

Castle Branch Required Documents

MLT/Phlebotomy Required Documents: BM22

1. Immunization Documentation:

a. Copy of required immunizations (*medical file*)

- Tuberculin (TB) skin test within the past 6 months
 - To be **renewed annually** from tested date.
 - Student must provide documentation yearly
 - TB vaccination titer within 8 years is acceptable
 - Positive test requires chest x-ray result documentation
- Tetanus/Diphtheria **or** Tdap
 - If no Tdap or Tetanus in the past 10 years – Tetanus booster is required.
- MMR (measles, mumps, rubella)
 - Born after 1957, you must have two MMR **or** positive titer documentation
- Chicken Pox
 - Date of the disease
 - Vaccination date documentation
 - **OR** Titer documentation
- Hepatitis B Vaccination
 - Refusal signature – Refusal may hinder clinical placement
 - **OR** Date and documentation of HBV series
- Influenza vaccination
 - Renewed 1 year from submission
 - **OR** Deferral document – deferral may hinder clinical placement
- COVID -19 Vaccination
 - not required, but if you have had the vaccination, please upload documentation.
 - Exemption [Religious](#) form [Medical](#) form

2. CPR Certification - Accepted Certification can be any of the below – Renewed Annually

- a. American Heart Assoc. Healthcare course certificate
- b. American Heart Assoc. Heart Saver course certificate
- c. American Red Cross Professional Basic CPR/ BLS
- d. Any Nationally recognized Basic CPR course certification [Online option](#)
- e. Military Training Network

3. Health Insurance – Renewed Annually

- a. Proof of insurance (*must include name of insurance company, **name of student**, and effective date*)
- b. Insurance must be in effect for the entire program duration.
- c. If still on parent's insurance – document with parent and student name required.

4. [MLT Essential Functions Requirements](#) form – Renewed Annually
 - a. Parental/guardian signature required if under 18 years of age
5. [Contract for Classroom/Laboratory Behavior](#) for MLT – Renewed Annually
6. [Confidentiality](#) / HIPPA form – Renewed Annually
7. [Acknowledgement of Legal relationship](#) BCC and MLT – Renewed Annually
8. [MLT FERPA](#) – Renewed Annually
9. [Reference Authorization](#) – Renewed Annually

******* Additional documents may be required by the Cooperative/Clinical site *******