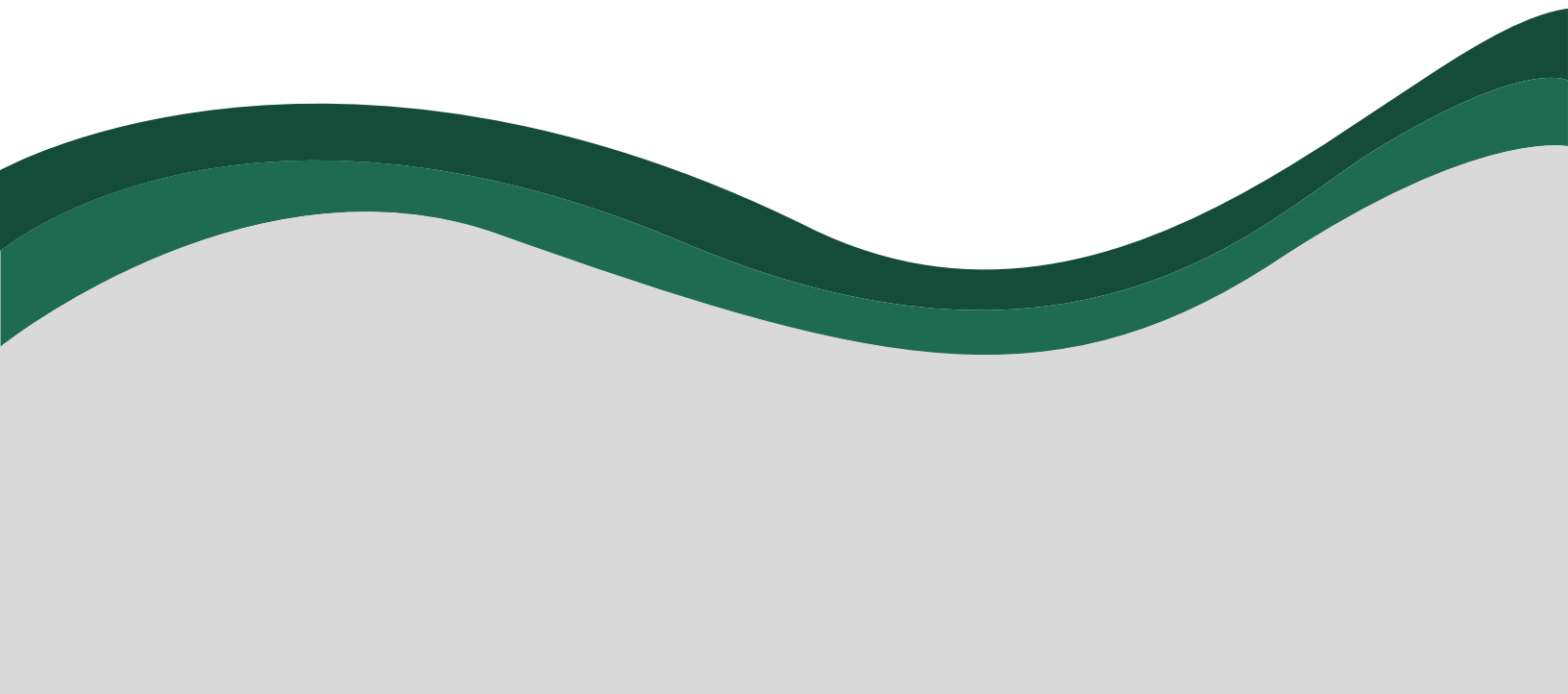




# **SCHOOL OF NURSING**

**The University of Alabama at Birmingham**

**BSN - DNP  
Nurse Anesthesia  
SUMMER 2025  
ADMISSION PACKET**



**UAB School of Nursing (SON)  
BSN to DNP Nurse Anesthesia Pathway Checklist Summer 2025**

- ☐ **1.** Your Program of Study, and FERPA Form will be delivered via Adobe Sign to your admission application email address. Sign and return required documents via Adobe Sign. (a copy will be emailed to you upon completion)
- ☐ **2.** Register your Blazer ID. Go to [www.uab.edu/blazerid](http://www.uab.edu/blazerid). Your student ID is provided to you on your Program of Study (do not forward your UAB email to a personal email account).
- ☐ **3.** All students must have updated **ACLS, BLS, PALS Certifications** and documentation showing unencumbered/unrestricted **Multi-State Compact Nursing License (please include licensing state/number/expiration)**. These documents must be submitted directly as **ONE PDF document** to the Nurse Anesthesia Pathway Program Manager Ms. Mina Momeni ([mmomeni@uab.edu](mailto:mmomeni@uab.edu)) prior to matriculation. Please denote your Name, and Cohort Year. If documents are not in PDF format and in **one** document they will not be accepted.
- ☐ **4.** Students enrolled in the SON must satisfy specific medical clearance requirements based on the program in which they are enrolled. Use the instruction sheet for setting up your personal medical clearance site. **(Attachment A)** <http://www.uab.edu/studenthealth/medical-clearance>
- ☐ **5.** Attend **Mandatory** Online Orientation March 26, 2025 (agenda and link will be emailed at a later date).
- ☐ **6.** Complete: **(AVAILABLE February 2025)**
  - HIPAA training course – Instructions Attached **(Attachment B)** (Once for the duration of your program)
  - OSHA training course – Instructions Attached **(Attachment C)** (Annual requirement)
- ☐ **7.** Background Check and Drug Screen Completion **(Attachment D)**
  - Step 1.** Check your email for background check email (April 2025), and complete within ten business days of email arrival from GHRR ([UABSchoolofNursingCRNADNA@screening.services](mailto:UABSchoolofNursingCRNADNA@screening.services))
  - Step 2.** Check your email for drug screen notification from LabCorp ([OTSWEBAPP@Labcorps.com](mailto:OTSWEBAPP@Labcorps.com)) and complete within ten days of email arrival **(April 2025)**
- ☐ **8.** Review insurance requirements at: <http://www.uab.edu/studenthealth/insurance-and-waivers> **(Attachment E)**

**You will not be able to register for classes until after all holds have been cleared which include: Medical Clearance, OSHA, HIPAA, Background Check and Drug Screen.** Summer Open Registration begins **April 7, 2025.**

