

Welcome New First year S121 Practical Nursing Semester 1 students!

- In preparation of any in-person clinical placement, there are mandatory requirements that you will need to demonstrate completion of, prior to being assigned to a clinical placement. These preclinical requirements could take up to 8 to 10 weeks to complete, and it is recommended that you provide enough time for the approval process.
- Once you have gathered all the necessary documents, you will need to create an account, upload and submit all documents, certificates and
 evidence to the ParaMed Placement Pass by the given deadline on March 28, 2025. A link to the portal can be found at
 https://georgebrowncollege.placementpass.ca/
- If you fail to complete, submit, and upload these requirements to ParaMed Placement Pass portal by the given deadline on March 28, 2025, you will be excluded from clinical practice which can jeopardize your academic standing & may lead to program withdrawal.
- Please note that even if you have graduated from another Health Sciences program either in George Brown College or from another college, university or institution and/or have experience working in any health-related profession, you are still required to complete all the requirement outlined below. If you fail to do so, you will be excluded from clinical practice which can jeopardize your academic standing & may lead to program withdrawal.
- All costs, service fees and fines associated with the overall medical and additional requirements are the responsibility of the student.

Below is a summary of all requirements that must be provided in your submission. Please read and follow all the instructions carefully: Medical Requirements

- All students must provide proof of current immunization records, blood test reports and health status. Book an appointment with your doctor/walk-in clinic and bring the health form with you to document receipt of the following -TDAP, MMR, Varicella, Hep B, Two Step TB Skin Test and Flu Shot requirements. For more information, visit https://www.georgebrown.ca/current-students/preplacement/forms/sally-horsfall-eaton-school-of-nursing-forms
- COVID-19 three doses vaccination: Public Health Ontario continues to recommend that people working with vulnerable communities be fully vaccinated against COVID-19. Clinical agency partners continue to require students to be fully vaccinated against COVID-19 in order to be approved to complete clinical placements within their facilities. Agencies have the right to decline the placement of students who are not fully vaccinated, and students who are not vaccinated are at risk of not being able to complete their clinical placement course requirements. If you are unvaccinated to COVID-19, please contact us to further discuss how this will have a negative impact to your academic and clinical standing in the program.
- IF YOU ARE EXPECTING OR PREGNANT, please talk to your doctor about the medical requirements and you must contact us as this may impact your academic and clinical standing in the program.
- Seasonal Flu Shot-please do not worry about the flu shot at this time, if you have everything completed except your new flu shot record, you may submit your health form documents to the Paramed portal by the given deadline.
- SPECIAL NOTE FOR INTERNATIONAL STUDENTS CURRENTLY RESIDING ABROAD OR OVERSEAS: You may start all medical requirements from your home country to help you save time and money before you arrive in Canada (except the Flu shot which you can get it done here in Nov/Dec). Please book an appointment with your family doctor/physician from your home country and bring this health form with you and start working on all the medical requirements over there. Please make sure that your doctor complete, sign and stamp this form and all the supporting medical documents are translated in English Language. If you fail to do so, you will pay all the extra medical costs and doctor's appointment here in Canada.

Vulnerable Sector Check (must be valid every year for the entire duration of Semester 2 clinical practice from May-August 2025)

- For students who currently reside in **Toronto region with a postal code that starts with the letter "M"**: Please see the Toronto Police instruction sheet and apply online and it could take 8 to 10 weeks to process and receive your VSC record to your email account.
- For student who currently reside in another region such as (<u>Durham, Halton, Hamilton, London, Niagara, OPP, Peel & York</u>) or Out of Province.
- If you have any history of criminal record, please contact us to further discuss how this will have a negative impact to your academic and clinical standing in the program.

