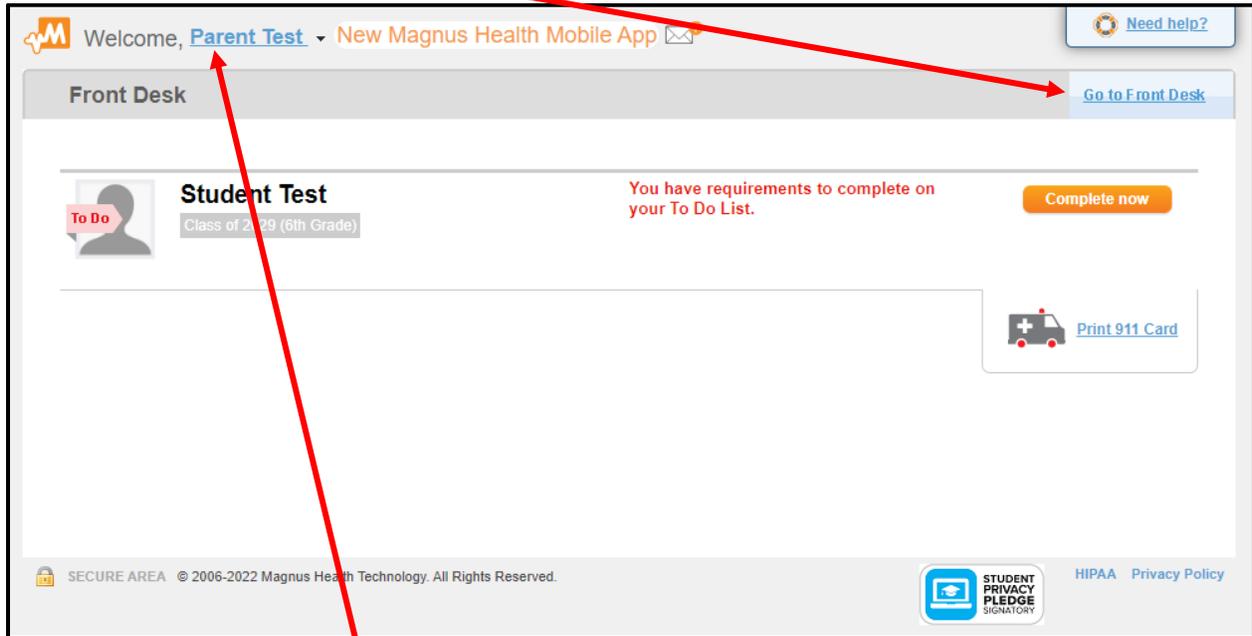


- a. Once you've watched it and feel comfortable with the steps, you can **click the box next to Don't show this window again**, and then click **Close**. Leaving the box unchecked will open the video each time you login to Magnus.
- b. You can also click the three dots to the right and download a copy of the video to your computer to view later or as many times as you need.

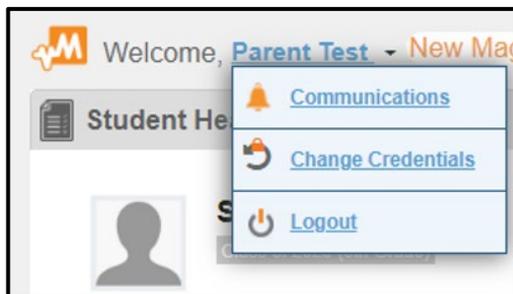


4. After viewing the video, you will see what Magnus calls the Front Desk. This is your main screen.

- a. Click **Go to Front Desk** at any time to return to this screen



- b. Hover your mouse over your name at the top, and you will see:



- i. Communications
 1. Shows messages and information sent to you from Vanguard School staff
- ii. Change Credentials
 1. Allows you to update your username and password
- iii. Logout
 1. Logs you out of Magnus

