Compliance Requirements for Physical Therapy Students

For compliance questions, contact Tammy Jo Edge
Phone: 859 218 0472
Email: Tammy.edge@uky.edu
C.T. Wethington Building Room 111
Requirements

- Full Background Check
- 10 Panel Drug Screening
- Clinical Requirements:
  - Immunizations: MMR, Varicella, Hep B, and Tdap
    - Health Insurance (annual)
    - Influenza Shot (annual)
    - Commitment to Behavioral Standard in Patient Care
    - Tuberculosis Two-Step Skin Test (initial)
      - One step annual renewal
    - CPR Certification
    - First Aid Certification
    - Physical Examination
    - Bloodborne Pathogens Certification
    - Discrimination and Harassment Training
    - HIPAA training
Due Dates

- The full background check and drug screening are due **BY June 1st before class registration and start of program.**

- The clinical requirements are due by **August 1st each year you are in the program.**

- Flu Immunization is due November **1st each year.**

- Bloodborne Pathogen training **is due 8/1 the year AFTER you start the program.**

- It is highly recommended that you begin gathering these materials as early as possible, especially if you are an out-of-state student or you are far from your primary health care provider. Get them done as early as possible in case problems arise!
Instructions for current UK undergraduates:

- If you are a current UK student and are planning to attend UK’s PT program, **you will ONLY need to order an updated Background Check and Drug Screen.**
- Tammy Jo Edge will make sure that you are moved to the PT file on CastleBranch.

Please go to [https://uky-health.castlebranch.com/UK33](https://uky-health.castlebranch.com/UK33) and follow the below steps:

1. Click on place order
2. Select Doctor of Physical Therapy
3. Select Lexington or Hazard Campus
4. Select Lexington UK40: I need to order my Recheck Background and drug test
   OR
   Select Hazard UK41: I need to order my Recheck Background and drug test
5. The cost is $58.
Please do NOT place your CastleBranch order until May 1st or after!

How to get started:
Create an account on Castle Branch

University of Kentucky - College of Health Sciences and CastleBranch – one of the top ten background screening and compliance management companies in the nation – have partnered to make your onboarding process as easy as possible. Here, you will begin the process of establishing an account and starting your order. Along the way, you will find more detailed instructions on how to complete the specific information requested by your organization. Once the requirements have been fulfilled, the results will be submitted on your behalf.
If you are a current UK student please go to the next slide!

New to UK Students follow these instructions:

- Select “Place Order”
- Select “College of Health Sciences”
- Select “Doctor of Physical Therapy”
- Select “I need to order my initial Background Check, Drug Test, and Medical Document Manager”
- You will then be directed to review your order, and then enter your personal details
- The cost is $95.00
Background Check and Drug Screen

- Your background check will begin immediately upon purchasing.
- Instructions for your Drug Screening will be provided within your Castle Branch “To Do List” within three business days.
  - You will be able to download the registration form and locate a LabCorp near you to process the specimen. **It is your responsibility to make sure that you allow enough time for us to receive the result prior to the start of courses.**
  - For issues processing a drug screen, please call CastleBranch directly at (888) 723-4263.
Clinical Requirements

- Health Insurance (annual)
- Flu Shot (annual)
- Commitment to Behavioral Standard in Patient Care
- Tuberculosis Two-Step Skin Test (initial)
  - One step annual renewal
- CPR Certification
- First Aid Certification
- Physical Examination
- Bloodborne Pathogens Certification
- Discrimination and Harassment Training
- HIPAA training
- Immunizations: MMR, Varicella, Hep B and Tdap
Health Insurance

- You must provide a copy of your current health insurance card or proof of coverage.
- If your name is different than the name listed on the card, you will need to upload documentation confirming your coverage.
- Make sure that you upload a copy of the front AND the back of the insurance card.