- ☐ **9.** Register for classes using the Registration Quick Guide **(Attachment F)**.
- ☐ **10.** Check the Academic calendar for important dates (registration, drop/add). The Nurse Anesthesia Program will provide a more detailed calendar at Orientation. **(Attachment G)**  
<https://www.uab.edu/students/academics/academic-calendar>
- ☐ **11.** Complete FASFA and UAB Financial Aid Application **(Optional)**  
<https://www.uab.edu/cost-aid/how-to-apply/steps-to-apply-for-aid>
- ☐ **12.** Please apply if you qualify for any of the funding opportunities listed on the following website **(Optional)**:  
<https://www.uab.edu/nursing/home/scholarships-financial-aid>
- ☐ **13.** Tuition Due Date Information: <https://www.uab.edu/cost-aid/cost/payment-plan-options>
- ☐ **14.** First day of class Monday May 12, 2025 (Online).  
Fall Semester (On-Campus courses) start date August 24, 2025
- ☐ **15.** Contact List **(Attachment H)**
- ☐ **16.** Essential Student Success Resources **(Attachment I)**

We recommend you submit requirements and plan to complete any missing portions as soon as possible. Medical clearance compliance will be required prior to starting classes. Please contact UAB Student Health with any questions via the Patient Portal.

To ensure a safe and healthy campus, UAB requires all entering students to satisfy immunization/TB requirements. All requirements must be met prior to enrolling at the university. Before you register in nursing courses, you must upload a number of medical records in the UAB Student Health and Wellness Patient Portal. Students can access the Patient Portal from the right side navigation on their BlazerNet homepage.

Please begin locating your medical records immediately to help determine if you need to initiate immunizations to comply with our program requirements. Some immunizations take time to complete. Any instance of an incomplete immunization prior to school starting may prohibit you from attending clinicals.

BSN-DNP NP students are required to satisfy **the Level 3 Immunization requirements** for clinical students.

<https://www.uab.edu/students/health/immunizations/level-3>

**You will not have access to the patient portal until the semester prior to starting the program.**

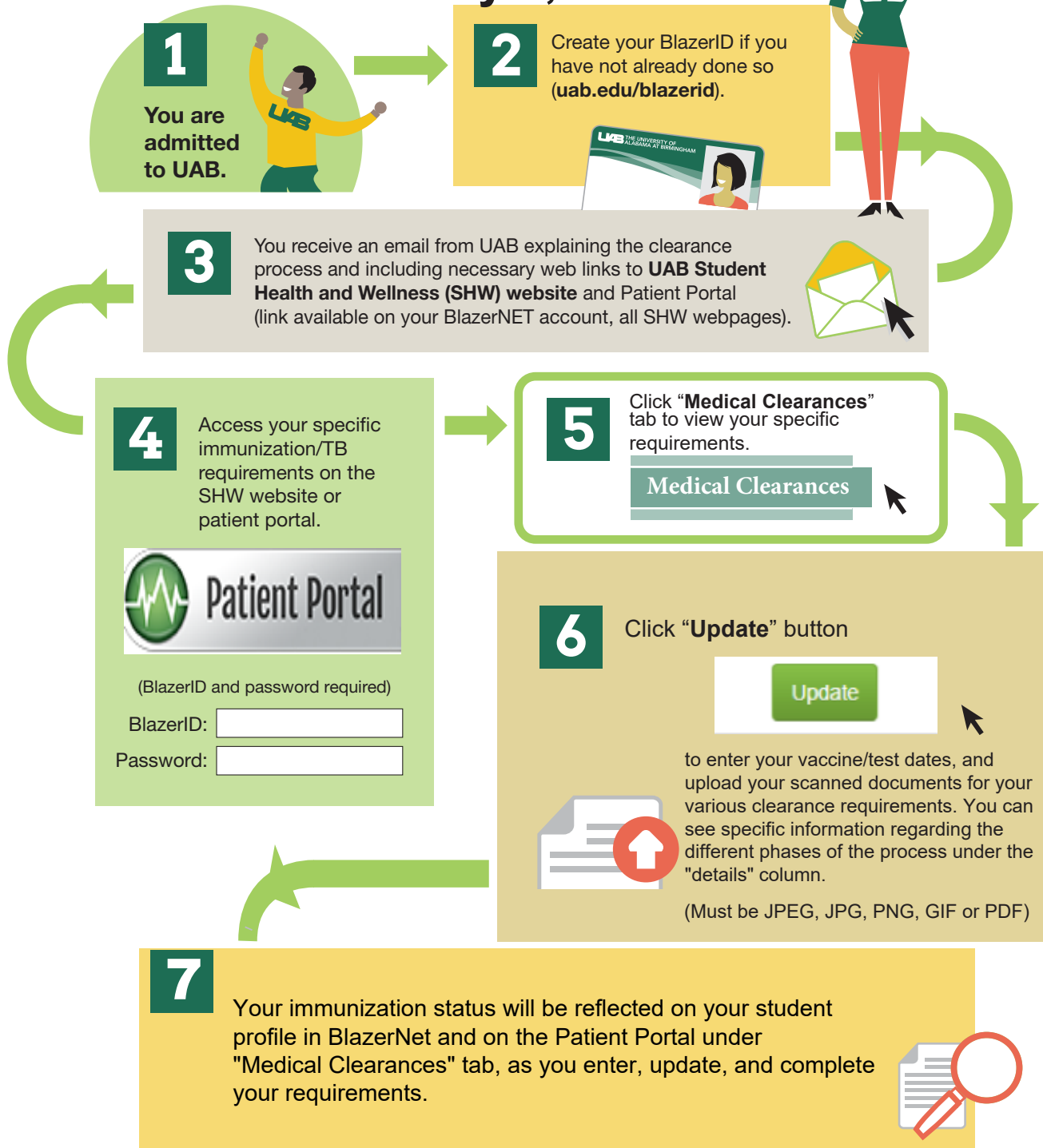
**Submit Your Documentation:**

- Log into BlazerNET at [www.uab.edu/BlazerNET](http://www.uab.edu/BlazerNET) using your Blazer ID and password, Click on "Patient Portal" and log in using your Blazer ID and password.
- Click on "Forms", then click "Add immunization record"

You will have the ability to scan and upload documents for your various clearance requirements. (Must be JPEG, JPG, PNG, GIF or PDF). You may also fax your immunization records to SHW at 205-996-SHOT (7468).

