

CHECKLIST FOR CLINICAL DOCUMENTS
STUDENTS GOING INTO 2ND, 3RD, AND 4TH YEAR
DEADLINE DATE: JUNE 1ST

Date: _____ Name: _____	Program: Bachelor of Science in Nursing Compressed ____ Collaborative ____ (check one)	Year Level: <div style="display: flex; justify-content: space-around;"> 2 3 4 </div> (year going into - circle one)
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All documents must cover the full upcoming academic year (check "Important Dates" on LU website)

****Provide photocopies of documents only – keep your originals in a safe and easily accessible location****

Suggestion: Scan & store all documents (each year) on your computer ensuring they are secure but easily accessible at all times – they may be required by your placement agency when you are in your final year.

	✓ when complete	<u>YEARLY REQUIREMENTS:</u>
1.	<div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 15px;"></div>	<u>Criminal Records Check with Vulnerable Sector Screening (CRC with VSS)</u> <ul style="list-style-type: none"> Thunder Bay Police are on-line. They no longer offer walk-in service. Choose LEVEL 3 (PVSC) for employment. Toronto Police Dept. has a specific form that is required. You must contact the Registration & Information Assistant to get a copy of that form (clinicaldocs.nurs@lakeheadu.ca). Police Depts. except Toronto require a "Nursing Records Check Letter" when applying for your CRC with VSS. Letter is on "MyInfo" under "Forms". Choose the letter that pertains to the Program you are in. You must apply to the Police Agency in which you are currently living.
2.	<div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 15px;"></div>	<u>1 Step TB (Tuberculosis) Skin Test:</u> It is preferred that your test is recorded on the form found on the Nursing Website (under Forms). Your Health Care Provider may supply their own form <i>as long as the following is shown: Date administered; Date read; Result; HCP name, HCP signature, Clinic name with address (stamp with info accepted).</i> If a previous positive TB skin test was handed in, (+ copy of x-ray results), you are not to have another TB skin test done. <div style="background-color: yellow; text-align: center; font-weight: bold;">Results recorded on Immunization Record will not be accepted.</div> <p style="text-align: center;">https://www.lakeheadu.ca/academics/departments/nursing/current-students/forms</p>
		DOCUMENTS THAT EXPIRE: ONLY SUBMIT IF RENEWED OR RE-CERTIFIED
A.	<div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 15px;"></div>	<u>Basic Life Support Certificate (BLS; BLS Provider, CPR BLS (HCP)):</u> Nursing applies a 2-year expiry to all BLS certificates. If your BLS expires during the upcoming academic year, it must be renewed early to meet June 1 st deadline date. <i>First Aid, Oxygen Therapy or Airway Management is not required. A 3-year certificate because of First Aid is not accepted - it is only valid for a 2-year period.</i> <div style="background-color: yellow; text-align: center; font-weight: bold;">On-line courses are not accepted - you must attend in person.</div> <div style="text-align: right;">expires: _____</div>
B.	<div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 15px;"></div>	<u>Mask Fit Certificate:</u> (2-year expiry) You can either find an agency that provides this service in your hometown (N95 Respirator) or choose to have this done on campus (by an independent provider) in the March/April timeframe. <div style="text-align: right;">expires: _____</div>
C.	<div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 15px;"></div>	<u>Tetanus Vaccination: (10-year expiry)</u> If you require the vaccination it is recommended that you get the Tdap vaccination (tetanus, diphtheria and acellular pertussis). If your vaccination expires during the upcoming academic year, you will be required to get the vaccination done early to meet the deadline date. Tdap ____
		<u>MISSING DOCUMENTATION - FOR 2ND YEAR STUDENTS ONLY (IF PREVIOUSLY NOT SUBMITTED):</u>
D.	<div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 5px;"></div>	<u>Serology Report:</u> If you required Hep B vaccination/s in 1 st year you will need to ensure proof of vaccination/s not previously submitted are included with this year's pkg., along a copy of the <i>follow-up</i> serology report (done 1 month after 3 rd HBV). Hep B = ____ ; Date: _____ Also, if you had any Varicella vaccination/s done due to non-reactive serology report and were not handed in they must also be included. No follow-up serology is required.
E.		COMPLETE TOP PORTION OF THIS FORM AND ATTACH THIS PAGE TO THE FRONT OF YOUR PACKAGE

*** Do not submit an incomplete package – incomplete packages are subject to fine ***

**** For more in-depth info on any of the above, please go to Nursing website under "Clinical Documentation"; "Documents" ****
 Submit Package (ensuring each document is clear and fully visible or will not be accepted) by:

1. **Email (pdf format preferred) to clinicaldocs.nurs@lakeheadu.ca**