Standard First Aid with CPR C (must be valid every three years) & Basic Life Support Certificate (must be valid every year for the entire duration of Sem 2 clinical practice from May-August 2025)

- All students must have a current SFA & BLS certificate to participate in practicum. If you live in Toronto region, you may register for this course at Peak Excellence Shop at https://www.peakexcellenceshop.com/ or at any WSIB Approved First Aid Trainers, for more information visit this link https://www.georgebrown.ca/current-students/preplacement/additional-requirements/certificates
- Please do not register for Emergency First Aid course, we will not accept it. No temporary certificate will be accepted.

Mask Fit Test 3M N95 Certificate (must be valid every two years for the entire duration of Sem 2 clinical practice from May-August 2025)

• All students must have a valid mask fit test certificate. We will accept your mask fit test certificate either from your workplace or other agency if it is valid within 2 years. If you need to complete this step, please book your mask fit testing at Peak Excellence Shop company online at https://www.peakexcellenceshop.com/ and check their Certificate Packages or go to other third-party agency.

Final Step: Once you have everything completed and done and officially registered to your Stu-View account, your final step is to create an account, submit and upload your completed health form documents to the **ParaMed Placement Pass website** at https://georgebrowncollege.placementpass.ca/ by the given deadline.

(Service fees effective on September 1, 2024)

• Initial Clearance Fee-\$73.45 dollars tax included (unlimited document uploads until you received your first clearance, student will pay, and it is non-refundable)

SHOULD YOU HAVE ANY QUESTIONS, PLEASE CONTACT:

Suzette Martinuzzi, Pre-placement Coordinator

Telephone: (416) 415-5000 ext. 3415 Email: smartinu@georgebrown.ca

Business Hours and Locations

Monday to Wednesday (9:00 am-4:00 pm) at 51 Dockside Drive, Room 702, 7th Floor, Waterfront campus, Toronto, ON M5A 0B6 Thursday to Friday (9:00 am-4:00 pm) at 200 King Street East, Main Building "A", 4th Floor, Room 401B, St. James Campus, Toronto, ON M5A 3W8, by appointment only



(S121) Practical Nursing (Winter Term 2025) New First year: Semester 1 & 2 students

Due Date: March 28, 2025

MEDICAL REQUIREMENTS CHECKLIST (Mandatory)

□ Tetanus & Diphtheria vaccine (Td/Adacel vaccine must be valid every 10 years) □ Pertussis vaccine (must provide proof of adult dose received after 18 years of age, otherwise get an Adacel booster) □ COVID-19 three doses vaccination (mandatory attach proof of record) □ Seasonal Flu Shot (mandatory every year in November or December) □ Measles, Mumps & Rubella (documentation of two doses of MMR vaccine OR laboratory evidence of immunity) □ Varicella (documentation of two doses of Varivax vaccine OR laboratory evidence of immunity) □ Hepatitis B (ask your doctor to do blood test, ATTACH copies of blood test reports and all immunization records) □ Two Consecutive Step Tuberculosis Skin Test (must be valid every year) □ Yellow immunization card or any type of immunization records □ Final signature of your doctor/physician and medical office stamp NON-MEDICAL REQUIREMENTS CHECKLIST (Mandatory)	Pertussis vaccine (must provide proof of adult dose received after 18 years of age, otherwise get an Adacel booster) COVID-19 three doses vaccination (mandatory attach proof of record) Seasonal Flu Shot (mandatory every year in November or December) Measles, Mumps & Rubella (documentation of two doses of MMR vaccine OR laboratory evidence of immunity) Varicella (documentation of two doses of Varivax vaccine OR laboratory evidence of immunity) Hepatitis B (ask your doctor to do blood test, ATTACH copies of blood test reports and all immunization records) Two Consecutive Step Tuberculosis Skin Test (must be valid every year) Yellow immunization card or any type of immunization records Final signature of your doctor/physician and medical office stamp
□ Vulnerable Sector Check-(must be valid every year for the entire duration of Sem 2 Clinical Practice from May to August 2025) □ Standard First Aid Certificate -(must be valid every three years for the entire duration of Sem 2 Clinical Practice from May to August 2025) □ Basic Life Support Certificate -(must be valid every year for the entire duration of Sem 2 Clinical Practice from May to August 2025) □ Mask Fit Test 3M N95 Certificate -(must be valid every two years for the entire duration of Sem 2 Clinical Practice from May to Aug 2025) □ Paramed Placement Pass Service Fees □ Fill-out & complete all the top sections with your name, ID#, program, issued/expiry dates and Agreement Form PARAMED PLACEMENT PASS SERVICE FEES (rates are subject to change without further notice)	Standard First Aid Certificate -(must be valid every three years for the entire duration of Sem 2 Clinical Practice from May to August 2025) Basic Life Support Certificate -(must be valid every year for the entire duration of Sem 2 Clinical Practice from May to August 2025) Mask Fit Test 3M N95 Certificate -(must be valid every two years for the entire duration of Sem 2 Clinical Practice from May to Aug 2025) Paramed Placement Pass Service Fees Fill-out & complete all the top sections with your name, ID#, program, issued/expiry dates and Agreement Form PARAMED PLACEMENT PASS SERVICE FEES