We look forward to serving you during your time at UAB. Feel free to contact Student Health and Wellness on the Patient Portal or by phone (205.975.7753) if you have any questions or concerns.

# 7 steps to completing Student Immunization / TB Clearance as of January 3, 2023



The purpose of the medical clearance process is to ensure a safe and healthy environment on the UAB campus. Medical clearance requirements vary by school and student type. **These requirements must be met before the first day of class to avoid having a registration hold placed on your student account, registration cancelled, or being unable to begin classes.**

## UAB Student Health and Wellness 1714 9th Avenue South

Please use the **Patient Portal** to contact Student Health and Wellness. This is the most efficient way to inquire about your immunizations or test results.

**UAB SH&W PHYSICAL EXAMINATION** (*Please print in black ink*) To be completed and **signed** by physician or clinician. A physical examination is required for all clinical students within 1 year prior to matriculation.

**You may schedule a physical exam at Student Health & Wellness if you do not have a physician. Schedule an appointment through your patient portal or call 205-934-3580 and ask our receptionist for details.**

Last Name	First Name	Middle	Date of Birth (mm/dd/yyyy)		BlazerID@uab.edu
Permanent Address				Area Code/Phone Number	

Height \_\_\_\_\_ Weight \_\_\_\_\_ TPR \_\_\_\_/\_\_\_\_/\_\_\_\_ BP \_\_\_\_/\_\_\_\_

Vision: Corrected Right 20/\_\_\_\_ Left 20/\_\_\_\_

Uncorrected Right 20/\_\_\_\_ Left 20/\_\_\_\_

Color Vision \_\_\_\_\_

Are there abnormalities? If so, describe full	WNL	ABN	DESCRIPTION (attach additional sheets if necessary)
1. Head, Ears, Nose, Throat			
2. Eyes			
3. Respiratory			
4. Cardiovascular			
5. Gastrointestinal			
6. Musculoskeletal			
7. Metabolic/Endocrine			
8. Neuropsychiatric			
9. Skin			
Other			

A. Is there loss or seriously impaired function of any organs? \_\_\_\_No \_\_\_\_Yes

Explain \_\_\_\_\_

B. Recommendation for physical activity (physical education, intramurals, etc.) \_\_\_\_Unlimited \_\_\_\_Limited

Explain \_\_\_\_\_

\_\_\_\_\_  
Signature of Physician/Physician Assistant/Nurse Practitioner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name of Physician/Physician Assistant/Nurse Practitioner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Office Address/Stamp

\_\_\_\_\_  
Area Code/Phone Number

UAB Student Health and Wellness  
**Health History Form**  
Learning Resource Center  
1714 9<sup>th</sup> Avenue South, 3<sup>rd</sup> Floor  
Birmingham, Alabama 35294-1270  
(205) 934-3580

**Please save this form and upload it to your patient portal for your medical clearance.**

Entering Semester: ☐ Fall ☐ Spring ☐ Summer • Year \_\_\_\_\_ • UAB Student No.   B  

**General Information**

Full Name: \_\_\_\_\_ Gender: ☐ Male ☐ Female  
Last First MI ☐ Transgendered ☐ Transitional

Date of Birth: Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

School: \_\_\_\_\_ Program or Major Code: \_\_\_\_\_  
CAS, Med, Dent, SHP, Nurs. etc. Education, History, Physics, Biology, etc.

Current Email address: \_\_\_\_\_ Blazer ID: \_\_\_\_\_

Are you an International Student or Scholar? ☐ Yes ☐ No If Yes, which country? \_\_\_\_\_

Telephone number: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_  
Home Cell

Local Address: \_\_\_\_\_

Permanent Address \_\_\_\_\_

Primary emergency contact: \_\_\_\_\_ Telephone number: \_\_\_\_\_ Relationship: \_\_\_\_\_

Secondary emergency contact: \_\_\_\_\_ Telephone number: \_\_\_\_\_ Relationship: \_\_\_\_\_

**Personal Health History**

**Medical Conditions**

**Please list any surgeries, asthma, diabetes, ADHD, injuries, hospitalizations, etc.**

Name	Description	Year

**Medications**

**Please list prescription, non-prescription, vitamins, birth control, etc.**

Name	Description	Dosage

**Food/Medicine Allergies**

**Please list penicillin, codeine, insect bites, antibiotics, specific food or chemical, etc.**

Name	Description	Reaction

## Family & Personal Health History (to be completed by the student)

**Has any person, related by blood, had any of the following?**

Yes	No		Relationship
		High Blood Pressure	
		Stroke	
		Cancer	
		Heart attack before age 55	
		Diabetes	
		Glaucoma	

Yes	No		Relationship
		Cholesterol or blood fat disorder	
		Blood clotting disorder	
		Psychiatric	
		Suicide	
		Alcohol/drug problems	

**Have ever had or now have: (please check at right of each item and if yes, indicate year of first occurrence)**

Yes	No	Symptom	Year
		High Blood Pressure	
		Rheumatic fever	
		Heart trouble	
		Pain/pressure in chest	
		Shortness of breath	
		Asthma	
		Pneumonia	
		Chronic cough	
		Tuberculosis	
		Tumor/cancer (specify)	
		Malaria	
		Thyroid trouble	
		Serious skin disease	
		Hearing loss	
		Sexually transmitted disease	
		Severe menstrual cramps	
		Irregular periods	
		Frequent vomiting	
		Gall bladder or gallstones	
		Jaundice or Hepatitis	
		Rectal disease	
		Severe/recurrent abdominal pain	
		Sinusitis	
		Hernia	
		Chicken pox	
		Anemia/Sickle Cell Anemia	
		Eye trouble besides glasses	
		Bone, joint, other deformity	
		Shoulder dislocation	
		Knee problems	
		Recurrent back pain	
		Neck injury	
		Diabetes	

