

## Requirement Explanation

Package Name	Category Name	Student Notes	URL	Item Name	Field Name
High School Learner - CNA Post102020	Photo Identification and Social Security Card	<p>You must submit your current government or school issued photo ID and your social security card.</p> <ul style="list-style-type: none"> <li>Acceptable alternative photo identification include: Current Passport, U.S. state issued Driver's License, U.S. VISA, U.S. Permanent Resident card, or U.S. Citizenship and Immigration Services (USCIS) photo identification.</li> <li>Acceptable alternatives to Social Security Card include: If you do not have a Social Security card, please provide Department of the Treasury Internal Revenue Service Individual Taxpayer Identification Number (ITIN) letter or card, U.S. Citizenship and Immigration Services (USCIS) identification card, or Medicare Card with SSN.</li> </ul>	<a href="http://forms.complio.com/ReviewStandards/32768.pdf">http://forms.complio.com/ReviewStandards/32768.pdf</a>	Government or School issued photo ID	Document
				Social Security Card	Document
	Age verification	You must be at least 15 years and 9 months old for this program.		Date of Birth	Date of Birth
	CPR	<p>You must submit your valid CPR card here. The American Heart Association (AHA) Basic Life Support (BLS) for Healthcare Providers CPR card is preferred but not required.</p>	<a href="http://forms.complio.com/ReviewStandards/32.pdf">http://forms.complio.com/ReviewStandards/32.pdf</a>	Valid CPR Card (BLS Provider preferred)	Document
					Date
					Expiration Date
	Hepatitis B	<p>You must submit A OR B:</p> <p>A) 3 doses of the Hepatitis B Vaccine, or the 2 dose Heplisav series.</p> <p>B) Positive Hepatitis B Titer.</p> <p>If you do not have a copy of your immunization records or your immunization records do not meet the below minimum review standards, and you have attended public school in Texas, an acceptable version of your records is available to all students under the age of 26 on the Texas Immunization Registry ImmTrac2 website. To access, click the link below and then select "" Request an Immunization Record"" towards the bottom of the page.</p> <p><a href="https://www.dshs.texas.gov/immunize/immtrac/clients.shtm">https://www.dshs.texas.gov/immunize/immtrac/clients.shtm</a></p> <p>To see what is required on your documentation, please see <a href="http://forms.complio.com/ReviewStandards/3.pdf">http://forms.complio.com/ReviewStandards/3.pdf</a></p>	<a href="http://forms.complio.com/ReviewStandards/3.pdf">http://forms.complio.com/ReviewStandards/3.pdf</a>	Hepatitis B Dose 2	Document
				Date	
				Hepatitis B Dose 3	Document
				Date	
Hepatitis B Titer				Document	
Results					
Date					
Hepatitis B Dose 1				Document	
Date					
Hepatitis B Heplisav Dose 1 of 2	Document				
Date					
Hepatitis B Heplisav Dose 2 of 2	Document				
Date					



