STUDENT CHECKLIST OF REQUIRED HEALTH RECORD DOCUMENTS:

1. □ Temporary License Form - Important for Students Who Do Not Have An Active GA License. If you are coming from another state (ENDORSEMENT), or are inactive in Georgia (REINSTATEMENT), be sure to fill out an application with the GA Board of Nursing, prior to registering for our course. Once you have filled out the GA Board Application, then sign our Temporary License Form, (see our website under Costs and Requirements). KSU will send GA Board the Form A (temporary license request). GA Board will mail your Temporary License to your home near the end of the theory portion of our course.

   **Active GA License:** If you have an ACTIVE Georgia RN License, turn in a copy of the license to us.

2. □ Criminal Background Check/Drug Screening – Required for all RN Refresher Students (Link on our website). You must select Kennesaw State University – School of Nursing (Do not select Continuing Education or NP.) This Background Check is through “Advantage Students” (not the same one that the GA Board of Nursing requires).

3. □ CPR – REQUIRED through the American Heart Association, BLS for Healthcare Providers. (Do not take CPR through any other provider that claims to go by the AHA guidelines. Clinical Sites require that it be taught through the American Heart Association.) Please turn in copy of front and back, and be sure to sign your card. Must be current through the end of clinical rotation.

4. □ Malpractice/Liability Insurance – Submit an official MEMORANDUM or CERTIFICATE, (not your on-line confirmation). Limits of Liability must be at least: $1,000,000/$4,000,000. (Cost about $100) Visit: www.proliability.com or www.nso.com, or another provider of your choice. See instructions for Malpractice Insurance on our website, under Costs & Requirements. ***Purchase for Registered Nurse, not student nurse.

5. □ Health Insurance – Submit verification (copy of health insurance card – front and back).

6. □ Authority Release Forms - Print from our website (under Costs & Requirements). Sign and date pages 2 & 4. Dr. White will add her signature when received.

7. □ Nurse Refresher Physical Form – Physical required within the past year, physician must sign our form. Complete your portion of Health History (first page and sign second page at bottom). Also submit OFFICIAL LABORATORY DOCUMENTATION OF PPDs, ALL TITERS AND IMMUNIZATIONS. Please do not use a highlighter on lab reports.

8. □ Tetanus Immunization - Tdap required (Tetanus, Diphtheria, and Pertussis) with documentation specifying this, also with Month/Day/Year, practitioner’s name/address, and nurse’s signature or initials. Must be within the last ten years. If immunization record shows both Tdap and Td, Tdap must be circled to show that it was given, not Td (which does not contain Pertussis.)

9. □ FLU Vaccine – Documentation required
10. □ **Varicella** – Documentation of Chicken Pox Immunity by:

   - Proof of Positive **Varicella Titer**
   - or
   - Documentation of **two Varivax Immunizations**

11. □ **Proof of MMR Immunity**

   - Documentation of **two (2) MMR Vaccines**
   - or
   - Documentation of **positive TITERS** for each: Measles, Mumps, & Rubella (all 3 diseases).

12. □ **Hepatitis B** – Must submit one of the following:

   - **Three injections** at prescribed intervals (Documentation that series is IN PROGRESS, will be accepted when you first enter the course. Must complete second vaccine before starting clinical.
   - or
   - Documentation of **positive titer**
   - or
   - Documentation of **refusal of vaccine** – signed Declination

13. □ **PPD** –

   The **2-Step Skin Test is required**, (two separate PPDs, each read within 48 to 72 hours). The second PPD should be placed **at least one week**, after the first. (Questions-call 470-578-6064). *If you have been getting an annual PPD, you only need one PPD, (although if you have missed a year, you must do the 2-Step Skin Test). Provide documentation of results showing: Dates given, dates read, results (measurement of induration in mm), & practitioner’s signature. If you have had a positive PPD, please call above number before proceeding, as you may need a Quantiferon Gold Test, or T-Spot, or possibly a CXR, depending on your circumstances.

***You do not have to complete all health requirements in order to register for our course. However, you must complete and turn in all these health requirements (immunizations, titers, insurance, CPR, Background Check, etc.,) **two weeks prior to the start date of the course**. The requirements are mandated by the contract between KSU and the agencies that offer preceptors for your clinical experience. Failure to complete the forms by the established due date may result in you being dropped from the course. All the agencies providing clinical placement require complete clinical files before providing the name of a preceptor.***
MAKE A COPY OF ALL RECORDS FOR YOURSELF BEFORE MAILING.

MAIL ALL DOCUMENTS TO THIS ADDRESS:
(Do not fax, do not email.)
Due two weeks prior to start of class.

Kay Ryle, Administrative Assistant IV
Kennesaw State University
WellStar College of Health & Human Services
Prillaman Hall – Health Science Bldg. (Rm 4235)
520 Parliament Garden Way NW - MD #4101
Kennesaw, GA 30144

If you have any questions regarding the above requirements or forms, please contact Kay Ryle at:
kryle1@kennesaw.edu
470-578-6064.