Yes	No	Symptom	Year
		Mononucleosis	
		Hay fever	
		Head/neck radiation	
		Arthritis	
		Concussion	
		Frequent/severe headache	
		Dizziness/fainting spells	
		Severe head injury	
		Paralysis	
		Epilepsy/seizures	
		Blood transfusion	
		Protein in blood or urine	
		Ulcer (duodenal/stomach)	
		Intestinal trouble	
		Pilonidal cyst	
		Allergy injection therapy	
		Back injury	
		Broken bones	
		Kidney infection	
		Bladder infection	
		Kidney stone	

### Mental Health History

		Sleep problems	
		Self-injurious Behavior	
		Depression/bipolar	
		Anxiety/panic	
		LD/ADD/ADHD	
		Eating Disorder	
		Obsessive compulsive	
		Self-induced vomiting	

### Substance Use History

		Alcohol/drug problem	
		Smoke 1+ pack cigs/week	

UAB Student Health & Wellness Immunization Form

Clinical Students

NAME: \_\_\_\_\_ DATE OF BIRTH: (mm/dd/yyyy): \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

PROGRAM OF STUDY: \_\_\_\_\_ BLAZERID: \_\_\_\_\_@UAB.EDU

**IMMUNIZATION HISTORY MUST BE COMPLETED AND SIGNED BY A HEALTH CARE PROVIDER**

**\*Copies of your original immunization records are acceptable in place of this form. Please submit completed form or immunization records directly to your UAB SH&W Patient Portal.**

**FORMAT mm/dd/yyyy**

1. **MMR- Measles, Mumps, and Rubella:** All students must satisfy this requirement, either by two vaccine doses against each of the three diseases or laboratory evidence of immunity to all three diseases. First dose must have been received no sooner than one year after birth.

Two doses of MMR vaccine:

**EITHER**

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**OR**

Two doses of each vaccine component:

Measles

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Mumps

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Rubella

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**OR**

Laboratory evidence of immunity to all three diseases:

Measles

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Positive: \_\_\_\_ Negative: \_\_\_\_

Mumps

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Positive: \_\_\_\_ Negative: \_\_\_\_

Rubella

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Positive: \_\_\_\_ Negative: \_\_\_\_

\*If any laboratory titers are non-immune, 2 repeat vaccines are required. Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

2. **Tdap-** Tetanus, Diphtheria, Acellular Pertussis: All students must have had one dose of the adult Tdap given 2006 or later. If the last adult Tdap is greater than 10 years old, a Td booster is required.

Tdap Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Td Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

3. **Hepatitis B Series:** All students must have a series of three Hepatitis B vaccinations (initial dose, dose two at 1 month, dose three at 6 months). A post-vaccine surface antibody titer (to demonstrate immunity) is required one month after 3<sup>rd</sup> vaccine dose.

Dose 1 Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Dose 2 Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Dose 3 Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Hep B surface antibody titer:

Reactive: \_\_\_\_ Non-Reactive: \_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**\*If Hep B surface antibody is non-reactive, repeat series and post-vaccine surface antibody titer are required.**

Dose 1 Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Dose 2 Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Dose 3 Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Hep B surface antibody titer:

Reactive: \_\_\_\_ Non-Reactive: \_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**\*If repeat Hep B surface antibody is non-reactive, Hep B surface antigen is required to rule out acute or chronic Hep B infection.**

Hep B surface antigen titer:

Positive: \_\_\_\_ Negative: \_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**\*\*If Hep B surface antigen is positive, visit with SH&W provider is required for additional testing. If negative, student will be considered a non-responder.**



NAME: \_\_\_\_\_ DATE OF BIRTH: (mm/dd/yyyy): \_\_\_\_\_

4. **Varicella** (chickenpox or shingles): All students must have documented history of Varicella, a positive Varicella antibody titer, or two doses of Varicella vaccines given at least 28 days apart. First dose must have been received no sooner than one year after birth.

**EITHER**

Yes: \_\_\_\_\_ No: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

History of Varicella (chickenpox or shingles):

**OR**

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Positive: \_\_\_\_\_ Negative: \_\_\_\_\_

Varicella antibody titer

**OR**

Varicella vaccination Dose 1: \_\_\_\_/\_\_\_\_/\_\_\_\_

Dose 2: \_\_\_\_/\_\_\_\_/\_\_\_\_

\*If Varicella antibody titer is negative or equivocal, two repeat vaccinations are required.

Varicella vaccination Dose 1: \_\_\_\_/\_\_\_\_/\_\_\_\_ Dose 2: \_\_\_\_/\_\_\_\_/\_\_\_\_

5. **Meningococcal ACWY**: All students 21 and younger are required to show documentation of a meningitis A vaccine given on/after their 16<sup>th</sup> birthday. Students age 22 and older are exempt.

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

6. **Tuberculosis**: All clinical students must meet UAB's Tuberculosis screening requirement. This includes a Tb Attestation Statement and Tb testing. If no history of positive Tb skin test, two separate skin tests or one IGRA blood test are required upon matriculation. Skin tests must be placed at least one week apart.

**\*ALL TB TESTING (skin tests or blood tests) MUST BE PERFORMED IN THE U.S.**

**EITHER**

- a. Tuberculin Skin Test (PPD) within 12 months prior to matriculation:

Date Placed: \_\_\_\_/\_\_\_\_/\_\_\_\_ Date Read: \_\_\_\_/\_\_\_\_/\_\_\_\_ Result (mm): \_\_\_\_\_ Positive: \_\_\_\_\_ Negative: \_\_\_\_\_

- b. Tuberculin Skin Test (PPD) within 3 months prior to matriculation:

Date Placed: \_\_\_\_/\_\_\_\_/\_\_\_\_ Date Read: \_\_\_\_/\_\_\_\_/\_\_\_\_ Result (mm): \_\_\_\_\_ Positive: \_\_\_\_\_ Negative: \_\_\_\_\_

\*If positive skin test result, IGRA required within 3 months prior to matriculation.

**OR**

- a. IGRA (Tspot or Quantiferon TB Gold) blood test within 3 months prior to matriculation:

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Positive: \_\_\_\_\_ Negative: \_\_\_\_\_

\*If positive IGRA result, Chest X-Ray within 3 months prior to matriculation and UAB TB High Risk Questionnaire required.

