



EMPLOYEE HEALTH SCREENING

Shawnee Mission School District - Center for Academic Achievement

8200 W 71st Street
Overland Park, KS 66204

Date and Time

January 20, 2026
1:00 PM – 5:15 PM

Tests Include: Total Cholesterol, HDL, LDL, Triglycerides, Glucose, Blood Pressure, Height, Weight, Waist Circumference and BMI.

9 hour fast recommended. Black coffee and water permitted.

TO SCHEDULE YOUR ONSITE APPOINTMENT:

1. Go to <https://www.ehealthscreenings.com/signup>.
2. If you have participated in a previous screening facilitated by eHealthScreenings, enter your username and password and click Submit. On the following screen under Step 1, enter the Screening Key: **SHA06** and Click to Select. If you have not participated in a screening, under the NOT YET REGISTERED? box, enter the Screening key: **SHA06** and click Submit. Enter your assigned default username and password. For your assigned default username and password use the following format:
USERNAME: First Initial + Last Initial + DOB (MMDDYYYY) (example: John Smith born 4/23/1975 is JS04231975)
PASSWORD: Last Name + Last 4 SSN (example: John Smith with social 123456789 is Smith6789)
**Username and Password are case sensitive*
3. Update account information and click **Submit**.
4. If you would like to opt in for a text message reminder, select **Yes**, type in your cell number and click **Submit**. If you do not want the text message reminder, select **No** and click **Submit**.
5. Select the state where you would like to complete your onsite health screening.
6. Use the drop-down function to choose your desired location, date and time. Click **Register**.
7. Acknowledge the Health Screening Consent by checking the **"I agree"** box located at the bottom of the consent. Enter first & last name in the Signature section. Click **Continue**.
8. Once you have completed the sign-up process, a confirmation page will be generated for you to print for your records. You will also receive a confirmation email with the same information just after scheduling your appointment and 24 hours before your appointment time.

REMEMBER: You must fast (no food) for 9 hours before your appointment. Please drink plenty of water. Black coffee is permitted. Continue to take any prescription medications. If you are diabetic, please consult your physician before fasting.



EMPLOYEE HEALTH SCREENING

Shawnee Mission School District - Center for Academic Achievement

8200 W 71st Street
Overland Park, KS 66204

Date and Time

January 28, 2026
1:00 PM – 5:50 PM

Tests Include: Total Cholesterol, HDL, LDL, Triglycerides, Glucose, Blood Pressure, Height, Weight, Waist Circumference and BMI.

9 hour fast recommended. Black coffee and water permitted.

TO SCHEDULE YOUR ONSITE APPOINTMENT:

1. Go to <https://www.ehealthscreenings.com/signup>.
2. If you have participated in a previous screening facilitated by eHealthScreenings, enter your username and password and click Submit. On the following screen under Step 1, enter the Screening Key: **SHA06** and Click to Select. If you have not participated in a screening, under the NOT YET REGISTERED? box, enter the Screening key: **SHA06** and click Submit. Enter your assigned default username and password. For your assigned default username and password use the following format:
 USERNAME: First Initial + Last Initial + DOB (MMDDYYYY) (example: John Smith born 4/23/1975 is JS04231975)
 PASSWORD: Last Name + Last 4 SSN (example: John Smith with social 123456789 is Smith6789)
 *Username and Password are case sensitive
3. Update account information and click **Submit**.
4. If you would like to opt in for a text message reminder, select **Yes**, type in your cell number and click **Submit**. If you do not want the text message reminder, select **No** and click **Submit**.
5. Select the state where you would like to complete your onsite health screening.
6. Use the drop-down function to choose your desired location, date and time. Click **Register**.
7. Acknowledge the Health Screening Consent by checking the **"I agree"** box located at the bottom of the consent. Enter first & last name in the Signature section. Click **Continue**.
8. Once you have completed the sign-up process, a confirmation page will be generated for you to print for your records. You will also receive a confirmation email with the same information just after scheduling your appointment and 24 hours before your appointment time.

REMEMBER: You must fast (no food) for 9 hours before your appointment. Please drink plenty of water. Black coffee is permitted. Continue to take any prescription medications. If you are diabetic, please consult your physician before fasting.



EMPLOYEE HEALTH SCREENING

Shawnee Mission School District - Center for Academic Achievement

8200 W 71st Street
Overland Park, KS 66204

Date and Time

February 26, 2026
1:00 PM – 4:15 PM

Tests Include: Total Cholesterol, HDL, LDL, Triglycerides, Glucose, Blood Pressure, Height, Weight, Waist Circumference and BMI.

9 hour fast recommended. Black coffee and water permitted.

