1. **You will be provided with information on how to develop your CB account during the meeting with the director of nursing (DON) in July. Start working on completing these requirements as soon as you are notified of program acceptance. Collect all documentation of the below requirements and be prepared to upload results to CB after the July meeting with the DON. DO NOT create your CB account before this meeting.**
2. **Make sure your name is visible on ALL documents uploaded to your CB account OR it will be rejected.**
3. **You are responsible for monitoring your CB account for acceptance or denial of your submissions!!!!! If the submission is denied by CB, you must work to resolve the issue. Call Stephanie Tracy, Academic Specialist for the Nursing Programs, should you need assistance 740-699-3807.**
4. **You acknowledge that you are responsible for maintaining ongoing compliance with you CastleBranch (CB) account.**
5. **DO NOT SUBMIT VACCINES THAT YOU RECEIVED AS A CHILD!!**
6. **All students must FIRST submit titers for MMR, Varicella, and Hepatitis B. Immunizations are uploaded to CB AFTER titer results.**
7. **If the titer result for MMR, Varicella, or Hepatitis B are negative, you will receive additional vaccine(s) as directed. You will submit electronic proof of additional immunization(s)/vaccine(s) as prompted by CB along with the signed immunization non-converter form.**

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| **BACKGROUND CHECK SECTION** | |
| **BCI/FBI Student Agreement Form**  **MUST BE UPLOADED BY AUGUST 1ST.**   * **If you have a background check that you obtained for the STNA program, you may use that. It must be within the year of application to the program. Please check Stephanie Tracy if you have submitted these to another program. She can get you a copy for this requirement.**   **IT CAN TAKE UP TO 4-6 WEEKS TO GET RESULTS BACK TO THE PROGRAM, so get these done ASAP.** | * Submit your BCI/FBI Student Agreement form which is found on the Belmont college website under your program of choice. * Make sure form is signed and dated by you. * This is only done upon entry into the nursing program. * **If you have a criminal action reported on either your state of FBI background check, you must meet with the Director of Nursing and complete the Background Criminal Offenses Student Signature Form.** |
| **State of Ohio (BCI) Background Check Results**  **MUST BE UPLOADED BY AUGUST 1ST** | * Submit your BCI background check result. * **State of Ohio background checks will say BCI the top of the page.**   **PAY ATTENTION: make sure to upload this to the proper section in CB.** |
| **FBI Background Check Results**  **MUST BE UPLOADED BY AUGUST 1ST.** | * Submit your BCI background check result. * **State of Ohio background checks will say BCI the top of the page.**   **PAY ATTENTION: make sure to upload this to the proper section in CB.** |
| **Physical Examination**  **MUST BE UPLOADED BY AUGUST 1ST.**  **SCHEDULE THIS APPOINTMENT ASAP** | * Submit the Physical Exam form found on the Belmont college website. ONLY THIS FORM WILL BE ABLE TO BE UPLOADED TO CB. * Make sure form has ALL REQUIRED SIGNATURES AND DATES. |
| **10-panel urine drug test must be obtained by the student and submitted separately to the nursing program.** | * This test result is not uploaded to CB. These results are given to Ms. Tracy at [stracy@belmontcollege.edu](mailto:stracy@belmontcollege.edu) or hand deliver them. * If your drug test is positive due to prescriptive medication, it is YOUR responsibility to work with your healthcare provider to obtain documentation of the drug being taken and why. |
| **Measle, Mumps, & Rubella (MMR)**  **MUST BE UPLOADED BY AUGUST 1ST.** | * Upload MMR titer that has been completed within the last 3 years. * You must submit all three components for the MMR titer. If any one component is negative or equivocal, you must be revaccinated according to CDC guidelines and upload the immunization non-converter form. |
| **Varicella (Chicken Pox)**  **MUST BE UPLOADED BY AUGUST 1ST.** | * Upload Varicella titer that has been completed within the last 3 years. * You must submit all three components for the MMR titer. If any one component is negative or equivocal, you must be revaccinated according to CDC guidelines and upload the immunization non-converter form. |

