



Department of Veterans Affairs Medical Center Atlanta GA

Student Orientation/Documentation Checklist

Student's Name: _____

School: _____

Faculty Member: _____

VA Preceptor's Name: _____

Date: _____ Unit: _____

All Orientation/Documentation packets must be submitted at least two weeks prior to the 1st day of clinical rotation. Students will not be permitted to start their clinical rotation until the Orientation/Documentation packet is complete. Incomplete Orientation/Documentation packets will not be accepted. Please include this checklist with the required documentation

Below is a list of the required documentation:

- 1. Application for Health Professions Trainees
- 2. Immunizations:
 - a. Varicella Antibody/Statement of having disease or waiver
 - b. Hepatitis B. Vaccine X3 or waiver
 - c. Hepatitis B. Surface Antibody
 - d. PPD (within one year) or chest X-Ray Date: _____
 - e. Flu (optional) Date: _____
- 3. Copy of CPR Card (front & back) Exp. Date: _____
- 4. Finger Printing form (Please bring Driver's License for Identification)
- 5. Information for ID Badge: Sex _____ Height _____ Weight _____
 Eye Color _____ Hair color _____ Place of Birth _____
 Race: American Indian or Alaska Native Asian or Pacific Islander
 Black non-Hispanic Hispanic White non-Hispanic

**Please bring two forms of identification for the ID Badge processing to include:
A Picture ID to include: State issued Drivers License, U.S. Passport, or Military ID card
A Non-Picture ID or Acceptable Picture ID not issued by Fed or State Government ID to include: Social Security Card, Certified Birth Certificate, or State Voter Registration Card**



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7. Students must review the following Atlanta VAMC polices:
- Administration of medications**
 - Patient lifting**
 - Restraints & Seclusion**
 - Code 99**
- These policies will be reviewed on the 1st day of orientation at the Atlanta VA Medical Center After reviewing all policies, students will complete the test questions on that same day.

8. Undergraduate students submit test questions to Clinical Instructor or Jeanne Overby
Graduate students submit test questions to Joel Moorhead

9. Complete the following VA Talent Management System (TMS) training:
- Health Insurance Portability and Accountability Act (HIPPA)**
 - Mandatory Training for Trainees**
 - Safe Patient Handling & Movement Video**

Also, please note that upon completion of self registration, you must send an email to Robert.Sizemore@va.gov or Guy.Ladson@va.gov ASAP in order to have access to the Safe Patient Handling Video.

Upon completion of the TMS training, print completion certificates and submit with other documentation.

10. Upon completion of your clinical training, please complete:
- Learner's Perception survey**
 - Atlanta VAMC student evaluation form**



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Learners' Perceptions Survey

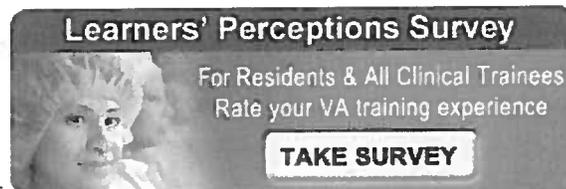
Please wait until you have completed a significant portion of your VA training before taking this survey.



The survey asks you to rate various aspects of your **clinical training experience**. Information from the survey provides feedback in identifying areas of excellence as well as areas needing improvement.

The website address for the Learner's Perception Survey is <http://www.va.gov/oaa/app-forms.asp>.

*This online survey takes
approximately 15 minutes to complete.*



Your responses will be kept confidential.
If you have trouble logging in,
call **1- 888-877-9869**
or e-mail [OAA Help Desk](#).

To Print your Certificate of Completion:

- You must have already completed the survey to receive a certificate.
- Login using the same credentials you used to take the survey.
- If you have not already completed the survey or have forgotten your login credentials, you will not be able to print a completion certificate.

Upon completion of the survey, the student will be able to print out a certificate which shows they have completed the survey. Students must turn in this certificate to their instructor along with the completed Atlanta VAMC student evaluation form

Please notify **Jeanne Overby, MSN, RN, CMSRN** via Jeanne.Overby@va.gov or **Joel Moorhead, MSN, RN, CMSRN** via Joel.Moorhead@va.gov if you have any questions or concerns.