- a. Chest X-Ray Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Normal: \_\_\_\_\_ Abnormal: \_\_\_\_\_ (\*Please attach results)

- b. UAB High Risk TB Questionnaire

- c. Have you been treated with anti-tubercular drugs? Yes: \_\_\_\_\_ No: \_\_\_\_\_ (treatment only required if chest x-ray positive)

If yes, type of treatment: \_\_\_\_\_ Length of Treatment: \_\_\_\_\_ \*Please attach supporting documentation.

---

***Verification of the above Student Immunization Record and Tuberculosis Screening by Health Care Provider:***

Verified by: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

## **American Health Insurance Portability and Accountability Act of 1996 (HIPAA)**

### **\*\*HIPAA training is a one-time training**

**You will have access to HIPAA one semester prior to enrolling in the pathway.**

HIPAA works to ensure that all medical records, medical billing and patient records meet certain consistent standards with regards to documentation, handling and privacy.

**\*\*If you have taken HIPAA training with another healthcare institution, you will need to retake it through UAB's Campus Learning in order to complete the requirement and receive credit.**

### **New UAB School of Nursing Students**

**Do not go directly into CAMPUS LEARNING, use the link provided.**

*To access the HIPAA training course go to:*

(clicking the link enrolls you into the course)

[https://uab.doceboas.com/lms/index.php?r=course/deeplink&course\\_id=27&generated\\_by=151665&hash=89c0297a2b7474b2ada7e5ab7cc93766a3192250](https://uab.doceboas.com/lms/index.php?r=course/deeplink&course_id=27&generated_by=151665&hash=89c0297a2b7474b2ada7e5ab7cc93766a3192250)

- Click on LOGIN WITH BLAZERID
- Login using your BlazerID/Username and Password
- Successful completion is considered a score of 75% or better. If unsuccessful, repeat these steps until you have a satisfactory score.
- You can see your certificate in the Campus Learning System by going to "My Activities" located on the homepage; however, <https://www.uab.edu/learninglocker> is the repository for full training history. Courses completed within the campus learning system will be logged into the Learning Locker within 1 business day

### **Returning/Current UAB School of Nursing Students or Previous/Current UAB Employees**

If you have completed HIPAA with UAB as a Previous Student or Employee, you will need to send a copy of your Certificate to the Office of Student Success via email ([sonstudaffrs@uab.edu](mailto:sonstudaffrs@uab.edu)) or fax to 205.934.5490.

- To view and email/print your HIPAA certificate in the Campus Learning System go to <https://www.uab.edu/learninglocker>
- LOGIN WITH BLAZER ID
- Select "View Certificate" and either Print or Email your Certificate to the Office of Student Success.

***The School of Nursing will have access electronically to your training.*** Once you complete the training you should expect **2** business days before your hold is removed.

**If you are having problems accessing Campus Learning or accessing your course/certificate please email [campuslearning@uab.edu](mailto:campuslearning@uab.edu).** Please include a phone number where you can be reached. This phone should be near your computer so that someone can assist you.

## Bloodborne Pathogens Course (OSHA) Occupational Safety and Health Administration **Bloodborne Pathogens Course is REQUIRED ANNUALLY.**

You will have access to OSHA one semester prior to enrolling in the pathway.

### **New UAB School of Nursing Students**

(Do not go directly into CAMPUS LEARNING, use the link provided)

To access the “Bloodborne Pathogens Course” (OSHA) training go to:

(clicking the link enrolls you into the course)

[https://uab.docebosaas.com/lms/index.php?r=course/deeplink&course\\_id=153&generated\\_by=151665&hash=c521d66fdc107127e15b8255bd9640cb1465247](https://uab.docebosaas.com/lms/index.php?r=course/deeplink&course_id=153&generated_by=151665&hash=c521d66fdc107127e15b8255bd9640cb1465247)

- Click on LOGIN WITH BLAZERID
- Log in using your BlazerID and password
- Click on Bloodborne Pathogens Course
- You will need to click on and go through *Course Material, Reality Check, Course Assessment and Course Evaluation*
- You can see your certificate in the Campus Learning System by going to “My Activities” located on the homepage; however, <https://www.uab.edu/learninglocker> is the repository for full training history. Courses completed within the campus learning system will be logged into the Learning Locker within 1 business day

### **Returning & Current UAB School of Nursing Students (1 year or older)**

#### **Certification and Retraining**

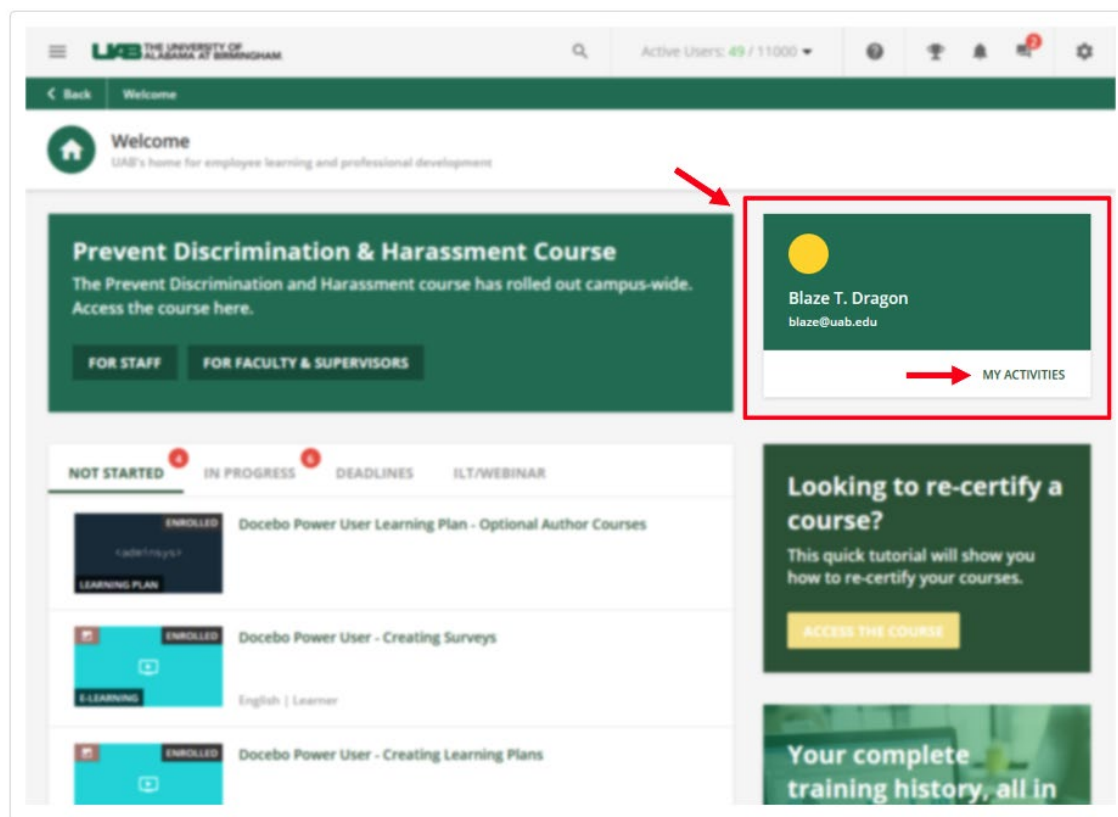
- Log in to Campus Learning <https://uab.docebosaas.com/learn>
- Click on LOGIN WITH BLAZERID
- Log in using your BlazerID and password
- From the landing page-upper right side-you will choose **MY ACTIVITIES** from the profile section
  - Under ‘My Activities’ you will choose **Certification** – this will take you to the ‘Certification and Retraining’ page
- -Click on **RENEW NOW** – this will direct you to the course that requires re-certification\*  
(All previous certificate’s will be available in the Learning Locker)
- You will need to click on and go through *Course Material, Reality Check, Course Assessment and Course Evaluation*
- You can see your certificate in the Campus Learning System by going to “My Activities” located on the homepage; however, <https://www.uab.edu/learninglocker> is the repository for full training history. Courses completed within the campus learning system will be logged into the Learning Locker within 1 business day

