

Malpractice Insurance is required. A copy of malpractice insurance certificate covering student/intern/resident for activities undertaken during the rotation at Northside Hospital. **Please attach to this application.**

Immunization Record: A copy of the immunization record for student/intern/resident **must be include PPD within last 12 months.**

Flu shot verification required: Rotations November 1st through March 31st only

Letter of Good Standing: Your school must provide a letter of good standing for you to rotate at our institution. This letter should include whether or not a criminal background check has been done.

NORTHSIDE HOSPITAL & HEART INSTITUTE Visiting Medical Student/Intern/Resident Rotations Checklist

The attached packet contains all the documents you will need to make application for a rotation at Northside Hospital. Please make sure you have filled out all these required forms legibly and that they are signed and dated. Thank you.

CHECK LIST ITEMS

- Application for Medical Student/Intern/Resident Rotation
Form filled out completely, signed and dated
- Approval from Dean of Medical School/ University
- Immunization Record attached
- PPD record attached
- Certificate of malpractice insurance attached
- Background Check is due 30 days prior to starting a rotation (or include in Deans letter)

Please send all forms to:

**Northside Hospital
Department of Medical Education
Attn: Jaymie West, Coordinator
6000 49th Street North
St. Petersburg, FL 33709
Phone: (727) 521-5057 FAX: (727) 521-5022
E-Mail: Jaymie.West@HCAHealthcare.com**