



Physical and Mental Capacity Assessment Form

The physical and mental capacity assessment completed by your Primary Care Provider is not the same as your annual exam. This assessment is very specific to your abilities to perform as a CMU Department of Health Sciences' student and meeting the requirements listed. This initial assessment is required upon entry to the program. The assessment must be completed no earlier than 90 days prior to the start of class.

Student Name:		
CMU ID:	DOB:	1 st Day of Class for Program Admitted:
TO BE COMPLETED BY HEALTHCARE PROVIDER		
I have verified that the individual examined is the named individual on this form. I find that this individual (please initial all that apply):		
_____ is physically able to meet his/her/their clinical/lab obligations		
_____ is mentally able to meet his/her/their clinical/lab obligations		
Elaborate on limitations (if any)		

Date of exam: _____ Signature of Healthcare Provider: _____		
Printed name of Healthcare Provider: _____		
Name of Facility: _____		
Phone Number: _____		

Student Attestation: This section to be completed by the student

Physical and Mental Capacity Assessment Requirements

Students must complete the physical/mental capacity assessment form as required for admission to a CMU Department of Health Sciences program. Failure to complete the form will result in forfeiture of placement in the program. The student must verify, by initialing, they can perform all of the following. Students must complete the Student Attestation prior to the physical assessment and present the completed form for review by the provider at the time of the physical exam.

Mental Capacity Requirements

- ___ 1. Must be able to use intellectual abilities to exercise good judgement in the classroom and clinical environment.
- ___ 2. Must be able to use critical thinking in the classroom and clinical environment.
- ___ 3. Must be able to demonstrate ability to self-regulate behavior.
- ___ 4. Must be able to collaborate professionally with all members of the health care team and academic community.

Physical Requirements

The listed physical requirements are necessary to participate in the clinical/lab courses in the Department of Health Sciences.

- ___ 1. Strength: must be able to lift, push, pull; sufficient to move and carry equipment, transfer patients, and perform CPR. (Transferring patients and CPR are not applicable to MLT/Phlebotomy Students)
- ___ 2. Mobility: must be able to walk, bend, stoop, reach, stand for long periods of time; coordination and balance sufficient to assist patients within confined spaces.
- ___ 3. Fine Motor Movements: must be able to manipulate accessory equipment (example: tubes, syringes, IV's, specialty equipment/devices), and to perform skilled procedures.
- ___ 4. Speech: must be able to speak clearly in order to communicate effectively.
- ___ 5. Vision: must have sufficient vision (with or without correction) to perform all required duties.
- ___ 6. Hearing: must have sufficient hearing (with or without hearing devices) to perform all required duties.

Date: _____ Student's Signature: _____

Student's Printed Name: _____