

HOCKING COLLEGE
3301 Hocking Parkway, Nelsonville, Ohio 45764
PH 740-753-3591

To ensure receipt of your Student Health Physical prior to your Clinical/Theory start term, please begin Student Health Physical process 2 months prior to your Clinical/Theory start term.

Dear Provider:

This individual is interested in a career in Nursing, Allied Health, EMT/Paramedic, Fire/Emergency, or Police Science. Please complete the attached physical exam while keeping in mind the following question – **In your opinion, do you feel this person is physically capable of performing his/her responsibilities as a student?** Please understand that we consider pregnancy a normal state. If there is no complication in the pregnancy, no special considerations are needed.

The physical strength demands are as follows:

Heavy Work: Exerting 50 to 100 pounds of force occasionally and/or 25 to 50 pounds of force frequently, and /or 10 to 20 pounds of force constantly to move objects.

The following items are other requirements that are essential for these positions.

- **Physical:** standing, walking, sitting, lifting, carrying, pushing, pulling, climbing stairs, in/out vehicles, operating equipment/machinery, stooping, crouching, crawling, reaching, head/neck movement.
- **Mental:** alertness, precision, ingenuity, problem solving, analytic ability, memory, creativity, concentration.
- **Interpersonal:** talking, persuasiveness, imagination, initiative, speaking ability, diplomacy, judgment, patience.
- **Coordination:** balancing, handling, controls (buttons, knobs, pedal, levers, cranks), driving, grasp, manual dexterity.
- **Perception:** feeling, seeing, hearing, tactile/auditory/olfactory discrimination, aesthetic sense, spatial aptitude.

Immunization/Testing Information

1) Tuberculin Skin Test (Mantoux Method)

A TST (Tuberculin Skin Test) is required within the year before starting clinical and every year after. A student will only be allowed into a clinical area with EITHER documentation of a negative TST or a negative chest x-ray. **A two-step TB skin test is required if this is the first time a student has been tested or if it has been more than 1 year since the last test. A two-step simply means that the TB test is administered and then repeated again 1-3 weeks.** A single BAMT (Blood Assay for *M. Tuberculosis*) may be substituted for the TST. Please attach results to the physical form.

2) Tetanus, Diphtheria, Pertussis (Tdap)

Due to the increase in Pertussis and the subsequent risk to unprotected clients, students entering the nursing, Medical Assistant, Physical Therapy Assistant, Dietetic programs must have a Tdap vaccination.

3) Varicella (Chickenpox)

Two doses of varicella vaccine separated by 4 weeks or a negative titer is required. **If titer shows no immunity, vaccination is required.** If a titer is chosen, please attach results to the physical form.

IMPORTANT! MMR and varicella vaccines should be administered on the same day. If not, they must be separated by 4 weeks.

4) Measles, Mumps, Rubella (MMR)

Persons born in or after 1957 who cannot document prior vaccination must receive two doses of MMR separated by at least 4 weeks. Alternatively, serologic testing (titer) could be chosen to determine immunity to measles, mumps, and rubella. Persons born before 1957 should have at least one dose of MMR if they do not have laboratory evidence of measles, mumps, and rubella immunity (titer.) If a titer is chosen, please attach results to the physical form. Pregnancy should be avoided for 1 month after vaccination. **If titer shows no immunity, vaccination is required.**

IMPORTANT! If the two-step TST is needed, the MMR should be given with the 2nd TST. If the MMR is given 1st, a student must wait 6 weeks before getting the TST.

5) Hepatitis B (HBV)

Due to potential exposure to blood and other potentially infectious materials, completion of a Hepatitis B series is required. Hepatitis B is a series of 3 vaccines given over 6 months.

6) Drug Screen (UDS)

Check with department to see what panel Drug screening is required.

7) Additional immunizations may be required by individual facilities or when the CDC recommends seasonal immunizations due to infectious diseases.

It is the student's responsibility to pay for all costs incurred in obtaining the physical exam.

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STUDENT HEALTH PHYSICAL

Student Name _____ Date _____

Address _____

Gender (circle) M F Date of Birth ____/____/____ Student ID # _____

Technology (circle) Nursing Allied Health

HEALTH HISTORY (student must complete prior to physical exam)

Explain "YES" responses following the question.	YES	NO
1. Have you had a medical illness or injury since your last checkup?		
2. Have you ever been hospitalized overnight?		
3. Have you ever had surgery?		
4. Are you currently taking any prescription or nonprescription (over-the-counter) medications, herbs, or supplements? If yes, list all medications.		
5. Do you have any allergies, including allergy to latex? Any food allergies to bananas, avocados, potatoes, tomatoes, kiwis, chestnuts, peaches, papaya?		
6. Have you ever been considered disabled?		
7. Do you require any special adaptive equipment?		
8. Do you think you are in good health? If no, explain.		

