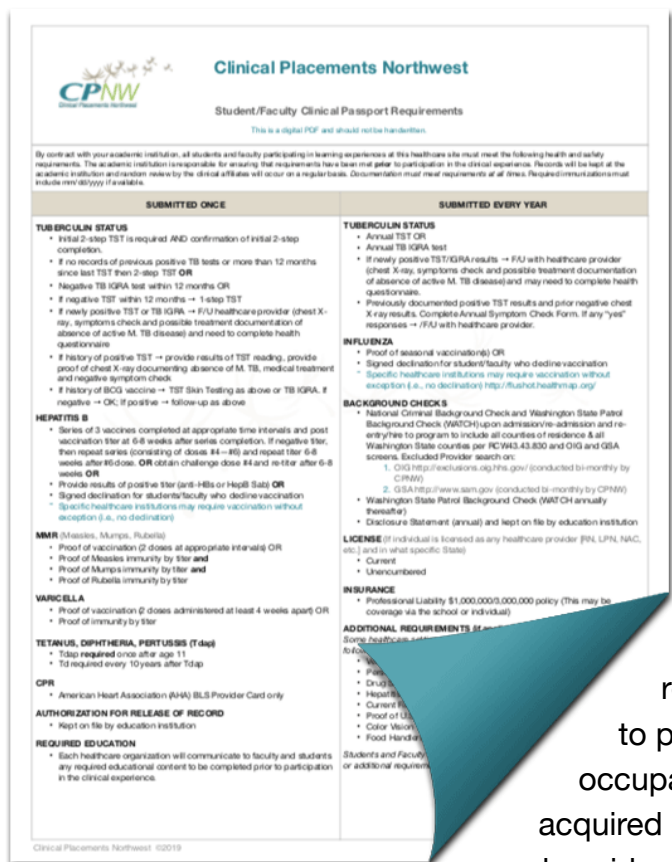


What is a Clinical Passport?

The Clinical Passport is a set of established health and safety standards required of all students and faculty participating in a learning experience within the healthcare setting. It serves as a record of immunity status for vaccine-preventable diseases. The record should show all pertinent information about that vaccine and when it was administered.



Clinical Placements Northwest
Student/Faculty Clinical Passport Requirements

This is a digital PDF and should not be handwritten.

By contract with your academic institution, all students and faculty participating in learning experiences at this healthcare site must meet the following health and safety requirements. The academic institution is responsible for ensuring that requirements have been met prior to participation in the clinical experience. Records will be kept at the academic institution and are not released by the clinical affiliates with or on a regular basis. Documentation must meet requirements at all times. Required immunizations must include immunity if available.