TO SCHEDULE YOUR ONSITE APPOINTMENT:

1. Go to <https://www.ehealthscreenings.com/signup>.
2. If you have participated in a previous screening facilitated by eHealthScreenings, enter your username and password and click Submit. On the following screen under Step 1, enter the Screening Key: **SHA06** and Click to Select. If you have not participated in a screening, under the NOT YET REGISTERED? box, enter the Screening key: **SHA06** and click Submit. Enter your assigned default username and password. For your assigned default username and password use the following format:
USERNAME: First Initial + Last Initial + DOB (MMDDYYYY) (example: John Smith born 4/23/1975 is JS04231975)
PASSWORD: Last Name + Last 4 SSN (example: John Smith with social 123456789 is Smith6789)
**Username and Password are case sensitive*
3. Update account information and click **Submit**.
4. If you would like to opt in for a text message reminder, select **Yes**, type in your cell number and click **Submit**. If you do not want the text message reminder, select **No** and click **Submit**.
5. Select the state where you would like to complete your onsite health screening.
6. Use the drop-down function to choose your desired location, date and time. Click **Register**.
7. Acknowledge the Health Screening Consent by checking the **"I agree"** box located at the bottom of the consent. Enter first & last name in the Signature section. Click **Continue**.
8. Once you have completed the sign-up process, a confirmation page will be generated for you to print for your records. You will also receive a confirmation email with the same information just after scheduling your appointment and 24 hours before your appointment time.

REMEMBER: You must fast (no food) for 9 hours before your appointment. Please drink plenty of water. Black coffee is permitted. Continue to take any prescription medications. If you are diabetic, please consult your physician before fasting.

If you would like to schedule by phone, please call EHS Customer Service
at 888-708-8807, ext. 1, Monday - Friday 7:00am - 6:00pm CST.



EMPLOYEE HEALTH SCREENING

Shawnee Mission School District - Center for Academic Achievement

8200 W 71st Street
Overland Park, KS 66204

Date and Time

March 3, 2026
1:00 PM – 6:30 PM

Tests Include: Total Cholesterol, HDL, LDL, Triglycerides, Glucose, Blood Pressure, Height, Weight, Waist Circumference and BMI.

9 hour fast recommended. Black coffee and water permitted.

TO SCHEDULE YOUR ONSITE APPOINTMENT:

1. Go to <https://www.ehealthscreenings.com/signup>.
2. If you have participated in a previous screening facilitated by eHealthScreenings, enter your username and password and click Submit. On the following screen under Step 1, enter the Screening Key: **SHA06** and Click to Select. If you have not participated in a screening, under the NOT YET REGISTERED? box, enter the Screening key: **SHA06** and click Submit. Enter your assigned default username and password. For your assigned default username and password use the following format:
 USERNAME: First Initial + Last Initial + DOB (MMDDYYYY) (example: John Smith born 4/23/1975 is JS04231975)
 PASSWORD: Last Name + Last 4 SSN (example: John Smith with social 123456789 is Smith6789)
 *Username and Password are case sensitive
3. Update account information and click **Submit**.
4. If you would like to opt in for a text message reminder, select **Yes**, type in your cell number and click **Submit**. If you do not want the text message reminder, select **No** and click **Submit**.
5. Select the state where you would like to complete your onsite health screening.
6. Use the drop-down function to choose your desired location, date and time. Click **Register**.
7. Acknowledge the Health Screening Consent by checking the **"I agree"** box located at the bottom of the consent. Enter first & last name in the Signature section. Click **Continue**.
8. Once you have completed the sign-up process, a confirmation page will be generated for you to print for your records. You will also receive a confirmation email with the same information just after scheduling your appointment and 24 hours before your appointment time.

REMEMBER: You must fast (no food) for 9 hours before your appointment. Please drink plenty of water. Black coffee is permitted. Continue to take any prescription medications. If you are diabetic, please consult your physician before fasting.



EMPLOYEE HEALTH SCREENING

Shawnee Mission School District - Center for Academic Achievement

8200 W 71st Street
Overland Park, KS 66204

Date and Time

April 30, 2026
1:00 PM – 6:50 PM

Tests Include: Total Cholesterol, HDL, LDL, Triglycerides, Glucose, Blood Pressure, Height, Weight, Waist Circumference and BMI.

9 hour fast recommended. Black coffee and water permitted.

