

Clinical Passport Tutorial

What is a Clinical Passport?

The Clinical Passport is a set of established health and safety standards required of all students and faculty caring for patients in 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.

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 and safeguards you and other healthcare professionals from infection and the potential or patients becoming infected.

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	
Student/Faculty Name: Last, First, M.I. College: Program: These requirements are in place for the health and safety of students, faculty and their patients.	
By contract with your academic institution, all students and faculty participating in patient care experiences must meet the following health and safety requirements. The academic institution is responsible for ensuring that requirements have been met prior to participation in patient care/clinical experience. Records will be kept at the academic institution and random review by the clinical affiliates will occur on a regular basis. Documentation must meet requirements at all times. Required immunizations must include mm/dd/yyyy if available.	
SUBMITTED ONCE	SUBMITTED EVERY YEAR
TUBERCULIN STATUS <ul style="list-style-type: none">Documentation of an initial 2 step TST is required AND documentation of annual TSTs since 2 step was completedIf no records of previous positive TB tests > or more than 12 months since last TST → 2 step TST ORNegative TB IGRA test within 12 months ORIf negative TST within 12 months → one step TSTIf newly positive TST or TB IGRA → f/u by 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: submit annual symptom check completed within one year from healthcare provider INFLUENZA <ul style="list-style-type: none">Proof of seasonal vaccination(s) ORSigned declaration for students/faculty who decline vaccination Specific healthcare institutions may require vaccination without exception (i.e., no declaration) http://cphn.clinicalplacementsnw.org/ BACKGROUND CHECKS <ul style="list-style-type: none">National Criminal Background Check and Washington State Patrol Background Check (WATCH) upon admission/admission and reentry/return to program to include all counties of residence & all Washington State counties per RCW 43.43.030 and OIG and GSA screens. Excluded provider search on:<ul style="list-style-type: none">OIG http://www.oig.gov (individual records)GSA http://www.gsa.gov (contract records)Washington State Patrol Background Check (WATCH) annually thereafterDisclosure Statement (annual) kept on file by education institution LICENSE (If faculty licensed or certified as any healthcare provider (RN, LPN, NAC, etc. & in what specific State) <ul style="list-style-type: none">CurrentUnencumbered INSURANCE <ul style="list-style-type: none">Professional Liability \$1,000,000/\$3,000,000 policy (This may be coverage via the school or individual) ADDITIONAL REQUIREMENTS (Some healthcare settings may require the following: <ul style="list-style-type: none">Vehicle Insurance (for personal health insurance)Personal Health InsuranceDrug ScreenHepatitis A VaccineCurrent First Aid CardProof of U.S. CitizenshipColor Vision TestFood Handlers License (Students and Faculty will be informed of additional