

**Student Checklist of Documentation Required for Clinical or Externship**  
**SUBMIT DOCUMENTATION FOR THE FOLLOWING IMMUNIZATIONS/REQUIREMENTS.**

- \_\_\_\_\_ Physical: general physical stating you are physically and mentally cleared for a clinical rotation.
- \_\_\_\_\_ Dental Screening – for Dental Hygiene Program ONLY
- \_\_\_\_\_ *American Heart Association Basic Life Support (formerly Healthcare Provider)* for healthcare providers.  
**This version is required for your licensure exams.**
- \_\_\_\_\_ Panel 10 urine drug screen: panel 10 = ten drug groups are tested (list is in packet); specify panel 10 to doctor or lab. **A copy showing the drugs groups tested for and the test results should be submitted.** (Completed after program start).
- \_\_\_\_\_ State & federal criminal background checks fingerprinting. (Completed after program start).

**Immunizations**

- PPD (TB test) – Documentation should show 2 PPDs within last 12 months of starting the program.  
**One PPD must be within 6 months of starting the clinical/externships for each program.**
- \_\_\_\_\_ 1<sup>st</sup> TB test / PPD: need documentation of date given, date read, and results
- \_\_\_\_\_ 2<sup>nd</sup> TB test / PPD: need documentation of date given, date read, and results **OR**
- \_\_\_\_\_ A blood test (called a Tspot or Quantiferon Gold) is also acceptable instead of the two TB tests.
- Hepatitis B vaccine: 3 shot series – must have at least the first dose administered – or positive immunity titer
- \_\_\_\_\_ Dose 1                      \_\_\_\_\_ Dose 2                      \_\_\_\_\_ Dose 3                      **OR**
- \_\_\_\_\_ Positive immunity titer                      **OR**
- \_\_\_\_\_ Signed waiver (required if you do not have all three doses completed, even if series is started)
- \_\_\_\_\_ Tetanus (Tdap) vaccine: most current dose must be administered within the last 10 years

- Varicella (chicken pox):
- \_\_\_\_\_ Dose 1    \_\_\_\_\_ Dose 2    **OR**
- \_\_\_\_\_ Positive immunity titer (**if titer is negative, one booster dose is required.**)

- MMR (measles, mumps, rubella): documentation of 2 doses of vaccine or positive immunity titer
- \_\_\_\_\_ Dose 1    \_\_\_\_\_ Dose 2    **OR**    \_\_\_\_\_ Positive immunity titer

**If any titer results are negative, booster dose is required.**

- \_\_\_\_\_ Covid – 19 Vaccine (as required by clinical and externship partners.)
- \_\_\_\_\_ Flu vaccine (required Fall/Spring)