TO SCHEDULE YOUR ONSITE APPOINTMENT:

1. Go to <https://www.ehealthscreenings.com/signup>.
2. If you have participated in a previous screening facilitated by eHealthScreenings, enter your username and password and click Submit. On the following screen under Step 1, enter the Screening Key: **SHA06** and Click to Select. If you have not participated in a screening, under the NOT YET REGISTERED? box, enter the Screening key: **SHA06** and click Submit. Enter your assigned default username and password. For your assigned default username and password use the following format:
USERNAME: First Initial + Last Initial + DOB (MMDDYYYY) (example: John Smith born 4/23/1975 is JS04231975)
PASSWORD: Last Name + Last 4 SSN (example: John Smith with social 123456789 is Smith6789)
**Username and Password are case sensitive*
3. Update account information and click **Submit**.
4. If you would like to opt in for a text message reminder, select **Yes**, type in your cell number and click **Submit**. If you do not want the text message reminder, select **No** and click **Submit**.
5. Select the state where you would like to complete your onsite health screening.
6. Use the drop-down function to choose your desired location, date and time. Click **Register**.
7. Acknowledge the Health Screening Consent by checking the **"I agree"** box located at the bottom of the consent. Enter first & last name in the Signature section. Click **Continue**.
8. Once you have completed the sign-up process, a confirmation page will be generated for you to print for your records. You will also receive a confirmation email with the same information just after scheduling your appointment and 24 hours before your appointment time.

REMEMBER: You must fast (no food) for 9 hours before your appointment. Please drink plenty of water. Black coffee is permitted. Continue to take any prescription medications. If you are diabetic, please consult your physician before fasting.



EMPLOYEE HEALTH SCREENING

Shawnee Mission School District - Center for Academic Achievement

8200 W 71st Street
Overland Park, KS 66204

Date and Time

May 14, 2026
1:00 PM – 5:15 PM

Tests Include: Total Cholesterol, HDL, LDL, Triglycerides, Glucose, Blood Pressure, Height, Weight, Waist Circumference and BMI.

9 hour fast recommended. Black coffee and water permitted.

TO SCHEDULE YOUR ONSITE APPOINTMENT:

1. Go to <https://www.ehealthscreenings.com/signup>.
2. If you have participated in a previous screening facilitated by eHealthScreenings, enter your username and password and click Submit. On the following screen under Step 1, enter the Screening Key: **SHA06** and Click to Select. If you have not participated in a screening, under the NOT YET REGISTERED? box, enter the Screening key: **SHA06** and click Submit. Enter your assigned default username and password. For your assigned default username and password use the following format:
USERNAME: First Initial + Last Initial + DOB (MMDDYYYY) (example: John Smith born 4/23/1975 is JS04231975)
PASSWORD: Last Name + Last 4 SSN (example: John Smith with social 123456789 is Smith6789)
**Username and Password are case sensitive*
3. Update account information and click **Submit**.
4. If you would like to opt in for a text message reminder, select **Yes**, type in your cell number and click **Submit**. If you do not want the text message reminder, select **No** and click **Submit**.
5. Select the state where you would like to complete your onsite health screening.
6. Use the drop-down function to choose your desired location, date and time. Click **Register**.
7. Acknowledge the Health Screening Consent by checking the **"I agree"** box located at the bottom of the consent. Enter first & last name in the Signature section. Click **Continue**.
8. Once you have completed the sign-up process, a confirmation page will be generated for you to print for your records. You will also receive a confirmation email with the same information just after scheduling your appointment and 24 hours before your appointment time.

REMEMBER: You must fast (no food) for 9 hours before your appointment. Please drink plenty of water. Black coffee is permitted. Continue to take any prescription medications. If you are diabetic, please consult your physician before fasting.



EMPLOYEE HEALTH SCREENING

Shawnee Mission School District - Center for Academic Achievement

8200 W 71st Street
Overland Park, KS 66204

Date and Time

June 15, 2026
8:00 AM – 1:30 PM

Tests Include: Total Cholesterol, HDL, LDL, Triglycerides, Glucose, Blood Pressure, Height, Weight, Waist Circumference and BMI.

9 hour fast recommended. Black coffee and water permitted.

TO SCHEDULE YOUR ONSITE APPOINTMENT:

1. Go to <https://www.ehealthscreenings.com/signup>.
2. If you have participated in a previous screening facilitated by eHealthScreenings, enter your username and password and click Submit. On the following screen under Step 1, enter the Screening Key: **SHA06** and Click to Select. If you have not participated in a screening, under the NOT YET REGISTERED? box, enter the Screening key: **SHA06** and click Submit. Enter your assigned default username and password. For your assigned default username and password use the following format:
 USERNAME: First Initial + Last Initial + DOB (MMDDYYYY) (example: John Smith born 4/23/1975 is JS04231975)
 PASSWORD: Last Name + Last 4 SSN (example: John Smith with social 123456789 is Smith6789)
 *Username and Password are case sensitive
3. Update account information and click **Submit**.
4. If you would like to opt in for a text message reminder, select **Yes**, type in your cell number and click **Submit**. If you do not want the text message reminder, select **No** and click **Submit**.
5. Select the state where you would like to complete your onsite health screening.
6. Use the drop-down function to choose your desired location, date and time. Click **Register**.
7. Acknowledge the Health Screening Consent by checking the **"I agree"** box located at the bottom of the consent. Enter first & last name in the Signature section. Click **Continue**.
8. Once you have completed the sign-up process, a confirmation page will be generated for you to print for your records. You will also receive a confirmation email with the same information just after scheduling your appointment and 24 hours before your appointment time.