requirements need to be)	TUBERCULIN STATUS <ul style="list-style-type: none">Annual TST ORAnnual TB IGRA testIf newly positive TST/IGRA results → f/u 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: submit annual symptom check completed within one year from healthcare provider INFLUENZA <ul style="list-style-type: none">Proof of seasonal vaccination(s) ORSigned declaration for students/faculty who decline vaccination Specific healthcare institutions may require vaccination without exception (i.e., no declaration) http://cphn.clinicalplacementsnw.org/ BACKGROUND CHECKS <ul style="list-style-type: none">National Criminal Background Check and Washington State Patrol Background Check (WATCH) upon admission/admission and reentry/return to program to include all counties of residence & all Washington State counties per RCW 43.43.030 and OIG and GSA screens. Excluded provider search on:<ul style="list-style-type: none">OIG http://www.oig.gov (individual records)GSA http://www.gsa.gov (contract records)Washington State Patrol Background Check (WATCH) annually thereafterDisclosure Statement (annual) kept on file by education institution LICENSE (If faculty licensed or certified as any healthcare provider (RN, LPN, NAC, etc. & in what specific State) <ul style="list-style-type: none">CurrentUnencumbered INSURANCE <ul style="list-style-type: none">Professional Liability \$1,000,000/\$3,000,000 policy (This may be coverage via the school or individual) ADDITIONAL REQUIREMENTS (Some healthcare settings may require the following: <ul style="list-style-type: none">Vehicle Insurance (for personal health insurance)Personal Health InsuranceDrug ScreenHepatitis A VaccineCurrent First Aid CardProof of U.S. CitizenshipColor Vision TestFood Handlers License (Students and Faculty will be informed of additional requirements need to be)
HEPATITIS B <ul style="list-style-type: none">Documentation of 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 #1, #2 and repeat titer 6-8 weeks after #3 dose. OR obtain challenge dose #4 and retest after 6-8 weeks ORProof of documentation of positive titer (anti-HBs or HgB SAg) ORSigned declaration for students/faculty who decline vaccination Specific healthcare institutions may require vaccination without exception (i.e., no declaration) MMR (Measles, Mumps, Rubella) <ul style="list-style-type: none">Proof of vaccination (2 doses at appropriate intervals) ORProof of immunity by titer VARICELLA (Chicken Pox) <ul style="list-style-type: none">Proof of vaccination (2 doses at appropriate intervals) ORProof of immunity by titer TETANUS, DIPHTHERIA, PERTUSSIS (Tdap) <ul style="list-style-type: none">Tdap required onceTd required every 10 years after Tdap CPR <ul style="list-style-type: none">American Heart Association BLS Healthcare Provider Certificate AUTHORIZATION FOR RELEASE OF RECORD <ul style="list-style-type: none">Kept on file by education institution REQUIRED EDUCATION <p>EACH HEALTHCARE INSTITUTION WILL COMMUNICATE TO FACULTY AND STUDENTS ANY REQUIRED EDUCATIONAL CONTENT TO BE COMPLETED PRIOR TO PARTICIPATING IN PATIENT CARE.</p> <p>STUDENTS AND FACULTY IN CPKIL AND INCPIC CONSORTIUMS MUST COMPLETE ALL STUDENT LEARNING MODULES ON THE WEBSITE. IF ANY QUESTIONS, PLEASE CONSULT YOUR PROGRAM</p>	

