



# Professional Policies and Procedures

## Professional Requirements and Standards

### POLICY TITLE: PROFESSIONAL PROGRAM REQUIREMENTS

Date of Origin (if available):

Date(s) of Revision: May 21, 2008; Sept 26, 2011; May 13, 2013; Jan 7, 2014; Aug 16, 2017; Dec 12, 2022

Faculty Sponsor(s): Lori Holt, Chad Sekutera, Evonne Young

Undergraduate Department Approval Date(s): Dec 13, 2011; May 13, 2013; Oct 9, 2017, January 10, 2023

#### Policy:

In order to be enrolled in the Johnson Beth-El Undergraduate Nursing professional courses, students must demonstrate compliance with the professional program requirements according to the time frames and specifications stated below.

The following requirements must be completed, and the appropriate documentation uploaded into MyClinicalExchange by the published due date each semester. All documentation must be current and not expire during the semester. Failure to meet any requirements or deadlines will result in the implementation of a Professional Improvement Contract-Professional Behavior (PIC-PB) or being administratively dropped from the course.

#### Background Check

A criminal background check is required of all students (see [Background Check Policy](#)).

#### Drug Testing

Drug testing must be completed by students as specified per BSN Option in the [Student Drug Testing Policy](#).

#### Health Insurance

Students must provide documentation of current healthcare insurance.

#### Cardiopulmonary Resuscitation

Students must provide documentation of current American Heart Association Basic Life Support Healthcare Provider CPR with the demonstration portion taken in a classroom (not online) setting. Students are responsible for locating all training and renewal classes. If CPR certification expires during a clinical course, then it must be renewed prior to the beginning of the course.

#### Tuberculosis Screening

1. Baseline testing
  - a. All new nursing students will complete baseline testing for *Mycobacterium tuberculosis* infection.
  - b. Baseline testing consists of one of the followings:
    - i. A two-step tuberculin skin test (TST),

- ii. A single Blood Assay for *Mycobacterium tuberculosis* (BAMT), or iii.  
Documentation of previous positive testing for tuberculosis
2. Two-step TST: The two-step TST consists of an initial TST, read 48 – 72 hours after placement, with results recorded in mm of induration. A second TST is then placed one to three weeks after the initial test and read 48 – 72 hours after placement. Documentation of a negative TST within the previous 12 months can be substituted for the initial TST. The second TST is not placed, if the first TST is positive. [Two-Step TB Test Form](#)
3. BAMT: Blood assays for *Mycobacterium tuberculosis* used in the United States are the QuantiFERON®-TB Gold In-Tube test and the T-SPOT®. TB test. A single BAMT is sufficient for baseline testing. BAMT's are helpful in persons' who have received BCG (bacille Calmette-Guèrin) vaccine, as BCG does not cause a false-positive BAMT.
4. Documentation of previous positive: Students who provide documentation of a previously positive TST or BAMT or documentation of completed treatment for latent tuberculosis infection or tuberculosis disease do not need to undergo further baseline testing for tuberculosis. Students who have received BCG vaccine and have a history of a positive TST may wish to consider having a BAMT.
5. Positive Tests Any student who has a positive (current or previous) TST or BAMT must complete a symptom screen (Attachment A) and be evaluated by a primary care provider to rule out active tuberculosis disease (Attachment B).
6. Serial Follow-up Testing
  - a. Students with negative baseline testing must have a single TST or BAMT every year to rule out tuberculosis infection. Students who have positive follow-up testing must be evaluated as above.
  - b. Students with previous positive tests must complete a symptom screen every year (Attachment A). Students with symptoms consistent with tuberculosis must be evaluated by a health care provider and provide documentation of the evaluation.

## Immunizations

Students must provide a legible copy of the Certificate of Immunization. Series immunizations must be documented in chronological order with the most recent immunizations in the farthest right spots. The Certificate must be completed by their health care provider, which meets the following requirements:

1. Measles, Mumps and Rubella: 2 (two) MMR's (or written evidence of laboratory tests showing positive titers of all three immunities: measles, mumps and rubella). This is not required if student was born before January 1, 1957.
2. Tdap
  - a. Tetanus: Documentation of a tetanus containing vaccine every 10 years (for example: Td, Tdap). DT and DTaP are not recommended for adults, but still meet the requirement for a tetanus containing vaccine.
  - b. Pertussis: Documentation of one pertussis containing vaccine.
3. Hepatitis B series. The three-injection series takes six months to complete. Students in the traditional option must initiate the series before starting NURS 2100, and complete the series before starting NURS 2200. Accelerated option students must have the first two injections completed prior to starting NURS 2200 and will need to complete the series during NURS 2200 by the date instructed by the lead faculty. The schedule for the Hepatitis B series is as follows: Injection 1, wait 1 month, Injection 2, wait three months, Injection 3.
4. Varicella (Chicken Pox). Students must have a documented history of a two-injection varicella immunization series OR a documented laboratory result indicating immunity to varicella.

5. Influenza (Flu) immunization. Students must receive this immunization annually [Verification of Influenza Immunization Form](#)
6. COVID-19 Vaccines. Please see [COVID-19 Vaccine Policy](#) below.
7. Students must upload records of the above into MyClinicalExchange by the published due dates.

**Procedure:**

The student will provide documentation as instructed by policy and follow any additional instructions from the lead faculty member for NURS 2100, the lead faculty member of any clinical course, the Undergraduate Nursing Department Academic Services Professional, or the Undergraduate Nursing Department Chairperson.

**Rationale:**

In order to provide a safe environment for students, faculty, the community, and patients/clients, students must meet the minimum requirements of the nursing discipline for safety and the prevention of transmission of communicable diseases.