REMEMBER: You must fast (no food) for 9 hours before your appointment. Please drink plenty of water. Black coffee is permitted. Continue to take any prescription medications. If you are diabetic, please consult your physician before fasting.



EMPLOYEE HEALTH SCREENING

Shawnee Mission School District - Center for Academic Achievement

8200 W 71st Street
Overland Park, KS 66204

Date and Time

June 30, 2026
8:00 AM – 12:00 PM

Tests Include: Total Cholesterol, HDL, LDL, Triglycerides, Glucose, Blood Pressure, Height, Weight, Waist Circumference and BMI.

9 hour fast recommended. Black coffee and water permitted.

TO SCHEDULE YOUR ONSITE APPOINTMENT:

1. Go to <https://www.ehealthscreenings.com/signup>.
2. If you have participated in a previous screening facilitated by eHealthScreenings, enter your username and password and click Submit. On the following screen under Step 1, enter the Screening Key: **SHA06** and Click to Select. If you have not participated in a screening, under the NOT YET REGISTERED? box, enter the Screening key: **SHA06** and click Submit. Enter your assigned default username and password. For your assigned default username and password use the following format:
 USERNAME: First Initial + Last Initial + DOB (MMDDYYYY) (example: John Smith born 4/23/1975 is JS04231975)
 PASSWORD: Last Name + Last 4 SSN (example: John Smith with social 123456789 is Smith6789)
 *Username and Password are case sensitive
3. Update account information and click **Submit**.
4. If you would like to opt in for a text message reminder, select **Yes**, type in your cell number and click **Submit**. If you do not want the text message reminder, select **No** and click **Submit**.
5. Select the state where you would like to complete your onsite health screening.
6. Use the drop-down function to choose your desired location, date and time. Click **Register**.
7. Acknowledge the Health Screening Consent by checking the **"I agree"** box located at the bottom of the consent. Enter first & last name in the Signature section. Click **Continue**.
8. Once you have completed the sign-up process, a confirmation page will be generated for you to print for your records. You will also receive a confirmation email with the same information just after scheduling your appointment and 24 hours before your appointment time.

REMEMBER: You must fast (no food) for 9 hours before your appointment. Please drink plenty of water. Black coffee is permitted. Continue to take any prescription medications. If you are diabetic, please consult your physician before fasting.



EMPLOYEE HEALTH SCREENING

Shawnee Mission School District - Center for Academic Achievement

8200 W 71st Street
Overland Park, KS 66204

Date and Time

July 14, 2026
8:00 AM – 12:40 PM

Tests Include: Total Cholesterol, HDL, LDL, Triglycerides, Glucose, Blood Pressure, Height, Weight, Waist Circumference and BMI.

9 hour fast recommended. Black coffee and water permitted.

TO SCHEDULE YOUR ONSITE APPOINTMENT:

1. Go to <https://www.ehealthscreenings.com/signup>.
2. If you have participated in a previous screening facilitated by eHealthScreenings, enter your username and password and click Submit. On the following screen under Step 1, enter the Screening Key: **SHA06** and Click to Select. If you have not participated in a screening, under the NOT YET REGISTERED? box, enter the Screening key: **SHA06** and click Submit. Enter your assigned default username and password. For your assigned default username and password use the following format:
 USERNAME: First Initial + Last Initial + DOB (MMDDYYYY) (example: John Smith born 4/23/1975 is JS04231975)
 PASSWORD: Last Name + Last 4 SSN (example: John Smith with social 123456789 is Smith6789)
 *Username and Password are case sensitive
3. Update account information and click **Submit**.
4. If you would like to opt in for a text message reminder, select **Yes**, type in your cell number and click **Submit**. If you do not want the text message reminder, select **No** and click **Submit**.
5. Select the state where you would like to complete your onsite health screening.
6. Use the drop-down function to choose your desired location, date and time. Click **Register**.
7. Acknowledge the Health Screening Consent by checking the **"I agree"** box located at the bottom of the consent. Enter first & last name in the Signature section. Click **Continue**.
8. Once you have completed the sign-up process, a confirmation page will be generated for you to print for your records. You will also receive a confirmation email with the same information just after scheduling your appointment and 24 hours before your appointment time.

REMEMBER: You must fast (no food) for 9 hours before your appointment. Please drink plenty of water. Black coffee is permitted. Continue to take any prescription medications. If you are diabetic, please consult your physician before fasting.

