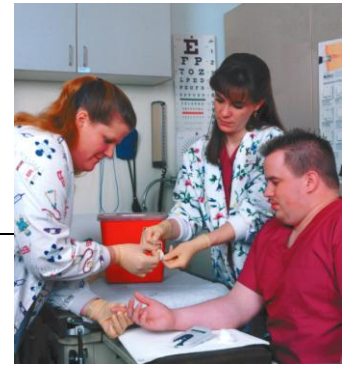


Nursing Assistant Certified



GENERAL INFORMATION

The Nursing Department of Everett Community College offers a career mobility approach to nursing education that prepares graduates for **Certification** as Nursing Assistants. The program is approved by the Washington State Department of Social and Health Services.

Curriculum. Instruction covers the following areas: basic technical skills, mental health and social services needs of clients, clients' rights, promotion of clients' independence, communication and interpersonal skill development, safety and emergency procedures, rules and regulations that affect the Nursing Assistant's practice, personal care skills, basic restorative services, infection control, CPR instruction, and HIV training. The entire program is completed in one academic quarter.

Physical Attributes. In general, employers and clinical agencies expect students to meet the following criteria:

- Use good body mechanics, lift/carry a minimum of 25 lbs independently and 50 lbs with assistance.
- Normal or corrected vision and hearing to a normal range.
- Full range of motion, ability to be in constant movement – standing, stooping, walking, and sitting.
- Good manual and finger dexterity.
- Ability to differentiate odors in the clinical setting.
- Communication skills. Ability to communicate fluently in English. This includes verbal communication (in person and on the telephone) as well as written communication.

Summary of Occupational Exposure. Students planning a career in health care need to be aware of the fact that they are at risk for exposure to blood-borne pathogens. Tasks and procedures performed by the health care professional involve risks classified by the Centers for Disease Control in the following ways:

- *Category I* – Direct contact with blood or other bodily fluids to which universal precautions apply.
- *Category II* – Activities performed without blood exposure but exposure may occur in emergencies.
- *Category III* – Task/activity does not entail predictable or unpredictable exposure to blood.

CAREER OPTIONS

Nursing Assistants are qualified for employment as entry-level caregivers in hospitals, long-term care agencies, clinics, physician's offices, urgent care settings, and client's homes. Many Nursing Assistants continue with education that leads to licensure as a nurse (LPN or RN).

LEARN MORE ABOUT EVCC'S NURSING PROGRAM

Nursing Information Sessions are offered several times each quarter. Information discussed includes the profession of nursing, nursing education in general, nursing employment, and EvCC's Nursing Program and application process.

For more information you may call the Nursing Department at 425-388-9463.

PROGRAM COMPLETION REQUIREMENTS

To successfully complete the Nursing Assistant Certified program, students must complete NURS 100, 10 credits, with a grade of C (2.0) or better. C- is not acceptable.

SPECIAL NOTES:

Attendance. To receive maximum benefit from a program that combines theory and practice, regular attendance is absolutely essential. Absences beyond Washington State requirements will result in course failure and failure to meet Washington State guidelines for certification.

Transportation. Students must provide their own transportation to college and clinical facilities.

NURSING ASSISTANT APPLICATION PROCEDURES

Application materials are accepted at any time. To apply, the three items listed below must be delivered to the Nursing Records/Health Professions Office, Index Hall, Room 140, EvCC, 2000 Tower Street, Everett WA 98201.

1. Completed Nursing Assistant Application. Note: Signing the application allows the Nursing department to obtain a Washington State Criminal Background Check.
2. Proof of U.S. high school graduation or equivalent, or completion of the GED. (Official high school transcript or official GED verification is required.)
3. Completed Immunization Checklist together with verification copies of evidence of immunization.

When the three items above have been received by the Health Professions Office students will be contacted with further application instructions which may include the scheduling of an interview. At the same time, the Health Professions Office will obtain a Washington State Criminal Background Check.

Admitted students will be informed by letter. At that time, admitted students must submit **proof of insurance** that provides accident and emergency room coverage to the Health Professions Office. Students who do not currently have such coverage may contact the Student Activities Office for a brochure that describes insurance that may be purchased through the College. (Students are also strongly encouraged to purchase a medical insurance policy to cover illness.)

- *Neither the College nor the clinical facility is responsible for the cost of medical care for injury or illness which occurs as a result of classroom or clinical activities.*

Once proof of insurance has been verified by the College, the admitted student will be given a Permission Slip for Nursing 100, and may register. A maximum of 10 students are admitted each quarter.

Criminal Background Checks are processed on each incoming Nursing Assistant student by the Washington State Patrol. Your signature on the bottom of the Nursing Application form gives the Nursing Program permission to request background check information from the Washington State Patrol. If a “less than satisfactory” rating is assigned to the student by the State Patrol, the clinical facilities will deny access to the student.

