

## UPMC of Central Pa Cross Cultural Health Care Program Bridging The Gap Medical Interpreter Training

The Bridging the Gap Medical Interpreter training program is a nationally acclaimed program being offered under license at UPMC of Central Pa. This 40-hour interpreter training program is designed for bilingual individuals who are proficient in their languages and work at UPMC of Central Pa; external applicants are also welcomed! All participants will be assessed to determine their level of fluency prior to enrollment. Curriculum Outline Includes: Medical Terminology, Healthcare Interpreting Skills, Culture, Navigating the Health Care System, Professional Development Protocols, Ethics, and more!

### Dates for the Medical Interpreter Training for 2023 • March 27-31; June 26-30; Sept 11-15; Dec. 4-8

All sessions are from 8 a.m. to 5 p.m., Monday thru Friday. Participants who complete the training will be qualified to interpret at UPMC of Central Pa. They will also receive a "Certificate of Successful Completion" from The Cross Cultural Health Care Program. Please complete the interactive form below and email [pereze2@upmc.edu](mailto:pereze2@upmc.edu) Approval from your department manager is required. Please register to reserve your spot. For more information, please call **717-782-5522** or email Elisabeth A. Pérez, Manager at [pereze2@upmc.edu](mailto:pereze2@upmc.edu)

### Bridging the Gap Participant Registration Form

Name: \_\_\_\_\_ Employee ID: \_\_\_\_\_  
UPMC Site: \_\_\_\_\_  
Department: \_\_\_\_\_ Department Phone Number: \_\_\_\_\_  
Role/Job Title: \_\_\_\_\_ FTE:  Direct  Indirect Care  
UPMC email address: \_\_\_\_\_  
Personal email address: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_  
Language(s): \_\_\_\_\_ Country of Language Origin: \_\_\_\_\_  
Speak: \_\_\_\_\_  
Read: \_\_\_\_\_  
Write: \_\_\_\_\_

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Enter the dates of the session you wish to attend: \_\_\_\_\_

### Form of Payment *(This section needs to be completed by your Department Manager)*

Corporate Code: \_\_\_\_\_ Cost Center: \_\_\_\_\_ Subaccount: \_\_\_\_\_  
Managers name: \_\_\_\_\_ Manager's phone: \_\_\_\_\_  
Manager's email address: \_\_\_\_\_