3rd Year DPT MANDATORIES:

IMPORTANT:

Mandatories must be completed by JUNE 15, 2016.

Students will not be able to participate in clinical education internships if they are not in compliance.

During your 3rd year in the DPT program, you will be participating in three (3) clinical education (CE) internships. During your clinical internships a site may have additional specific requirements depending on the contract stipulations that UVM has with that particular site. Please be prepared for the event a site you are assigned requires additional items (e.g. background check, drug test, current physical exam, on-site orientation, interview, etc.). These items may cause you to incur additional fees/expenses.

Completing the mandatories takes time, so please make an appointment with your physician now to complete the annual PPD immunization form. Many immunization requirements can also be completed at a public health clinic.

UVM Student Health does not bill private insurance companies. Any immunizations received at the UVM Student Health office will be billed to the student’s UVM account. You will need to submit your receipt to your own insurance provider.

Please allow time to complete the on-line HIPPA/OSHA training. Keep an eye out for an email from Evolve e-Learning Solutions with a link to begin the course.

Mandatory information can also be found on the College of Nursing & Health Sciences PT mandatories website here:
http://www.uvm.edu/~cnhs/?Page=student_services/gradmandatories.html

If you have any questions regarding mandatories, please contact Lisa McClintock, Clinical Education Administrator in the Department of Rehabilitation & Movement Science: lisa.mcclintock@med.uvm.edu, or (802) 656-3014.
Class of 2017 DPT MANDATORIES

It is the student’s responsibility to ensure completion and maintain yearly compliance.

Keep copies of all documents. Save this document for reference throughout the program.

<table>
<thead>
<tr>
<th>REQUIREMENT</th>
<th>GUIDELINES:</th>
<th>DUE DATE</th>
<th>EXP. DATE</th>
<th>DOCUMENT REQUIRED:</th>
<th>ADDITIONAL INFORMATION:</th>
</tr>
</thead>
<tbody>
<tr>
<td>TB SKIN TEST</td>
<td>TB Skin Test or QuantiFERON Gold test is required.</td>
<td>Before 06/15/2016</td>
<td>Annual</td>
<td>Completed on school form</td>
<td>If positive results, one of the following is required: Student with a first time positive PPD must submit the school form AND a copy of the radiology report. Student with a history of positive PPD must submit the TB Symptom Checklist form.</td>
</tr>
<tr>
<td>CPR</td>
<td>American Heart Association Basic Life Support for Health Care Plus AED</td>
<td>As needed</td>
<td>Certification must remain valid for entire clinical experience</td>
<td>Copy of front and back of CPR certification card with signature</td>
<td>Certification must remain valid for entire clinical experience.</td>
</tr>
<tr>
<td>PROOF OF HEALTH INSURANCE</td>
<td>Provide a copy of your current health insurance card AND Proof of Health Insurance form.</td>
<td>Before 06/15/2016</td>
<td>If your insurance changes, you are responsible for providing updated information</td>
<td>Copy of insurance card or equivalent AND Proof of Health Insurance form</td>
<td></td>
</tr>
<tr>
<td>HIPAA/OSHA TRAINING</td>
<td>Complete your HIPAA/OSHA training via the Evolve e-Learning Solutions website at: <a href="https://www.evolvelms.com/lms/uvm/default.aspx">https://www.evolvelms.com/lms/uvm/default.aspx</a></td>
<td>Before 06/15/2016</td>
<td>Annual</td>
<td>No need to submit a document as long as you’ve completed your training online</td>
<td>Training won’t be considered complete unless all sections of the training have been completed.</td>
</tr>
<tr>
<td>APTA MEMBERSHIP CARD</td>
<td>Copy of APTA membership card</td>
<td>As needed</td>
<td>On card</td>
<td>Copy of your APTA membership card</td>
<td>Yearly renewal is required</td>
</tr>
<tr>
<td>DRIVER’S LICENSE</td>
<td>Provide a copy of your driver’s license</td>
<td>Before 06/15/2016</td>
<td>On license</td>
<td>Copy of your driver’s license</td>
<td>Must be valid through final clinical experience.</td>
</tr>
<tr>
<td>CRIMINAL BACKGROUND CHECK</td>
<td>Follow instructions as indicated by CERTIPHI</td>
<td>Before 06/15/2016</td>
<td>Background check results from provider</td>
<td>Complete on-line application</td>
<td>Follow instructions as indicated by CERTIPHI</td>
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</table>

**IMPORTANT NOTES**

Many clinical placements will require additional site requirements such as a physical, criminal background check, drug screen, or influenza vaccination.

If you visit Student Health for your immunization/serology work, you can request a receipt and file it along with the claim to your insurance company.

It is your responsibility to keep track of timely submission of your requirements and to keep them updated.

Keep a copy of all requirements in a binder for your reference and use during your clinical experiences.

If you know you will be unable to meet the above deadlines for extenuating circumstances, you should schedule a meeting with Lisa McClintock – Lisa.McClintock@med.uvm.edu
Proof of Health Insurance Form - Submit this form AND copy of insurance card

*The University does not pay medical costs resulting from injury during clinical/practicum rotations or other curricular activity unless this injury is due to negligence of the University. All CNHS students are required to carry their own health insurance.