Once you have everything done and completed, your final step is to create an account, submit and upload your completed health form documents to the ParaMed Placement Pass website at https://georgebrowncollege.placementpass.ca/ by the given deadline. If you fail to do so, you will be excluded from clinical practice which can jeopardize your academic standing & may lead to program withdrawal.

(Service fees effective on September 1, 2024)

Initial Clearance Fee-\$73.45 dollars tax included (unlimited document uploads until you received your first clearance, student will pay, and it is non-refundable)

SHOULD YOU HAVE ANY QUESTIONS, PLEASE CONTACT

Suzette Martinuzzi, Pre-placement Coordinator

Telephone: (416) 415-5000 ext. 3415 Email: smartinu@georgebrown.ca **Business Hours and Locations**

Monday to Wednesday (9:00 am-4:00 pm) at 51 Dockside Drive, Room 702, 7th Floor, Waterfront campus, Toronto, ON M5A

Thursday to Friday (9:00 am-4:00 pm) at 200 King Street East, Main Building "A", 4th Floor, Room 401B, St. James Campus, Toronto, ON M5A 3W8

Page 2 of 8



(S121) PRACTICAL NURSING PROGRAM-NEW FIRST YEAR SEMESTER 1 STUDENTS PREFEQUISITE HEALTH FORM (WINTER TERM 2025)

