



**Per New York State (NYS) Laws and Regulations, all healthcare facilities require specific documentation, both medical and professional. SUNY Poly requires this information be on file PRIOR to beginning clinical/practicum coursework. This is for your safety, as well as, your patient’s and community’s safety.**

**1. NYS Public Health Requirements – Wildcat Wellness Student Portal**

Students should submit only the NYS Public Health Requirements, MMR and Meningitis (first 4 listed in blue below) as well as physical exam to the Wildcat Wellness Center Student Portal by August 1 (Fall semester) and January 1 (Spring semester).

Log in with your Poly username and password to: [myhealth.sunypoly.edu](http://myhealth.sunypoly.edu)

**2. College of Health Sciences Requirements- CastleBranch**

All requirements below (including those in blue) for nursing/clinical documentation can be submitted to the CastleBranch student portal:

<https://portal.castlebranch.com/yp12>

**IT IS MANDATORY THAT YOU KEEP A COPY OF ALL YOUR DOCUMENTATION.**

You may be required to present this information to your preceptor or healthcare facility. Specific healthcare facilities may require more stringent documentation. It is the responsibility of the student to meet compliance for that specific facility and to provide the required documentation. You may be DE-REGISTERED from your coursework if ALL required documentation is not provided prior to the beginning of clinical/practicum start date.

If you have any questions, please contact the Clinical Coordinator: [lowerye@sunypoly.edu](mailto:lowerye@sunypoly.edu)

Requirement	Submit	Acceptable Documentation
Measles (Rubeola)	One Time	2 vaccination dates, at least 28 days apart, on or after the first birthday OR serologic evidence of immunity with the laboratory value or statement from diagnosing physician indicating measles disease.
Mumps	One Time	2 vaccination dates, at least 28 days apart, on or after the first birthday OR serologic evidence of immunity with the laboratory value or statement from diagnosing physician indicating mumps disease.
Rubella	One Time	2 vaccination dates, at least 28 days apart, on or after the first birthday OR serologic evidence of immunity with the laboratory value.
Meningitis	Every 5 Years	Vaccination date(s) within 5 years OR completed Meningitis Information Response Form (declining).
Hepatitis B	One Time	3 vaccination dates, at 0, 1 and 6 month intervals OR serologic evidence of immunity with laboratory value.

Requirement	Submit	Acceptable Documentation
Physical Examination	Every Year	A physical exam completed within the last year by a MD, PA, or NP indicating your ability to perform clinical/practicum activities and that you are free of communicable diseases. The SUNY Poly physical examination document is recommended for documentation.
Influenza	Every Year	Vaccination date required by October 15th.
Tuberculosis (TB)	Every Year	The date of a negative Mantoux, Quantiferon TB-GOLD, or T-Spot test in the last year or written declination from your healthcare provider. A positive result will require documentation of a negative chest X-ray within the last 2 years. Submitted physical exam forms must state that the student is free from symptoms of active disease. Presence of potential signs or symptoms of TB will require further evaluation before clearance is granted.
Tetanus, Diphtheria, Pertussis (Tdap)	Every 10 Years	Vaccination date must be valid throughout the clinical course.
COVID Vaccine	One Time	Although not required for SUNY Poly, it is recommended. This vaccine may be required by clinical sites. You are required to abide by <b>all</b> clinical site health mandates.
<b>Nursing, Nurse Practitioner and PMHNP students must also submit the following below:</b>		
CPR Certification	Every 2 Years	Copy of your valid CPR documentation, indicating issue date and expiration date. BLS and/or ACLS are acceptable.
Nursing License	Every 2 Years, or Upon Renewal	Copy of your valid NYS Registration Certificate or copy of online verification, indicating RN license number and date of expiration.
Health Insurance	One Time	Please provide a copy of your health insurance card and update it if insurance changes.
Varicella (Chicken Pox)	One Time	2 vaccination dates, at least 28 days apart, OR serologic evidence of immunity with the laboratory value.