

## Clinical Rotation Requirement Checklist

### REQUIRED DOCUMENTS DUE 1<sup>ST</sup> WEEK OF SCHOOL

You must provide a hard copy of the following:

#### 1. CPR or BLS Card

#### 2. Hepatitis B Titer: Blood test to check Hep B immunity

- ◆ If **POSITIVE (Reactive)** BRING THE RESULT DOCUMENTATION,
- ◆ if **NEGATIVE (Non-Reactive)** BRING RESULT AND PROOF OF 1ST HEPATITIS B VACCINE. Series includes 3 injections: 1st dose, 2nd dose in a month, 3rd dose at 6 months followed by REACTIVE TITER)
- ◆ Please note it is imperative that you complete the series since you will be required to provide documentation proof of completion of the series in the 12th grade if your titer was non-reactive
- ◆ Explain to your HCP that you will be exposed to real patient care areas (refer to the yellow sheet if you need a letter to take to the provider for further understanding of the situation)

#### 3. Hepatitis C: A waiver signed by a parent stating if you have ever had Hep C and any treatment. (This form will be given to you in junior year in clinical class)

#### 4. COVID-19 Vaccine: (Pfizer, Moderna or Johnson & Johnson) must have completed both shots and provide a copy of the front and back of card (your name should be clearly visible)

#### 5. Flu Vaccine: Must be given no earlier than July 1, 2022, bring documentation of the vaccination (location, date, patient name) along with OBTAIN LOT NUMBER, MANUFACTUER AND EXPIRATORY DATE on flu vaccine documentation.

#### 6. Tuberculosis Skin Test: TB Skin Test results cannot expire during your entire clinical rotation. \* Note this test is time sensitive and requires two visits to health care provider in a 48–72-hour period

1. First visit – injected with PPD
2. You must return in 48 to 72 hours for result reading TB or Mantoux Test 8-minute video

- ◆ A POSITIVE (+) TB REQUIRES a Chest X-ray within a year. Please have MD note read, “Normal CXR and no evidence of TB”
- ◆ QuantIFERON test is an alternative test for someone who had received BCG vaccination, however some hospital requires to have TB skin test and X ray done

#### 6. Health Insurance: Copy of health insurance coverage for those students attending clinical rotations. If your child does not have medical insurance. Noninsured will self-pay for any injuries that may occur.

#### 7. Government issued ID for background check

Each health facility has its own clinical requirements, separate from our school requirements. We are asking for the known requirements and reminding all that this list is subject to change.

You may require a drug test at the assigned hospital

Am I all cleared to start? Here is a Check List to confirm:

- |   |  |
|---|--|
| <input type="checkbox"/> CPR Card   | <input type="checkbox"/> Government issued ID  |
| <input type="checkbox"/> Hepatitis B Titer for Antibodies                   | <input type="checkbox"/> Annual TB Test  |
| <input type="checkbox"/> Hepatitis C Waiver                                 | <input type="checkbox"/> Health Insurance Copy   |
| <input type="checkbox"/> Annual Flu Vaccine                                 | <input type="checkbox"/> All the up to date required immunizations (Tdap, MMR, Varicella,) |
| <input type="checkbox"/> Covid Vaccine Card copy (front and back, boosters) |  |