

**Genesys Regional Medical Center**  
**FINAL CHECKLIST FOR INCOMING TRAINEE**

**Items to do immediately:**

\_\_\_\_\_ Medical Licensure Requirements (Osteopathic Trainees Only)

- All applicants for health professions license in Michigan are required to submit fingerprints and undergo a criminal background check. Please follow the instructions in your licensing packet. The Michigan Board is not able to accept fingerprints that have been obtained for any other purpose. Your license will not be issued until this process is complete.
- Request final official medical school transcripts **or** a letter of good standing to be sent **directly** to the State of Michigan Licensing Board from your medical school (Letter must not be dated more than 90 days prior to graduation).
- If applicable, forward Certification of Internship form in licensure packet to your place of internship.
- If applicable, forward Verification of License in Another State to appropriate state board. Fees are usually required.

\_\_\_\_\_ Medical Licensure Requirements (Allopathic Trainees Only)

- All applicants for health professions license in Michigan are required to submit fingerprints and undergo a criminal background check. Please follow the instructions in your licensing packet. The Michigan Board is not able to accept fingerprints that have been obtained for any other purpose. Your license will not be issued until this process is complete.
- Forward Certification of Medical Education Form to your medical school
- Verification of your ECFMG certification must be sent electronically from the ECFMG office. Visit <https://cvsonline2.ecfm.org/ImgGenInfo.asp> for information on how to do this. Also, please forward a copy of your ECFMG certificate to Medical Education.
- If applicable, forward Verification of License in Another State Form to the appropriate state board. Fees are usually required.

\_\_\_\_\_ Medical Licensure Requirements (Podiatry Trainees Only)

- All applicants for health professions license in Michigan are required to submit fingerprints and undergo a criminal background check. Please follow the instructions in your licensing packet. The Michigan Board is not able to accept fingerprints that have been obtained for any other purpose. Your license will not be issued until this process is complete.
- Request final official medical school transcripts showing the date your DPM was conferred to be sent **directly** to the State of Michigan Podiatric Licensing Board from your medical school.
- If applicable, forward Certification of Appointment form in licensure packet to your place of training.
- If applicable, forward Verification of License in Another State to appropriate state board. Fees are usually required.

\_\_\_\_\_ Schedule a health/drug screen with Genesys Employee Health Services at 810-606-5957

\_\_\_\_\_ Register for ACLS and BLS. Must be approved by the American Heart Association.

- \_\_\_\_\_ Complete [Lab Coat Order Form](#) and contact Uniforms by Susan to place order at 810-732-3533.
- \_\_\_\_\_ Obtain an NPI number at <https://nppes.cms.hhs.gov>
- \_\_\_\_\_ Begin VISA process (if applicable)

### **Items to complete and return to Medical Education by April 10, 2009**

- \_\_\_\_\_ Sign and return the hospital training agreement
- \_\_\_\_\_ Complete the medical license application and return to Medical Education. Include a check payable to the State of Michigan in the amount of \$170.00 (Osteopathic and Allopathic) or \$135.00 (Podiatry). Please DO NOT return the application to the State of Michigan.
- \_\_\_\_\_ Complete and return the Certification of Appointment to Training Form in the license packet
- \_\_\_\_\_ Complete and return the [Application for Employment](#)
- \_\_\_\_\_ Complete the OMM training module and submit answers to the test to [Mary.Goldman@genesys.org](mailto:Mary.Goldman@genesys.org)
- \_\_\_\_\_ Review the Medical Education Policies and Procedures Manual on CD-ROM. Sign and return the [Acknowledgement of Receipt Form](#).
- \_\_\_\_\_ Complete and return the [Rotation Schedule Choice Form](#) (if applicable)
- \_\_\_\_\_ Complete and return the [Shadow Call Opportunity Form](#)
- \_\_\_\_\_ Complete and return the [Parking Permit Form](#)
- \_\_\_\_\_ Complete and return the [Personal Data Information Form](#)
- \_\_\_\_\_ If joining the [Genesys Athletic Club](#), complete and return the attached [form](#). After July 1<sup>st</sup>, go to Membership Services at the athletic center to sign up.

### **Items to complete by June 30, 2009:**

- \_\_\_\_\_ Registered for [AOA](#) and [MOA](#) membership (osteopathic trainees only)
- \_\_\_\_\_ Completed the required training modules and returned tests:
  - [Safety Training](#) via Genesys Learning Institute – Test results submitted on-line.
  - [Ultravisual Presentation](#) – View and submit completed [test](#) to Medical Education.
  - [Fatigue Presentation](#) – View and submit completed [test](#) to Medical Education.
  - [Map to Success Presentation](#) – View and submit completed [test](#) to Medical Education.

### **Items to bring with you to your health/drug screening appointment:**

- Copy of all of your immunizations records and titer results
- All prescription bottles if taking medication
- Dress appropriately for i.d. badge photo

### **Items to bring with you to orientation if not submitted prior to:**

- ACLS and BLS certification
- Medical school diploma and final medical school transcripts
- Part II board scores
- OMM Training Test
- One of the following: driver's license and social security card, a driver's license and birth certificate, or a current passport.
- 2008 1040 Tax Form

- Marriage Certificate if married in 2009 and birth certificate if child born in 2009
- If no taxes were ever paid, must provide marriage certificate (if applicable) and birth certificate of children (if applicable)

State of Michigan Licensing  
**Board of Osteopathic Medicine**  
PO Box 30670  
Lansing, MI 48909  
517-335-0918

Genesys Regional Medical Center  
Medical Education Department  
One Genesys Parkway  
Grand Blanc, MI 48439  
810-606-5980 or 800-233-2863  
810-606-5990 Fax

State of Michigan Licensing  
**Board of Medicine**  
PO Box 30192  
Lansing, MI 48909  
517-335-0918

State of Michigan Licensing  
**Board of Podiatric Medicine**  
PO Box 30670  
Lansing, MI 48909  
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