High School Learner - CNA Post102020	MMR	<p>You must submit A OR B:</p> <p>A) 2 doses of the MMR Vaccine.</p> <p>B) Positive titers for Measles, Mumps, and Rubella.</p> <p>If you do not have a copy of your immunization records or your immunization records do not meet the below minimum review standards, and you have attended public school in Texas, an acceptable version of your records is available to all students under the age of 26 on the Texas Immunization Registry ImmTrac2 website. To access, click the link below and then select "" Request an Immunization Record"" towards the bottom of the page.</p> <p><a href="https://www.dshs.texas.gov/immunize/immtrac/clients.shtm">https://www.dshs.texas.gov/immunize/immtrac/clients.shtm</a></p> <p>To see what is required on your documentation, please see <a href="http://forms.complio.com/ReviewStandards/3.pdf">http://forms.complio.com/ReviewStandards/3.pdf</a></p>	<a href="http://forms.complio.com/ReviewStandards/3.pdf">http://forms.complio.com/ReviewStandards/3.pdf</a>	Measles Titer	Document
					Results
					Date
				Rubella Titer	Document
					Results
					Date
				MMR Dose 2	Document
					Date
				MMR Dose 1	Document
		Date			
	Mumps Titer	Document			
		Results			
		Date			
	Tdap	<p>You must submit a Tdap from within the last 10 years.</p> <p>If you do not have a copy of your immunization records or your immunization records do not meet the below minimum review standards, and you have attended public school in Texas, an acceptable version of your records is available to all students under the age of 26 on the Texas Immunization Registry ImmTrac2 website. To access, click the link below and then select "" Request an Immunization Record"" towards the bottom of the page.</p> <p><a href="https://www.dshs.texas.gov/immunize/immtrac/clients.shtm">https://www.dshs.texas.gov/immunize/immtrac/clients.shtm</a></p> <p>To see what is required on your documentation, please see <a href="http://forms.complio.com/ReviewStandards/1.pdf">http://forms.complio.com/ReviewStandards/1.pdf</a></p>	<a href="http://forms.complio.com/ReviewStandards/1.pdf">http://forms.complio.com/ReviewStandards/1.pdf</a>	Tdap	Document
			Date		
		Expiration Date			
Varicella	<p>You must submit A OR B OR C:</p> <p>A) 2 doses of the Varicella Vaccine.</p> <p>B) Positive Varicella Titer.</p> <p>C) Documentation of having had varicella from your physician.</p> <p>If you do not have a copy of your immunization records or your immunization records do not meet the below minimum review standards, and you have attended public school in Texas, an acceptable version of your records is available to all students under the age of 26 on the Texas Immunization Registry ImmTrac2 website. To access, click the link below and then select ""Request an Immunization Record"" towards the bottom of the page.</p> <p><a href="https://www.dshs.texas.gov/immunize/immtrac/clients.shtm">https://www.dshs.texas.gov/immunize/immtrac/clients.shtm</a></p> <p>To see what is required on your documentation, please see <a href="http://forms.complio.com/ReviewStandards/3.pdf">http://forms.complio.com/ReviewStandards/3.pdf</a></p>	<a href="http://forms.complio.com/ReviewStandards/3.pdf">http://forms.complio.com/ReviewStandards/3.pdf</a>	Varicella Dose 2	Document	
				Date	
			Varicella Titer	Document	
				Results	
				Date	
			Proof of disease	Document	
				Date	
			Varicella Dose 1	Document	
				Date	



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High School Learner - CNA Post102020	Influenza	<p>You must submit a flu shot for the current season or electronically sign the below influenza declination form.</p> <p>Your flu shot must be received no earlier than 8/1 to be accepted for the current flu season.</p> <p>This category is not tracked between 5/1 and 9/30.</p> <p>To see what is required on your documentation, please see <a href="http://forms.complio.com/ReviewStandards/1.pdf">http://forms.complio.com/ReviewStandards/1.pdf</a></p>	<a href="http://odessacompliance.com/forms/OdessaFluDeclination.pdf">http://odessacompliance.com/forms/OdessaFluDeclination.pdf</a> , <a href="http://forms.complio.com/ReviewStandards/1.pdf">http://forms.complio.com/ReviewStandards/1.pdf</a>	Flu Shot	Document
				Date	
				Expiration Date	
				Flu Declination	Document
				Date	
	Expiration Date				
	Complete Form				
	Meningitis	<p>If you are 21 or under you must submit one dose of the meningitis vaccination.</p> <p>If you do not have a copy of your immunization records or your immunization records do not meet the below minimum review standards, and you have attended public school in Texas, an acceptable version of your records is available to all students under the age of 26 on the Texas Immunization Registry ImmTrac2 website. To access, click the link below and then select "" Request an Immunization Record"" towards the bottom of the page.</p> <p>This might also be documented on your immunization record as MCV4 or Menactra</p> <p><a href="https://www.dshs.texas.gov/immunize/immtrac/clients.shtm">https://www.dshs.texas.gov/immunize/immtrac/clients.shtm</a></p> <p>To see what is required on your documentation, please see <a href="http://forms.complio.com/ReviewStandards/1.pdf">http://forms.complio.com/ReviewStandards/1.pdf</a></p>	<a href="http://forms.complio.com/ReviewStandards/1.pdf">http://forms.complio.com/ReviewStandards/1.pdf</a>	Meningitis Dose	Document
					Date
Tuberculosis	<p>If you test negative for tuberculin exposure, you must submit a negative PPD skin test, or an IGRA (QuantiFERON OR T-Spot) blood test each year.</p> <p>If you complete annual TB test through your healthcare industry employer, you may submit a record of your two most recent negative annual TB tests that dated within two years from today's date from your employer as an alternative to the PPD or IGRA.</p> <p>If you test positive for tuberculin exposure, you must submit a positive test, along with a negative chest x-ray from the last 3 years and a TB clearance letter from the last 1 year. If you do not have a positive test to submit, you may submit a letter from your physician indicating that you need a chest x-ray for tuberculosis screening.</p>	<a href="http://odessacompliance.com/forms/Odessa2StepPPDExplanation.pdf">http://odessacompliance.com/forms/Odessa2StepPPDExplanation.pdf</a> , <a href="http://forms.complio.com/ReviewStandards/464.pdf">http://forms.complio.com/ReviewStandards/464.pdf</a>	PPD Step 1	Document	
				Read Date	
				Implant Date	
				Result	
			PPD Step 2	Document	
				Read Date	
				Implant Date	
				Result	
			Annual PPD	Document	
				Expiration Date	
				Read Date	
				Implant Date	
			TB Clearance Letter	Document	
Date					
Expiration Date					
Chest X-Ray	Document				
	Date				
	Expiration Date				