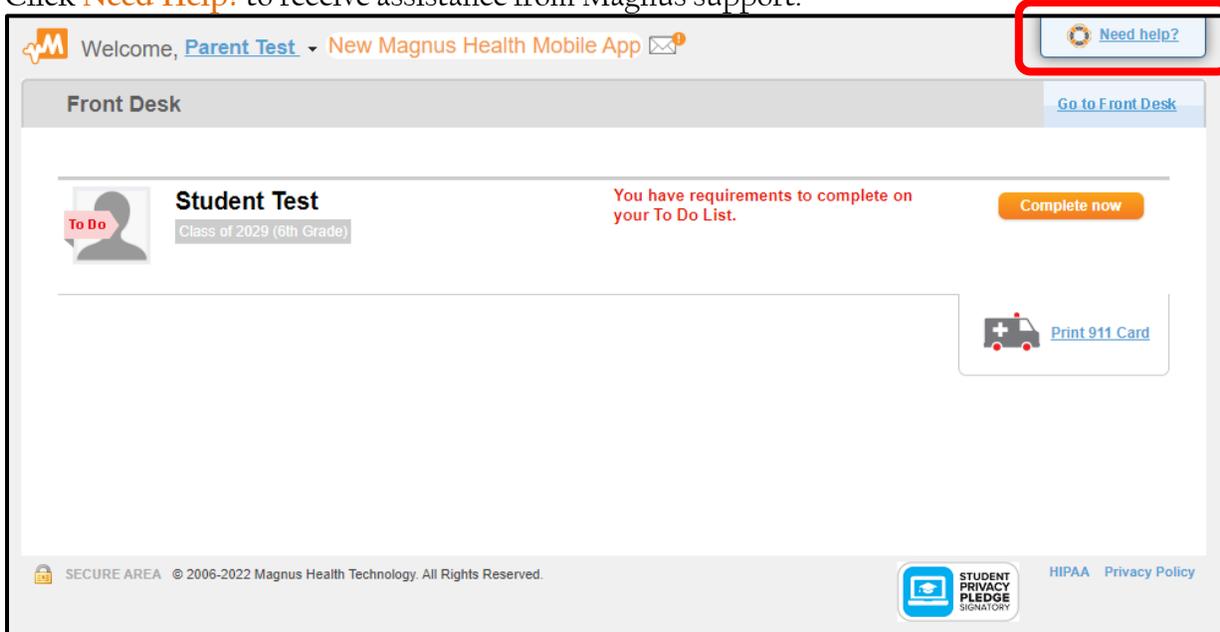
5. Click on **Print 911 Card** to view your child's emergency medical information

You will then see the emergency medical information in this format

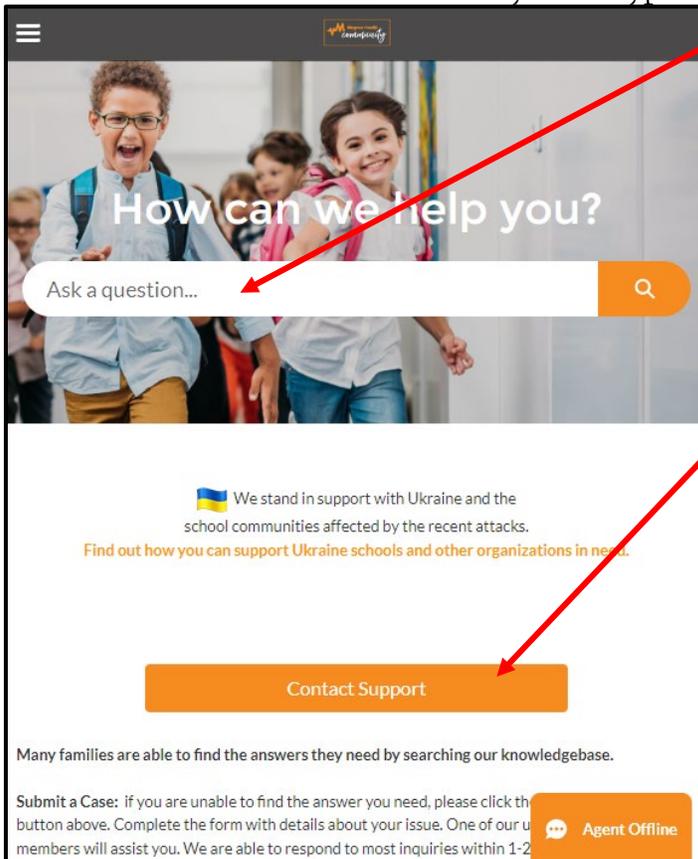
Student Test | Generated on 08/02/2022 at 09:50 AM (Eastern) | Page 1

