

# Clinical Mandatory Prerequisites Student Checklist

Student Name: \_\_\_\_\_

Date: \_\_\_\_\_

All of the following documentation must be submitted before the student will be allowed to attend their clinical rotation. All certifications and immunizations must remain current for the entire clinical rotation.

Initials/Date

**Criminal Background Check:** Yes \_\_\_\_\_ No \_\_\_\_\_

\_\_\_\_\_

**BLS Healthcare Provider with AED** (AHA every two years; Red Cross every year)

\_\_\_\_\_ Date expires      **Circle one:**    AHA            Red Cross

\_\_\_\_\_

**Proof of medical insurance** (must have one of the following)

\_\_\_\_\_ Yes: (copy of front and back of card)

\_\_\_\_\_ No: **signed waiver**

\_\_\_\_\_

**TB skin test** (annual renewal)

\_\_\_\_\_ Date expires

\_\_\_\_\_ Positive TB test - Chest X-Ray is required

\_\_\_\_\_ First ever TB skin test (2 documented tests 1 - 3 weeks apart)

\_\_\_\_\_

**Measles (rubeola), Mumps, & Rubella (MMR)** - only need one of the following:

\_\_\_\_\_ Documentation of two inoculations at 12-15 months and 5 years of age

\_\_\_\_\_ Documentation of disease by clinician

\_\_\_\_\_ Titer reflects immunity

\_\_\_\_\_

**Chickenpox (varicella)** - only need one of the following:

\_\_\_\_\_ Documentation of two inoculations that are four to eight weeks apart

\_\_\_\_\_ Documentation of disease by clinician

\_\_\_\_\_ Titer reflects immunity

\_\_\_\_\_

**Tetanus:** Tdap booster injection required every 10 years

\_\_\_\_\_ Date

\_\_\_\_\_

**Hepatitis B** - Need both:

\_\_\_\_\_ Documentation of immunization of series of three Hep B injections

\_\_\_\_\_ Positive Hep B titer 6-8 weeks after 3rd Hep B inoculation

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