



WICHITA STATE  
UNIVERSITY  
COLLEGE OF  
HEALTH PROFESSIONS  
School of Nursing

## Graduate Nursing PRACTICUM DOCUMENTATION REQUIREMENTS

All students must complete PRIOR to enrollment in a practicum course:

- 1) Medical requirements
- 2) License/insurance/training requirements

**EXPIRED DOCUMENTATION** - It is the **responsibility of the student** to submit expiring items as needed to avoid a lapse. Students who have items that lapse during the semester may not continue in the practicum and are subject to administrative withdrawal.

**DEADLINES** - Verification from Student Health Services (SHS) **MUST** be received by the Graduate Nursing programs office deadline. It is the **responsibility of the student** to confirm verification of receipt from SHS with the Graduate Nursing program.

***IMPORTANT:*** Completion of practicum documentation includes confirmation of documents received by SHS in the Graduate Nursing programs office. NOTE: If your practicum begins prior to the actual semester start, then your due date may be earlier.

**MEDICAL** – Do not submit medical records (i.e. physical exam; immunizations) to the Graduate Nursing program office. It is the **responsibility of the student** to contact and confirm verification of receipt from SHS with the Graduate Nursing program **prior** to the due date.

**LICENSE/INSURANCE/TRAINING** - This information is submitted to the Graduate Nursing programs office.

## MEDICAL REQUIREMENTS

Submit the following paperwork to **WSU STUDENT HEALTH SERVICES**.

Student Health Services - located on the 2<sup>nd</sup> floor of Ahlberg Hall, east side of building.

Phone 978-3620; Fax 978-3517.

### **Requirement Procedure for College of Health Professions Students** (effective, July, 2011) -

1. Students will receive a checklist of health information necessary for clinical requirements.
2. Students will attach the checklist to their documentation of health information and submit to WSU Student Health. **All documents should be submitted at one time.**
3. **Updates ONLY** to health information (examples: Influenza vaccine, Hep B/Td vaccines and TB skin testing) may be submitted when received.
4. Student Health Services will issue a card to the student's department with the pertinent health information dates.
5. Each CHP department will supply Student Health Services with a list of new students at the beginning of each program year.
6. Student Health Services will charge the student's WSU account a one-time \$20.00 fee for review of records. This fee will cover the student the entire time of their program.

The student must have **ALL** Practicum **DOCUMENTATION** below attached to the College of Health Professions Requirement Checklist.

1. **PHYSICAL EXAM** – within one year.

Exams can be done at Student Health or the student can submit a copy of the physical exam (form provided by Student Health) to be completed by their PCP and then submitted to SHS.

2. **TUBERCULOSIS SCREENING** –clearance annually. Students can receive TB screening at SHS or appropriate documentation from the PCP can be submitted to SHS. One of the following is required for TB clearance:

- Negative TB test.
- Negative Quantiferon blood test.
  - If a student's TB or QFT is positive, clearance requires a negative chest x-ray. A completed symptom review sheet for students with a documented history of positive TB test or positive QFT.

3. **Tdap VACCINATION** – This is to meet the requirement for pertussis. The recommendations for healthcare workers from Immunze.org is a single dose of Tdap regardless of age and of the time since the last Td dose.

4. **MMR** - documentations of two doses of MMR (first dose on/after first birthday and second dose at least 28 days later) OR titers demonstrating immunity to Mumps, Rubella, and Rubeola.

5. **VARICELLA** – Two varicella vaccinations given 4 weeks apart OR a titer demonstrating immunity to varicella.

6. **HEPATITIS B** - Three dose series completed in the appropriate time frame OR positive Hepatitis B titer. A waiver may be requested in extenuating health circumstances.

7. **INFLUENZA VACCINE** – Vaccination against seasonal influenza is required annually (typically between mid-September to March 31<sup>st</sup>). A waiver may be requested in extenuating health circumstances.

8. **MENINGITIS** - Required if the student is living in the dorm for the first year, or waived.

## College of Health Professions Requirement Checklist

Name: \_\_\_\_\_

Program: \_\_\_\_\_

myWSUId: \_\_\_\_\_

Please attach checklist to all requirements and submit all at the same time.