<p>Student Test DOB: 05/01/2006</p> <p>Class of 2029 (6th Grade)</p> <p>Allergy, Asthma, Diabetes, Seizures, Hearing Screening, Vision Screening</p>	<div style="background-color: red; color: white; padding: 5px; font-weight: bold;">EMERGENCY MEDICAL INFORMATION</div> <p>Student Test DOB: 05/01/2006 Emergency Instructions Step 1: Go to www.magnus911.com Step 2: Enter 16 digit emergency ID M-2698-0265-4056-4567</p>										
<p>Demographic Information</p> <p>Address: _____ cell: _____</p> <p>City: _____</p> <p>State/Province: _____</p> <p>Zip code: _____</p>											
<p>Health Emergency Contacts</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Relationship</th> <th style="text-align: left;">Name</th> <th style="text-align: left;">Home Phone</th> <th style="text-align: left;">Work Phone</th> <th style="text-align: left;">Cell Phone</th> </tr> </thead> <tbody> <tr> <td></td> <td>Parent Test</td> <td>919-895-9871</td> <td></td> <td></td> </tr> </tbody> </table>		Relationship	Name	Home Phone	Work Phone	Cell Phone		Parent Test	919-895-9871		
Relationship	Name	Home Phone	Work Phone	Cell Phone							
	Parent Test	919-895-9871									
<p>Allergies</p> <p>Name: Milk Epi Pen: NO Epi Pen Expiration: _____</p> <p>Reaction: Breaks out in Hives Severity: Severe</p> <p>Date of Last Reaction: 06/01/2022 Signs of Reaction: _____</p> <p>General Treatment: _____ Notes: this is a test</p>											