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Clinical Placements Northwest Student/Faculty Clinical Passport Requirements	
Student/Faculty Name: Last, First, M.I. DOB: _____ College: _____ Program: _____ Form verified by: _____ Date: _____ Name: _____ Date: _____ Name: _____ Date: _____	
By contract with your academic institution, all students and faculty participating in patient care experiences must meet the following health and safety requirements. The academic institution is responsible for ensuring that requirements have been met prior to participation in patient care/clinical experience. Records will be kept at the academic institution and random review by the clinical affiliates will occur on a regular basis. Documentation must meet requirements at all times. Required immunizations must include mm/dd/yyyy if available.	
SUBMITTED ONCE	SUBMITTED EVERY YEAR
TUBERCULIN STATUS <ul style="list-style-type: none">A. Two-step TST (1) Place Date: _____ Read Date: _____ Result: mm _____ Neg _____ Pos _____B. Two-step TST (2) Place Date: _____ Read Date: _____ Result: mm _____ Neg _____ Pos _____C. TB IGRA Date: _____ Result: _____D. If New Positive/Exam/X-ray Date: _____ ORE. Positive TST/Negative X-ray Date: _____ HEPATITIS B (if primary series shots: (at 0, 1, 2 mos.) plus titer confirmation (6-8 weeks later) <ul style="list-style-type: none">A. Vaccination Dates: 1) _____ Date: _____ Immunity confirmed by titer: _____ OR 2) _____ Date: _____ OR #1 and #2 vaccines and re-titer 3) _____ Date: _____ Immunity confirmed by titer: _____ OR 4) _____ Date: _____ C. Immunity confirmed by titer (anti-HBs or HgB SAg) Date: _____ D. Signed declaration Date: _____ Known non responder: _____ MMR (Measles, Mumps, Rubella) <ul style="list-style-type: none">A. Vaccination Dates: 1) _____ 2) _____ ORB. Immunity by titer: Measles Date: _____ Mumps Date: _____ Rubella Date: _____ VARICELLA (Chicken Pox) <ul style="list-style-type: none">A. Vaccination Dates: 1) _____ 2) _____ ORB. Immunity by titer Date: _____ TETANUS/DIPHTHERIA/PERTUSSIS <ul style="list-style-type: none">A. Tdap Date: _____B. Td Date: _____ AHA BLS Healthcare Provider Certificate <ul style="list-style-type: none">Expiration Date: _____ Authorization for Release of Record School keeps this on file	TUBERCULIN STATUS <ul style="list-style-type: none">A. Annual TST (Given less than one year from previous TST) Date: _____ Result: Neg _____ Pos _____ OR Date: _____ Result: Neg _____ Pos _____ OR B. Annual TB IGRA (drawn less than one year from previous IGRA) Date: _____ Result: _____ OR C. If New Positive/Exam/X-ray Exam Date: _____ X-ray Date: _____ D. Known Positive/Possible Treatment/Annual Symptom Check from Health Care Provider Date: _____ INFLUENZA Effective dates: 08/01/2016 – 4/30/2017 <ul style="list-style-type: none">A. Which healthcare provider administered vaccine? B. Proof of seasonal vaccination Date 1: _____ Date 2: _____ Date 3: _____ OR C. Signed declaration Date 1: _____ Date 2: _____ Date 3: _____ BACKGROUND CHECK <ul style="list-style-type: none">A. National Criminal Background Check including Excluded Provider Search on OIG and GSA upon admission and then monthly OIG and GSA Dates: _____ B. Washington State Patrol Check (WATCH) upon admission and then annually Date: _____ C. Disclosure Statement annually (School keeps this on file) Date: _____ LICENSE (Any healthcare license, certification, registration) <ul style="list-style-type: none">A. State: _____ Exp. Date: _____ OR B. Not Applicable INSURANCE <ul style="list-style-type: none">A. Professional Liability Policy Expiration Date: _____ ADDITIONAL REQUIREMENTS (if applicable) <ul style="list-style-type: none">A. Vehicle Insurance Date: _____ B. Personal Health Insurance Date: _____ C. Drug Screen Date: _____ D. Hepatitis A Vaccine Two doses Dates: 1) _____ 2) _____ E. Current First Aid Card Date: _____ F. Proof of U.S. Citizenship Date: _____ G. Confidentiality Statement Date: _____ H. Color Vision Test Date: _____ I. Food Handlers License Date: _____ <p>This is not a comprehensive list; there may be more items.</p>

