

**UMKC SCHOOL OF NURSING & HEALTH STUDIES
POLICY: CLINICAL PROFESSIONAL REQUIREMENTS
APPENDIX A (AMENDMENT A IN CNE MANUAL)
BSN-PL, BSN-AT AND RN-BSN STUDENTS**

All UMKC School of Nursing & Health Studies BSN students must provide **written** documentation of the following immunizations and/or tests to Verified Credentials, Inc. *prior to enrollment*. To upload your documents go to <https://scholar.verifiedcredentials.com/umkc>.

Required frequency = yearly, biennial (every 2 years), & one time requirement

1. ___/___/___ **Flu Vaccine** every year enrolled.
2. ___/___/___ **TB** - A screen for tuberculosis via evidence of a 2-Step TB skin tests or a TB titer (T-Spot or Quantiferon-TB Gold) less than 12 months old. All positive reactors must visit their Health Department & bring a copy of the Dept.'s documentation of this visit with their follow up plan to us. (Skin test or Quantiferon must be done yearly. If positive chest x-ray submitted once but if symptoms arise another x-ray will be required.)

3. ___/___/___ (expires) **Copy of current RN license(s) from any state** (if not submitted with application or now expired) *RN-BSN students only*.
4. ___/___/___ (expires) **Copy of current AMERICAN HEART ASSOCIATION CPR card** (or ACLS)

5. ___/___/___ **#1 MMR** A. For students born prior to 1957, rubella titers are required
- ___/___/___ **#2 MMR** B. For students born after 1956, measles, mumps, and rubella (MMR) immunity may be documented in the following ways:
 - a) Documentation of two doses of MMR after age of twelve (12) months and rubella titer, OR
 - b) Evidence of immunity through a titer, for example, Mumps IGG, Rubella IGG (measles), Rubella IGG. Titers are preferable if immunizations are contraindicated (e.g. pregnancy)

OR

- ___/___/___ **MMR Titer**
 - A. For students born prior to 1957, rubella titers are required
 - B. For students born after 1956, measles, mumps, and rubella (MMR) immunity may be documented in the following ways:
 - a) Documentation of two doses of MMR after age of twelve (12) months and rubella titer, OR b) Evidence of immunity through a titer of each of the diseases (ex. MMR titer, or individual Mumps IGG, Rubella IGG (measles), Rubella IGG. Titers are preferable if immunizations are contraindicated (e.g. pregnancy).

6. ___/___/___ **Tdap** - Tetanus/diphtheria/pertussis immunity via documentation of toxoid booster date within last 10 yrs.
7. ___/___/___ **#1 Hepatitis B** - Completion of Hepatitis B vaccine series **and** titer. If titer is negative, repeat series & titer.
- ___/___/___ **#2 Hepatitis B**
- ___/___/___ **#3 Hepatitis B**

AND

- ___/___/___ **Hepatitis B Titer**
8. ___/___/___ **#1 Chicken Pox** – Two varivax vaccinations at least 28 days apart or varicella IGG titer (w/positive reading)
- ___/___/___ **#2 Chicken Pox**

OR

- ___/___/___ **Chicken Pox Titer**
9. **Copy of current Personal Health Insurance card**
10. **Criminal Background Check** <https://scholar.verifiedcredentials.com/umkc> (Customer Service 1-800-938-6090)
11. **Drug Test** - <https://scholar.verifiedcredentials.com/umkc> (Customer Service 1-800-938-6090)
12. **Color Blind Test** (PL and AT given at Clinical Jump Start in August. RN-BSN will need to provide)
13. **Department of Mental Health Background Check** <http://sonhs.umkc.edu/wp-content/uploads/2014/10/dept-mental-health-check.pdf> (All BSN-PL and BSN-AT students. RN-BSN students who will be in a facility in the state of MO).

I understand that I must maintain current records. *Failure to comply with this policy by allowing immunizations to expire may have the following consequences. I may be restricted during enrollment and/or dropped from clinical courses. Evidence of inability to comply must be provided in writing from an appropriate authority in order to be exempt from the terms of this policy. The information I have submitted is accurate to the best of my knowledge. I will also keep copies of all of the above with me for clinical site verification*

PRINT NAME

DATE

SIGNED NAME

HIPAA - Contact your clinical site regarding their HIPAA certification details.