6. Click **Need Help?** to receive assistance from Magnus support.

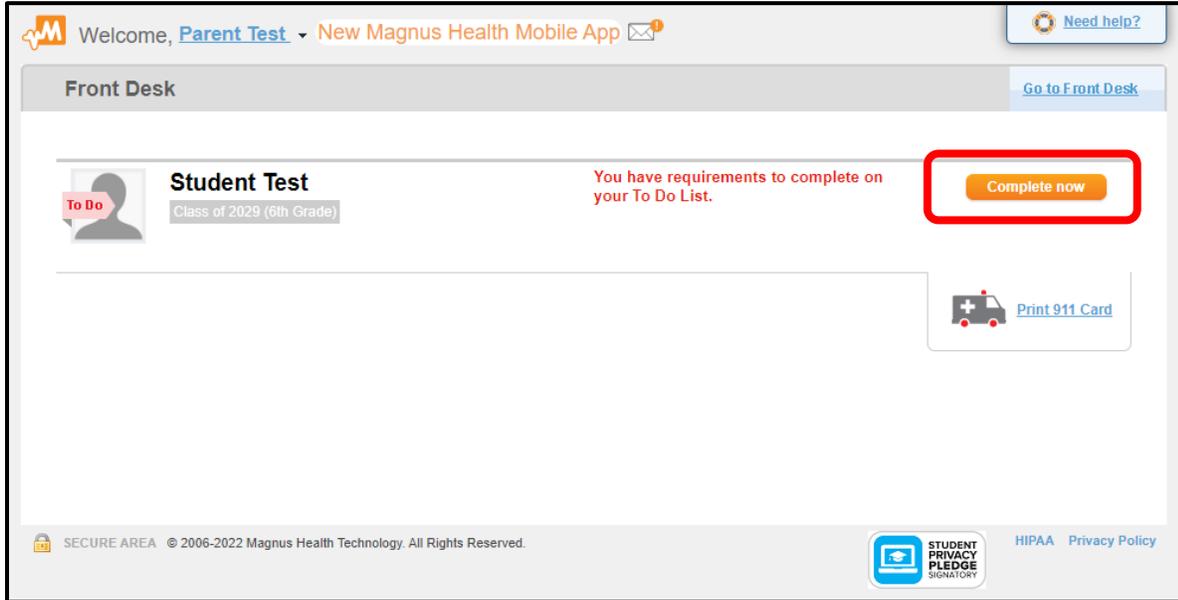


a. You will then see this screen where you can type in your question or click on Contact Support

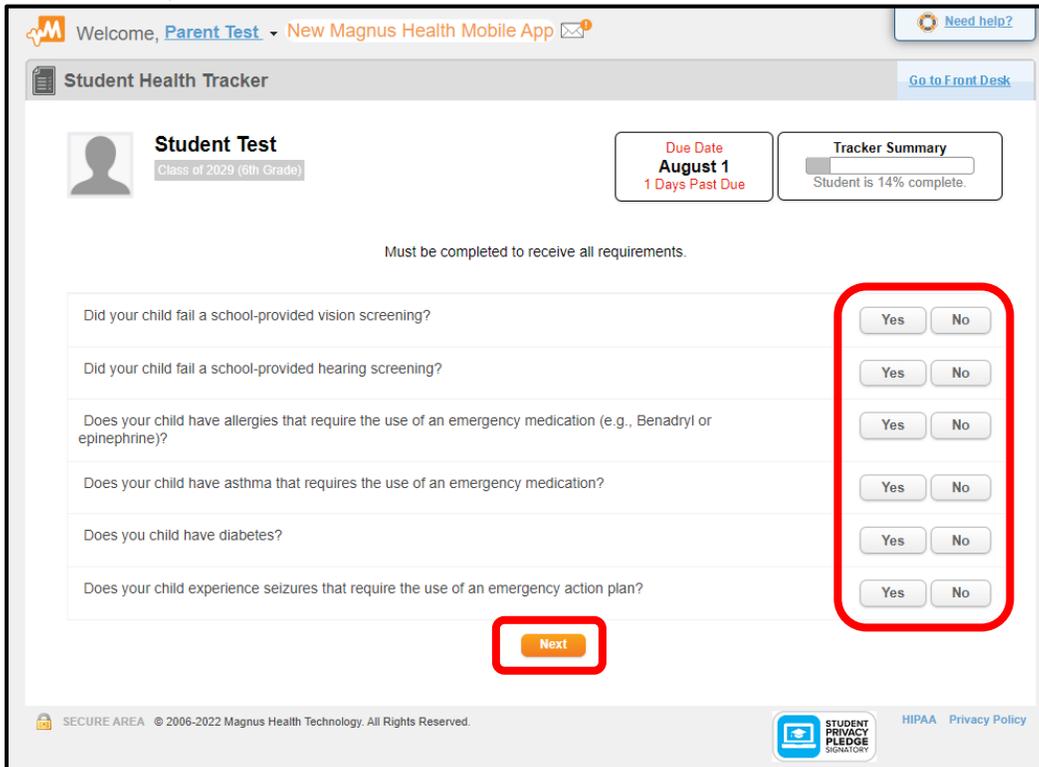


Student Health Tracker

1. Click **Complete Now** (the first time you log in) to start the process of entering your child’s medical information.



- a. You will then see the **Conditional Questions**
 - i. Click **Yes** or **No** for each question
 - ii. Then, click **Next**



