



MOUNT MERCY COLLEGE--DEPARTMENT OF NURSING
1330 ELMHURST DRIVE N.E.
CEDAR RAPIDS, IA 52402

NURSING STUDENT PHYSICAL EXAMINATION FORM

This form is to be completed in its entirety by the examining health care provider.

Student Name _____ Phone # _____ Date of Birth _____

Home Address _____ City _____ State _____ Zip _____

Weight _____ Height _____ Calculated BMI _____

Blood pressure _____ Pulse _____

Allergies: Drugs _____ Food _____ Latex _____

EENT _____

Respiratory System _____

Cardiovascular System _____

Gastrointestinal System _____

Reproductive System _____

Neurological System _____

Integumentary System _____

Musculoskeletal System _____

Medication currently being taken _____

Past Surgeries _____

Chronic Illnesses _____

Relevant Laboratory data (if applicable): _____

Recommendation regarding this student's ability to perform in classroom, lab and clinical setting:

No Reservation _____ Reservation _____ Not Able _____
(explain)

IMMUNIZATIONS

Certification of immunity for students beginning nursing education

The following immunizations are recommended by the Iowa Department of Health and **required** by Mount Mercy College before participating in clinical experiences. A copy of the student's immunization record may be provided in place of this page.

Type of Immunization	Date of Booster
Measles, Mumps, Rubella	
DPT	
Tetanus	
Polio	
Hepatitis B (Series of 3 injections)	Date of series completion
Mantoux Tuberculin Test (Must be given within the past six months. A chest x-ray and medical follow-up is required if test is positive.)	Date given _____ Results _____ Follow-up if needed _____
Meningitis	

Has the student contracted or been immunized for chicken pox (Varicella)? _____

Signature of Health Care Provider _____
Date _____
Provider's Address _____
Provider's Telephone Number _____

Please return completed form to:

Mount Mercy College
Department of Nursing – 229 Donnelly
1330 Elmhurst Drive N.E.
Cedar Rapids, IA 52402

Any questions should be directed to the Department of Nursing at 319-368-6471.