SUBMITTED ONCE	SUBMITTED EVERY YEAR
<p>TUBERCULIN STATUS</p> <ul style="list-style-type: none"> Initial 2-step TST is required AND confirmation of initial 2-step completion. If no records of previous positive TB tests or more than 12 months since last TST then 2-step TST OR Negative TB IGRA test within 12 months OR If negative TST within 12 months → 1-step TST If newly positive TST or TB IGRA → FU with healthcare provider (chest X-ray, symptoms check and possible treatment documentation of absence of active M. TB disease) and need to complete health questionnaire If history of positive TST → provide results of TST reading, provide proof of chest X-ray documenting absence of M. TB, medical treatment and negative symptom check If history of BCG vaccine → TST Skin Testing as above or TB IGRA. If negative → OK; if positive → follow-up as above <p>HEPATITIS B</p> <ul style="list-style-type: none"> Series of 3 vaccines completed at appropriate time intervals and post vaccination titer at 6-8 weeks after series completion. If negative titer, then repeat series (consisting of doses #4-#6) and repeat titer 6-8 weeks after #6 dose. OR obtain challenge dose #4 and re-titer after 6-8 weeks OR Provide results of positive titer (anti-HBs or HepB SAb) OR Signed declaration for students/faculty who decline vaccination Specific healthcare institutions may require vaccination without exception (i.e., no declination) <p>MMR (Measles, Mumps, Rubella)</p> <ul style="list-style-type: none"> Proof of vaccination (2 doses at appropriate intervals OR Proof of Measles immunity by titer and Proof of Mumps immunity by titer and Proof of Rubella immunity by titer <p>VARICELLA</p> <ul style="list-style-type: none"> Proof of vaccination (2 doses administered at least 4 weeks apart) OR Proof of immunity by titer <p>TETANUS, DIPHTHERIA, PERTUSSIS (Tdap)</p> <ul style="list-style-type: none"> Tdap required once after age 11 Td required every 10 years after Tdap <p>CPR</p> <ul style="list-style-type: none"> American Heart Association (AHA) BLS Provider Card only <p>AUTHORIZATION FOR RELEASE OF RECORD</p> <ul style="list-style-type: none"> Kept on file by education institution <p>REQUIRED EDUCATION</p> <ul style="list-style-type: none"> Each healthcare organization will communicate to faculty and students any required educational content to be completed prior to participation in the clinical experience. 	<p>TUBERCULIN STATUS</p> <ul style="list-style-type: none"> Annual TST OR Annual TB IGRA test If newly positive TST/IGRA results → FU with healthcare provider (chest X-ray, symptoms check and possible treatment documentation of absence of active M. TB disease) and may need to complete health questionnaire. Previously documented positive TST results and prior negative chest X-ray results. Complete Annual Symptom Check Form. If any "yes" responses → FU with healthcare provider. <p>INFLUENZA</p> <ul style="list-style-type: none"> Proof of seasonal vaccination(s) OR Signed declination for student/faculty who decline vaccination Specific healthcare institutions may require vaccination without exception (i.e., no declination) http://rushot.healthmap.org/ <p>BACKGROUND CHECKS</p> <ul style="list-style-type: none"> National Criminal Background Check and Washington State Patrol Background Check (WATCH) upon admission/re-admission and re-entry to program to include all counties of residence & all Washington State counties per RCW 9A.43.030 and OHG and GSA screens. Excluded Provider search on: <ol style="list-style-type: none"> OHG http://echeckers.org/his.gov/ (conducted bi-monthly by CPNW) GSA http://www.siam.gov (conducted bi-monthly by CPNW) Washington State Patrol Background Check (WATCH annually thereafter) Disclosure Statement (annual) and kept on file by education institution <p>LICENSE (if individual is licensed as any healthcare provider (RN, LPN, NAC, etc.) and in what specific State)</p> <ul style="list-style-type: none"> Current Unencumbered <p>INSURANCE</p> <ul style="list-style-type: none"> Professional Liability \$1,000,000/5,000,000 policy (this may be coverage via the school or individual) <p>ADDITIONAL REQUIREMENTS (if applicable)</p> <ul style="list-style-type: none"> Food Handler Drug Test First Aid Hepatitis B Current BLS Color Vision Food Handling

Why are vaccinations important?

You are likely to come into contact with infective material from patients, potentially placing you at risk for exposure and possible transmission of vaccine-preventable diseases.

Why is the Clinical Passport so important?

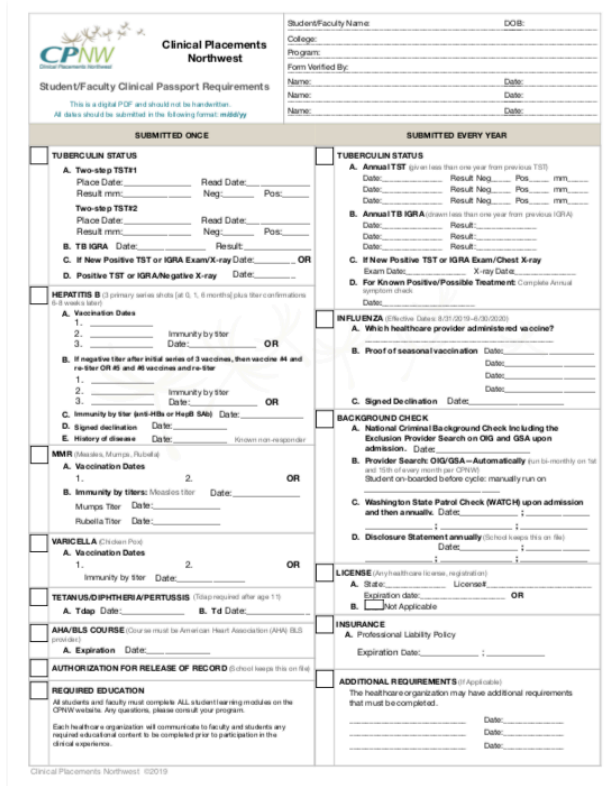
Employers and healthcare providers have a shared

responsibility to prevent occupationally acquired infections and avoid causing harm to patients by taking

reasonable precautions to prevent transmission of vaccine-preventable diseases. Vaccines help maintain immunity, safeguard healthcare professionals from infection and protect vulnerable patients.

