

Continuing Education Program

(NURS 1066) Clinical Practice Consolidation (Returning student)

Renewal Health Form deadline: (one month before the start of the new semester)

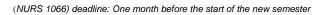
STUDENT CHECKLIST AND ACTIONS REQUIRED

Notice: If you are returning student in this course, it is your **main responsibility** to make sure that all of the requirements below are valid until the end of your Consolidation course and submit this form to ParaMed Office by the given deadline. If you **fail** to do so, you will be **excluded** from clinical/field placement which will **affect** your academic standing & may lead to program **withdrawal**. All costs, service fees and fine associated with the overall health form requirements are responsibility of the student.

RENEWAL: MEDICAL REQUIREMENTS

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ᆜ	Seasonal Flu Shot (mandatory every Nov/Dec)
Ш	 Step 1-Tuberculosis Skin Test, pg. 2 Tuberculosis Skin Test with Negative (-) or (< 10 mm) results from last year (only if applicable) Book an appointment with your doctor/Walk-In Clinic and bring your new PRR form at your scheduled appointment If your previous Two Step-TB skin test result was "Negative or (less than 10 mm)" last year, please ask your doctor to do annual Step 1-TB Skin Test. Fees may apply. Please ensure that your doctor/physician to complete and sign your health form
	Tuberculosis Skin Test Positive (+) or > 10 mm results last year (only if applicable)
	 Book an appointment with your doctor/Walk-In Clinic and bring your new PRR form at your scheduled appointment. If your previous TB skin test result was "Positive (+) or (> 10 mm)" from last year, you are no longer required to redo or pay for another TB skin test or Chest X-ray again. Please advise your doctor/physician to document your previous TB skin test Positive (+) date given/result and do a physical examination to answer the TB Skin Test Questions (No #1-6). Please ensure that your doctor/physician complete and sign your health forms
	Final Signature of doctor/physician & Medical Office Stamp (fees may apply), pg. 2
	Complete any Medical Deficiency from your last visit with ParaMed (if any), pg. 3
	Please bring your old health form documents RENEWAL: ADDITIONAL REQUIREMENTS
photocopies	icates will expire before the start or during your Consolidation course, you must apply for the renewal and bring all originals and one set of of your documents at your scheduled appointment with ParaMed Office. Please read all detail instructions on pgs. 4-5
	Police Vulnerable Sector Check (renew every year) pg. 4
	CPR Level (HCP) Certificate Card- (renew every year) pg. 4
	Mask Fit Test Certificate Card (renew every two years) pg. 4
<u>L</u> _ <u>E</u>	ParaMed Office Appointment & Service Fees, see below & pg. 4
∐ F	ParaMed and George Brown College Agreement Form, pg. 5
	PARAMED OFFICE APPOINTMENT & SERVICE FEES (rates are subject to change)
www.georgebi your schedule ParaMed is a • S • S	e you have everything done and completed, your final step is to create an account and book an appointment with ParaMed Office online at rownhealth.ca by the deadline. It is mandatory that you bring and submit all of the originals, one set of photocopies of your forms and pay the Service Fees at ad appointment. Please DO NOT book or go to ParaMed Office with an INCOMPLETE forms, otherwise they will charged you a Subsequent Visit Fee. "Fragrance Free Zone", kindly do not wear any perfume, lotion or cologne at your appointment. (June 1st, 2017 to May 31st, 2018) Standard Visit Fee - \$55.10 dollars (submission of health form, RN fee, archives & medical records access online) Subsequent Visit Fee (due to a Deficiency List Form) - \$24.15 dollars Cancelled or Missed Appointment Fine-\$55.10 dollars (without 24 hour notice) Mask Fit Test-\$44.90, Photocopy - \$3.00 CONTACT US

- Suzette Martinuzzi, Pre-placement Coordinator at (416) 415-5000 ext. 3415 or via email smartinu@georgebrown.ca
- The Clinical Pre-placement Office campus locations:
- (Mon-Wed) 51 Dockside Drive, Room 702, 7th Floor, Waterfront Campus (Thurs-Fri) 200 King Street East, Room 401B, 4th Floor, Building "A", St. James Campus: Business Hours: 8:00 am to 3:30 pm, by appointment only/visit https://coned.georgebrown.ca/continuing-education-clinical-pre-placement-health-form-requirements/