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<thead>
<tr>
<th>Subscriber/Member ID</th>
<th>Primary Subscriber’s Name</th>
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<tr>
<th>Insurance Carrier</th>
<th>Subscriber's Relationship to You</th>
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Submit Form via Fax, Email, or In Person to Lisa McClintock

Fax: 802-656-6586
106 Carrigan Drive, 310 Rowell Bldg.
Burlington, VT 05405

Email: lisa.mcclintock@med.uvm.edu

Please note, UVM Student Health will not submit your paperwork for you. You will need to pick up your documents and submit them.
D.P.T. MANDATORIES

COPYES OF MEDICAL RECORDS/LABS WILL NOT BE ACCEPTED.

PPD - Tuberculin Skin Test
*If a Two-Step PPD is a site requirement, please complete 1) and 2) BCG vaccine does not preclude the need for PPD testing or chest x-ray

<table>
<thead>
<tr>
<th>Date given</th>
<th>Date read</th>
<th>Results (mm)</th>
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(circle result) pos neg

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(circle result) pos neg

IF FIRST TIME WITH A POSITIVE PPD: Must have chest x-ray. Please attach copy of radiology report, and list results.

IF HISTORY OF A POSITIVE PPD:
1) Obtain TB Symptom Checklist from Department
2) Take the TB Symptom Checklist to your appointment and give to your health care provider to complete

*Please note, depending on your site placement, an updated chest x-ray may also be required if you have a history of a positive PPD.

Licensed Health Care Provider Attestation

By signing below, I affirm that I am a licensed health care provider. I am aware that leaving any required fields blank will result in the student being unable to progress in his/her major at the University of Vermont.

Signature of Licensed Health Care Provider | Credentials | Date

Clinic Stamp or Printed Name of Provider | Provider Telephone Number

Submit Form via Fax, Email, or In Person to Lisa McClintock

Fax: 802-656-6586
E-mail: lisa.mcclintock@med.uvm.edu

Please note, UVM Student Health will not submit your paperwork for you. You will need to pick up your form and submit it to Cis Dumas.

The information included on this form maybe released to the infection control officer and clinical education coordinators at sites where you perform your clinical education experience.
Frequently Asked Questions

**General Questions**

Q: How do I submit my documentation?

A: Please submit your mandatories forms to Lisa McClintock via fax, email, or in person.

Lisa McClintock  
College of Nursing and Health Sciences  
106 Carrigan Drive, 310 Rowell  
Burlington, VT 05405  
Phone: (802) 656-3014  
Fax: (802) 656-6586  
lisa.mcclintock@med.uvm.edu

Q: What happens if I can’t submit my mandatories by the deadline?

A: It is imperative that you plan ahead to ensure that your mandatories are completed by the deadline. If you fail to submit your mandatories by the deadline, you will not be able to participate in your clinical experience and your instructor will be notified.

**CPR Certification**

Q: What CPR certifications will you accept?

A: American Heart Association Basic Life Support for Health Care Providers

Q: What if my CPR certification will expire during my clinical education experience?

A: It is your responsibility to be aware of your CPR certification expiration date. Your CPR certification is required to be valid for your entire clinical education experience. If your CPR certification will expire during your clinical, please renew it BEFORE your clinical starts and submit an updated copy of the front and back of your CPR card with signature(s).

Q: Will you accept the American Red Cross Challenge Exam for my CPR Certification course?

A: No, the American Red Cross Challenge Exam is not accepted. It serves as a refresher and not a certification course.

Q: How do I find out about upcoming CPR classes?

A: CNHS offers CPR classes at least twice per semester. You will receive email notices regarding how to sign up for upcoming CPR class dates.

**HIPAA/OSHA Training**

Q: How often do I need to complete HIPAA/OSHA training?

A: Program requirements vary. Please check the mandatories information for your program.
Influenza Vaccination

Q: Am I required to get a flu shot?
A: It is strongly recommended that all CNHS students receive the influenza vaccination both to protect yourself, but also to protect the patients with whom you come into contact. Some sites may require you to get the influenza vaccination before beginning your placement.

PPD

Q: If I have a PPD Skin Test and it is positive, what should I do? First time positive only
A: You will need to be assessed to determine why the skin test is positive. Reasons may include previous BCG vaccine, latent TB (exposed, but not active), or active TB. This will require a symptom review and chest x-ray. You will need to provide a copy of the radiology report.

Q: If I have a history of a positive PPD, what should I do?
A: Do not get another PPD skin test because this will continue to result as a positive. Instead, ask your health care provider to perform a TB Symptom Check. Bring your TB Symptom Check form to your appointment.

Q: What if I have difficulty getting an appointment with my doctor for my PPD?
A: You often do not need a full office visit appointment for the placement and reading of your PPD. Ask if a nurse can place/read your PPD instead.

Additional Questions

Q: How will I know when my mandatories have been completed?
A: It is your responsibility to keep track of the documents that you submit to ensure you have met all requirements.

Q: Does CNHS cover the cost of my immunization and serology work?
A: It is your responsibility to cover the cost. If you visit Student Health for your immunization and serology work, you can request a receipt and file it along with the claim to your insurance company.

Q: Who do I contact if I have additional questions?
A: Lisa McClintock
   College of Nursing and Health Sciences
   106 Carrigan Drive, 310 Rowell
   Burlington, VT 05405
   (802) 656-3014
   lisa.mcclintock@med.uvm.edu