Keeping Current

You have the professional responsibility to know and keep current with your immunizations and health requirements.



Clinical Placements Northwest
Student/Faculty Clinical Passport Requirements

This is a digital PDF and should not be handwritten.
All data should be submitted in the following format: mm/dd/yyyy

Student/Faculty Name: _____ DOB: _____
College: _____
Program: _____
Form Verified By: _____
Name: _____ Date: _____
Name: _____ Date: _____
Name: _____ Date: _____

SUBMITTED ONCE	SUBMITTED EVERY YEAR
<p><input type="checkbox"/> TUBERCULIN STATUS</p> <p>A. Two-step TST#1 Place Date: _____ Read Date: _____ Result: Neg. Pos. Two-step TST#2 Place Date: _____ Read Date: _____ Result: mm. Neg. Pos.</p> <p>B. TB IGRA Date: _____ Result: _____ C. If New Positive TST or IGRA Exam/X-ray Date: _____ OR D. Positive TST or IGRA/Negative X-ray Date: _____</p> <p><input type="checkbox"/> HEPATITIS B (primary series shots [at 0, 1, 6 months] plus titer confirmations [at 6 weeks])</p> <p>A. Vaccination Dates 1. _____ 2. _____ Immunity by titer Date: _____ OR 3. _____</p> <p>B. If negative titer after initial series of 3 vaccines, then receive #4 and re-titer OR #6 and all vaccines and re-titer 1. _____ 2. _____ Immunity by titer Date: _____ OR 3. _____</p> <p>C. Immunity by titer (anti-HBs or HepB SAb) Date: _____ D. Signed declination Date: _____ E. History of disease Date: _____ (Known non-responder)</p> <p><input type="checkbox"/> MMR (Measles, Mumps, Rubella)</p> <p>A. Vaccination Dates 1. _____ 2. _____ OR B. Immunity by titer: Measles titer Date: _____ Mumps titer Date: _____ Rubella titer Date: _____</p> <p><input type="checkbox"/> VARICELLA (Chicken Pox)</p> <p>A. Vaccination Dates 1. _____ 2. _____ OR B. Immunity by titer Date: _____</p> <p><input type="checkbox"/> TETANUS/DIPHTHERIA/PERTUSSIS (Tdap required after age 11)</p> <p>A. Tdap Date: _____ B. Td Date: _____</p> <p><input type="checkbox"/> AHA/IBLS COURSE (Course must be American Heart Association (AHA) BLS Provider)</p> <p>A. Expiration Date: _____</p> <p><input type="checkbox"/> AUTHORIZATION FOR RELEASE OF RECORD (Should keep this on file)</p> <p><input type="checkbox"/> REQUIRED EDUCATION</p> <p>All students and faculty must complete ALL student learning material on the CPNW website. Any questions, please consult your program. Each healthcare organization will communicate to faculty and students any required educational content to be completed prior to participation in the clinical experience.</p>	<p><input type="checkbox"/> TUBERCULIN STATUS</p> <p>A. Annual TST (on less than one year from previous TST) Date: _____ Result: Neg. Pos. mm. mm. Date: _____ Result: Neg. Pos. mm. mm. Date: _____ Result: Neg. Pos. mm. mm.</p> <p>B. Annual TB IGRA (on less than one year from previous IGRA) Date: _____ Result: _____ Date: _____ Result: _____ Date: _____ Result: _____</p> <p>C. If New Positive TST or IGRA Exam/Chest X-ray Exam Date: _____ X-ray Date: _____ D. For Known Positive/Possible Treatment: Complete Annual Symptom Check</p> <p><input type="checkbox"/> INFLUENZA (Effective Dates: 8/31/2019-4/30/2020)</p> <p>A. Which healthcare provider administered vaccine? Date: _____ B. Proof of seasonal vaccination Date: _____ Date: _____ Date: _____</p> <p>C. Signed Declaration Date: _____</p> <p><input type="checkbox"/> BACKGROUND CHECK</p> <p>A. National Criminal Background Check including the Exclusion Provider Search on OHG and GSA upon admission Date: _____ B. Provider Search: OHG/GSA - Automatically (run bi-monthly on file and 608 already completed CPNW) (Student on-boarded before cycle; manually run on _____) C. Washington State Patrol Check (WATCH) upon admission and then annually Date: _____ D. Disclosure Statement annually (Should keep this on file) Date: _____</p> <p><input type="checkbox"/> LICENSE (if healthcare license, registration)</p> <p>A. State: _____ License: _____ OR Expiration date: _____ B. Not Applicable</p> <p><input type="checkbox"/> INSURANCE</p> <p>A. Professional Liability Policy Expiration Date: _____</p> <p><input type="checkbox"/> ADDITIONAL REQUIREMENTS (if applicable) The healthcare organization may have additional requirements that must be completed. Date: _____ Date: _____ Date: _____</p>

