Clinical Documentation Requirements Summary



Required Once

HEPATITIS B The hepatitis B requirement can be met through completion of one of the following:

 3-series (Recombinex HB or Energix-B or Recombivax HB) Series shots at 0, 1, & 6 months, AND Titer confirmation 6-8 weeks later.

OR

Positive Titer alone (Hep B Surface Antibody).

Individuals who do not respond to the primary hepatitis B vaccine series must complete a second vaccine series. For the second series, a different brand of vaccine should be administered. *Re-Titer 6-8 weeks after re-series*.

• Re-administer Doses 1-3 as above/initial series.

OR

Administer doses #4 and #5 of Energix-B

OR

- 2 dose-series (Heplisav) Series shots are administered one month apart. *
- If negative titer after repeated series of vaccine, you will be considered a non-converter.
- D. History of Disease/non-converter*
- * Signed Declination: A student is permitted in the clinical setting if they have begun, but not yet completed, their Hep B vaccine series. A signed declination is required if the student is in process and has not completed their vaccine series.

MMR (Measles, Mumps, Rubella) or MMRV (Measles, Mumps, Rubella, and Varicella)

2- Doses of MMRV is accepted if received prior to the age of 12 years.

OR

Proof of immunity by titer for all 3 viruses.

VARICELLA

Proof of vaccination (2 doses administered at least 4 weeks apart) **OR** Proof of immunity by titer

*History of disease is not acceptable unless proven by titer.

TETANUS, DIPHTHERIA, PERTUSSIS (Tdap)

1 initial dose of Tdap required followed by a dose of Td or Tdap every 10 years.

COVID-19

• Initial Dose of COVID-19 Vaccine (1-dose or 2-dose series)

Required Annually

TUBERCULIN STATUS The Tuberculin Status requirements can be met through completion of one of the following:

- A. TB IGRA blood test
- B. Completed 2-step TST
 - If first TST is positive, with no prior history of disease, then an IGRA with a provider examination and Chest Xray is recommended to confirm.
- **C.** If TST or IGRA within 12 months, 1-step TST, plus record of last test.
- **D.** If results of TB are *positive* then provide date of Exam/X-ray
 - Accompanying treatment documentation may be requested on a case-by-case basis.
- E. If history of Positive TB results then provide date of Exam/x-ray
 - Accompanying treatment documentation may be requested on a case-by-case basis.

For known history of positive/possible Treatments complete a <u>symptom check form annually</u>.

INFLUENZA (required Fall and Winter Quarter only)

Proof of seasonal vaccination each year in the program

BACKGROUND CHECKS

Pursuant to the Revised Code of WA (RCW43.43.830), Program staff will complete the background checks below on each student upon admission/re-admission and re-entry/hire to program to include all counties of residence & all Washington State counties.

- 1. National Criminal Background
- 2. Office of Inspector General (OIG) exclusion check
- 3. General Service Administration (GSA) exclusion check
- 4. Washington State Patrol Background Check (WATCH)
- 5. Criminal History Disclosure Form completed annually.

Exemptions

Any Exemption requests will be reviewed on a case-by-case basis and are subject to approval by each clinical site. Alternate Clinical Placement cannot be guaranteed by Olympic College if an exemption request is denied.

Valid for 2 Years

AHA Basic Life Support (BLS) Card

AHA BLS Provider Approved Course card/e-card will be provided in program prior to clinical start. Students are required to submit their BLS card to the canvas course once received.

Reminder: All Live Vaccines such as MMR, VZA, Nasal Flu vaccines (LAIV) must be administered on the same day or separated by 28 days and may interfere with TB PPD testing. Please plan ahead and avoid conflicts in timing!

Requirements are subject to change based on Clinical Partner Policy. All questions can be referred to the Clinical Placement Liaison, Brittany Marrero at bmarrero@olympic.edu