- ☐ Physical Exam
- ☐ Tuberculin test or Quantiferon Gold Assay\*
- ☐ Tdap Vaccine (Tetanus/diphtheria/acellular pertussis)
- ☐ Documentation of two doses of MMR (first dose on/after first birthday and second dose at least 28 days later) OR titers demonstrating immunity to Mumps, Rubella, and Rubeola.
- ☐ Varicella- titer or 2 vaccine series
- ☐ Three dose series completed in the appropriate time frame OR positive Hepatitis B titer.
- ☐ Influenza Vaccine\*\*
- ☐ Chest X-Ray &/or Signs/Symptoms review as indicated

\*Updates may be turned in as received.

\*\*A waiver may be requested through the School of Nursing- Graduate Nursing Program in extenuating health circumstances.

## **LICENSE, INSURANCE AND TRAINING REQUIREMENTS**

**Submit the following items to the Graduate Nursing programs office:**

Room 501 Ahlberg Hall, Attn: Amy McClintock. Phone 978-5704. Fax 978-3094

1. Students will receive a checklist for licensure, insurance, and training requirements, necessary for practicum documentation requirements.
2. Students will attach the checklist to their documentation of licensure, insurance, and training requirements and submit to the Graduate Nursing programs office.

**All documents should be submitted at one time (exception to Liability Insurance).**

3. Renewals or Updates **ONLY** to information may be turned in when received.

- ☐ **BACKGROUND CHECK** - Allow a week to complete, as this is done online. A copy will be provided to the Graduate Nursing program office.
- ☐ **LIABILITY INSURANCE (DUE: July 1)** - A copy of your current coverage for NP student insurance (minimum of \$1 million each incident/ \$3 million aggregate). Nursing Administration students may have RN insurance.
- ☐ **REGISTERED NURSE LICENSE** - Submit a copy of proof of current license in Kansas. If your practicum will be in another state, you must also provide proof of license in that state.
- ☐ **CPR** – Submit a copy of your current Certification in Basic Cardiac Life Support/BCLS/CPR (and ACLS for ACNP students).
- ☐ **BLOODBORNE PATHOGENS** – To be completed online at Certified. Good for one year from date of exam. To be updated when expired.
- ☐ **HIPAA INSTRUCTION** – To be completed online at Certified. One-time documentation.
- ☐ **PERSONAL HEALTH INSURANCE FOR YOU** – Submit a copy of proof of personal health insurance.
- ☐ **PERSONAL HEALTH INSURANCE FOR YOU** – Submit a statement that you will not allow your personal health insurance to expire while in the program.

## **School of Nursing-Graduate Program Requirement Checklist for Practicum Documentation**

Name: \_\_\_\_\_ myWSUId: \_\_\_\_\_

**Please submit all of the following items at ONE TIME, to:**

Amy McClintock, c/o School of Nursing, Ahlberg Hall, Room 501, Phone 978-5704; Fax 978-3094

- ☐ **BACKGROUND CHECK** - Allow a week to complete, as this is done online. A copy will be provided to the Graduate Nursing program office.
- ☐ **BACKGROUND CHECK Waiver** - You must sign a release.
- ☐ **LIABILITY INSURANCE** - A copy of your current coverage policy page for NP student insurance (minimum of \$1million each incident/ \$3 million aggregate). Nursing Administration students may have RN insurance.
- ☐ **REGISTERED NURSE LICENSE** - Submit proof of current license in Kansas. The Kansas State Board of Nursing no longer issues cards. It is the responsibility of the student to visit the KSBN site and make a copy of your RN license and submit. If your practicum will be in another state, you must also provide proof of license in that state.
- ☐ **CPR** - Submit a copy of current certification in Basic Cardiac Life Support/BCLS/CPR.
- ☐ **ACLS** - Current certification in Advanced Cardiac Life Support (ACLS)-required for ACNP students.
- ☐ **BLOODBORNE PATHOGENS** – To be completed online at Certified. Good for one year from date of exam. To be updated when expired.
- ☐ **HIPAA INSTRUCTION** – To be completed online at Certified. One-time documentation.
- ☐ **PERSONAL HEALTH INSURANCE FOR YOU** - To be updated if any change occurs while student you are in program.
- ☐ **PERSONAL HEALTH INSURANCE STATEMENT** - You are to submit a one sentence statement that you will not allow your personal health insurance to expire while you are in The program.