***The School of Nursing will have access electronically to your training.*** Once you complete the training you should expect 2 business days before your hold is removed.

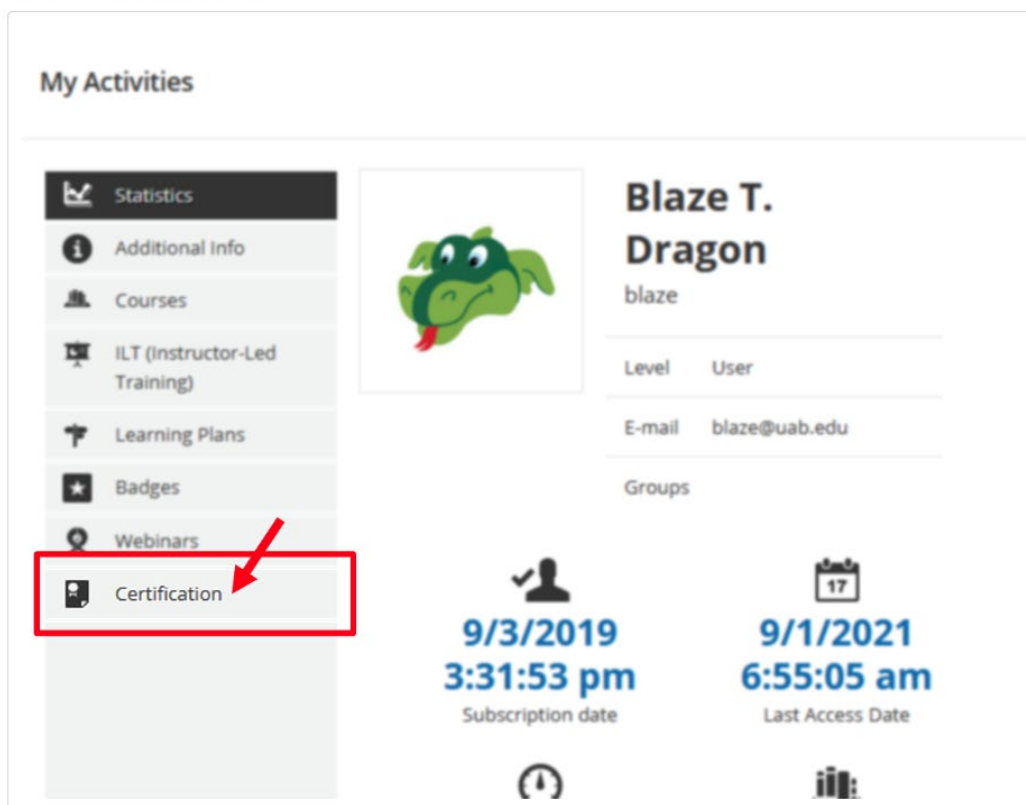
**\*If you are having problems accessing Campus Learning or accessing your course/certificate, please email [campuslearning@uab.edu](mailto:campuslearning@uab.edu).** Please include a phone number where you can be reached. This phone should be near your computer so that someone can assist you.

## Accessing the Renew Now Option

- 1 Log into the Campus Learning System.
- 2 Locate your profile details on the home page, then click My Activities.



- 3 Click the Certification tab.



4 Click the **Renew Now** link.

My Activities

**Certifications & Retraining**

☒ Also show expired certifications

Search


TITLE	CODE	DESCRIPTION	ISSUED ON	EXPIRATION	TO RENEW IN
Annual Compliance - BIO500	OHS_BIO500	Annual re-certification for Bloodborne Pathogens (OSHA)	9/1/2021	Every 365 day Next exp: 9/1/2022	364 days <a href="#">RENEW NOW</a>

