

C.N.A. Medical Clearance Form

One American Way Norwich, CT 06360

		has been examined by me, on
(Student's Name	Printed)	
the following date of, and found to be in good physical condition, free of communicable diseases and is physically able to participate in Certified Nursing Assistant Health training program.		
Restrictions (Visual, audible, sensor	ry, or motor function)	
Medications (if any):		
PPD Results Positive:	Negative:	Date Read:
Print Physician's Name		Signature of Physician
Practice Name:		
Address:		
Phone Number:		

Immunization Documentation Requirements for Certified Nursing Assistant Clinical Rotations

The following immunizations and tests are required for entry into your clinical training and to maintain your ability to function as a student in the clinical settings.

<u>TB/ PPD Mantoux (Tuberculosis)</u>: This test is required for students of <u>ALL</u> programs American Professional Educational Services offers and must be current throughout your clinical rotation time. This test is valid for a period of 6 months to one year. Depending on the facility, this test may have to be repeated prior to starting or finishing clinical time. Documentation must be attached to the physical release form.

<u>Influenza</u>: This vaccination is required for all Paramedic and Allied Health (CNA, EKG Technician, and Phlebotomy) students and must be current throughout your clinical rotation during flu season (October to May). It must be received at the beginning of the season or prior to the start of clinical rotation.