Clinical Passport Tutorial

There are two types of tests used to measure for TB exposure

TUBERCULIN STATUS

There are two types of tests that are done to measure for TB exposure:

- Tuberculin Skin Test (TST)
- TB blood tests (IGRA)

TST: When you first have a TST, you are required to get a 2-step. The first skin test reaction should be read between 48 and 72 hours after administration. You will have to retest if not read within this time period.

If the first TST is negative, you will need to obtain a second TST within 1-3 weeks, then yearly after that. If your yearly TST lapses, you will then need to again complete the 2-step process.

TUBERCULIN STATUS

- Initial 2-step TST is required AND confirmation of initial 2-step completion.
- If no records of previous positive TB tests or more than 12 months since last TST then 2-step TST **OR**
- Negative TB IGRA test within 12 months OR
- If negative TST within 12 months → 1-step TST
- If newly positive TST or TB IGRA → F/U healthcare provider (chest X-ray, symptoms check and possible treatment documentation of absence of active M. TB disease) and need to complete health questionnaire
- If history of positive TST → provide results of TST reading, provide proof of chest X-ray documenting absence of M. TB, medical treatment and negative symptom check
- If history of BCG vaccine → TST Skin Testing as above or TB IGRA. If negative → OK; If positive → follow-up as above

TUBERCULIN STATUS

- Initial 2-step TST is required AND confirmation of initial 2-step completion.
- If no records of previous positive TB tests or more than 12 months since last TST then 2-step TST **OR**
- Negative TB IGRA test within 12 months OR
- If negative TST within 12 months → 1-step TST
- If newly positive TST or TB IGRA → F/U healthcare provider (chest X-ray, symptoms check and possible treatment documentation of absence of active M. TB disease) and need to complete health questionnaire
- If history of positive TST → provide results of TST reading, provide proof of chest X-ray documenting absence of M. TB, medical treatment and negative symptom check
- If history of BCG vaccine → TST Skin Testing as above or TB IGRA. If negative → OK; If positive → follow-up as above

If first TST is negative, then retest within 1-3 weeks, then yearly.

INFLUENZA

- Proof of seasonal vaccination(s) OR
- Signed declination for student/faculty
- Specific healthcare institutions may have an exception (i.e., no declination) <http://www.washington.edu/health/flu>

BACKGROUND CHECKS

Rationale – A 2-step is performed at baseline because people who were infected with TB many years ago may have a negative reaction to an initial TST. The first “step” may stimulate (or boost) the immune system’s ability to react to the test. If the second “step” is not performed as part of baseline screening, a subsequent positive TST reaction could be misinterpreted as a new infection. Additionally, the TST (Tuberculin Skin

Test) and a live vaccine must be done on the same day or separated by 30 days. If done sooner, there is potential for a false positive, resulting in increased cost and unnecessary treatment (chest x-rays).