2. You will see the chart below.
 - a. The options in the chart are dependent upon the answers provided in the Conditional Questions.
 - i. For example:
 1. If your child has allergies requiring medication, you will see an Allergy Action Plan form
 2. If your child has seizures, you will see a Seizure Action Plan form
 - ii. These forms will not be visible to you if you click No in the Conditional Questions

The screenshot shows the 'Student Health Tracker' interface for a 'Student Test' (Class of 2029, 6th Grade). At the top, it displays a 'Due Date' of August 1 (1 Day Past Due) and a 'Tracker Summary' showing 8% completion. A red banner indicates 'You have 12 requirement(s) in your to do list.' Below this is a table of requirements with columns for Requirement, Blank Form, Action, Answer, and Status. Callout boxes provide instructions: 'Shows how many steps need to be completed' points to the red banner; 'Indicates that this step needs to be completed' points to the 'To Do' status; 'Click to view the information you entered' points to the 'View Answer' link; 'A quick way to download the form' points to a document icon; and 'Click the orange buttons to complete that step' points to an orange button.

Requirement	Blank Form	Action	Answer	Status
Conditional Questions		Edit	View Answer	Complete No Approval Required
To Do Vital Health Record <i>This is a required form that must be completed by a parent/guardian.</i>		Fill it out		
To Do Annual Physical Exam Form <i>This is a required form that must be completed and signed by a parent/guardian and physician. Physician's signature required</i>		Turn it in		
To Do Immunization Form <i>This is a required form that must be completed and signed by a parent/guardian and physician.</i>		Turn it in		
To Do Over-The-Counter Medication Form <i>This is a required form that must be completed and signed by a parent/guardian.</i>		Fill it out		
To Do Does your child take prescribed medications during the school day? Prescription Medication Form <i>This is a required form that must be completed and signed by a parent/guardian and physician. Physician's signature required</i>		Yes No		
To Do Asthma Action Plan Form <i>This is a required form that must be completed and signed by a physician. Physician's signature required</i>		Turn it in		

(Chart continued on next page)

Some of these requirements will only show if you answered Yes in the Conditional Questions

b. Additional information will show in the chart as you begin completing the requirements

Once you've completed some of the requirements, you will see a link to view your answer, as well as a note regarding status. Some forms need to be reviewed by a school nurse, or it will indicate that something is

c. If you need to edit your answers to the Conditional Questions, click the Edit button

Requirement	Blank Form	Action	Answer	Status
Conditional Questions		Edit	View Answer	✔ Complete No Approval Required

Vital Health Record

1. Click the **Fill it out** button to start

To Do

Vital Health Record
This is a required form that must be completed by a parent/guardian.

Fill it out

2. When you first start, all links will have a red X showing that it has not been completed. Once that section is completed, you will see a green check mark.

a. Click each link and complete the required steps

Vital Health Record
Editing for Student Test

[Preview Vital Health Record](#)

User Details

Student Test
DOB: 05/01/2006

Class of 2029 (6th Grade)

Status
✖ Incomplete

Deadline: August 1

Submit for Approval

[Save and return to tracker](#)

Please complete each section of Student Test's Vital Health Record.

Sections

✔ Student Information	🕒 Completed Since: 5 days ago
✖ Health Emergency Contacts	Incomplete
✖ Insurance	Incomplete
✖ Healthcare Providers	Incomplete
✔ Allergies	🕒 Completed Since: 5 days ago
✔ Medications	🕒 Completed Since: 5 days ago
✖ Heart Health Questions about you	Incomplete

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i. A red asterisk (*) indicates required information

Student Information
Editing for Student Test

i Please complete the fields below with the student's information.

