

**KINGSBOROUGH COMMUNITY COLLEGE
OF
THE CITY UNIVERSITY OF NEW YORK
ORIENTAL BOULEVARD, MANHATTAN BEACH
BROOKLYN, NEW YORK 11235**

HEALTH REQUIREMENTS FOR CLINICAL NURSING STUDENTS

Office of Health Services

PLEASE MAKE (2) COPIES OF ALL INFORMATION SUBMITTED

Students in the clinical phase of the Nursing Program must complete ALL of the following requirements as indicated and bring them to Health Services – Room A108.

DEADLINE DATE: _____

Student's Name: _____ S.S. #: _____

- _____ 1. Complete physical done by a private physician required annually
- _____ 2. Urinalysis – with toxicology/lab results
- _____ 3. Tuberculin Test – required annually
Mantoux Skin Test – Date: _____ Result: _____
Chest X-Ray (only if positive skin test) – Date: _____ Result: _____
- _____ 4. Complete blood count (w/differential) - lab report required

Physician's Signature: _____ **Physician's Stamp:**

Date: _____

Revised 5/11rn