



SOUTHWEST FLORIDA PUBLIC SERVICE ACADEMY

4312 MICHIGAN AVENUE, FORT MYERS, FL 33905

Phone: 239-334-3897 www.swfpsa.org

Todd Everly, Academy Director

RECRUIT NAME: _____

ADDRESS _____

CITY: _____ STATE: _____ ZIP: _____ PHONE: _____

For the medical professional conducting the examination: The purpose of this examination is to ensure that the physical, physiological, intellectual, and psychological health of the applicant is suitable for the environment and functions of an EMT as described on page 2, which are from the A.D.A.'s physical, mental, and emotional performance requirements for an entry level Emergency Medical Technician. The EMS Program at the Southwest Florida Public Service Academy has accepted the following, as requirements for all recruits entering the program.

EMS Program Recruits must meet the following requirements:

EMS Required Immunizations Titers for MMR, Varicella, or Hep B may be submitted INSTEAD of immunization dates.

Immunization	Date(s) Administered	Laboratory Results / Reports	Refusal Requirements
Tetanus-Pertussis (TDaP) (within 10 years)		N/A	N/A
MMR (Measles, Mumps, Rubella)	#1: #2:	Date: _____ ____ Positive ____ Negative (submit all three titers)	N/A
Varicella (Chickenpox)	#1 #2	Date: _____ ____ Positive ____ Negative (submit titer)	N/A
Hepatitis B	#1 #2 #3	Date: _____ ____ Positive ____ Negative Hep B surface antibody (anti-HBs) (submit titer)	Students who elect not to receive the Hepatitis B Vaccine will need to sign the waiver below
Tuberculosis Test (TB/PPD/TST)	Date Read	____ Positive <i>If positive, X-ray is required.</i> ____ Negative <i>REQUIRED ANNUALLY</i>	N/A

WAIVER STATEMENT:

As a recruit performing in clinical facilities, I understand that I may be exposed to environmental hazards and infectious diseases including, but not limited to tuberculosis, hepatitis B, and HIV (AIDS). Southwest Florida Public Service Academy recommends that all Health Program students obtain the Hepatitis B vaccine. Proof of vaccination from hepatitis B may be required before certain clinical rotations. I have been informed and understand the inherent risks related to exposure to environment hazards and infectious diseases through contact with body fluids and airborne microorganisms, including hepatitis B while involved in clinical rotations. I also understand that the hepatitis B vaccine is highly recommended. I understand that if I elect not to have the Hepatitis B vaccine, I agree to hold harmless all persons or entities connected with Southwest Florida Public Service Academy, clinical affiliations, and the EMS Program.

Recruit Signature: _____ Date: _____

MEDICATIONS:

Please list any medications the recruit is currently taking above or write 'NONE'.

ALLERGIES:

Please list any allergies the recruit has above or write 'NKA'.

EXCEPTIONS:

Please note above any physical, mental and emotional abnormalities, defects, or diseases which may, in any way, interfere with the recruit's attendance and progress in the EMS program or write 'NONE'.

I, _____, give Southwest Florida Public Service Academy permission to share any part or all of the information on this Health Report with any agency, including their representative(s) or instructor(s), to which I will be assigned for required internship.

Recruit Signature: _____ Date: _____

This is to certify that I have examined the above-named recruit on the below date and have found her/him to be in good physical, mental and emotional health, as described herein, and as described on the reverse side of this form, and free from communicable disease including TB.

SIGNED: _____ DATE: _____

(Signature of M.D., D.O., A.R.N.P., P.A.)

ADDRESS: _____



SOUTHWEST FLORIDA PUBLIC SERVICE ACADEMY

4312 MICHIGAN AVENUE, FORT MYERS, FL 33905

Phone: 239-334-3897 www.swfpsa.org

Todd Everly, Academy Director

ATTN: Recruit and Physician – Please review the physical, mental and emotional requirements for recruits of the EMS Program.

Page 1 of this document MUST be completed and signed by a healthcare provider, then submitted by the applicant to CastleBranch.

Recruits will not be permitted to complete an internship without this completed Health Report on file.

Incomplete or missing documentation will cause delay or denial of your application

The following are from the A.D.A.'s physical, mental, and emotional performance requirements for an entry level Emergency Medical Technician. The EMS Program at the Southwest Florida Public Service Academy has accepted the following, as requirements for all recruits entering the program.

EMS Program Recruits must meet the following requirements:

PHYSICAL REQUIREMENTS

<p>Recruit agrees that I have the ability to:</p> <ul style="list-style-type: none"> Perform repetitive tasks. Walk the equivalent of five miles per day. Reach above shoulder level. Hear tape recorded transcripts. Distinguish colors. Adapt to shift work. Perform with a high degree of manual dexterity. Work with chemicals and detergents. Tolerate exposure to dust and/or fumes. 	<p>Physician agrees that recruit has the ability to:</p> <ul style="list-style-type: none"> Ability to grip. High degree of physical flexibility. Ability to bend both knees. Ability to sit for long periods of time. Ability to climb stairs or ladder. Ability to stand for long periods. Ability to lift 25 pounds. Ability to squat. Ability to perform CPR. <p>Health Care Provider: To the best of my ability, from my examination and history taking on this recruit, I concur that the recruit can perform all the listed physical requirements. – Signature on Page 2</p>
---	--

MENTAL AND EMOTIONAL REQUIREMENTS

<p>I have the Ability to:</p> <ul style="list-style-type: none"> Cope with a high level of stress. Make fast decisions under high pressure. Cope with the anger/fear/hostility of others in a calm manner. Manage altercations. Concentrate. Demonstrate a high degree of mental flexibility. Cope in an acceptable manner with confrontation. Handle multiple priorities in a stressful situation. 	<ul style="list-style-type: none"> Ability to assist with problem resolution. Ability to work alone. Ability to demonstrate a high degree of patience. Ability to adapt to shift work. Ability to work in areas that are close and crowded. <p>Health Care Provider: To the best of my ability, from my examination and history taking on this recruit, concur that the recruit can perform all the listed physical requirements. – Signature on page 2</p>
---	--