		PREREQUISITE HEALTH FORM (WINTER TERM 2025)	
Name x			
GRC ID	# X		
Due Da		March 28, 2025	
Due Da	ic.	MEDICAL REQUIREMENTS	
Communic This proce people. The have not not be provide academic SPECIAL help you's doctor/phy complete, doctor's	cable Diseases is necessing completion to their immed on the for and clinical NOTE FOR save time a sisician from sign and stappointme	(DOCTOR/PHYSICIAN/HEALTH CARE PROFESSIONAL TO COMPLETE, SIGN & STAMP) pecifies certain surveillance requirements for those entering into healthcare practice settings. The Program policy was developed in a asse Surveillance protocols, specified under the Public Health Ontario, OHA, OMA and LTCAO to meet the requirements of our students' sessary to ensure that our students protect their health and safety, and the health and safety of patients, children, seniors, employees a ion of this information is not optional, and all sections must be completed as outlined. Our placement agency partners have the right to rumunization standards. If, for medical reasons, your patient is unable to receive a required immunization or Chest X-ray, a medical note of orm. IF YOU ARE EXPECTING OR PREGNANT, please talk to your doctor about the medical requirements and you must contact us as till standing in the program. R INTERNATIONAL STUDENTS CURRENTLY RESIDING ABROAD OR OVERSEAS: You may start all medical requirements from your and money before you arrive in Canada (except the Flu shot which you can get it done here in Nov/Dec). Please book an appointment of your home country and bring this health form with you and start working on all the medical requirements over there. Please make sustamp this form and all the supporting medical documents are translated in English Language. If you fail to do so, you will pay all the extraport there in Canada. Check out the YouTube tutorial videos for all the Medical and Non-Medical recom/channel/UCIQndxFUqeBVhjB3QKPQ91w	placement settings. Ind other vulnerable refuse students who if this exclusion must his may impact your our home country to ent with your family ure that your doctor a medical costs and
1.	TETANU	US & DIPHTHERIA (Td/ADACEL vaccine must be valid every 10 years) attach a yellow card or any immunization rec	ord.
		Date of last Tetanus & Diphtheria (Td/Adacel) booster/(mm/dd/yyyy)	
2.		SSIS (must provide proof of adult dose after 18 years of age) (If not, then you must get a new ADACEL booster))
		Date of last Pertussis shot/(mm/dd/yyyy)	
3.	vulnerable COVID-1: are not fu are unva in the pro	1 st dose Given Date//(mm/dd/yyyy) 2 nd dose Given Date/(mm/dd/yyyy) 3 rd dose Given Date/(mm/dd/yyy)	ed against t of students who uirements. If you
_		Proof of approved exemption status	
4.	everything	NAL FLU SHOT (mandatory every year in November or December) (Note: Please do not worry about the flu shot at this tim g completed except the flu shot, you may submit this health form to the ParaMed portal by the given deadline)	e. If you have
5.	MEASLE	Given Date/(mm / dd / yyyy) (attach proof of record) ES, MUMPS & RUBELLA (MMR) (Two doses vaccine OR Laboratory evidence of immunity)	
.		Documentation of receipt of two doses of MMR vaccine on or after the 1 st birthday four weeks apart and attach a y any proof of immunization record. This vaccine is not recommended for pregnant women and pregnancy should be av months post immunization. 1 st Dose date//	
	OR		
6.			
	OR	Documentation of receipt of two doses of Varivax vaccine on or after the 1 st birthday four weeks apart and attach any proof of immunization record. This vaccine is not recommended for pregnant women and pregnancy should be avmonths post immunization. 1 st Dose date//(mm/ dd / yyyy) 2 nd Dose date//(mm/ dd / yyyy)	
Final S	ignatur	re of doctor/physician/health care professional	(pg. 3)
Date (ı	mm/dd/y	yyyy):Medical Office Stamp:	<i>(pg. 3)</i>