If you would like to schedule by phone, please call EHS Customer Service
at 888-708-8807, ext. 1, Monday - Friday 7:00am - 6:00pm CST.



EMPLOYEE HEALTH SCREENING

Shawnee Mission School District - Center for Academic Achievement

8200 W 71st Street
Overland Park, KS 66204

Date and Time

August 26, 2026
1:00 PM – 6:30 PM

Tests Include: Total Cholesterol, HDL, LDL, Triglycerides, Glucose, Blood Pressure, Height, Weight, Waist Circumference and BMI.

9 hour fast recommended. Black coffee and water permitted.

TO SCHEDULE YOUR ONSITE APPOINTMENT:

1. Go to <https://www.ehealthscreenings.com/signup>.
2. If you have participated in a previous screening facilitated by eHealthScreenings, enter your username and password and click Submit. On the following screen under Step 1, enter the Screening Key: **SHA06** and Click to Select. If you have not participated in a screening, under the NOT YET REGISTERED? box, enter the Screening key: **SHA06** and click Submit. Enter your assigned default username and password. For your assigned default username and password use the following format:
USERNAME: First Initial + Last Initial + DOB (MMDDYYYY) (example: John Smith born 4/23/1975 is JS04231975)
PASSWORD: Last Name + Last 4 SSN (example: John Smith with social 123456789 is Smith6789)
**Username and Password are case sensitive*
3. Update account information and click **Submit**.
4. If you would like to opt in for a text message reminder, select **Yes**, type in your cell number and click **Submit**. If you do not want the text message reminder, select **No** and click **Submit**.
5. Select the state where you would like to complete your onsite health screening.
6. Use the drop-down function to choose your desired location, date and time. Click **Register**.
7. Acknowledge the Health Screening Consent by checking the **"I agree"** box located at the bottom of the consent. Enter first & last name in the Signature section. Click **Continue**.
8. Once you have completed the sign-up process, a confirmation page will be generated for you to print for your records. You will also receive a confirmation email with the same information just after scheduling your appointment and 24 hours before your appointment time.

REMEMBER: You must fast (no food) for 9 hours before your appointment. Please drink plenty of water. Black coffee is permitted. Continue to take any prescription medications. If you are diabetic, please consult your physician before fasting.



EMPLOYEE HEALTH SCREENING

Shawnee Mission School District - Center for Academic Achievement

8200 W 71st Street
Overland Park, KS 66204

Date and Time

September 2, 2026
1:00 PM – 5:40 PM

Tests Include: Total Cholesterol, HDL, LDL, Triglycerides, Glucose, Blood Pressure, Height, Weight, Waist Circumference and BMI.

9 hour fast recommended. Black coffee and water permitted.

TO SCHEDULE YOUR ONSITE APPOINTMENT:

1. Go to <https://www.ehealthscreenings.com/signup>.
2. If you have participated in a previous screening facilitated by eHealthScreenings, enter your username and password and click Submit. On the following screen under Step 1, enter the Screening Key: **SHA06** and Click to Select. If you have not participated in a screening, under the NOT YET REGISTERED? box, enter the Screening key: **SHA06** and click Submit. Enter your assigned default username and password. For your assigned default username and password use the following format:
 USERNAME: First Initial + Last Initial + DOB (MMDDYYYY) (example: John Smith born 4/23/1975 is JS04231975)
 PASSWORD: Last Name + Last 4 SSN (example: John Smith with social 123456789 is Smith6789)
 *Username and Password are case sensitive
3. Update account information and click **Submit**.
4. If you would like to opt in for a text message reminder, select **Yes**, type in your cell number and click **Submit**. If you do not want the text message reminder, select **No** and click **Submit**.
5. Select the state where you would like to complete your onsite health screening.
6. Use the drop-down function to choose your desired location, date and time. Click **Register**.
7. Acknowledge the Health Screening Consent by checking the **"I agree"** box located at the bottom of the consent. Enter first & last name in the Signature section. Click **Continue**.
8. Once you have completed the sign-up process, a confirmation page will be generated for you to print for your records. You will also receive a confirmation email with the same information just after scheduling your appointment and 24 hours before your appointment time.

REMEMBER: You must fast (no food) for 9 hours before your appointment. Please drink plenty of water. Black coffee is permitted. Continue to take any prescription medications. If you are diabetic, please consult your physician before fasting.



EMPLOYEE HEALTH SCREENING

Shawnee Mission School District - Center for Academic Achievement

8200 W 71st Street
Overland Park, KS 66204

Date and Time

September 15,
2026
1:00 PM – 7:00 PM

Tests Include: Total Cholesterol, HDL, LDL, Triglycerides, Glucose, Blood Pressure, Height, Weight, Waist Circumference and BMI.

9 hour fast recommended. Black coffee and water permitted.

