

## **Appendix A**

This form is to be used as a “Checklist” for School Coordinators to then provide the content for the Regulatory Letter that is to be submitted for students and faculty completing clinical within JHH.

### **For Clinical Groups:**

- Utilize Appendix A as checklist - Nursing Student & Clinical Faculty Information

### **For Independent Practicum Students:**

- Utilize Appendix A & AP as checklist - Independent Practicum

### **All Students**

- Provide proof of current annual TB (2 step or (-) CXR within 2 years)
- Proof of hepatitis B vaccination or declination of vaccine
- Proof of MMR vaccination or titer
- Demonstration of varicella immunization/vaccination or titer
- Flu vaccination by Dec. 1 of each year
- Tdap vaccination
- CPR (AHA, BLS)
- Criminal Background check
- Nine panel urine drug screen
- Infection Control for Nursing Students – (CastleBranch attestation; CB)
- Proof of Bloodborne Pathogen Training - (CB)
- Proof of HIPAA Training – (CB)
- Verification of Health Insurance Coverage (student) -(CB)
- Completer “CCC” Confidentiality Agreement Form for each student and each instructor (CB)
- Students sign attestation letter - (CB)
- Certificate of Professional Liability Coverage MOU/CIO for School
- All of the above must be completed for EACH STUDENT and each CLINICAL FACULTY
- Faculty have attended orientation (dates posted on line)

### **Appendix AP - If Practicum student – add below to above**

- Licensure if appropriate (ex. RN)
- Attestation of Personal Professional liability coverage
- Student information JHED ID creation with below EPIC training
  - Epic Computer modules (undergraduate)
  - Epic Computer modules and possible classes (graduate)