NAMI	≣ x						NTS (Due Date: March 28, 20	
7	was for a	received. <i>A</i> a copy of the	Ask your doctor e laboratory blo	to check the approod test report and	opriate box, do attach it on the	cument the dates of any jur	" laboratory blood test if previous in a dulthood vaccination reconneck out the YouTube tutorial vio	rd. Ask your doctor
		I Initial In	nmune/Reactiv	/e/Positive (> 10	U/L) "Anti-HBs	s or HBsAb" lab test resul	t: NO injections or doses required	d, attach a copy of
		Initial No Section A dental/fie	A & B as outlin eld/clinical prac	on-Reactive/Nega ed below: After the tice. Student is ex	e student has compected to comp	ompleted a 2 nd dose, they w	BsAb" lab test result: Student n vill be given a temporary clearance update on vaccination record per	e to proceed to
		•	1st dose	/		(mm/ dd / yyyy)	ood vaccination record)	
		•	2 nd dose	/	/	(mm/ dd / yyy)		
		•	3 rd dose	JPaAh lah taat raa	/	(five months after 1s	^t dose, repeat HBsAb lab test afte I attach a copy of lab test report.	er four weeks)
		•	ii the repeat i				• • • • • • • • • • • • • • • • • • • •	
				if the repeat lab	test result was	"non-immune", proceed	to Section B series below.	
		Section	B-Second Ser	ies (doctor must	document any	proof of junior or adulthous	ood vaccination record)	
		•	4 th dose	/	/	(mm/ dd / yyyy) (mm/ dd / yyyy)		
		•	6 th dose	/	/	(flin/ dd / yyyy) (five months after 4 th	dose, repeat HBsAb lab test afte	er four weeks)
		•	If the lab tes	 t result is still "nor	n-immune/non	-reactive", student status w	vill be considered a "non-respond	der/exemption".
			lab test result:	NO injections or o	doses required	and attach copy of most red es or No	cent "HBsAg-Antigen Positive"	blood test report
8						ead and follow instructions	s <i>below)</i> Check out the YouTub njB3QKPQ91w	e tutorial videos fo
		your If you skin t	doctor needs to had BCG vac est.	o do annual physic cination it is NOT a t your doctor/heal	cal exam and are a contraindication and care profes	nswer letters (A-F) below. on for skin test, you are still ssional properly complete,	It was "Positive", NO more ann required to provide proof and consign & stamp all the information	nplete a Two Step-Ti
				/ PR	REVIOUS YEAR	R: STEP 1 TB SKIN TEST	/	
	(Da	te Given: m	m / dd / yyyy)	(Date F	Read: 48-72 hou	urs after date given)	(Induration size) (mm))
						B SKIN TEST (7-21 days a	j	
	(Da	te Given on	opposite arm:	mm / dd / yyyy)	(Date Read:	: 48-72 hours after date give	en) (Induration size) (mm))
				Cl	JRRENT YEAR	R: STEP 1 TB SKIN TEST	1	
	(Da	te Given: m	m / dd / yyyy)	/	(Date Read:	: 48-72 hours after date give	en) (Induration size) (mm))
				CURRENT YE	AR: STEP 2 TE	B SKIN TEST (7-21 days at	fter Step 1)	
				/			/	
	(Da		TB SK	IN TEST POSIT	IVE (+) WITH	48-72 hours after date give I MORE THAN >10 MM I YSICAL EXAM & ANSV	en) (Induration size) (mm) INDURATION SIZE VER LETTERS (A-G) BELOW	
	a)	Result		Date		of the X-ray report val	lid within two years)	
	b)	History of	f disease?	Yes or No	Date (mm/	dd/yyyy)		
	c)						mm/dd/yyyy)	
	d) e)	INH Prop	student nave hylaxis (Trea	e signs/symptom tment)? Yes or	IS OF ACTIVE TE	3 on physical examinatio	n?	
	f)			th) Referred?				
	g)			attend their place			· /	
Final	Sign	ature of	doctor/phy	sician/health	care profe	ssional:		(pg. 4)
Date	(mm/	dd/yyyy)	:		Medical Of	ffice Stamp:		(pg. 4)