<p>First Name: * <input type="text" value="Student"/></p> <p>Preferred Name: <input type="text"/></p> <p>Middle Name: <input type="text"/></p> <p>Last Name: * <input type="text" value="Test"/></p> <p>Sex: * <input type="radio"/> Male <input checked="" type="radio"/> Female</p> <p>Pronouns: <input type="text"/></p> <p>Date of Birth: * <input type="text" value="05/01/2006"/></p> <p>Height: <input type="text" value="5"/> ft <input type="text" value="6"/> in</p> <p>Weight: <input type="text"/> lb</p>	<p>Student Cell Phone: <input type="text"/></p> <p>Address: * <input type="text"/></p> <p>City: * <input type="text"/></p> <p>State/Province: * <input type="text"/></p> <p>Zip Code: * <input type="text"/></p>
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Save as Complete [Cancel](#)

3. When you've completed each link in the Vital Health Record, click **Submit for Approval**. If you are still working on parts of this, click **Save and return to tracker**. Then, come back to this section when you have the information to complete it

Vital Health Record
Editing for Student Test

i Please complete each section of Student Test's Vital Health Record.

User Details

Student Test

DOB: 05/01/2006

Class of 2029 (6th Grade)

Status

✗ Incomplete

Deadline: August 1

Submit for Approval

[Save and return to tracker](#)

i Please complete each section of Student Test's Vital Health Record.

Sections

✓ Student Information	⌚ Completed Since: 5 days ago
✗ Health Emergency Contacts	Incomplete
✗ Insurance	Incomplete
✗ Healthcare Providers	Incomplete
✓ Allergies	⌚ Completed Since: 5 days ago
✓ Medications	⌚ Completed Since: 5 days ago
✗ Heart Health Questions about you	Incomplete

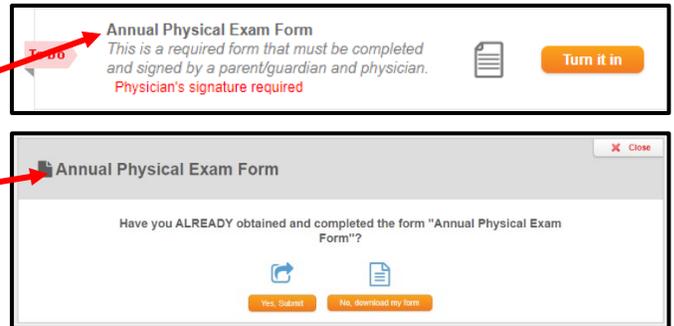
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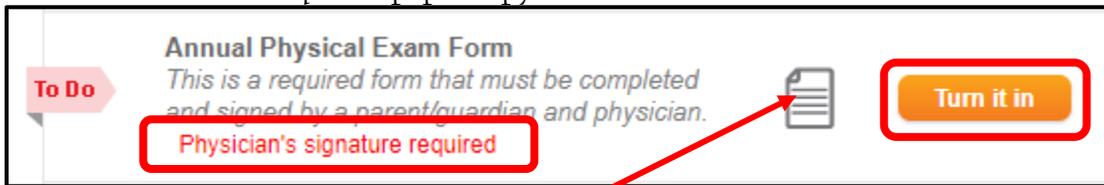
Steps for each of the following requirements are similar and outlined below

- Annual Physical Exam Form
- Immunization Form
- Does your child take prescribed medications during the school day?
- Do you request that your child carry and self-administer their own prescribed medication?
- Asthma Action Plan Form
- Allergy Action Plan Form
- Diabetes Action Plan Form
- Seizure Action Plan Form
- Private Hearing Screening
- Private Vision Screening Form
- Private Dental Examination