TO SCHEDULE YOUR ONSITE APPOINTMENT:

1. Go to <https://www.ehealthscreenings.com/signup>.
2. If you have participated in a previous screening facilitated by eHealthScreenings, enter your username and password and click Submit. On the following screen under Step 1, enter the Screening Key: **SHA06** and Click to Select. If you have not participated in a screening, under the NOT YET REGISTERED? box, enter the Screening key: **SHA06** and click Submit. Enter your assigned default username and password. For your assigned default username and password use the following format:
 USERNAME: First Initial + Last Initial + DOB (MMDDYYYY) (example: John Smith born 4/23/1975 is JS04231975)
 PASSWORD: Last Name + Last 4 SSN (example: John Smith with social 123456789 is Smith6789)
 *Username and Password are case sensitive
3. Update account information and click **Submit**.
4. If you would like to opt in for a text message reminder, select **Yes**, type in your cell number and click **Submit**. If you do not want the text message reminder, select **No** and click **Submit**.
5. Select the state where you would like to complete your onsite health screening.
6. Use the drop-down function to choose your desired location, date and time. Click **Register**.
7. Acknowledge the Health Screening Consent by checking the **"I agree"** box located at the bottom of the consent. Enter first & last name in the Signature section. Click **Continue**.
8. Once you have completed the sign-up process, a confirmation page will be generated for you to print for your records. You will also receive a confirmation email with the same information just after scheduling your appointment and 24 hours before your appointment time.

REMEMBER: You must fast (no food) for 9 hours before your appointment. Please drink plenty of water. Black coffee is permitted. Continue to take any prescription medications. If you are diabetic, please consult your physician before fasting.

If you would like to schedule by phone, please call EHS Customer Service
at 888-708-8807, ext. 1, Monday - Friday 7:00am - 6:00pm CST.



EMPLOYEE HEALTH SCREENING

Shawnee Mission School District - Center for Academic Achievement

8200 W 71st Street
Overland Park, KS 66204

Date and Time

September 24,
2026
1:00 PM – 6:30 PM

Tests Include: Total Cholesterol, HDL, LDL, Triglycerides, Glucose, Blood Pressure, Height, Weight, Waist Circumference and BMI.

9 hour fast recommended. Black coffee and water permitted.

TO SCHEDULE YOUR ONSITE APPOINTMENT:

1. Go to <https://www.ehealthscreenings.com/signup>.
2. If you have participated in a previous screening facilitated by eHealthScreenings, enter your username and password and click Submit. On the following screen under Step 1, enter the Screening Key: **SHA06** and Click to Select. If you have not participated in a screening, under the NOT YET REGISTERED? box, enter the Screening key: **SHA06** and click Submit. Enter your assigned default username and password. For your assigned default username and password use the following format:
USERNAME: First Initial + Last Initial + DOB (MMDDYYYY) (example: John Smith born 4/23/1975 is JS04231975)
PASSWORD: Last Name + Last 4 SSN (example: John Smith with social 123456789 is Smith6789)
**Username and Password are case sensitive*
3. Update account information and click **Submit**.
4. If you would like to opt in for a text message reminder, select **Yes**, type in your cell number and click **Submit**. If you do not want the text message reminder, select **No** and click **Submit**.
5. Select the state where you would like to complete your onsite health screening.
6. Use the drop-down function to choose your desired location, date and time. Click **Register**.
7. Acknowledge the Health Screening Consent by checking the **"I agree"** box located at the bottom of the consent. Enter first & last name in the Signature section. Click **Continue**.
8. Once you have completed the sign-up process, a confirmation page will be generated for you to print for your records. You will also receive a confirmation email with the same information just after scheduling your appointment and 24 hours before your appointment time.

REMEMBER: You must fast (no food) for 9 hours before your appointment. Please drink plenty of water. Black coffee is permitted. Continue to take any prescription medications. If you are diabetic, please consult your physician before fasting.



EMPLOYEE HEALTH SCREENING

Shawnee Mission School District - Center for Academic Achievement

8200 W 71st Street
Overland Park, KS 66204

Date and Time

October 1, 2026
1:00 PM – 6:40 PM

Tests Include: Total Cholesterol, HDL, LDL, Triglycerides, Glucose, Blood Pressure, Height, Weight, Waist Circumference and BMI.

9 hour fast recommended. Black coffee and water permitted.