CONTINUING EDUCATION (NURS 1066) CLINICAL PRACTICE CONSOLIDATION COURSE (Returning student) RENEWAL HEALTH FORM

Name x				
GBC ID# x_				
	(ParaMed Office Official Stamp)			
Deadline Dat	ate x			
Total Clinica				
	on: (total 200 hours)			
Extended Co	onsolidation: (total 400 hours)			
Ontario legisla: accordance wii placement sett employees and outlined. Our p unable to recei 1. SEA Influe are o vacc subn The denie	MEDICAL REQUIREMENTS DOCTOR/PHYSICIAN/HEALTHCARE PROVIDER TO COMPLETE, SIGN & STAMP ation specifies certain surveillance requirements for those entering into healthcare practice settings. The Program policy was on the communicable disease surveillance protocols, specified under the Public Hospitals Act, to meet the requirements of of this process is necessary to ensure that our students protect their health and safety, and the health and safety of patient of the students. Other than the influenza vaccine, the completion of this information is not optional, and all sections must be of placement partners have the right to refuse students who have not met their immunization standards. If, for medical reasons, paire a required immunization or Chest X-ray, a medical note of this exclusion must be provided on the form. ASONAL FLU SHOT (mandatory every year in November/December) Juenza virus vaccine is available free of charge from health services in the fall or can be obtained from your healthcare provide encouraged to submit evidence of the vaccination in December. If you know or suspect that you have an allergy to excination preservatives, or components, please discuss your options with your HCP. Do not worry about the flu shot at this time influenza vaccine is not mandatory; however, if an outbreak occurs at an assigned agency, and flu vaccine was not received, and access to the facility, thus jeopardizing the successful completion of your placement. Seasonal Flu Shot Given Date (mm / dd / yyyy) Healthcare professional signature (mm / dd / yyyy) Negative (-) with less than (< 10 mm): If you have proof of previous Two Consecutive Step-TB Skin Test done and result of "Negative with less than (< 10 mm)" induration, please ask your doctor to renew your Step 1-TB Skin Test only and documents to renew your Step 1-TB Skin Test only and documents to renew your Step 1-TB Skin Test only and documents to renew your Step 1-TB Skin Test only and documents to renew your Step 1-TB Skin Test only and documen	our students' ents, visitors, completed as your client is der. Students ggs or other me; you may er/December. , you may be		
	STEP 1-TB SKIN TEST			
	(Given Date: mm / dd / yyyy) (Date Read: 48-72 hours after date given) (Induration size) (mm)			
Positive (+) with more than (> 10 mm): If you have proof of previous TB Skin Test done and the result was "Positive with more than 10 mm)" induration, you are NO LONGER required to do any TB Skin test or Chest X-ray again. Please advise your doctor/physician to do annual physical examination only and answer questions letters (A-F) below. Fees may apply. TB SKIN TEST POSITIVE WITH (MORE THAN >10 MM) INDURATION DOCTOR/PHYSICIAN MUST DO ANNUAL PHYSICAL EXAM & ANSWER LETTERS (A-F) BELOW:				
۵۱		dhaaad		
a)		d/yyyy)		
ŕ	b) History of disease? Yes or NoDate (mm /dd/ yyyy)			
d) Does this student have signs/symptoms of active TB on physical examination? Yes or No				
e)	INH Prophylaxis?(Treatment) Yes or No Date (mm /dd/ yyyy)			
f)	Specialist (Public Health) Referred? Yes or No Date (mm /dd/ yyyy)			
ŕ	ature of doctor/physician/health care professional: (pg.			
Date (mm/c	/dd/yyyy)Medical Office Stamp	(pg. 2)		



GBC ID# x

(NURS 1066) CLINICAL PRACTICE CONSOLIDATION COURSE (Returning student) RENEWAL HEALTH FORM

3. MEDICAL DEFICIENCY LIST

DID YOU HAVE ANY MEDICAL DEFICIENCY FROM YOUR LAST VISIT WITH PARAMED OFFICE? If so, please read carefully the instructions below and use the information that only applies to you:

→	If your old health form was " NOT CLEARED " due to outstanding/missing MMR or Varicella or Hepatitis B or Tdap booster shot and/or repeat lab test from your last visit with ParaMed, it is mandatory that you complete any deficiency as outlined below before you go and pay for your next ParaMed appointment. Otherwise they will not stamp your form clear again and you will pay a returning visit fee.		
	Totanua Diphtharia & Partuasia (Tdan) must be valid every 10 years or get ADACEL begeter shot (Only if applicable)		
	Tetanus, Diphtheria & Pertussis (Tdap)-must be valid every 10 years or get ADACEL booster shot (Only if applicable) • Repeat Dose Date:/(mm / dd / yyyy)		
	Measles, Mumps & Rubella (MMR) (if only outstanding from your last visit with ParaMed)		
	Repeat Dose Date:/(mm / dd / yyyy)		
	Repeat laboratory blood test report after last dose		
	Varicella (if only outstanding from your last visit with ParaMed)		
	 Repeat Dose Date:/(mm / dd / yyyy) 		
	Repeat laboratory blood test report after last dose		
	Hepatitis B (if only outstanding from your last visit with ParaMed)		
	Repeat Dose Date:/(mm / dd / yyyy)		

If your old health form was stamped as "CLEARED" from your last visit with ParaMed, NO injection and/or booster shot required. But it is mandatory that you bring your old health form documents. Please disregard this section.

Repeat laboratory blood test report after last dose

→ If your old health form was stamped as "EXCEPTION" from your last visit with ParaMed, NO injection and/or blood test required and/or doctor/HCP signature required unless given/advised by your doctor/HCP. But it is mandatory that you bring your old health form documents. Please disregard this section.

_____ GBCID# x______

(NURS 1066) CLINICAL PRACTICE CONSOLIDATION (Returning student) ADDITIONAL REQUIREMENTS

	ADDITIONAL REGULEMENTS
4.	RENEWAL: POLICE VULNERABLE SECTOR CHECK (every year)
	☐ Issued Date/Stamp Date//Expiry Date//_ (one year after the issued date) mm/ dd / yyyy mm/ dd / yyyy
	Notice: If you are registered in this course, you are required to renew your police vulnerable sector check every year and must be valid for the entire academic year. Please ATTACH the original police vulnerable sector check result and submit it to ParaMed Office at your scheduled appointment. Students cannot attend placement until ParaMed Office has received the original written police check report. If your police check record is " Not Clear " or " Positive ", this may jeopardize your academic standing and may lead to program withdrawal. Please contact your academic program coordinator.
	Please read carefully the instructions below in how to apply for police check according to your regional police service:
	 For students who currently reside in Toronto region (with a postal code that starts with letter "M") To apply or renew your Toronto police check, you must book an appointment to see Suzette Martinuzzi at 416-415-5000, ext 3415, or smartinu@georgebrown.ca. The Clinical Pre-placement office is located at 51 Dockside Drive, 7th Floor, Room 702 Waterfront campus, Toronto, ON M5A 0B6 It is mandatory that you bring a money order/bank draft payment of \$20.00 dollarsand payable to Toronto Police Service and a government issued photo ID card at your scheduled appointment. (We do not accept cash, credit card or personal cheque) Toronto Police Service will take 4 to 8 weeks or longer to receive and process your police check results. It is your responsibility to
	apply or renew your police check prior to your health form deadline. For more details, visit <u>Police Vulnerable Sector Check website.</u> For students who currently reside in another region such as (Durham, Halton, Hamilton, London, Niagara, Peel & York)
	 or other province If you live in another region such as (Durham, Halton, Hamilton, London, Peel & York) or other province, please apply directly at your specific regional police service and they can take 2- 4 weeks to process your application form. Niagara Regional Police Service will take 9-10 weeks to process, so you must apply asap. Please make sure that your police check is valid for the entire academic year. For more details, visit Police Vulnerable Sector Check website.
	 If you require a volunteer letter in order to pay for the student rate except Peel region, please email us your full name, GBC ID# program name and your regional police service complete address. For more details, visit Police Vulnerable Sector Check website.
5. RENEWAL: CPR LEVEL (HCP) CERTIFICATE CARD (every year) CPR Level (HCP) Certificate Card-(No Standard First Aid course required) it is mandatory that you renew your certificate is rene year and must be valid for the entire academic year. For the list of First Aid Approved Trainers, please check their website availa area. No Online CPR training certificate is accepted. It is mandatory that you have it done with a standard in-class format. Please original certificate card and photocopies at your scheduled appointment with ParaMed Office.	
	CPR Level-HCP Certificate Card
	☐ Issued Date/Stamp Date// Expiry Date/_/ mm/ dd / yyyy mm/ dd / yyyy
6.	RENEWAL: MASK FIT TEST CERTIFICATE CARD (every two years) ParaMed Office will do the mask fit test for you at your scheduled appointment. Please do not eat, drink and chew gum 30 minutes prior to your ParaMed Office appointment. If you are expecting or pregnant, you need to submit a medical note to exempt you from mask fit test. All male students must be clean-shaven. All students must be tested and fitted for an appropriate mask (respirator) in the event of flu (or other airborne/droplet) outbreak. Cards must clearly state the mask type (model) and size. Please ensure you carry your mask fit card at all times during placement. Mask fit cards are valid for two years after the issue date.
	☐ Issued Date// Expiry Date//(two years after the issued date) mm / dd / yyyy