Have you had any of the following?	YES	NO	Have you had any of the	YES	NO
Diabetes			Any Immune System Disease		
Eye Disease			Asthma		
Ear or Hearing Problems			Tuberculosis		
Heart Disease			Hepatitis		
High Blood Pressure			Measles		
Hernia or Rupture			Mumps		
Back/Extremity Problems			Rubella		
Fainting or Blackout Spells			Chickenpox		
Epilepsy or Convulsions			Psychiatric Disorder		

Explain any "YES" responses here _____

I certify that all statements made by me on this medical history are true and complete to the best of my knowledge.

Student Signature _____

Student Name (printed) _____

Physical Examination

Height	Weight	Blood Pressure /	Heart Rate
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Wears Glasses/Contacts/Neither (circle)

Vision	Uncorrected	Corrected
Right	20/	20/
Left	20/	20/
Both	20/	20/

Hearing: Right _____ Left _____

Color Vision (ISHIHARA 14 Color Plate or equivalent)

Normal _____ Deficient _____

Findings	Normal	Abnormal (indicate nature and degree)
Skin/Scalp		
Eyes		
Ears		
Nose		
Mouth & Teeth		
Pharynx		
Head/Neck		
Lymph Nodes		
Thyroid		
Chest		
Breasts (optional)		
Lungs		
Heart		Rhythm _____ Murmur _____
Abdomen		
Hernia		
Back/Spine		
Musculoskeletal		
Neurologic		
Psychiatric		

Any diagnostics ordered? (i.e. EKG, UA, blood work) No _____ Yes _____ (If yes, indicate type and attach results to physical form.)

COMMENTS: _____

I certify that I have on this date examined this individual. On the basis of this examination and the medical history furnished to me, this person has no medical problems that would interfere with participation in their educational program.

Agree _____ Disagree _____ Date _____

Provider's Signature _____ M. D. D.O. N.P. P.A.

Provider's Name _____ Phone _____

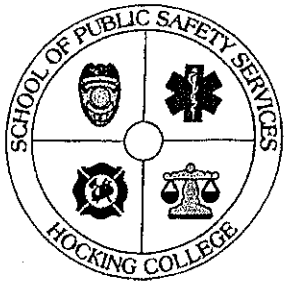
(please print or stamp)

Address _____

Immunizations/Testing

MMR (measles, mumps, rubella) <i>2 vaccines required or titer</i>	#1 vaccine Date _____	#2 vaccine Date _____	MMR Titer (attach results)
Tdap(Tetanus/Diphtheria/Pertussis) <i>Must have within past 10 years</i>	Date _____		
TST (2 step must be performed if 1 st TB) OR a single BAMT (attach results)	#1 skin test Date _____ Result _____mm	#2 skin test Date _____ Result _____mm	Chest x-ray required if TST positive (attach results.)
Hepatitis B Vaccine <i>3 doses required</i>	#1 vaccine Date _____	#2 vaccine Date _____	#3 vaccine Date _____
Varicella (Chickenpox) <i>2 doses required or titer</i>	Vaccine Date _____	Vaccine Date _____	Varicella Titer (attach results)
A Urine Drug Screen (UDS) Check with dept. to see what panel Drug screening is required.	Attach results		

- Nursing Students- return physical to the Nursing Office, Davidson Hall, Room 217 or fax to 740-753-6352.
- Allied Health Students- return physical to Darlene Tipple, Davidson Hall, Room 309 or fax to 740-753-6430.



Hocking College PSS

Student Behavior Commitment

Name (Print)

Date

I recognize the possibility of property damage, serious injury or death in failing to follow strict safety guidelines while participating in the Hocking College PSS programs.

I agree to follow all class, field, lab and grounds safety guidelines and rules as presented to me by the instructors.

I agree to maintain a professional and responsible behavior **(including no profanity in class)**.

I will wear the uniform assigned for classes unless otherwise directed by the instructor.

I will arrive at class in appropriate dress attire with appropriate clothing for varying conditions.

I will comply with grooming standards such as clean, pressed and shaved or beards/mustache neatly trimmed.

I will come to attention when an instructor or other administrative staff enters the room and at the beginning of each hour of class (after break).

I agree to treat and respect others as I would want to be treated.

I agree to respect school property.

If I pass a senior staff member or instructor or college instructor, I will address them with "Good morning sir/mam", or "Good afternoon sir/ma'am."

I will stay focused and pay attention to directions at all times.

I will not be on the Internet or working on anything on the computer that is not related to the topic being discussed during the current class hour unless directed to by the instructor.

I will maintain control of my emotions.

I will attend each class and arrive no later than 0815 hours unless excused absence is preapproved.

I will participate in all portions of the training program as well as cleanup of the facilities. I will clean up after myself and remove any trash to the proper receptacles.

I will not consume or possess alcohol, illegal drugs or controlled substances.

I will operate vehicles in a safe and controlled manner and park in designated student lot.

I will not take any photos/video without instructor approval.

I will turn off my cell phone during instructional periods unless authorized by the instructor.

I will bring fluids for hydration during all classes and lunch/snacks with me each day as needed.

I will bring all injuries and medical needs to the attention of the instructor as soon as possible.

