

## Bronson Healthcare Group Medical Assistant Placement Checklist

### Pre-Placement

Requirement	Responsible Party			Timeline	Notes
	Bronson	Student	School		
Ensure contract is in place with Bronson Healthcare			X	Prior to initial student placement effort	Contact Sarah Barker 269-341-8917 or <a href="mailto:BarkersA@bronsonhg.org">BarkersA@bronsonhg.org</a>
Prepare cover letter and resume		X		1 month prior to desired internship start	Include the Cover letter and Resume in the online application
Student applies online		X	X	1 month prior to desired internship start	Link within the student letter found at <a href="#">Students and Residents Overview&gt; Medical Assistant Student Experiences</a>
Confirm placement (including Manager contact information) <i>or</i> regret		X	X	3 weeks prior to desired internship start	Continue with rest of document if placement occurs

**Bronson Healthcare Group Medical Assistant Placement Checklist**  
**Post-Placement**

Requirement	Responsible Party			Timeline	Notes
	Bronson	Student	School		
Complete the items as outlined in the acceptance email from Human Resources		X		Upon notification of placement	Includes: <ul style="list-style-type: none"> <li>Contact school's placement coordinator to share the good news</li> <li>Log back into Clinician Nexus to complete onboarding paper work</li> <li>Establish a Bronson user ID and password by contacting 269-341-6330 (you must complete step 2 first).</li> <li>Contact Practice Manager</li> <li>Complete the Epic Independent Study exercise found at <a href="https://inside.bronsonhg.org/index.asp?pageid=386&amp;catid=5941#2305">https://inside.bronsonhg.org/index.asp?pageid=386&amp;catid=5941#2305</a>.</li> <li>We recommend using a printed version of the exercise book to complete the exercise in the training environment. You may print a copy (over 40 pages) or contact your school representative for a printed copy and instructions.</li> </ul>
Complete Student Access Agreement Form	X			Upon notification of placement	
<p>Student Minimum Working Requirement form aka Addendum A items to complete  <b>Medical Assistant Students DO NOT need to complete PAPR or Respirator Questionnaire: indicate N/A</b>  <b>**No need to complete Addendum A if student is a current Bronson Employee**</b>  Found at <a href="#">Student Experiences&gt;Bronson Student Requirements</a></p>					
National Criminal background check within 365-days of internship start		X	X	Upon notification of placement	Positive test results must be reviewed with Bronson HR department
Negative drug screen within 365-days		X	X	Upon notification of placement	
TB skin test (mantoux) negative in past 12-months		X	X	Upon notification of placement	
Measles, Mumps and Rubella vaccination (MMR)		X	X	Upon notification of placement	Proof of immunity or Documented administration of MMR vaccine schedule
Varicella immunization or proof of immunity		X	X	Upon notification of placement	

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	Bronson	Student	School		
Hepatitis B vaccination		X	X	Upon notification of placement	Provide documentation of 3-dose hepatitis B vaccine series or Provide documentation of immunity to hepatitis B or Receive hepatitis B vaccine series with the first dose given prior to internship start or Sign the hepatitis B vaccine declination statement (provided by Bronson)
Tetanus, Diptheria, and Pertussis vaccination (Tdap)		X	X	Upon notification of placement	
Influenza vaccine		X	X	Upon notification of placement	
Bronson orientation includes HIPPA training and Code of Conduct		X	X	Upon notification of placement	<a href="#">Student Experiences&gt;Bronson Student Requirements</a> Print and sign the Bronson Methodist Hospital Student Agreement Regarding: HIPAA & Confidentiality Guidelines Cell Phone Policy Social Media Policy found midway through the <i>Student Orientation Manual</i> <b>Retain copy in school's file.</b>
ID badge	X	X		Prior to first day at clinical site	Not necessary if student has a school name badge; Student must have an ID badge created prior to internship start
Basic Life Support (BLS) training		X	X	Upon notification of placement	
Complete Addendum A form			X	One-two weeks week prior to student experience	Email completed Addendum A form to <a href="mailto:caldwelt@bronsonhg.org">caldwelt@bronsonhg.org</a> . School will keep all supporting documentation and provide if requested.
Provide Student with Bronson System User ID and temporary password	X	X		After Epic Training is complete	Student will access the Bronson Network from a Bronson site to set a new password.
Acclimate Student to Practice Setting	X	X		First day at clinical site	Student will share the paperwork/objectives to complete for school.