Total: 1

5 Click on the appropriate course, then complete the course modules.

**Certifications & Retraining**

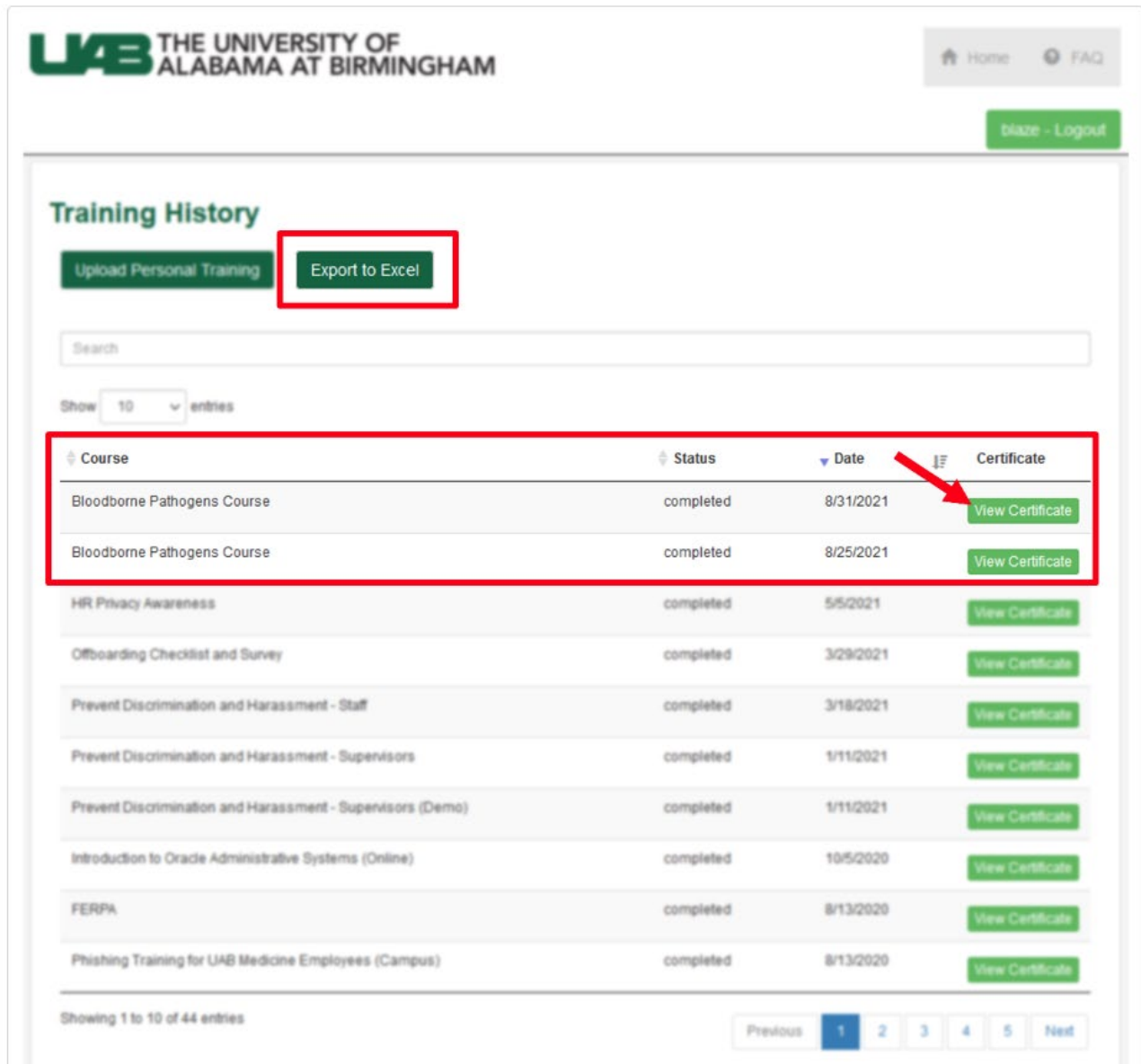
**!** **Your certification Annual Compliance - BIO500 is going to expire at 9/1/2022 12:00:00 am.**  
Please subscribe and complete one of the following courses or learning plans in order to renew it.  
Selecting an item you've already used to obtain this certification in the past, will result in a complete tracking data reset for that item!

  
Bloodborne Pathogens Course

## Accessing Your Training Record

Your complete training history, including a completion record for the initial course and your recertification, is stored in the Learning Locker. To access your complete training history:

- 1 Log into the Learning Locker at [uab.edu/learninglocker](http://uab.edu/learninglocker). Note: Completions may take up to 24 hours to display in the Learning Locker.
- 2 Completions will be displayed in the table on the home page. You may export your entire training history to Excel or view an individual course certificate in the Learning Locker.



**UAB THE UNIVERSITY OF ALABAMA AT BIRMINGHAM**

Home FAQ

blaze - Logout

### Training History

Upload Personal Training **Export to Excel**

Search

Show 10 entries

Course	Status	Date	Certificate
Bloodborne Pathogens Course	completed	8/31/2021	<b>View Certificate</b>
Bloodborne Pathogens Course	completed	8/25/2021	<b>View Certificate</b>
HR Privacy Awareness	completed	5/5/2021	<b>View Certificate</b>
Offboarding Checklist and Survey	completed	3/29/2021	<b>View Certificate</b>
Prevent Discrimination and Harassment - Staff	completed	3/18/2021	<b>View Certificate</b>
Prevent Discrimination and Harassment - Supervisors	completed	1/11/2021	<b>View Certificate</b>
Prevent Discrimination and Harassment - Supervisors (Demo)	completed	1/11/2021	<b>View Certificate</b>
Introduction to Oracle Administrative Systems (Online)	completed	10/5/2020	<b>View Certificate</b>
FERPA	completed	8/13/2020	<b>View Certificate</b>
Phishing Training for UAB Medicine Employees (Campus)	completed	8/13/2020	<b>View Certificate</b>

Showing 1 to 10 of 44 entries

Previous 1 2 3 4 5 Next



## Drug Screen & Background Check

All BSN to DNP NP students in the School of Nursing are required to consent to and pay for a criminal background check and urine drug screening at least once per year.

You will receive an email (sent to your UAB.EDU email address) requesting you to complete a background check. The email will come from [UABSchoolofNursingCRNADNA@screening.services](mailto:UABSchoolofNursingCRNADNA@screening.services), DISA Global Solutions Inc.. The cost of the background check is currently \$92.

Approximately 24 hours after you order and pay for your background check, you will receive an email from [OTSWEBAPP@Labcorp.com](mailto:OTSWEBAPP@Labcorp.com), LabCorp. This email will contain your registration number to complete your drug screening.

