

Standardized Patient/Participant Application **Simulation Center**

California Health Sciences University (CHSU) uses standardized patients/participants (SPs) in the training of our medical students. An SP is a person who has been trained to accurately and consistently simulate medical scenarios or cases to learners in teaching and/or assessment activities. As an SP, you will participate in a simulated medical visit where you will perform as the patient and interact with student doctors. In a performance, you may be expected to recall and recreate the medical history, personality, emotional structure and response pattern of an actual patient at a particular point in time. You may also

be expected to provide feedback as well as an accurate assessment of the learner's encounter with you.

Section 1: Personal Information						
Full Name:						
Address:		City:		State:	Zip:	
Home Phone:		Cell Phone:				
Email:						
1. Are you ov	ver 18?		Yes	No		
2. Are you le	gally eligible for employment in th	ne U.S.?	Yes	No		
3. Are you cu	rrently in the military?		Yes	No		
4. Are you a	/eteran?		Yes	No		
Section 2: Standardized Patient/Participant (SP) Employment History						
1. Have you	oreviously worked as an SP?		Yes	No		
2. Are you cu Part-tir	rrently an SP? (If no, please contin me Full-time Volunteer	nue to #3) · (If so, where?)	Yes	No		
Organization N	Name:		F	From:	То:	

Section 3: Other Employment History

1.	Do you have act	ing experience	?	Yes	No
2.	Are you currentl	y employed? (If	f no, please continue to #4)	Yes	No
	Part-time	Full-time	Volunteer (If so, where?)		

Organization Name:	From:	То:

Section 4: Education

	1.	Highest level	of education	completed:
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2.	Do you have background in either education or medicine?	Yes	No
	If Yes, please explain:		

Section 5: Job Requirements

Please answer if you can meet the following accountabilities to be a standardized patient/participant.

1.	Willing to be examined as a patient in a safe and controlled setting?	Yes	No
2.	Able to learn how to document medical student skills using a computer, written checklist or smartphone?	Yes	No
3.	Be comfortable dressing in a patient gown? Men and women will wear gym-type clothing/active wear under the patient gown.	Yes	No
4.	Willing to be on camera and videotaped as an SP? Video may be used only with permission as promotional material. Video will be reviewed by CHSU faculty and students.	Yes	No
5.	Be comfortable being touched on bare skin by a medical student?	Yes	No
6.	Agree to be punctual?	Yes	No
7.	Be able to provide written and/or oral feedback to medical students in a positive, sensitive, constructive, and helpful manner?	Yes	No
8.	Be comfortable in role-play situations around a set of given and specific case material?	Yes	No
9.	Agree to attend SP training and practices?	Yes	No

I have answered these questions truthfully and honestly, and I am aware of the requirements of being a CHSU standardized patient. I therefore am comfortable with and am able to meet the expectations of the SP program.

Signature	Date

For more information, please contact Nanami Yoshioka at nyoshioka@chsu.edu

 $Please\ download\ and\ complete\ the\ application, then\ click\ "Submit\ Form"\ or\ download\ and\ mail\ the\ printed\ application\ to:$

Attn: Nanami Yoshioka

CHSU College of Osteopathic Medicine 120 N. Clovis Ave, Clovis, CA 93612

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