

PLU School of Nursing Health and Clearance Requirements

All Health and Clearance requirements for the School of Nursing are managed through CastleBranch and Clinical Placements Northwest (CPNW) websites. Instructions on setting up your personal accounts on both sites will be provided to you upon your acceptance into the program. Additional forms mentioned below will be available to you through your CastleBranch account. Due dates have been set so that students meet and stay current during your clinical rotations as per our clinical partner requirements.

Health Requirements	What you need to prepare to submit	Additional information
Measles, Mumps, and Rubella (MMR)	You will need to supply proof of having received 2 vaccines OR a positive antibody titer for all 3 components (lab report or physician verification of results required.)	One-time requirement
Varicella (Chicken Pox)	You will need to supply proof of having received 2 vaccines OR a positive antibody titer (lab report or physician verification of results required).	One-time requirement
Hepatitis B	<p>A. Series of 3 vaccines (Recombinex HB or Energix-B or Recombivax HB) at 0, 1, 6 months plus titer confirmation 6-8 weeks later.</p> <ul style="list-style-type: none"> • For persons who do not respond to the primary hepatitis B vaccine series they must complete a second vaccine series. For the second series, a different brand of vaccine should be administered. If negative titer after initial series of 3 vaccines, then vaccine #4 and re-titer OR #5 and #6 vaccines and re-titer. <p>B. Series of 2 vaccines (Heplisav) administered one month apart.</p> <ul style="list-style-type: none"> • If negative titer after initial series of 2 vaccines, then vaccine #3 and re-titer and #4 vaccines and re-titer. <p>C. Immunity by Titer (anti-HBs or HepB Sab)</p> <p>D. History of the disease or proof of non-converter.</p>	One-time requirement

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TB skin test	<p>One of the following is required: Newly completed 2-step skin test (1-3 weeks between tests) completed within the past 12 months OR negative TB IGRA blood test (lab report or physician verification of results required) OR Previous 2 step skin test along with EACH annual renewal with no lapse in annual testing OR If positive results submit a clear chest x-ray (lab report or physician verification of results required) AND TB Symptom Check completed by your Health Care Provider.</p> <p><i>If you have a history of receiving a BCG vaccine, please complete the TB IGRA testing for the most accurate results. If this returns positive, please follow the instructions above for a positive result.</i></p>	<p>Annual updates are required (completed within 365 days of prior test).</p> <p>If your test expires, you must complete an additional 2-step PPD (2 tests placed 1-3 weeks apart) or TB IGRA blood draw to renew and come back into compliance.</p> <p>Annual Symptom Check review by a Health Care Provider is required with positive test results.</p>
Tetanus, Diphtheria & Pertussis (Tdap)	You will need to supply proof of a Tdap administered within the past 10 years. This vaccine must have been given after your 11 th birthday.	Boosters are required at 10-year intervals.
Covid	<p>You will need to provide vaccine information - must include the vaccine manufacturer, 1 or 2 dose series, date of first dose, date of second dose (if applicable).</p> <p>Boosters are recommended and the same information as above must be provided.</p>	Proof of vaccinations is required. Boosters are recommended and should be included if received.
Compliance Requirements	What you need to prepare to submit	Additional information
Influenza	You will need to supply proof of a flu shot administered during the current flu season each year. Due dates may fluctuate annually.	Annual update required in the Fall.
CPR Certification	<p>You will need to supply proof of current CPR certification. It must be an American Heart Association Healthcare Provider–BLS course.</p> <p>Courses can be found by going to https://ahainstructornetwork.americanheart.org/AHA/ECC/classConnector.jsp?pid=ahaecc.classconnector.home&_ga=2.104620039.626352960.1610496543-1651644369.1589996826</p> <p>* PLEASE NOTE– HeartSaver® is not an appropriate course to meet this requirement.</p>	<p>Renewals required before expiration</p> <p>**Note to students: you may be asked to update prior to expiration if your card expires before the start of a new semester.</p>
Health Insurance	You will need to supply the School of Nursing Health Insurance Affidavit using the document found in your CastleBranch tracker.	Annual update required

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E-learning modules	Modules are completed through your individual CPNW.org account.	Annual updates required
Handbook Acknowledgement	Submit the Handbook Acknowledgement. The document is available to download through CastleBranch.	Form name: <i>PLU SoN Handbook Affidavit 2015</i>
Consent to Release Education Records	Please submit the Consent to Release Education Records document. The form is available to download through CastleBranch.	Form name: <i>Release Educational Record</i>
Disclosure Form	Please submit the PLU Disclosure Form document. The form is available to download through Castlebranch.	Form Name: <i>PLU SoN Disclosure form</i>

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Student Permission to Receive Materials	Please submit the Student Permission to Receive Materials document. This form is available to download through CastleBranch.	Form name: <i>FERPA Mail Folder Release</i>
Essential Qualifications Affidavit	The Essential Qualifications for Participation in School of Nursing Degree Programs are used to assist the student in determining whether or not s/he meets essential qualifications, or if accommodations or modifications might be necessary for successful completion of the program at the School of Nursing. Students are required to sign a statement of understanding, acknowledgment, and compliance each semester of the nursing program. (Form name: <i>Essential Qualifications Affidavit 2015</i>)	Reminders will be sent to you through "MyCB" with due dates of: 1/20 5/10 8/20 12/20 Note that this is a two-step process in "MyCB."
Drug Screen	You will need to supply proof of a 10-panel drug screening. Instructions on completing this requirement will be provided upon creation of your CastleBranch account.	Required once, upon admission; clinical agencies reserve the right to request a repeat at any time.
National Background Screening	You are required to complete a National Background screening upon admission to the program	One-time requirement
Washington State WATCH Background screening	You are required to complete a WATCH screening upon admission and annually.	Annual update required