TO SCHEDULE YOUR ONSITE APPOINTMENT:

1. Go to <https://www.ehealthscreenings.com/signup>.
2. If you have participated in a previous screening facilitated by eHealthScreenings, enter your username and password and click Submit. On the following screen under Step 1, enter the Screening Key: **SHA06** and Click to Select. If you have not participated in a screening, under the NOT YET REGISTERED? box, enter the Screening key: **SHA06** and click Submit. Enter your assigned default username and password. For your assigned default username and password use the following format:
 USERNAME: First Initial + Last Initial + DOB (MMDDYYYY) (example: John Smith born 4/23/1975 is JS04231975)
 PASSWORD: Last Name + Last 4 SSN (example: John Smith with social 123456789 is Smith6789)
 *Username and Password are case sensitive
3. Update account information and click **Submit**.
4. If you would like to opt in for a text message reminder, select **Yes**, type in your cell number and click **Submit**. If you do not want the text message reminder, select **No** and click **Submit**.
5. Select the state where you would like to complete your onsite health screening.
6. Use the drop-down function to choose your desired location, date and time. Click **Register**.
7. Acknowledge the Health Screening Consent by checking the **"I agree"** box located at the bottom of the consent. Enter first & last name in the Signature section. Click **Continue**.
8. Once you have completed the sign-up process, a confirmation page will be generated for you to print for your records. You will also receive a confirmation email with the same information just after scheduling your appointment and 24 hours before your appointment time.

REMEMBER: You must fast (no food) for 9 hours before your appointment. Please drink plenty of water. Black coffee is permitted. Continue to take any prescription medications. If you are diabetic, please consult your physician before fasting.



EMPLOYEE HEALTH SCREENING

Shawnee Mission School District - Center for Academic Achievement

8200 W 71st Street
Overland Park, KS 66204

Date and Time

October 5, 2026
1:00 PM – 6:40 PM

Tests Include: Total Cholesterol, HDL, LDL, Triglycerides, Glucose, Blood Pressure, Height, Weight, Waist Circumference and BMI.

9 hour fast recommended. Black coffee and water permitted.

TO SCHEDULE YOUR ONSITE APPOINTMENT:

1. Go to <https://www.ehealthscreenings.com/signup>.
2. If you have participated in a previous screening facilitated by eHealthScreenings, enter your username and password and click Submit. On the following screen under Step 1, enter the Screening Key: **SHA06** and Click to Select. If you have not participated in a screening, under the NOT YET REGISTERED? box, enter the Screening key: **SHA06** and click Submit. Enter your assigned default username and password. For your assigned default username and password use the following format:
USERNAME: First Initial + Last Initial + DOB (MMDDYYYY) (example: John Smith born 4/23/1975 is JS04231975)
PASSWORD: Last Name + Last 4 SSN (example: John Smith with social 123456789 is Smith6789)
**Username and Password are case sensitive*
3. Update account information and click **Submit**.
4. If you would like to opt in for a text message reminder, select **Yes**, type in your cell number and click **Submit**. If you do not want the text message reminder, select **No** and click **Submit**.
5. Select the state where you would like to complete your onsite health screening.
6. Use the drop-down function to choose your desired location, date and time. Click **Register**.
7. Acknowledge the Health Screening Consent by checking the **"I agree"** box located at the bottom of the consent. Enter first & last name in the Signature section. Click **Continue**.
8. Once you have completed the sign-up process, a confirmation page will be generated for you to print for your records. You will also receive a confirmation email with the same information just after scheduling your appointment and 24 hours before your appointment time.

REMEMBER: You must fast (no food) for 9 hours before your appointment. Please drink plenty of water. Black coffee is permitted. Continue to take any prescription medications. If you are diabetic, please consult your physician before fasting.



EMPLOYEE HEALTH SCREENING

Shawnee Mission School District - Center for Academic Achievement

8200 W 71st Street
Overland Park, KS 66204

Date and Time

October 21, 2026
1:00 PM – 6:30 PM

Tests Include: Total Cholesterol, HDL, LDL, Triglycerides, Glucose, Blood Pressure, Height, Weight, Waist Circumference and BMI.

9 hour fast recommended. Black coffee and water permitted.

TO SCHEDULE YOUR ONSITE APPOINTMENT:

1. Go to <https://www.ehealthscreenings.com/signup>.
2. If you have participated in a previous screening facilitated by eHealthScreenings, enter your username and password and click Submit. On the following screen under Step 1, enter the Screening Key: **SHA06** and Click to Select. If you have not participated in a screening, under the NOT YET REGISTERED? box, enter the Screening key: **SHA06** and click Submit. Enter your assigned default username and password. For your assigned default username and password use the following format:
 USERNAME: First Initial + Last Initial + DOB (MMDDYYYY) (example: John Smith born 4/23/1975 is JS04231975)
 PASSWORD: Last Name + Last 4 SSN (example: John Smith with social 123456789 is Smith6789)
 *Username and Password are case sensitive
3. Update account information and click **Submit**.
4. If you would like to opt in for a text message reminder, select **Yes**, type in your cell number and click **Submit**. If you do not want the text message reminder, select **No** and click **Submit**.
5. Select the state where you would like to complete your onsite health screening.
6. Use the drop-down function to choose your desired location, date and time. Click **Register**.
7. Acknowledge the Health Screening Consent by checking the **"I agree"** box located at the bottom of the consent. Enter first & last name in the Signature section. Click **Continue**.
8. Once you have completed the sign-up process, a confirmation page will be generated for you to print for your records. You will also receive a confirmation email with the same information just after scheduling your appointment and 24 hours before your appointment time.

