RN-BSN Admission Checklist

Name_________________________ GHC ID#_________________________
Comments______________________

Registration Fee

Copy of Driver’s License

Health Insurance

BCLS Card

Health Form

Copies of Results:
TB Skin Test x 2
MIR x 2
Rubella Titer
Mumps Titer
Measles/Rubeola Titer
Varicella (Chicken Pox) Vaccine 1) 2) Titer
Hepatitis B 1) 2) 3) Titer
Tetanus/Diphtheria/Pertussis Titer
(Tdap)/10 yrs
Background Check Paid Receipt Date______________________
Influenza Vaccination

ADDITIONAL COMMENTS__________________________

_________________________________________

File Complete - Student ready for admission Date/Initials

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STUDENT HEALTH SCREEN REQUIREMENTS
FOR CLINICAL PLACEMENT

Student Name - PRINT

Student Signature

TB Skin Test: Must have documentation of one PPD skin test within the past year and one PPD skin test in the previous year. If proof is not available, must be skin tested immediately, and then receive another skin test 1-3 weeks later. If skin test positive student must have documentation of positive skin test and “negative” chest x-ray, and have no symptoms suggestive of TB.

M.M.R. (Measles, Mumps, Rubella) Regardless of Date of Birth
Must have documentation of two doses of MMR OR positive titers to Measles/Rubeola, Mumps, Rubella
a. Documentation of two MMR vaccinations at least 1 month apart started after the first birthday
   OR
b. Positive rubella titer (if no proof of two MMR vaccines available) AND
c. Positive measles/rubeola titer (if no proof of two MMR vaccines available) AND
d. Positive mumps titer (if no proof of two MMR vaccines available)

Varicella (Chicken-pox)
Must have documentation of two doses of Varicella Vaccine or one positive Varicella titer regardless if you had the disease
a. Positive Varicella titer
   OR
b. Two Varicella Vaccine's

Hepatitis B Vaccine
a. Documentation of three HBV vaccines AND a positive titer - OR
b. Documentation of starting vaccination series and is on schedule (Start Day, 1 month, 5 months) OR
c. Copy of Signed refusal

Tetanus/Diphtheria/Pertussis (must be within the last ten years)
Documentation of Tdap required

Annual Influenza Vaccination
Students are required to obtain the influenza vaccination prior to beginning his/her Educational Experience at the clinical facilities during Influenza Season. Flu season is determined by the state public health office of epidemiology and varies from year to year.
a. Documentation of Flu Vaccine