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| **Hepatitis B**  **MUST BE UPLOADED BY AUGUST 1ST.** | * Upload Hepatis B titer that has been completed within the last 3 years.   You must submit all three components for the MMR titer. If any one component is negative or equivocal, you must be revaccinated according to CDC guidelines and upload the immunization non-converter form. |
| **Tuberculosis (TB)**  **MUST BE UPLOADED BY AUGUST 1ST.** | **One of the following needs completed by JUNE 1st. NO EXCEPTIONS.**   1. Two step TB skin test with each TB antigen injected 7 to 21 days apart. (see below for explanation)   OR   1. QuantiFERON Gold blood test (lab report required)   OR   1. If previous positive TB results or allergy to the TB antigen, submit a CLEAR chest x-ray.   **REQUIRED ANNUALLY AFTER JUNE 1ST.**  **All TB testing must be done after June 1st.**  **A two-step TB skin test is as follows:**   1. **Intradermal needle injection of the TB antigen into the forearm. Then an assessment of site 48 to 72 hours later.** 2. **Intradermal needle injection of the TB antigen into the forearm. Then an assessment of site 48 to 72 hours later.**  * **IMPORTANT: Both steps must be uploaded at the same time into the CB system. If they are not loaded at the same time CB will reject the submission.** |

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| **Tdap (Tetanus, Diphtheria, Pertussis)**  **MUST BE UPLOADED BY AUGUST 1ST.** | Submit documentation of a Tetanus, Diphtheria & Pertussis (Tdap) vaccination. **MUST HAVE BEEN ADMINISTERED WITHIN THE LAST 10 YEARS. Renewal date is 10 years from date of administration.** |
| **Influenza (flu)**  **DUE OCTOBER 15TH. RENEWAL DATE WILL BE THE SAME FOR SUBSEQUENT YEARS.**  **DO NOT UPLOAD PREVIOUS YEAR VACCINE**  **DO NOT UPLOAD PRIOR TO OCTOBER 15TH.** | Submit documentation of a flu vaccine administered during the **CURRENT** flu season (August-May).  ***Documentation must include where vaccine was received, such as specific hospital, pharmacy, employer, family physician, etc.*** |
| **Student Accountability for Healthcare Cost**  **MUST BE UPLOADED BY AUGUST 1ST.** | Submit the Student Accountability for Healthcare Costs form. *This form is found on the Belmont College website under your program of choice*. MUST BE SIGNED AND DATED BY STUDENT.  Only needs uploaded upon entry of program.  **This is not your health insurance card.** |

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| **American Heart Association CPR Certification**  **A close-up of a card  Description automatically generated** | Submit your American Heart Association BLS provider CPR certification.  If you have recently completed the course and do not have access to your completion certificate, the course instructor may provide a note of completion for you to upload to your CB account.  **Temporary approval will be granted for 30 DAYS** with this submission.  A new requirement will be created in CB for you to upload your certificate.  **Students are encouraged to plan for this early due availability of courses being offered.** |

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| **Professional License/Certification**  **MUST BE UPLOADED BY AUGUST 1ST.**  **WALLET CARD WILL NOT BE ACCEPTED!** | You must submit your professional licensure/certification.  **Your submission must come from the provided websites:**  **Practical Nursing or Traditional ADN:**   * State Tested Nurse Assistant (STNA) license from current state registry. <https://nurseaidregistry.odh.ohio.gov/Public/PublicNurseAidSearch> * *Patient Care Technician*   <https://certportal.nhanow.com/certificationverification/>  **Transitional Nursing Students (LPN to RN or Paramedic to RN)**   * *LPN License*   **Must be without restrictions.**  <https://www.nursys.com/LQC/LQCTTerms.aspx>   * *Paramedic certification*   **Must be without restrictions.**  [**https://www.nremt.org/verify-credentials**](https://www.nremt.org/verify-credentials) |
| **HIPAA Certification/Training**  **MUST BE UPLOADED AFTER AUGUST 22nd.** | **Details will be provided during orientation with the faculty in August**. |
| **Student Understanding of HIPAA**  **MUST BE UPLOADED AFTER AUGUST 22nd.** | **Details will be provided during orientation with the faculty in August**. |
| **OSHA Certification/Training**  **MUST BE UPLOADED AFTER AUGUST 22nd.** | **Details will be provided during orientation with the faculty in August.** |
| **Honor Code and Acknowledgment of Program’s Policies Form. Details will be provided during orientation with the faculty in August the week before the semester starts. MUST BE UPLOADED AFTER THIS MEETING AND NOT BEFORE.** | Submit your Honor Code and Acknowledgement of Program’s Policies form which is found on the Belmont college website under your program of choice.  Make sure form is signed and dated by you.  This is only done upon entry into the nursing program. |
| **Student Understanding of Risk Form**  **MUST BE UPLOADED BY AUGUST 1ST.** | Submit your Student Understanding of Risk form which is found on the Belmont college website under your program of choice.  Make sure form is signed and dated by you.  This is only done upon entry into the nursing program |