Example of uploaded card:
Influenza Vaccination

- You will need to get a flu shot for the **current** flu season SEPT 1 – MARCH 31.
  - Any flu shot administered outside of the current flu season will be rejected.
  - Note that this document will look a little different depending on where you get your flu shot.
- This requirement has a different deadline than the others. You must complete this by November 1st.
Required Immunizations

- Required vaccines: please obtain documentation from your healthcare provider.
  - TB
  - Hep B
  - MMR
  - Varicella
  - Tdap
- Vaccines can be administered by University Health Services (UHS).
- Appointments may be made by calling 859-323-2778.
MEASLES, MUMPS AND RUBELLA (MMR) vaccine

Compliance can be obtained by providing:
1. Two MMR vaccines with first dose given at 1 year of age or older AND second dose given at age four or older; OR
2. Documentation of positive antibody titers showing proof of immunity for each of the three diseases: [measles (rubeola), mumps AND rubella]

Note: If a student submits documentation of negative or indeterminate titers, but they have also submitted proof of two MMR vaccines as listed above, this is acceptable.

Documentation must include:
- Student’s Name
- Student’s date of birth
- If series is completed, dates of each shot OR
- If titers are provided, dates of positive titers are required and information will include: “immune,” “positive” or number that when compared to range given on record indicates the student is positive/immune; AND
- Name of the healthcare provider OR UHS compliance form OR Employee compliance form OR state immunization certificate or registry.
Evidence of one dose of TDaP given at 11 years or older. If more than 10 years since date of TDap, then one dose of Td in the last 10 years.

Documentation must include:

- Student’s Name
- Student’s date of birth
- Date of TDaP shot; AND
- Name of the healthcare provider OR UHS compliance form OR Employee compliance form OR state immunization certificate or registry.

**TDaP**
(Tetanus-Diphtheria Acceular Pertussis)

*Note: TDaP is a different vaccine than the tetanus (Td) vaccine, which is recommended every 10 years. TDaP is also different than the childhood DTaP vaccine*
VARICELLA (Please note that oral history of disease or an X on immunization record is not accepted.)

Compliance may be obtained by providing:
1. Evidence of varicella two-dose series after one year of age; OR
2. Positive antibody titer showing proof of immunity; OR
3. Medically documented history of disease (chicken pox/varicella or shingles/zoster) from a healthcare provider (Doctor, APRN, or PA) with date of disease. An X on the immunization form by varicella is NOT acceptable proof of disease.

Note: If a student submits documentation of negative or indeterminate titers, but they have also submitted proof of two varicella vaccines as listed above, this is acceptable.

Documentation must include:
- Student’s Name
- Student’s date of birth
- If series is completed, dates of each shot; OR
- If titer is provided, date of positive titer is required and information will include: “immune,” “positive” or number that when compared to range given on record indicates the student is positive/immune; OR
- If providing medical history, submit a medical record from healthcare provider (Physician, APRN or PA) stating patient diagnosed with Chicken pox (Varicella) or Shingles (Herpes zoster); AND
- Name of the healthcare provider OR UHS compliance form OR Employee compliance form OR state immunization certificate or registry.
Compliance may be obtained by providing:
1. Evidence of three Hepatitis B vaccines; OR
2. If series is in process or historical documentation of vaccines could not be obtained, 2 vaccines are required upon initial submission to this requirement. You will be able to submit record of the third shot when it is due.

Documentation must include:
• Student’s Name
• Student’s date of birth
• Dates of HEP B shots; AND
• Name of the healthcare provider OR UHS compliance form OR Employee compliance form OR state immunization certificate or registry.

Subsequent Requirement: If only two initial vaccines obtained, Hepatitis B third dose due 6 months after the 1st dose.

