

**Marywood University Health Examination Form for
Admission to Nurse Aide Program**



TO BE COMPLETED BY APPLICANT (Please Print)

Name: _____

Workforce Education
2300 Adams Avenue
Scranton, PA 185069

Address: _____

City/State/Zip Code: _____

Phone: (570) 340-6060
Fax: (570) 961-4798

Phone: _____ Course Start Date: _____

Sponsor (if applicable) _____

Student Eligibility Requirements for Nurse Aide Training

Note to Healthcare Professional performing physical assessment

- The student must pass a physical examination, and must be free of communicable diseases.
- Student must have an administered and read two-step PPD test prior to the first day of class.
- Training in transferring, positioning, and the turning of residents/clients is an important part of the training program, Therefore, each student must have the physical ability to succeed in such training.
- The student must be able to lift 50 lbs to waist level without restrictions.

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To BE COMPLETED BY HEALTHCARE PROFESSIONAL

2-step Tuberculin test, PPD or Mantoux type

(This is required. Form is not complete until the results are read and reported)

Step 1 Date administered: _____ By Whom: _____ Site: _____

Date read: _____ By Whom: _____ Site: _____

Results: _____ mm

7-21 days after the first PPD is read, Step 2 can be administered

Step 2 Date administered: _____ By Whom: _____ Site: _____

Date read: _____ By Whom: _____ Site: _____

Results: _____ mm

If the PPD results are positive, please describe the treatment given and the date completed:

(Over)

Yes No I certify that the student/employee is free from communicable diseases in the communicable state.

Yes No I certify that the student/employee has no medical conditions/restrictions, which will prevent the student/employee from performing the essential function of the job. (If the student/employee has restrictions that require accommodation, please note them in the comments section below.)

Yes No Is applicant able to lift 50 lbs to waist level?

Comments: If applicant has any limitations, please explain: _____

Date of Examination: _____

Examiner's Name and Title: _____

Examiner's Signature: _____

Address: _____

City/State/Zip Code: _____ Phone: _____

Please Note: All students must undergo a physical examination as well as a two-step Tuberculin test (PPD). Documentation of both are only acceptable if performed within one year prior to the start of class and must be submitted by the first day of class. A PPD expiring during the course of the class will require an annual (one-step) PPD in addition to proof of the two-step PPD.

Direct any questions to: Workforce Education Department at 570-340-6060.