**N 84L: Student Onboarding Instructions for San Jose Regional Medical Center (SJRMC)**

1. Complete the attached *Non-SJRMC Employees Checklist,* save as PDF per instructions below, and e-mail it with the accompanying documentation to the fhda email to the faculty of record, Sherri Cozzens (cozzenssherri@fhda.edu).
2. All submissions must be saved **in PDF format**. Scans are acceptable as long as they are saved in **PDF format**. JPEG and other formats are not acceptable and will be rejected by SJRMC. If you do not have electronic version or are unable to scan your records, you must contact the faculty of record **STAT** and make the appropriate arrangements.
3. Make sure all submitted documents are **saved and named as per instructions!**  Documentation that does not comply with the provided specifications cannot be processed and will be rejected by SJRMC.
4. All documentation must be submitted by the due date as indicated in the notification e-mail.

**Instructions for Non-SJRMC Employees Checklist and accompanying documentation:**

1. Demographics:
   * Enter personal data
   * Under the ‘Department’ put ‘Nursing Education’
2. 10-panel Drug Screen and Background Check:
   * The form states “within 30 days” – ignore this. It is acceptable to submit your FIRST background check/drug screen if you have not yet done your second year one.
   * **However,** your 2nd-year screen and background check are to be done **2 to 3 weeks prior to starting Q4**.
3. TB tests:
   * Quantiferon must be current. Students going into Quarter 4 are usually due for their 2nd year QFT test. It must be done prior to submitting your paperwork! Specify the date(s) the diagnostic test(s) on the line next to the test. If submitting a CXR, it **MUST** state that the indication for CXR was a positive PPD.
4. Proof of immunization:
   * You **MUST submit TITERS** for all immunizations **except** for tDap and Influenza. **SJRMC will NOT accept** the vaccine proof. If you do not have the titers, complete them right away.
   * Make sure you have documentation indicating that your receive **tDap**, **not DTP** or other similar vaccines (tDap is an adult version of the vaccine). If necessary, please contact your primary provider or De Anza Health Service, and request the correct vaccine or have your records corrected (if DTP entered in error).
   * Enter the dates of the titers, tDAP and flu vaccines on the form*.*
5. Physician clearance report – put a check mark. I will compile the reports using your admission documentation.
6. Fit-test N 95 – write in “N/A.” You will not be fit tested.
7. BLS – make sure your certification is current. Put a check mark, circle BLS and provide the expiration date on the ‘expiration’ line.
8. Save the completed form using the following format: LastFirst\_Checklist (e.g. CozzensSherri\_Checklist)

**Accompanying documentation to be sent with the checklist:**

1. A copy of your 1st year drug screen and background check saved using the following format: LastFirst\_Background (e.g. CozzensSherri\_Background).
2. A copy of your current QFT saved using the following format: LastFirst\_TB (e.g. CozzensSherri\_TB)
3. If you are submitting CXR reading, it **MUST** state that the indication for CXR was the positive PPD.
4. Submit a copy of **ALL** of your immunization records (titers and tDAP) **EXCEPT** flu shot in **a single scanned file** saved using the following format: LastFirst\_Immunizations (e.g. CozzensSherri\_Immunizations)

* Again, you **MUST** submit copies of TITERS for all immunizations except for tDap and Influenza! SJRMC will NOT accept the vaccine proof. For tDap and Influenza include the proof of immunization.

1. Save your most current flu shot form in a separate file as LastFirst\_FluShot (e.g. CozzensSherri\_FluShot). If it is Fall quarter and the flu vaccine is not yet available, submit last year’s documentation.
2. A scan of your current BLS saved as LastFirst\_BLS (e.g. CozzensSherri\_BLS).

**You should submit a total of six files:**

1. LastFirst\_Checklist (e.g. CozzensSherri\_Checklist)
2. LastFirst\_Background (e.g. CozzensSherri\_Background)
3. LastFirst\_TB (e.g. CozzensSherri\_TB)
4. LastFirst\_Immunizations (e.g. CozzensSherri\_Immunizations)
5. LastFirst\_FluShot (e.g. CozzensSherri\_FluShot)
6. LastFirst\_BLS (e.g. CozzensSherri\_BLS)