TB Blood Tests - Interferon Gamma Release Assays (IGRAs) are blood tests used to determine if a person is infected with M. tuberculosis. The IGRA measures the immune response to TB proteins in whole blood. The IGRA tests most commonly available are the QuantiFERON Gold In-Tube (QFT-IT) and TSPOT tests.

TUBERCULIN STATUS

- Initial 2-step TST is required AND confirmation of initial 2-step completion.
- If no records of previous positive TB tests or more than 12 months since last TST then 2-step TST **OR**
- Negative TB IGRA test within 12 months OR
- If negative TST within 12 months → 1-step TST
- If newly positive TST or TB IGRA → F/U healthcare provider (chest X-ray, symptoms check and possible treatment documentation of absence of active M. TB disease) and need to complete health questionnaire
- If history of positive TST → provide results of TST reading, provide proof of chest X-ray documenting absence of M. TB, medical treatment and negative symptom check
- If history of BCG vaccine → TST Skin Testing as above or TB IGRA. If negative → OK; If positive → follow-up as above

IGRA for M. tuberculosis

INFLUENZA

- Proof of seasonal vaccination(s) OR
- Signed declination for student/faculty
- Specific healthcare institutions may have an exception (i.e., no declination) <http://www.washington.edu/health/flu>

BACKGROUND CHECKS

Note: If you have a newly positive TST or TB Blood Test you will require a follow-up by your healthcare provider (chest X-ray, symptoms check and possible treatment documentation of absence of active M. TB disease). You will also need to complete a health questionnaire.

Clinical Passport Tutorial

HEPATITIS B

Complete a series of three vaccines at 0, 1, and 6 months and a post vaccination titer at 6-8 weeks after the series... or

- Provide documentation of positive titer (anti-HBs or HepB Sab)... or
- Provide documentation of history of Hepatitis B... or
- Furnish a signed declination. **Note:** Many healthcare organizations do not accept a declination.

Series of 3 vaccines

HEPATITIS B

- Series of 3 vaccines completed at appropriate time intervals and post vaccination titer at 6-8 weeks after series completion. If negative titer, then repeat series (consisting of doses #4—#6) and repeat titer 6-8 weeks after #6 dose. **OR** obtain challenge dose #4 and re-titer after 6-8 weeks **OR**
- Provide results of positive titer (anti-HBs or HepB Sab) **OR**
- Signed declination for students/faculty who decline vaccination
- Specific healthcare institutions may require vaccination without exception (i.e., no declination)

MMR

2 MMR vaccines

MMR (Measles, Mumps, Rubella)

- Proof of vaccination (2 doses at appropriate intervals) OR
- Proof of Measles immunity by titer **and**
- Proof of Mumps immunity by titer **and**
- Proof of Rubella immunity by titer

You are required to have 2 MMR vaccines or proof of titer (3 titers, one each of Measles [Rubeola], Mumps and Rubella).

NOTE: In most cases getting the MMR is far less expensive than having blood titers drawn. Revaccination with MMR is safe.

VARICELLA

You are required to have 2 Varicella vaccines or proof of titer.

VARICELLA

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

2 Doses

NOTE: The titer is only recommended if you have had chicken pox disease. Titer after Varicella vaccine is not recommended by the CDC as most Varicella tests are not sensitive enough to detect antibody level for immunity post vaccination.

TETANUS, DIPHTHERIA, PERTUSSIS (Tdap)

- Tdap **required** once after age 11
- Td required every 10 years after Tdap

Proof of one dose

TETANUS

Students and faculty are required to show proof of one dose of Tdap, administered after 11 years of age, and a routine Td booster every 10 years.

Clinical Passport Tutorial

INFLUENZA

Students and faculty are required to show:

- Proof of seasonal vaccine (either the flu shot or nasal spray flu vaccine and where administered [pharmacy, personal medical provider, etc.]...
or
- Signed declination of vaccination.

Seasonal
vaccination

INFLUENZA

- Proof of seasonal vaccination(s) OR
- Signed declination for student/faculty who decline vaccination
- Specific healthcare institutions may require vaccination without exception (i.e., no declination) <http://flushot.healthmap.org/>

NOTE: Some healthcare institutions require vaccination without exception. Others may allow you to decline on a basis of medical condition, religious belief or creed, or on the basis of a strongly held personal belief. That requires your signature on a declination form stating the reason for declining and committing to wear a mask at all times during flu season when in the institution.