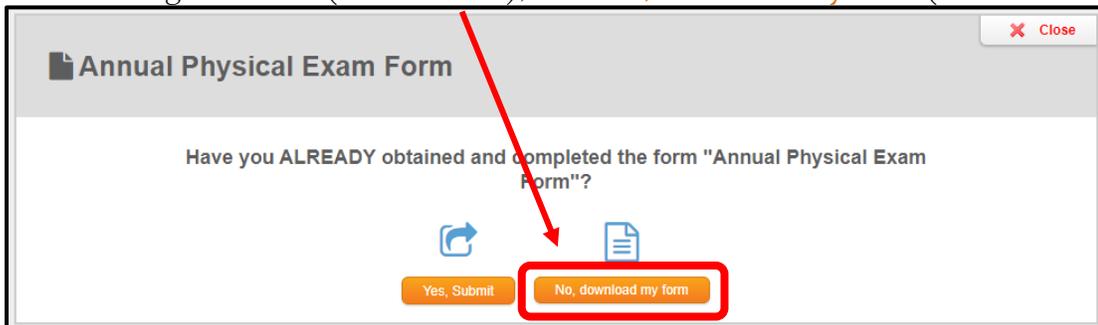
Note the section title at each step



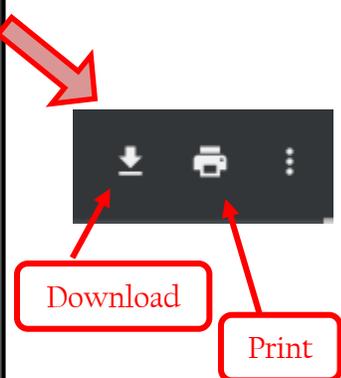
1. Take note if the form requires a physician’s signature.
 - a. You will need to download and print the form, bring it to your child’s doctor to complete, then scan and either upload or fax the form (see steps below for how to upload or fax the form)
 - i. You can also request a paper copy of this form from the school nurse



2. There are two ways to download the form
 - a. Click the paper icon next to **Annual Physical Exam Form**
 - b. After clicking **Turn it in** (shown above), click **No, download my form** (shown below)



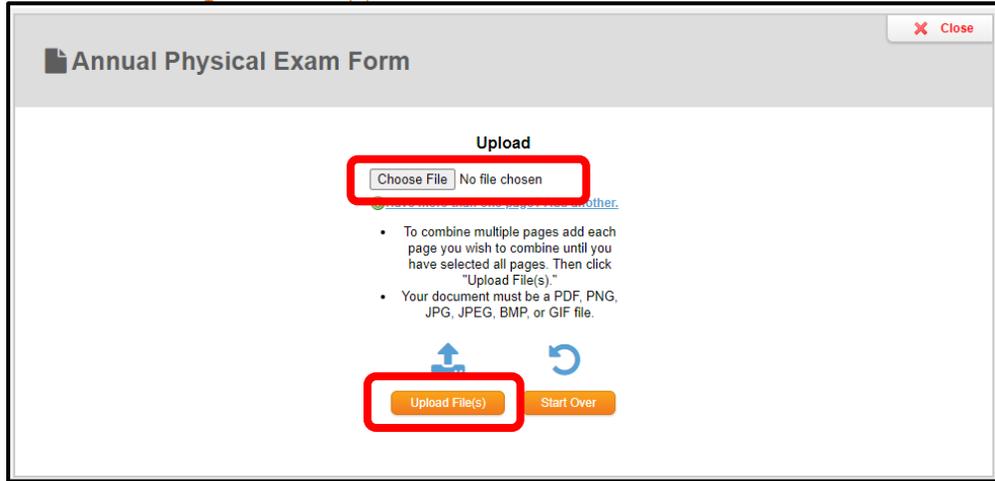
3. When the form opens, you will have the option to download it to save to your computer, or you can print it
 - a. This is the view in Chrome (your internet browser may be a little different):