S121 PRACTICAL NURSING-NEW SEMESTER 1 STUDENT IN WINTER TERM 2025

	NON-MEDICAL REQUIREMENTS (Due date: March 28, 2025)
NAME x	GBC ID# x
• \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Your academic department requires that all students must have a "clear" Vulnerable Sector Check which includes both a criminal record check and a search of sex offenders, valid for the academic year. Please attach the original VSC record, submit and upload it to ParaMed Placement Pass. If you are excluded from placement due to a "not clear" vulnerable sector check record, to will jeopardize your academic standing and can lead to withdrawal. Please contact the CPO Manager/Associate Dean to discuss this matter before you register and pay for this program. All costs associated with the police check application and additional fees related to fingerprint, court documents and Record Suspension (formerly Pardon) process are responsibility and be student. If you have any history of criminal record or not clear Vulnerable Sector Check, please contact us to further discuss how this will have a negative impact to your academic and clinical standing in the program. Check out the YouTube tutorial videos for all the non-medical requirements at https://www.youtube.com/channel/UCIQndxFUqeBVhjB3QKPQ91w Are you under 18 years of age? YES or NO (check mark) If your answer is YES, your regional police service will NOT accept and deny your vulnerable sector application at this time. They will allow you to apply only after your 18th birthday, please contact us for more information, as this may cause a delay in
	meeting the submission deadline. • If your answer is NO , please proceed and follow the instructions according to your Regional Police service below.
■ S T p	SPECIAL NOTE FOR INTERNATIONAL STUDENTS CURRENTLY RESIDING ABROAD OR OVERSEAS ONLY: The Vulnerable sector check cannot be started until you are physically in Ontario, Canada. It is essential that you begin the process for the Vulnerable sector check as soon as you arrive and have an official address in Ontario, Canada, because the process can take at least 8-10 weeks to receive the necessary vulnerable sector check clearance particularly if you live in Toronto begion with a postal code that start with letter "M".
	udents who currently reside in the Toronto region with a postal code that starts with the letter "M", it is importan
that yo	ou follow these steps:
	 Contact Suzette Martinuzzi, Clinical Pre-placement Co-ordinator to request the VSC Organization Code. Once you have the code, go to the Toronto Police Service website.
	 Scroll down to Vulnerable Sector Check, and read the information provided. Then scroll down to the Register for an Adul Police Record Check Account box and select the Fill Out Form button.
	Complete the "Registration Account Information" and select the "Process My Registration" button. This creates your account Now you must complete the six stages (Report, Documentation, Demographics, Payment Status, Authentication Status, and Application Status) of the VSC application. All six stages are mandatory.
	On the Report Selection page, scroll down to the Vulnerable Sector Check table and choose the Unpaid Student Placemen option. Then go to the Reason for the Police Record Check table and complete as follows:
	under Course Name, type your course (or program) name
	 under VSC Organization Code, type in the code provided to you by the Clinical Pre-placement Co-ordinator under Vulnerable Clientele Duties, type "To provide care, support, and guidance for the health and well-being of vulnerable persons from 1 to 99 years old"
	 where you have to list which vulnerable sectors you will be working with, type "Children, teenagers, elderly, seniors, and persons with physical and mental disability"
	 Finish answering the remaining stages. Note that payment for your online application must be provided by credit card only. Once your submission has been finalized, Toronto Police Service will send you an email notification indicating when you will receive your VSC results to your email account. Processing times typically take 8-10 weeks from the date the application is received but may take longer due to volume of requests and/or time of year.
	udent who currently reside in another region such as (<u>Durham, Halton, Hamilton, London, Niagara, OPP, Peel &</u>
<u>York)</u> (or Out of Province (your postal code must start with the letter "K, L, N, P") Please check your specific regional police service website, and they take 8 to 10 weeks to process and issue your vulnerable sector check.
	If you require a volunteer letter to pay for the student rate (except Peel region), please email us your full name, GBC ID# program name and your regional police service complete business address. For more details, visit . Vulnerable Sector Chec website. If you do not receive your VSC after 6 weeks, it is your responsibility to contact and follow-up with your specific Regional Police Service
	VULNERABLE SECTOR CHECK
	(must be valid every year for the entire duration of Semester 2 from May to August 2025)
☐ Issue	ed Date//Expiry Date//one year after the issued date) mm/ dd / yyyy mm/ dd / yyy



S121 PRACTICAL NURSING-NEW SEMESTER 1 STUDENT IN WINTER TERM 2025 NON-MEDICAL REQUIREMENTS (Due date: March 28, 2025)

NAME x	GBC ID#x
10.	STANDARD FIRST AID WITH CPR LEVEL C & BASIC LIFE SUPPORT (BLS) CERTIFICATE

- It is mandatory that you register for either in-person or Blended Format training class and must be valid for the entire academic year. If you live in Toronto region, you can check the Peak Excellence Shop website at https://www.peakexcellenceshop.com/ and check their Certificate Packages.
- Or you can register at any Ontario First Aid Approved First Aid Trainers available in your area, <u>click here</u> for more information.
- Please **do not** register for an Emergency First Aid course or to any company that offers these courses 100% fully online, we will not accept these types of certificates. We would advise you to retake this course with another company that offers it either hybrid or in person and you will have to pay again. All costs and service fees are the responsibility of the student.
- Please submit and upload your official certificate to your ParaMed Placement Pass account and attach it on the health form. (NO
 temporary certificate accepted).
- SPECIAL NOTE FOR INTERNATIONAL STUDENTS CURRENTLY RESIDING ABROAD OR OVERSEAS ONLY: The SFA and CPR
 level C and BLS course cannot be started until you are physically in Ontario, Canada. It is essential that you begin that you register as
 soon as you arrive, settled, and have an official address here in Ontario, Canada. Please contact us for more information. Check out the
 YouTube tutorial videos for all the Non-Medical requirements at
 https://www.youtube.com/channel/UCIQndxFUgeBVhjB3QKPQ91w