Student Immunization Students are required to submit evidence of immunizations as listed on the Immunizations Checklist. Verification copies (obtained from physicians or clinics) of the following are required prior to acceptance:

- Tuberculin skin test within the past 12 months. A 2-step TB test is required. If either of the Tuberculin skin tests are positive, a chest x-ray with written results and a personal statement of “no symptoms of TB are present” is required.
- Hepatitis B Vaccination Series (3 injections + titer).
- MMR injection and booster completed or positive serology (titer).
- Diphtheria/Tetanus injection (within the past 10 years).
- Varicella injection (two injections) or positive serology (titer).
- Influenza injection (yearly).

COST, REGISTRATION AND REFUND POLICIES

This course is offered on a self-support basis. Students pay a Course Fee and also pay for their own supplies and expenses associated with the class. The Course Fee is \$1,995 and is subject to change. Payment is due at the time of registration. Financial aid is not available.

Registration is open until all seats are taken or until four days prior to the start of the class, whichever comes first. The last day for a 100% refund is the 4th working day after the class begins. (During Summer Quarter the last day for a refund is the 3rd working day after classes begin.)



EXPECTED EXPENSES

COLLEGE RELATED EXPENSES

Course Fee	\$1,995, subject to change. Call 425-267-0150 for the current rate.
Technology Fee	\$3.50 per credit, to a maximum of \$35 per quarter.

NURSING-RELATED ESTIMATED EXPENSES

Uniform	\$100
Analogue Watch (with second hand)	Prices vary; coupons for discounts are available in Nursing Journals
Name pin	\$10
Goggles	\$15
Shoes	\$40-80
Transfer belt	\$25
Stethoscope	\$25
Medical/Accident insurance	Prices vary; available through the College's Student Activities office
Textbooks	\$100 (approximately); available in EvCC Bookstore
Washington State Nurses Aide Registration Fee (optional)	\$30
Washington State Competency Certification Test	\$100

Complete the enclosed Application and submit the Immunization Checklist and verifications and proof of high school graduation to the Nursing Records/Health Professions Office, Index Hall, Room 140, EvCC, 2000 Tower Street, Everett WA 98201. If no forms are enclosed in this application packet, call 425-388-9463.

Your social security number is confidential and, under a federal law called the Family Educational Rights & Privacy Act, the College will protect it from unauthorized use and/or disclosure. In compliance with state/federal requirements, disclosure may be authorized for the purposes of state and federal financial aid, Hope/Lifetime Learning tax credits, academic transcripts, assessment or accountability research. The National Student Clearinghouse, under an agreement with the College, may use the SSN to verify enrollment and degrees.

*Everett Community College does not discriminate on the basis of race, religion, creed, color, national origin, age, sex, sexual orientation, marital status, the presence of any physical, sensory or mental disability, genetic information or status as a disabled or Vietnam era veteran in its program and activities, or employment. The Vice President of Instruction and Student Services has been designated to handle inquiries regarding student-related non-discrimination policies and can be reached at 2000 Tower Street, Everett, WA 98201, or by phone at (425)388-9216. The Vice President of Administrative Services/Human Resources has been designated to handle employment-related inquiries regarding the non-discrimination policies and can be reached at 2000 Tower Street, Everett, WA 98201, or by phone at (425)388-9232. This publication is effective **SEPTEMBER 2010**. The College reserves the right to change courses, programs, degrees and requirements. It is the student's responsibility to be aware of correct information by routinely checking with Enrollment Services and/or the advisors listed in this publication. Requirements applicable to all certificates and degrees are published in the College Catalog. Nothing contained herein shall be construed to create any offer to contract or any contractual rights. For more information, call 425-388-9219, Everett Community College, 2000 Tower Street, Everett, WA 98201, www.everettcc.edu*



About Everett Community College

Improve your personal skills, discover new ideas, prepare for work and/or university transfer, and improve your career prospects through programs at EvCC.

Each term, about 9,000 students enroll in a wide variety of courses. Day, evening, distance, and workplace-based options are available. Students may enroll on a full-time or part-time basis. EvCC offers two-year associate degrees, short-term certificates, endorsements and industry certifications.

Student life can be active. Currently, EvCC offers athletic programs in basketball, baseball, and soccer, to name a few.

Student clubs range from Phi Theta Kappa (the Honor Society) to the United Native American Council to the International Club to the German Club, and more. Our Student Government and Programs Board are always on the go with activities that make college life fun. There are also opportunities to develop leadership skills.

Student services are designed to support students in their studies, remove barriers, and enrich student life. Financial aid services offer grant and loan opportunities, as well as scholarships. Our Counseling, Advising and Career Center has a rich array of information and personal assistance for students. The Diversity and Equity Center supports student activities and College programs that promote growth and opportunity toward cultural understanding.

Former EvCC students have found employment at Boeing, in small business, in community service agencies, in schools, and in other locales. Our transfer students are known to do very well at the UW, WWU and other schools.