REMEMBER: You must fast (no food) for 9 hours before your appointment. Please drink plenty of water. Black coffee is permitted. Continue to take any prescription medications. If you are diabetic, please consult your physician before fasting.



EMPLOYEE HEALTH SCREENING

Shawnee Mission School District - Center for Academic Achievement

8200 W 71st Street
Overland Park, KS 66204

Date and Time

October 27, 2026
1:00 PM – 5:40 PM

Tests Include: Total Cholesterol, HDL, LDL, Triglycerides, Glucose, Blood Pressure, Height, Weight, Waist Circumference and BMI.

9 hour fast recommended. Black coffee and water permitted.

TO SCHEDULE YOUR ONSITE APPOINTMENT:

1. Go to <https://www.ehealthscreenings.com/signup>.
2. If you have participated in a previous screening facilitated by eHealthScreenings, enter your username and password and click Submit. On the following screen under Step 1, enter the Screening Key: **SHA06** and Click to Select. If you have not participated in a screening, under the NOT YET REGISTERED? box, enter the Screening key: **SHA06** and click Submit. Enter your assigned default username and password. For your assigned default username and password use the following format:
USERNAME: First Initial + Last Initial + DOB (MMDDYYYY) (example: John Smith born 4/23/1975 is JS04231975)
PASSWORD: Last Name + Last 4 SSN (example: John Smith with social 123456789 is Smith6789)
**Username and Password are case sensitive*
3. Update account information and click **Submit**.
4. If you would like to opt in for a text message reminder, select **Yes**, type in your cell number and click **Submit**. If you do not want the text message reminder, select **No** and click **Submit**.
5. Select the state where you would like to complete your onsite health screening.
6. Use the drop-down function to choose your desired location, date and time. Click **Register**.
7. Acknowledge the Health Screening Consent by checking the **"I agree"** box located at the bottom of the consent. Enter first & last name in the Signature section. Click **Continue**.
8. Once you have completed the sign-up process, a confirmation page will be generated for you to print for your records. You will also receive a confirmation email with the same information just after scheduling your appointment and 24 hours before your appointment time.

REMEMBER: You must fast (no food) for 9 hours before your appointment. Please drink plenty of water. Black coffee is permitted. Continue to take any prescription medications. If you are diabetic, please consult your physician before fasting.



EMPLOYEE HEALTH SCREENING

Shawnee Mission School District - Center for Academic Achievement

8200 W 71st Street
Overland Park, KS 66204

Date and Time

October 29, 2026
1:00 PM – 6:00 PM

Tests Include: Total Cholesterol, HDL, LDL, Triglycerides, Glucose, Blood Pressure, Height, Weight, Waist Circumference and BMI.

9 hour fast recommended. Black coffee and water permitted.

TO SCHEDULE YOUR ONSITE APPOINTMENT:

1. Go to <https://www.ehealthscreenings.com/signup>.
2. If you have participated in a previous screening facilitated by eHealthScreenings, enter your username and password and click Submit. On the following screen under Step 1, enter the Screening Key: **SHA06** and Click to Select. If you have not participated in a screening, under the NOT YET REGISTERED? box, enter the Screening key: **SHA06** and click Submit. Enter your assigned default username and password. For your assigned default username and password use the following format:
USERNAME: First Initial + Last Initial + DOB (MMDDYYYY) (example: John Smith born 4/23/1975 is JS04231975)
PASSWORD: Last Name + Last 4 SSN (example: John Smith with social 123456789 is Smith6789)
**Username and Password are case sensitive*
3. Update account information and click **Submit**.
4. If you would like to opt in for a text message reminder, select **Yes**, type in your cell number and click **Submit**. If you do not want the text message reminder, select **No** and click **Submit**.
5. Select the state where you would like to complete your onsite health screening.
6. Use the drop-down function to choose your desired location, date and time. Click **Register**.
7. Acknowledge the Health Screening Consent by checking the **"I agree"** box located at the bottom of the consent. Enter first & last name in the Signature section. Click **Continue**.
8. Once you have completed the sign-up process, a confirmation page will be generated for you to print for your records. You will also receive a confirmation email with the same information just after scheduling your appointment and 24 hours before your appointment time.

REMEMBER: You must fast (no food) for 9 hours before your appointment. Please drink plenty of water. Black coffee is permitted. Continue to take any prescription medications. If you are diabetic, please consult your physician before fasting.