(1		Aid with CPR level C Certificate Card tire duration of Sem 2 clinical practice from	May to August 2025)
	Issued Date// mm/ dd / yyyy	Expiry Date//(mm/ dd/ yyyy	three years after the issued date
		ife Support (BLS) Certificate ne entire duration of Sem 2 from May to Aug	gust 2025)
	Issued Date// mm/ dd / yyyy	Expiry Date/(mm/ dd / yyyy	one year after the issued date)

11. MASK FIT TEST 3M N95 CERTIFICATE (must be valid every two years)

- If you reside in Toronto region, you can get the 3M N95 qualitative mask fit test either from your workplace or at Peak Excellence Shop company and book an appointment on their website at https://www.peakexcellenceshop.com/ and check their Certificate Packages.
- If you live Outside Toronto region or Out of Province, you can book either at <u>ParaMed Home Health Care</u> or <u>www.SOSFirstAid.ca</u> or at any third-party company closer to your area, as long as you have proof of valid certificate.
- All male students must be clean-shaven the same day at your scheduled appointment. No facial hair or jewelry that may interfere with the seal of the mask.Please do not eat, drink, smoke or chew gum one hour prior to your appointment.
- All nursing students must be tested and fitted for an appropriate qualitative mask (respirator) and in the event of flu (or other airborne/droplet)
 outbreak
- · Certificate/card must clearly state the mask model, type, and size and always carry it during your placement.
- SPECIAL NOTE FOR INTERNATIONAL STUDENTS CURRENTLY RESIDING ABROAD OR OVERSEAS ONLY: This mask fit test cannot be started until you are physically in Ontario, Canada. It is essential that you begin that you register as soon as you arrive, settled, and have an official address here in Ontario, Canada. Please contact us for more information. Check out the YouTube tutorial videos for all the Non-Medical requirements at https://www.youtube.com/channel/UCIQndxFUqeBVhjB3QKPQ91w

***************************************	Fit Test 3M N95 Certificate the entire duration of Sem 2 from May to August 2025)	
 ☐ Issued Date// mm / dd / yyyy	Expiry Date/(two years after the issumm / dd / yyy	ed date)

FINAL STEP:

- Once you have everything completed, your final step is to create an account, submit and upload your Health Form documents to the **ParaMed Placement Pass website at https://georgebrowncollege.placementpass.ca/** by the given deadline.
- After 48 hours of submission, you must Sign-in to your portal account to check the ParaMed RN evaluation result of your forms, download the Student Status Summary Report Certificate and attached it to your original health form documents, as you need to show this proof to your upcoming placement agency and for future reference.

WHAT'S COMING UP NEXT?

 For 2nd year in Semester 3 & 4 Clinical Application courses (NURS 2018 & NURS 2020), you will be required to renew your Step 1-TB Skin Test, Vulnerable sector check and Basic Life Support certificate and submit it to Paramed again two months before the new semester start per intake. Fees will apply.



George Brown College & ParaMed Agreement Form

l <u>x</u>	(Print Name) understand that any false statement is
grounds for cancellation of admission.	(Print Name) understand that any false statement is
submitted or withheld. I understand that	ght to cancel my admission privilege on the basis of medical information at it is my responsibility to inform the appropriate George Brown Collegence, special need, exception or medical condition which may place me a Brown College or on placement.
	orize ParaMed to review the above information.
<u>×</u> (Signature)	(Date)
Element of Risk	
involve certain elements of risk. Injurthe student, the placement or the coll may be injured. Following the Health	such as field trips, clinical and field placements or job shadowing ries may occur while participating in this activity without any fault of ege. By taking part in this activity, you are accepting the risk that you and Safety rules of your placement is required. By signing below you lement of risk and are willing to comply with the Health and Safety
	ported immediately to your supervisor and to your faculty. Completing ns and reporting any injury while participating in placement must take
X	

