



ATTENTION Students: Welcome to My

Barton Community College has partnered with CastleBranch to help you supply the requirements for your program including a background check, immunization record management and document tracking. This process needs to be **COMPLETED** before MLT classes with a cooperative lab begin. If you are ONLY doing phlebotomy this must be completed before class starts. To get started, have payment method (\$100 cost) and personal identifying information ready. Carefully follow the instructions below:



To place your order go to:

https://portal.castlebranch.com/BM02

| Program: | Code: |
|-------------------------------------|-------|
| Medical Lab Technician / Phlebotomy | BM22 |

To place your initial order, you will be prompted to create your secure myCB account. From within myCB, you will be able to:

| Manage program requirements | Complete tasks |
|-----------------------------|-----------------------------------|
| Complete background check | Upload, store and share documents |

The email address you provide will become your username.

This is a student-owned secure account and your access never expires.

If you change degrees contact User Experience Team to move your account.

Contact Us: 888.914.7279 or servicedesk.cu@castlebranch.com





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