I will not violate state or federal law.

I have read and understand each of the aforementioned commitments. In taking this course I accept complete responsibility for my actions.

Student's Signature



HOCKING COLLEGE SCHOOL OF PUBLIC SAFETY SERVICES
DRUG TEST POLICY
- EFFECTIVE AUTUMN 2016 -

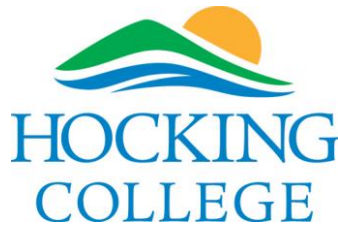
NEW STUDENTS

ALL STUDENTS ENTERING PROGRAMS IN THE SCHOOL OF PUBLIC SAFETY SERVICES (including but not limited to: EMT, OPOTA, CRIMINAL JUSTICE, AND FIRE SCIENCE) MUST SUCCESSFULLY PASS A DRUG TEST.

All students are required to report to Holzer Clinic (2131 East State Street, Athens, Ohio) for their urine drug screen. All costs for testing are the responsibility of the student. Students of the Public Safety Services programs are required to have a negative urine drug screen prior to attending the first day of classes. Students with a positive urine drug screen for drugs not medically prescribed for the applicant or an adulterated result, will forfeit their participation in any Public Safety Services class. An adulterated test or refused test result will be presumed a failed test. Students testing positive will be administratively withdrawn from the current semester and will be responsible for the financial impact resulting from the administrative withdrawal process. The student is eligible to reapply for admission after one calendar year unless the specific program falls under other more stringent state guidelines. If after one calendar year a second positive and or adulterated drug screen results, the student will not be permitted to reapply to any Hocking College Public Safety program.

CURRENT STUDENTS

Students already in a Public Safety Service program may be required to submit a random drug test given reasonable cause. "Reasonable cause" exists when a student exhibits behaviors that suggest impairment from drug use while participating in any Hocking College class, activity, clinical, or related event to their program of study. Students with a positive urine drug screen for drugs not medically prescribed for the applicant or an adulterated result, will forfeit their participation in any Public Safety Services class. An adulterated test or refused test result will be presumed a failed test. Students testing positive will be administratively withdrawn from the current semester and will be responsible for the financial impact resulting from the administrative withdrawal process. The student is eligible to reapply for admission after one calendar year unless the specific program falls under other more stringent state guidelines. If after one calendar year a second positive and or adulterated drug screen results, the student will not be permitted to reapply to any Hocking College Public Safety program.



EMS

Clinical Requirements

All the below fees are estimated and subject to change without notice:

ALL REQUIRED INFORMATION MUST BE COMPLETED AND TURNED INTO
THE PSS OFFICE COORDINATOR ONE WEEK PRIOR TO THE START OF
CLASSES (MANDATORY)

EMT:

Background Check Hocking College PD (BCI Only)	\$25.00
Physical	\$75.00
Drug Screen Holzer (Any location)	\$45.00

Paramedic:

Background Check Hocking College PD (BCI/FBI)	\$55.00 Both
Physical	\$75.00
Drug Screen Holzer (Any Location)	\$45.00
Current 2 Step TB Test Or(Current CXR if unable to complete test within the calendar year)	\$65.00
MMR	\$130.00



Varicella (or physician verification of chicken pox as a child)	\$66.00
Hepatitis B	\$140.00
Flu Vaccine (Current year, fall)	\$9.99
Current CPR Card	



EMS

Out-Of-Pocket Expenses

First Responder:

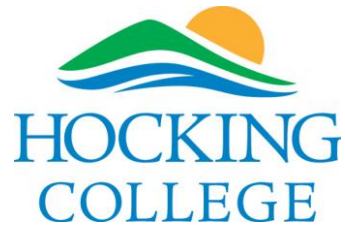
Book	\$108.00
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EMT:

Books	\$450.00 (approximately)
Uniform:	
Shirt (2)	Provided
Blue Pants (2)	\$22.00 each
Black Belt	\$20.00
Shoes/Boots	\$75.00
Watch with Second Hand	\$25.00
Eye Protection	\$10.00
Travel to Clinical Site	\$.50.5 per mile

AEMT:

Books	\$475.00 (approximately)
Uniform:	
Shirt (2)	Provided
Blue Pants (2)	\$22.00 each
Black Belt	\$20.00
Shoes/Boots	\$75.00
Watch with Second Hand	\$25.00
Eye Protection	\$10.00
Stethoscope	\$30.00
Travel to Clinical Site	\$.50.5 per mile



Paramedic:

Books	\$889.00 (approximately)
Uniform:	
Shirt (2)	Provided
Blue Pants (2)	\$25.00 Each
Black Belt	\$20.00
Shoes/Boots	\$75.00
Watch with Second Hand	\$25.00
Eye Protection	\$10.00
Stethoscope	\$30.00
Special Class Textbook (ACLS,PALS,ITLS)	\$150.00
Travel to Clinical Site	\$.50.5 per mile