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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.

The image shows a portion of a 'Clinical Passport Requirements' form. A blue arrow points to the 'TUBERCULIN STATUS' section with the text 'There are two types of tests used to measure for TB exposure'. The 'TUBERCULIN STATUS' section includes a 'SUBMITTED ONCE' column and an 'EVERY YEAR' column. The 'EVERY YEAR' column lists requirements for annual TST or IGRA, follow-up with a healthcare provider for positive results, and documentation of negative results. Below this is the 'INFLUENZA' section, which requires proof of seasonal vaccination or a signed declination. At the bottom is the 'BACKGROUND CHECKS' section, which requires a National Criminal Background Check and a Washington State Patrol Background Check.

This image shows the same 'Clinical Passport Requirements' form as above, but with a blue arrow pointing to the 'TUBERCULIN STATUS' section. The arrow contains the text: 'If first TST is negative, retest within 1-3 weeks, then yearly.' The 'TUBERCULIN STATUS' section details the requirements for a 2-step TST process, including documentation of the initial 2-step TST, follow-up with a healthcare provider for positive results, and documentation of negative results. The 'INFLUENZA' and 'BACKGROUND CHECKS' sections are also visible.

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 for detection of infection to M. tuberculosis. The IGRA measures the person’s immune reactivity to M. tuberculosis, the bacterium that causes TB. The IGRA tests most commonly available are the QuantiFERON Gold In-Tube (QFT-IT) and TSPOT tests.

This image shows the 'Clinical Passport Requirements' form with a blue arrow pointing to the 'TUBERCULIN STATUS' section. The arrow contains the text: 'IGRA for M. tuberculosis'. The 'TUBERCULIN STATUS' section details the requirements for a 2-step TST process, including documentation of the initial 2-step TST, follow-up with a healthcare provider for positive results, and documentation of negative results. The 'INFLUENZA' and 'BACKGROUND CHECKS' sections are also visible.

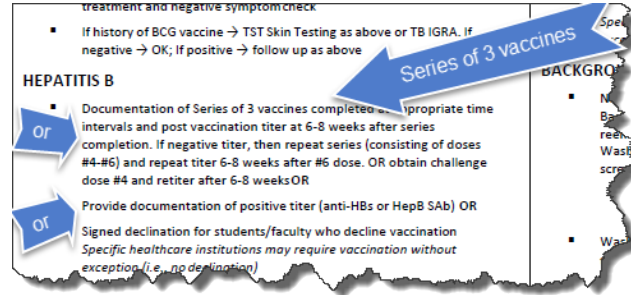
Note: If you have a newly positive TST or TB Blood Test you will require a follow-up by your healthcare provider (chest X-ray, symptoms check and possible treatment documentation of absence of active M. TB disease). You will also need to complete a health questionnaire.

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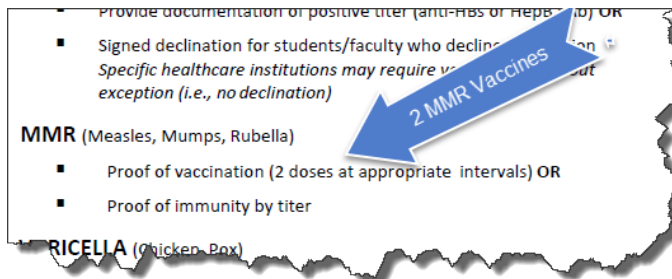
HEPATITIS B

Complete a series of three vaccines at 0, 1, and 6 months and a post vaccination titer at 6 and 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.



MMR



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

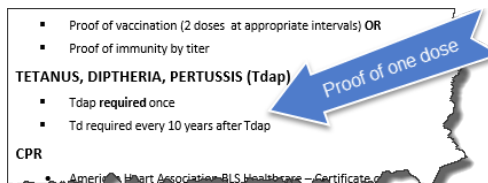
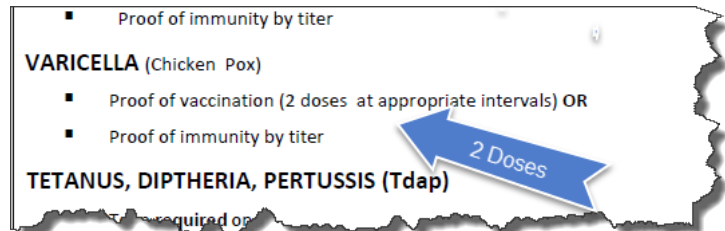
NOTE: In most cases getting the MMR is far less expensive than having blood titers drawn. Revaccination with MMR is

safe.

Varicella

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

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

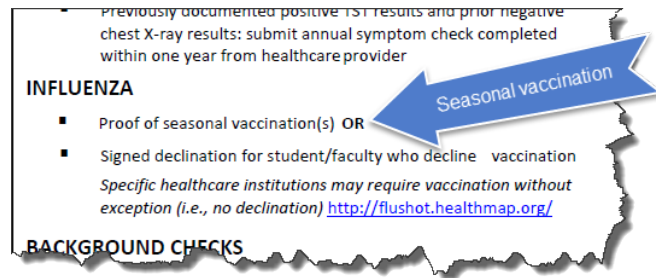
Students and faculty are required to show proof of one dose of Tdap, administered after 18 years of age, and a routine Td booster every 10 years.