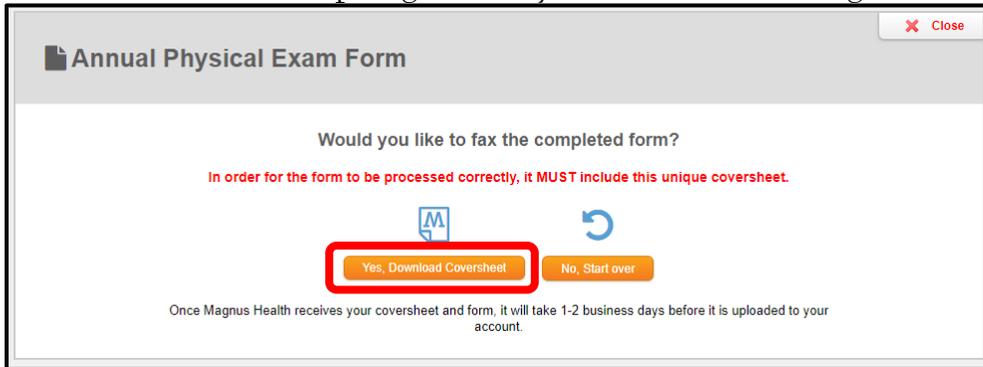
4. Once you have completed the form and it is signed by your child's doctor, you will need to scan and upload it, fax it to Magnus, or send it to school with your child to give to the school nurse.
 - a. To upload, go back to the Annual Physical Exam Form, and click **Yes, Submit**

- b. Click either **Upload** or **No, Fax**

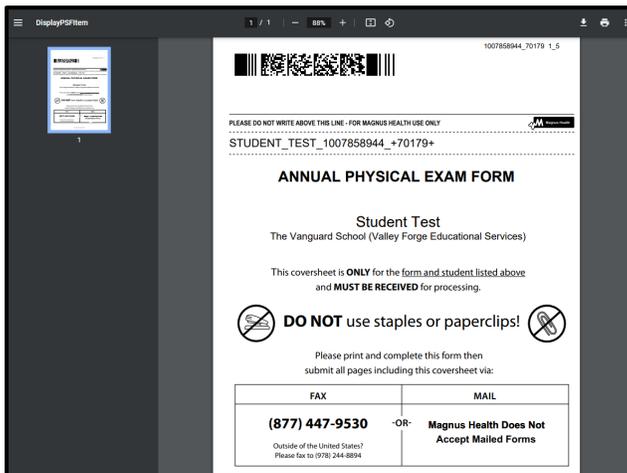
- c. If uploading, click **Choose File**, locate the file on your computer, and click open
 - i. Then, click **Upload File(s)**



- d. If faxing, click **Yes, Download Coversheet**
 - i. This sheet will help Magnus send your child’s form to Vanguard School



- e. The cover sheet will look like this.



- f. Fax the cover page and form to the number listed on the cover page

Directions for the following requirement are different than above

- Over the Counter Medication Form
1. Click **Fill it out** to access the list of over-the-counter medications



2. Click **Yes** or **No** for each over-the-counter medication

Please choose yes or no for each medication listed and then click next.

OTC Medication - Name/Generic	<input type="radio"/> Yes To All	<input type="radio"/> No To All
Ibuprofen - Ibuprofen	<input type="radio"/> Yes	<input type="radio"/> No
Acetaminophen - Acetaminophen	<input type="radio"/> Yes	<input type="radio"/> No
Antacid - Antacid	<input type="radio"/> Yes	<input type="radio"/> No
Cough Drops - Cough Drops	<input type="radio"/> Yes	<input type="radio"/> No
Calamine Lotion - Calamine Lotion	<input type="radio"/> Yes	<input type="radio"/> No
Insect Repellent - Insect Repellent	<input type="radio"/> Yes	<input type="radio"/> No
Other - Ophthalmic Drops	<input type="radio"/> Yes	<input type="radio"/> No
Other - First Aid Cream	<input type="radio"/> Yes	<input type="radio"/> No

cancel Next

3. Click **Next**

4. A form will open for you to e-sign