## Clinical Requirements

done recently (June of		-			*	er. If a physical has been apleting this form.
Physical examination		for clinical rotations at Sunnyview,				
Physical examination VA Medical Center,	and Bu	ıtler Memorial Ho	ospital.		ioi cinnea	i rotations at bunny view,
,			1			
Please state any abnocarrying out duties as		_	•		-	ns the student may have in
I do herby certify that	nt on (d	ate)	I examined			and found him/her
physically able to car	re for e	lderly patients an	d that the s	tudent has	no communicable	and found him/her diseases.
Physician's Signatur	e					
Please print physicia						
Address						
Phone number						
Step 2- Obtain a 2 st clinical like Med-Ex MUST HAVE TWO	press.		ude a total	of 4 visits.	This can be comp	oleted at a doctor's office o
	TB test date Date test was read		Results		Signature	
Step 3- Obtain a flu will not be permitted		1 2	our clinica	al site. Any	student who does	s not have a current vaccine
Date given		Vaccine		Lot #		Signature
<u>S</u>						3
Step 4- this informat	ion can	be filled out by	a doctor's	office or pa		
Vaccine			Date		Signature of individual filling out vaccine history.	
Last Tetanus vaccir						
Last MMR vaccine					]	
Varicella vaccine or	r reliab	le history				
Hepatitis B						
List 3 dates the vac	cine wa	is given			I	