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Tuberculosis	<p>If you test negative for tuberculin exposure, you must submit a negative PPD skin test, or an IGRA (QuantiFERON OR T-Spot) blood test each year.</p> <p>If you complete annual TB test through your healthcare industry employer, you may submit a record of your two most recent negative annual TB tests that dated within two years from today's date from your employer as an alternative to the PPD or IGRA.</p> <p>If you test positive for tuberculin exposure, you must submit a positive test, along with a negative chest x-ray from the last 3 years and a TB clearance letter from the last 1 year. If you do not have a positive test to submit, you may submit a letter from your physician indicating that you need a chest x-ray for tuberculosis screening.</p>	<a href="http://odessacompliance.com/forms/Odessa2StepPPDExplanation.pdf">http://odessacompliance.com/forms/Odessa2StepPPDExplanation.pdf</a> , <a href="http://forms.complio.com/ReviewStandards/464.pdf">http://forms.complio.com/ReviewStandards/464.pdf</a>	Chest X-Ray	Result
			Initial QuantiFERON TB Gold Test / T-Spot	Document
				Date
				Result
			Annual QuantiFERON TB Gold Test / T-Spot	Document
				Date
				Expiration Date
Letter indicating chest x-ray is needed	Document			
Healthcare Employer TB Screening Record	Document			
	Expiration Date			
CNA, NAR and EMR Registry	<ol style="list-style-type: none"> <li>Click on the website link: <a href="https://emr.dads.state.tx.us/DadsEMRWeb/emrRegistrySearch.jsp">https://emr.dads.state.tx.us/DadsEMRWeb/emrRegistrySearch.jsp</a></li> <li>Student enters SS number in the appropriate field with no dashes</li> <li>Submit</li> <li>View and confirm any information listed on Employability Status Check Search Results for accuracy on the yellow and white table. Students are expected to produce a "No Results Found" result if they have never been a CNA.</li> <li>Export Options Select PDF (below yellow and white table)</li> <li>Download PDF and upload to CNA, NAR and EMR Registry category</li> </ol>		CNA, NAR and EMR Registry	Document
Background Check	You must order a background check from American DataBank. Once your search is complete, it will be automatically uploaded here for you.		American DataBank Background Check	Date
				Results
Drug Screening	You must order a drug screen from American DataBank. Once complete, it will be automatically uploaded here for you.		American DataBank Drug Screen	Document
				Date
				Expiration Date
				Results
CE Health Careers Registration Form	You must electronically complete the CE Health Careers Registration Form.	<a href="http://odessacompliance.com/forms/HealthCareersRegistrationForm2022.pdf">http://odessacompliance.com/forms/HealthCareersRegistrationForm2022.pdf</a> , <a href="http://odessacompliance.com/forms/HealthCareersRegistrationForm2022_CPF.pdf">http://odessacompliance.com/forms/HealthCareersRegistrationForm2022_CPF.pdf</a>	CE Health Careers Registration Form	Document
				Date
				Complete Form