Contact Us

Suzette Martinuzzi, Coordinator at (416) 415-5000 ext. 3415 or via email smartinu@georgebrown.ca Virtual Business Hours: 9:00 am to 4:00 pm, by appointment only

FREEDOM OF INFORMATION ANDPROTECTION OF INDIVIDUAL PRIVACY ACT

The personal information on this form is collected under the legal authority of the Colleges and Universities Act, R.S.O. 1980, Chapter 272, Section 5, R.R.O. 1990, Regulation77 and the Public Hospital Act R.S.O.1980 Chapter 410, R.S.O. 1986, Regulations65 to 71 and in accordance with the requirements of the legal Agreement between the College and the agencies which provide clinical experience for students. The information is used to ensure the safety and wellbeing of students and clients in their care.



net Consent Form for Use and Disclosure of Student Information

Student Number:	Educational Program: S121 PN Semester 1-Winter 2025
First Name:	Last Name:
Permission to Use and Disc Information	close Your Student Related Personal Information and Personal Health
By signing this consent, you auth	orize your educational Programto:
Program) to authorized staff of Re	ersonal information (name and student profile information that is under the custody and control of your ceiving Agencies for the purpose of locating and coordinating an appropriate placement experience (e.g. eceptorship) as required by your educational program;
your compliance against Receiving may be tracked include personal in as immunity/immunization status your educational program, and is r Disclose your personal information	information and personal health information relating to placement prerequisites, for the purpose of tracking a Agency safety and infection control prerequisites for accepting students. Placement prerequisites that formation such as CPR certification or criminal records check status, and personal health information such of vaccine-preventable diseases. Placement prerequisite information is used only by staff involved with lever disclosed to users external to your educational program. In to the owner and administrator of the HSPnet system, namely Provincial Health Services Authority llow PHSA to indirectly collect your personal information to provide HSPnet student placement
2. Consent Period	
	ely and shall remain valid for up to six years, or shall be voided upon your ormal withdraw al from the Program, or upon written request as described below.
3. Your Rights With Respect t	o This Consent
	have the right to refuse to sign this consent, and if you refuse your placement will be processed ace of the Program and Receiving Agency.
Information in HSPnet, which survia HSPnet, is distributed with the	urity Policies - A copy of the document entitled <i>Identified Purposes and Handling of Personal</i> mmarizes Privacy and Security policies relating to how we may use and disclose your personal information is Consent Form. You may wish to review the complete Privacy and Security Policies for HSPnet before and Security Policies may be amended from time to time, and you may obtain an updated copy by contacting
personal information or personal experience. Such requests must b requested, we must restrict our us	on Use/Disclosure — You have the right to request that we restrict how we use and/or disclose your health information via HSPnet for the purpose of locating and coordinating a suitable placement e made in writing to the placement coordinator for your Program. If we agree to a restriction you have see and/or disclosure of your personal information in the manner described in your request. If this restriction e your placement via HSPnet, then your placement will be processed manually at the earliest convenience of serving agency.
placement coordinator for your P	have the right to revoke this consent at any time. Your revocation of this consent must be in writing to the rogram. Note that your revocation of this consent, or the voiding of this consent upon your completion or ould not be retroactive and would not affect uses or disclosures we have already made according to your
3.5 Right to Receive a Copy of Thi	s Consent Form - You may request a copy of your signed consent form.
	nformation is done under the authority of the privacy legislation that applies to educational . For more information visit https://hspcanada.net/privacy-and-security/
	m to use and/or disclose my personal information via HSPnet for the purpose of locating and
coordinating appropriate student placeme	nt(s) as required by the curriculum.
Signature of Student	Date (MM/DD/YYYY)