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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.



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



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.

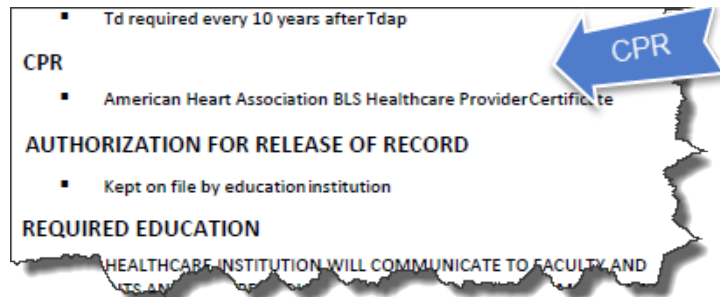
Your education program will ask you to sign a form which authorizes the college to release this information to any healthcare organization which provides the student's clinical training experience. This includes all necessary background check information (including, but not limited to: National criminal background check, Washington State Patrol background check, OIG and GSA Excluded Providers database search), and immunization records to any affiliated clinical education site requesting such information in order to finalize your externship placement with those facilities.

Clinical Passport Tutorial

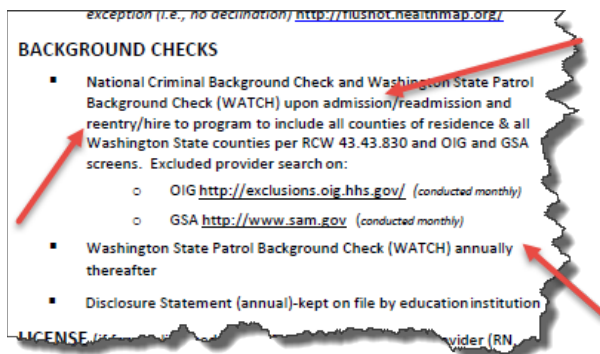
CPR

You are required to complete an American Heart Association (AHA) BLS course. 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, give high-quality chest compressions, deliver appropriate ventilations, and provide early use of an AED. It includes adult, child, and infant rescue techniques.

NOTE: Course can be AHA BLS Provider or Military Health Network Course. "Heartsaver CPR is not acceptable for this requirement."



Background Checks

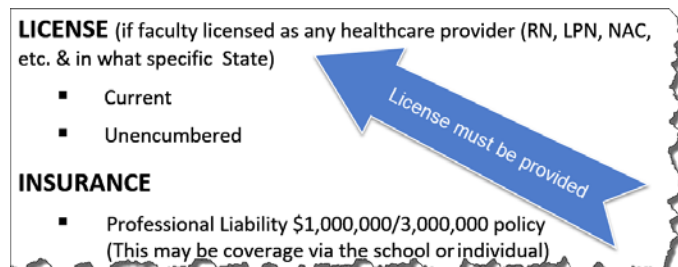


Thorough Criminal Background Checks are performed upon admission and reentry/rehire to a program. Checks are repeated annually.

Healthcare partners reserve the right to refuse or accept any student on the basis of these checks.

Licensure

If any individual possesses a healthcare license, certification or registration, this information must be provided including State of issue and expiration date.



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Insurance

LICENSE (if faculty licensed or certified as any healthcare provider (RN, LPN, NAC, etc. & in what specific State)

- Current
- Unencumbered

INSURANCE

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

ADDITIONAL REQUIREMENTS (if applicable)
Some healthcare settings may have additional requirements, such as the following:

- Vehicle Insurance (for access to VA & Military Facilities)
- Personal Health Insurance
- Drug Screen
- Hepatitis A Vaccine
- Current First Aid Card
- Proof of U.S. Citizenship
- Color Vision Test
- Food Handlers License

Students and Faculty will be informed prior to clinical experience if optional or additional requirements need to be met.

Professional Liability insurance policy with a \$1,000,000/3,000,000 limit is required. A policy expiration date must be provided.

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.