

**Continuing Education Program  
(NURS 9215) Clinical Consolidation Course  
Renewal Health Form deadline:**

**(one month before the start of the new semester)**

**RETURNING STUDENT CHECKLIST AND ACTION 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**

- Seasonal Flu Shot (**mandatory every Nov/Dec**)
- 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**

If your certificates will expire before the start or during your Consolidation course, you must apply for the renewal and bring all originals and one set of photocopies 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**
- [Basic Life Support \(BLS\) or CPR Level \(HCP\) Certificate](#) (renew every year) **pg. 4**
- [Mask Fit Test Certificate Card](#) (renew every two years) **pg. 4**
- [ParaMed Office](#) Appointment & Service Fees, **see below & pg. 4**
- ParaMed and George Brown College Agreement Form, **pg. 5**

**PARAMED OFFICE APPOINTMENT & SERVICE FEES (rates are subject to change)**

**Notice:** Once you have everything done and completed, your **final step** is to **create an account and book an appointment** with ParaMed Office online at [www.georgebrownhealth.ca](http://www.georgebrownhealth.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 your scheduled appointment. Please **DO NOT** book or go to ParaMed Office with an **INCOMPLETE** forms, otherwise they will **charged** you a **Subsequent Visit Fee**. ParaMed is a **“Fragrance Free Zone”**, kindly **do not wear** any perfume, lotion or cologne at your appointment.

**(June 1<sup>st</sup>, 2019 to May 31<sup>st</sup>, 2020)**

- Standard Visit Fee - \$57.27 dollars (submission of health form, RN fee, archives & medical records access online)
- Subsequent Visit Fee (due to a Deficiency List Form) - \$25.16 dollars
- Cancelled or Missed Appointment Fine-\$57.27 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](mailto:smartinu@georgebrown.ca)
- The Clinical Pre-placement Office campus locations:
- **(Mon-Wed)** 51 Dockside Drive, Room 702, 7<sup>th</sup> Floor, Waterfront Campus  
**(Thurs-Fri)** 200 King Street East, Room 401B, 4<sup>th</sup> 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/>



(NURS 9215) CLINICAL CONSOLIDATION COURSE  
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.

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)
- Repeat laboratory blood test report after last dose

- ➔ 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.
- ➔ 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.

**(NURS 9215) CLINICAL CONSOLIDATION COURSE  
RENEWAL HEALTH FORM  
ADDITIONAL REQUIREMENTS**

**4. POLICE VULNERABLE SECTOR CHECK (renew 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. All costs associated with the police check application and additional fees related to fingerprint, court documents and Record Suspension (formerly Pardon) process are responsibility and paid by the student.

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 dollars** and 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 [Police Vulnerable Sector Check website](#).

**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. BASIC LIFE SUPPORT (BLS) OR CPR LEVEL (HCP) CERTIFICATE (renew every year)**

[CPR Level \(HCP\)/ BLS Certificate Card](#)-(No Standard First Aid course required) it is mandatory that you renew your certificate is renewed every year and must be valid for the entire academic year. For the list of First Aid Approved Trainers, please check their website available in your area. No Online CPR training certificate is accepted. It is mandatory that you have it done with a standard in-class format. Please bring your original certificate card and photocopies at your scheduled appointment with ParaMed Office.

**BLS/CPR Level HCP Certificate**

Issued Date/Stamp Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Expiry Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
mm / dd / yyyy mm / dd / yyyy

**6. MASK FIT TEST CERTIFICATE CARD (renew 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 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](http://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 [ParaMed](#) 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)**

Name x \_\_\_\_\_

Program: **(NURS 9215) Clinical Consolidation Course**

I x \_\_\_\_\_ (Print Name) understand that any false statement is grounds for cancellation of admission.

I understand that the college has the right to cancel my admission privilege on the basis of medical information submitted or withheld. I understand that it is my responsibility to inform the appropriate George Brown College personnel of any communicable disease, special need, exception or medical condition which may place me at risk or pose a risk to others at George Brown College or on placement.

I will pay all the services fees and authorize ParaMed Office to review the above information.

x \_\_\_\_\_  
**(Signature) (Date)**

**Element of Risk**

All experiential learning programs, such as field trips, clinical and field placements or job shadowing involve certain elements of risk. Injuries may occur while participating in this activity without any fault of the student, the placement or the college. By taking part in this activity, you are accepting the risk that you may be injured. Following the Health and Safety rules of your placement is required. By signing below you agree that you have reviewed the element of risk and are willing to comply with the Health and Safety Rules of your placement.

If an injury should occur, it must be reported immediately to your supervisor and to your faculty. Completing Workers Safety Insurance Board forms and reporting any injury while participating in placement must take place within **72 hours** of occurrence.

x \_\_\_\_\_  
**(Signature) (Date)**

**Contact Us**

Suzette Martinuzzi, Coordinator at (416) 415-5000 ext. 3415 or via email [smartinu@georgebrown.ca](mailto:smartinu@georgebrown.ca)  
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Business Hours: 8:00 am to 3:30 pm, by appointment only or visit [FT Program Pre-placement](#)

**FREEDOM OF INFORMATION AND PROTECTION 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, Regulation 77 and the Public Hospital Act R.S.O. 1980 Chapter 410, R.S.O. 1986, Regulations 65 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.