High School Learner - CNA Post102020	Documents to Review	You must acknowledge that you have read the below required document information: 1. Welcome Health Careers Students 2. Wrangler Express Center Student Information 3. Student Email Blackboard Login Information 4. HC Student Contract - Classroom Guidelines 5. Student Clinical Agreement Form 6. Odessa-Complio-Student-User-Guide-05142020 7. OC Training Waiver For Over 18 (Please use this form if you are 18 years and older) OR OC Training Waiver For Under 18 (Please use this form if you are 18 years and under) 8. Health Careers Immunization Requirements 9. Health and Wellness for Students - Insurance and Healthcare Providers Information 10. Adult Model Release Information &bull;11. T-Shirt and Scrub Set Size: The sizes are unisex and may be larger than expected. To ensure the best fit, sample sizes can be tried on in advance at the Odessa College Continuing Education Building located at 2714 Robertson Ave Odessa, Texas 79764. If you have questions please call 432-335-6580 or email healthcareers@odessa.edu.	<a href="http://odessacompliance.com/forms/OC_TrainingWaiverOfLiabilityAndHoldHarmlessAgreement.pdf">http://odessacompliance.com/forms/OC_TrainingWaiverOfLiabilityAndHoldHarmlessAgreement.pdf</a>	Welcome Health Careers Students Information	Document Date Have you read the Welcome Health Careers Students Information? Complete Form
				Wrangler Express Center Student Information	Document Date Have you read the Wrangler Express Center Student Information? Complete Form
				Student Email Blackboard Login Information	Document Date Have you read the Student Email Blackboard Login Information? Complete Form
				HC Student Contract - Classroom Guidelines	Document Date Have you read the Student Contract - Classroom Guidelines Information? Complete Form
				Student Clinical Agreement Form	Document Date Have you read the Student Clinical Agreement Form? Complete Form
				Odessa-Complio-Student-User-Guide-05142020	Document Date Have you read the Odessa-Complio-Student-User-Guide-05142020? Complete Form
				OC Training Waiver For Over 18	Document Date



High School Learner - CNA Post102020	Documents to Review	<p>You must acknowledge that you have read the below required document information:</p> <ol style="list-style-type: none"> <li>Welcome Health Careers Students</li> <li>Wrangler Express Center Student Information</li> <li>Student Email Blackboard Login Information</li> <li>HC Student Contract - Classroom Guidelines</li> <li>Student Clinical Agreement Form</li> <li>Odessa-Complio-Student-User-Guide-05142020</li> <li>OC Training Waiver For Over 18 (Please use this form if you are 18 years and older) OR OC Training Waiver For Under 18 (Please use this form if you are 18 years and under)</li> <li>Health Careers Immunization Requirements</li> <li>Health and Wellness for Students - Insurance and Healthcare Providers Information</li> <li>Adult Model Release Information</li> <li>T-Shirt and Scrub Set Size: The sizes are unisex and may be larger than expected. To ensure the best fit, sample sizes can be tried on in advance at the Odessa College Continuing Education Building located at 2714 Robertson Ave Odessa, Texas 79764. If you have questions please call 432-335-6580 or email <a href="mailto:healthcareers@odessa.edu">healthcareers@odessa.edu</a>.</li> </ol>	<a href="http://odessacompliance.com/forms/OC_TrainingWaiverOfLiabilityAndHoldHarmlessAgreement.pdf">http://odessacompliance.com/forms/OC_TrainingWaiverOfLiabilityAndHoldHarmlessAgreement.pdf</a>	OC Training Waiver For Over 18	Have you read the OC Training Waiver? Complete Form		
				Health Careers Immunization Requirements	Document Date Have you read the Health Careers Immunization Requirements? Complete Form		
				Health and Wellness for Students - Insurance and Healthcare Providers Information	Document Date Have you read the Health and Wellness for Students - Insurance and Healthcare Providers Information? Complete Form		
				Adult Model Release Information	Document Date Have you read the Adult Model Release Information? Complete Form		
				T-Shirt and Scrub Set Size	Scrub Set Size		
				OC Training Waiver For Under 18	Document Date Have you read the OC Training Waiver?		
				Health Insurance	You may submit your current health insurance here. <a href="http://forms.complio.com/ReviewStandards/4096.pdf">http://forms.complio.com/ReviewStandards/4096.pdf</a>	Health Insurance Document	
				FERPA Form	You may electronically complete the below FERPA form. This document will allow the College to provide information about the student to only those that are listed by the student, including parents.	<a href="http://odessacompliance.com/forms/FERPAForm.pdf">http://odessacompliance.com/forms/FERPAForm.pdf</a> , <a href="http://odessacompliance.com/forms/FERPAFormCPF.pdf">http://odessacompliance.com/forms/FERPAFormCPF.pdf</a>	FERPA Form Document Date Complete Form
				Certificate of Completion	This category is for your administration to complete once all course requirements have been met.	Certificate of Completion Document Date	