HEPATITIS B
(Positive titer not accepted)
You must obtain a **TWO-step** TB test. Each year you will have to renew it with a one-step TB test.
Commitment to Behavioral Standard in Patient Care

- In Castle Branch, there is a link to this document. Follow this link or click here to go to the document.
- You will need to print, read, and sign this document.
- Then, scan it and upload it to Castle Branch (there are scanner apps you can download for free on your phone.)
CPR Certification

- Acceptable documents:
  - American Heart Association Basic Life Support OR
  - American Red Cross BLS/CPR for Healthcare Providers
    - Must be an in-person course (not online)

- A copy of BOTH the front and the back of your card is required and the card MUST be signed.

- More information can be found at the following links:
  - http://www.redcross.org/take-a-class/bls
  - http://cpr.heart.org/AHAECC/CPRAndECC/Training/HealthcareProfessional/BasicLifeSupportBLS/UCM_473189_Basic-Life-Support-BLS.jsp
First Aid Certification

- Upload copy of your current First Aid Certification card, front & back. Certification must be through the American Red Cross, American Heart Association or a comparable class.
Physical Examination

- Upload documentation of your completed physical examination. The form must be completed and signed by a medical professional, be completed within the past 12 months, AND must be completed on the 2 page form available for download from the following link.

http://www.uky.edu/chs/sites/chs.uky.edu/files/UK%20Student%20Health%20Record%20FINAL.pdf
Bloodborne Pathogens Training Certification

- This training will occur during the summer after your first year, so it will be due at the beginning of your second year (8/1).

- When you complete the Bloodborne Pathogens training, upload copy of your UK certificate to this requirement. Student name must be included.
Go to this link and enroll in the Canvas course. (NOTE: You will need your LinkBlue ID and password to do so. If you do not yet have it, you will have to wait until you do.)

Go to “Assignments.” You will find the HIPAA training presentation and quiz. Before beginning the quiz, carefully read and review all the information in the presentation. When you are familiar with the material, take the quiz. You will have multiple attempts, but you MUST receive a 100% in order to get credit.

Follow the same instructions for the Discrimination training.

When both are complete, go to the “Grades” tab. You will then select the “Print Grades” option. Save the document as a PDF (you only need the first page that displays the two grades and your name).

Upload this PDF for BOTH the HIPAA and Discrimination training requirements in Castle Branch.
The document you upload for the HIPAA and Discrimination training should look like this:

<table>
<thead>
<tr>
<th>NAME</th>
<th>DUE</th>
<th>SCORE</th>
<th>OUT OF</th>
</tr>
</thead>
<tbody>
<tr>
<td>Discrimination and Harassment Policy Acknowledgement Assignment</td>
<td>Dec 1, 2017 by 11:59pm</td>
<td>100</td>
<td>100</td>
</tr>
<tr>
<td>HIPAA Test Exam</td>
<td>Dec 1, 2017 by 11:59pm</td>
<td>100</td>
<td>100</td>
</tr>
<tr>
<td>ASSIGNMENT</td>
<td></td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>ATTENDANCE</td>
<td></td>
<td>N/A%</td>
<td></td>
</tr>
<tr>
<td>ESSAY</td>
<td></td>
<td>N/A%</td>
<td></td>
</tr>
<tr>
<td>EXAM</td>
<td></td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>EXTRACREDIT</td>
<td></td>
<td>N/A%</td>
<td></td>
</tr>
<tr>
<td>FINALEXAM</td>
<td></td>
<td>N/A%</td>
<td></td>
</tr>
</tbody>
</table>
Important Notes

- **Pay attention to due dates!** If you do not complete the requirements in time, a hold could be placed on your UK account.

- If Castle Branch rejects one of your submissions, **promptly** address this. They will provide a reason for the rejection. If you still do not understand why a document is not being accepted, you can contact Tammy Jo Edge at tammy.edge@uky.edu

- Occasionally, flu shots get rejected if the flu season is not explicitly stated on the document. It is preferable for the date to be written on the document prior to uploading, but this can be overridden by Tammy Jo Edge if necessary. **CHECK FIRST** to see if this is the reason a flu shot is rejected.