EvCC's University Center

Looking for educational
options close to home?

Check out our new University
Center, offering a variety of
Bachelor's and Master's
degrees –

**Right here.
Right now.**

www.uceverett.org

Instructions:

1. Complete all boxes of this application
2. Attach an official copy of your high school diploma or official copy of your GED certificate.
3. Using the Immunizations Checklist, attach immunization verification copies.
4. Take or mail these items to: Health Professions Student records, Everett Community College, 2000 Tower Street, Everett WA, 98201

Are you taking this course to augment Nursing Program acceptance?

- Yes No

I want to enter:

Quarter	Year

Are you interested in working in long-term care upon completion of this course?

- Yes No

Are you interested in working full-time?

- Yes No

Name: _____
last
first
middle
previous last names

Address: _____ Phone: () _____
street
city/state
zip

Student ID Number (obtained from the Enrollment Services Office)

Birthdate:

In case of emergency, contact:

Name: _____

Phone: () _____

Social Security Number (used to identify transcripts and obtain WA Background Check)

Education:

GED completion date: _____

High School:

Name	Location	Graduation date
_____	_____	_____

College/University: (Please list all; use back of sheet if necessary)

Name	Location	Dates attended	Degree earned (if any)
_____	_____	_____	_____
_____	_____	_____	_____

Current licensure:

Health Care Licensure state where licensed last date of renewal

_____	_____	_____
_____	_____	_____

The following information is for statistical purposes only. Providing this information is voluntary and in no way determines your eligibility for entry into the Nursing Program.

Ethnic Background

- Korean Chinese Spanish/Latino
- Filipino Vietnamese Japanese
- All other Asian/Pacific Islander
- Alaskan Native/Native American
- Black/African American White/Caucasian
- Other _____

Marital Status

- Single
- Married
- Divorced
- Widowed
- ___ # Dependent children

Gender

- Female
- Male

Current Employment

- Occupation: _____
- None <20%
 - 20 – 39% 40 – 59%
 - 60 – 79% 80 – 99%
 - 100%

SIGNATURE: Please read the following statements and sign in the space provided.

- 1) I have reviewed the information presented on this form and I agree that it is correct as stated, and
- 2) I request and authorize the Health Professions Office to obtain on my behalf the information needed for entry into a Health Professions Program, and
- 3) I am aware and agree that this information may be shared with the clinical sites that are a required part of this educational program.

Signature _____ Date _____

NURSING ASSISTANT CERTIFIED PROGRAM

IMMUNIZATION CHECKLIST

EFFECTIVE APRIL 2009

Instructions: Using this checklist, attach verifications from your healthcare provider for each required item below. Failure to provide a complete form and verification documents will result in denial of entry into the NAC course.

YOUR NAME: _____ **DATE:** _____

Place a checkmark in the box for each verification attached to this form.



<input type="checkbox"/>	MMR 1 st and 2 nd immunizations OR Measles, Mumps, and Rubella titers	GUIDELINE: Injection + booster or positive serology (titers) are required
<input type="checkbox"/>	DIPHTHERIA/ TETANUS	GUIDELINE: A primary series of three doses plus a booster every 10 years is required. Provide evidence of last booster.
<input type="checkbox"/>	VARICELLA titer OR 1 st and 2 nd immunizations	GUIDELINE: Varicella injections or titer is required.
<input type="checkbox"/>	INFLUENZA	GUIDELINE: Required yearly as an ongoing Health Professions student. Highly recommended prior to acceptance.
<input type="checkbox"/>	HEPATITIS B SERIES 3 immunizations and titer	GUIDELINE: Student must document the 1st dose at the time of application to Nursing. 2nd dose is administered at least 30 days after the 1st dose . 3rd dose is administered at least 4 months after the 1st dose and at least 2 months after the 2nd dose and is required prior to entry into any clinical setting. Final evidence of immunity is to be provided 30 days after 3rd dose and prior to entry into 2nd quarter of nursing. If titer is negative, the entire series needs to be repeated together with a titer. If titer is negative after 2 nd series, no action is needed.
<input type="checkbox"/>	PPD	GUIDELINE: A 2-step TB test is required as part of the initial TB testing. Thereafter the Tuberculin skin test must be repeated every 12 months. Two negative tests is considered a negative response unless a test has shown 5 or more mm of induration. If your PPD is due to expire during your time in a clinical facility, you must update the test prior to the beginning of the quarter in which it expires. If any of your PPD's are positive , a chest x-ray with written results, and personal statement of no symptoms of TB is required. Note: Tine tests are not acceptable.
<input type="checkbox"/>	Accident & Emergency Room Medical Insurance	GUIDELINE: Proof of accident or Emergency Room Medical Insurance is required. A copy of the insurance card, insurance ID, or policy statement that shows this coverage is acceptable. <i>Note: This documentation is not required for acceptance, but is required prior to admission into the program.</i>