Certified Background / CastleBranch

STUDENT INSTRUCTIONS FOR RESEARCH COLLEGE OF NURSING

Welcome!

When you place your initial order, you will be prompted to create your secure account. From within your account, you will be able to:

- ✓ View your order results
- ✓ Manage the requirements specific to your Program
- ✓ Complete tasks as directed to meet deadlines

✓ Upload and store important documents and records

 \checkmark Place additional orders as needed

Place Your Order

To place your order, go to: https://portal.castlebranch.com/RN17

Select the "Place Order" button; then "Please Select"; click on "Nursing" and complete each tab below:

RM98dt – Drug testing

RM98m – Background Check – Medical Document Manager

(if Background check doesn't find you in the MO Family Care Safety Registry then you must purchase the following)

RM98fr – (if needed) Background Check – MO Family Care Safety Registry

During order placement you will be asked personal identifying information needed for security or compliance purposes. Supplying accurate and comprehensive information is important to the speed in which your order is completed.

The email address you use when placing your order will become your username for your and will be the primary form of communication for alerts and messages. Payment methods include: MasterCard, Visa, debit card, electronic check, money order, and installment payment.

To Do Lists

You can respond to any active alerts or To-Do List items now, or return later by logging into your account. You will receive alerts if information is needed to process your order and as requirements approach their due dates. Access your account anytime to view order status and completed results. Authorized users at your school will have access to view your requirements and compliance status from a separate portal.

Service Desk is available to assist you via phone, chat and email Monday-Friday 8am-8pm & Sunday 10am-6:30pm EST 888-723-4263

Medical Document Manager

Measles, Mumps & Rubella (MMR)

- One of the following is required:

- 2 vaccinations (at least 28 days apart)
- Positive antibody titers for all 3 components (lab report required). If negative or equivocal titer must start 2 shot series.

Varicella (Chicken Pox)

- One of the following is required:

- 2 vaccinations (at least 28 days apart)
 - Positive antibody titer (lab report required). If negative or equivocal titer must start 2 shot series.

Hepatitis B

- One of the following is required:
 - 3 vaccinations AND Positive antibody titer (lab report required); If negative or equivocal titer must start 3 shot series and submit new titer.
 - OR signed declination waiver (available in Academic Programs Office).

TB Skin Test (2 Step)

- One of the following:

- 2 Step TB Skin test (1-3 weeks apart)
- Past 2 step test PLUS all subsequent annual tests.
- QuantiFERON Gold or T-Spot Blood Test
- If positive results positive, follow-up with your caregiver; submit clear Chest X-ray report (lab report required),
- TB questionnaire (available in Academic Programs Office), and verification that you can work in a hospital setting.

Tetanus, Diphtheria & Pertussis (Tdap)

-There must be documentation of an Adult Tdap booster within the past 10 years.

CPR - BLS Certification

-Must be the American Heart Association Healthcare Provider BLS course. Copy must be front and back of the Signed card.

Health Insurance

- One of the following every year in August:

- Provide copy of current health insurance card (front and back of card).
- OR Signed waiver form (located in Academic Programs Office).

Influenza

- One of the following (done free through Research Medical Center):

- Documentation of a flu shot administered during the current flu season
- OR Signed declination waiver

HIPPA Certification (go to NU0000 in Blackboard – starting July 21, 2016);

-Upload proof of HIPPA Exam score and date plus Signed copy of the HIPAA Certificate of Completion.

Confidentiality Statement (go to NU0000 in Blackboard - starting July 21, 2016);

-Upload proof of Clinical Orientation Exam score and date plus Signed copy of the Confidentiality Statement.

Exhibit A, B & C

-Must print off forms (go to NU0000 in Blackboard) and sign Exhibits A and B leaving facility blank; fill out student info only (middle section) on C and give to Camelia Williams, room 123 during registration and she will get signed and upload all 3.

MO State RN License

-Provide a copy of your current MO RN License or verification of licensure through <u>www.nursys.com</u> with expiration date.

KS State RN License

-Provide a copy of your current KS RN License or verification of licensure through <u>www.nursys.com</u> with expiration date.

Other RN License(s)

-Are you going to submit proof of any additional RN license(s) you have? If yes, submit a copy of your current RN License or verification of licensure through <u>www.nursys.com</u> or state website with expiration date.

Preceptor Packet

-Don't forget to turn in preceptor Packet info to Sherry Owen, Room 124.