7. PARAMED OFFICE APPOINTMENT & SERVICE FEES

- Once you have everything done, your final step create an account and book an appointment with ParaMed online at www.georgebrownhealth.ca.
- ParaMed Office is a "Fragrance Free Zone", kindly do not wear any perfume, lotion or cologne at your appointment.
- Download your ParaMed Office Confirmation Visit Sheet
- Fill-out and complete all of the sections with your Name, ID#, Program, telephone & email information, pgs. 2-5
- Please be prepared for your mask fit testing before you go to your <u>ParaMed</u> appointment.
- Bring and submit ALL OF YOUR of all your old and new health form documents, lab test reports, immunization records, police check and CPR HCP certification: (1) set of originals and (1) set of photocopies, **pgs. 2-5**
- Bring your Initial Visit and Mask Fit Test fee payment, page 1.
- After your ParaMed Office appointment, please keep all of your original forms and documents with you for future reference. GBC does not keep or maintain any hard copies of your health form records.



George Brown College & ParaMed Agreement Form (Complete prior to ParaMed Office appointment)

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rogram x				
I xcancellation of admission.	(Print Name) understand that any false statement is grounds for			
or withheld. I understand that it is my responsibility	my admission privilege on the basis of medical information submitted to inform the appropriate George Brown College personnel of any edical condition which may place me at risk or pose a risk to others at			
I will pay all the services fees and authorize ParaMed	Office to review the above information.			
X_ (Signature) (Date)				
Element of Risk				
elements of risk. Injuries may occur while participal or the college. By taking part in this activity, you are	ps, clinical and field placements or job shadowing involve certain ting in this activity without any fault of the student, the placement e accepting the risk that you may be injured. Following the Health is signing below you agree that you have reviewed the element of safety Rules of your placement.			
	diately to your supervisor and to your faculty. Completing Workers injury while participating in placement must take place within 72			
X(Signature) (Date)				

Contact Us

Suzette Martinuzzi, Coordinator at (416) 415-5000 ext. 3415 or via email smartinu@georgebrown.ca Clinical Pre-placement Office campus locations: (Mon-Wed) 51 Dockside Drive, Room 702, 7th Floor, Waterfront Campus (Thursday-Friday) 200 King Street East, Room 401B, 4th Floor, Building "A", St. James Campus Business Hours: 8:00 am to 3:30 pm, by appointment only or visit FT Program Pre-placement

FREEDOM OF INFORMATION ANDPROTECTION OF INDIVIDUAL PRIVACY ACT

The personal information on this form is collected under the legal authority of the Colleges and Universities Act, R.S.O. 1980, Chapter 272, Section 5, R.R.O. 1990, Regulation77 and the Public Hospital Act R.S.O.1980 Chapter 410, R.S.O. 1986, Regulations65 to 71 and in accordance with the requirements of the legal Agreement between the College and the agencies which provide clinical experience for students. The information is used to ensure the safety and wellbeing of students and clients in their care.