Keep in mind that all **live** vaccines, such as MMR, Varicella, LAIV (nasal flu) have to be administered on the same day or separated by 28 days.

Expiration - If any of your immunizations expire in the middle of the quarter or semester, up-to-date immunizations are required before beginning the term.

Authorization for Release of Record

Records

AUTHORIZATION FOR RELEASE OF RECORD

- Kept on file by education institution

Healthcare organizations conduct **random compliance audits** of student and faculty health and safety requirements. At any time,

healthcare has the authority to request proof of a student's and faculty's Clinical Passport information.

Your education program will ask you to sign a form which authorizes the college to release all information contained in the Clinical Passport to those healthcare organizations which provide your learning experience. This includes all necessary background check information (including, but not limited to: National criminal background check, Washington State Patrol background check, OIG and GSA Excluded Providers database search), and immunization records. Your education program will keep this information on file. Students are accountable for reporting any crimes committed after the Release is signed and while enrolled in the education program.

MILITARY IMMUNIZATION

Students who have military experience may present with an immunization record reflecting "medical immunity" for certain vaccines. This medical immune category is a permanent exemption from receiving the vaccine based on medical screening. [Click here for exemption code listing with definitions.](#)

Clinical Passport Tutorial

AHA/BLS COURSE

You are required to complete an American Heart Association (AHA) BLS Provider Course and have a current Course card/

eCard at all times. AHA BLS Provider Resuscitation Quality Improvement Program (RQI) meets this requirement.

The BLS Course teaches both single rescuer and team basic life support skills for application in both in- and out-of-hospital settings. The course trains participants to promptly recognize several life threatening emergencies, five high-quality chest compressions, deliver appropriate ventilations, and provide early use of an AED. It includes adult, child, and infant rescue techniques.

NOTE: Course must be AHA Provider only. A course following AHA Guidelines only is not acceptable.



CPR

- American Heart Association (AHA) BLS Provider Card only

BACKGROUND CHECKS

A. The school runs a National Background Check and WATCH (Washington State Patrol background check on admission/readmission).

B. OIG/GSA are included in the initial Background Check and run bi-monthly by

BACKGROUND CHECKS

- National Criminal Background Check and Washington State Patrol Background Check (WATCH) upon admission/re-admission and re-entry/hire to program to include all counties of residence & all Washington State counties per RCW43.43.830 and OIG and GSA screens. Excluded Provider search on:
 1. OIG <http://exclusions.oig.hhs.gov/> (conducted bi-monthly by CPNW)
 2. GSA <http://www.sam.gov> (conducted bi-monthly by CPNW)
- Washington State Patrol Background Check (WATCH annually thereafter)
- Disclosure Statement (annual) and kept on file by education institution

CPNW. If a student enters the program mid-cycle the check must be run by the school.

C. The WATCH is run annually by the school

D. Criminal History Disclosure: This document is completed upon admission into the education program and completed annually thereafter. This form serves as a personal attestation providing the student to disclose any criminal convictions that will be discovered on the background checks.

Clinical Passport Tutorial

LICENSE

Students and faculty are required to provide all healthcare licenses, certifications, or registrations; past or present; active or expired. State of issue and expiration date(s) are required.

License must be provided

LICENSE (If individual is licensed as any healthcare provider [RN, LPN, NAC, etc.] and in what specific State)

- Current
- Unencumbered

Insurance required

INSURANCE

- Professional Liability \$1,000,000/3,000,000 policy (This may be coverage via the school or individual)

INSURANCE

Every student must be covered by liability insurance. Students are responsible to verify

that their college provides adequate coverage. If the college does not provide coverage, students need to secure insurance from an agency.

NOTE: Some healthcare organizations may have additional requirements that are listed at the bottom of your Passport. Your education program will inform you if any of these requirements will be necessary.

ADDITIONAL REQUIREMENTS

Each healthcare organization has unique requirements. It is the school's responsibility to check with each organization for any additional requirements.