**The deadline to complete both the background check and the drug screening is 10 business days from the date of the first background check email you are sent, unless you are notified of a change in the deadline. It is recommended that you order and pay for your background check within 3 days of receiving the email from [UABSchoolofNursingCRNADNA@screening.services](mailto:UABSchoolofNursingCRNADNA@screening.services).**

Please remember your UAB email account is one of the official forms of communication for UAB. If your UAB email account is forwarded to another email account, please be aware that important emails may be filtered into your junk, spam, or other folder. You are responsible for checking your UAB email. Any correspondence missed because you forwarded your UAB email to a different email account (Yahoo, Gmail, etc.) will not excuse you from complying with these requirements.

During this process, either DISA or LABCORP may attempt to reach out to you by phone. Please answer all calls until this process is complete, as the testing centers may need additional information from you and will not leave a message due to privacy concerns.

**Please Note:** Missing these important deadlines may jeopardize your seat in the program. The School of Nursing may rescind your admission offer for BSN-DNP NA Pathway if you fail to comply with these requirements. Please be diligent and complete the background check and drug screening requirements in a timely fashion.

In addition, the email with results will come from [DISAGlobalSolutionsInc@screening.services](mailto:DISAGlobalSolutionsInc@screening.services). Please let us know if you have any additional questions!

Staffing and supply shortages have increased the wait time on the return of your **background check/drug screen** results to UAB Nursing Student Success. The hold on your account will be removed as soon as we have full clearance from DISA on both the background check and drug screening. Please know that there is a seat available for you to register in your spring classes. We request your continued patience and understanding in this process.





## Student Health Services

## HEALTH INSURANCE/WAIVER INFORMATION

As an institution, one goal that UAB has is to ensure that students have access to the best health care available. With this in mind, there are a few updates that we have regarding Student Health Insurance at UAB.

Effective fall 2018, UAB's Student Health Insurance Plan (SHIP) is provided by United HealthCare. This product offers the best available protection at a very competitive price. The plan includes preventive services and unlimited lifetime maximums for medical and prescription coverage. This plan provides access to a national network of preferred providers in all 50 states which allows students to have the same level of protection wherever their studies or life might take them as students of UAB. Below is a summary of the product:

Annual Premium:	\$3126.00 (2024-2025)
Deductible:	\$250 (2024-2025)
Maximum Out of Pocket:	\$4000 for individual (2024-2025)

UAB is happy to present this new product and looks forward to this partnership with United HealthCare to provide the best possible coverage available.

### Insurance Waiver

UAB has also worked to improve the Insurance Waiver process to make this easier for students. If you are an undergraduate student registered for 9+ hours, a graduate student in a program that requires insurance, enrolled in a clinical program, or an international student, you will be automatically enrolled into the SHIP. The cost of the premium for the semester will be added to your student account and you will receive information regarding your benefit.

If you have **private healthcare coverage** that meets the waiver criteria, you can submit an insurance waiver online through an encrypted URL in BlazerNet. Once waivers are received and validated, you will not be enrolled in the SHIP and the charge will not be posted or will be removed from your account. **To ensure you are not charged for the coverage if you do not need it, please submit your waiver online by the priority submission deadline, March 25, 2024.**

Please visit the UAB Student Health and Wellness Insurance and Waivers webpage for more information on the United HealthCare product or guidance on submitting an Insurance Waiver request.

**Insurance Requirements:** <https://www.uab.edu/students/health/insurance-requirements>

**Insurance Waivers:** <https://www.uab.edu/students/health/insurance-requirements/waivers>

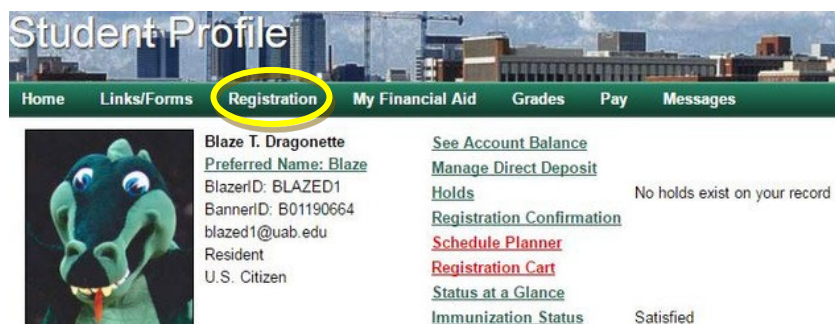
UAB Student Health Services  
 1714 9<sup>th</sup> Avenue South  
 Birmingham, AL 35214  
 205-934-3580  
[studenthealth@uab.edu](mailto:studenthealth@uab.edu)



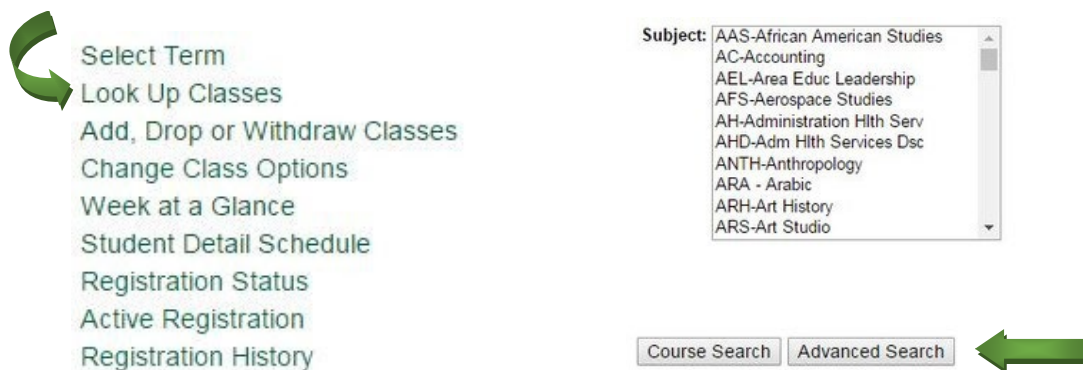
## Registration Instructions

UAB uses BlazerNet to make registering for courses easy. Use the following instructions to register for your upcoming classes.

- 1) Sign in to your BlazerNet student portal. [www.uab.edu/blazernet](http://www.uab.edu/blazernet)
- 2) Click on the **Registration** button on the top banner.




- a. The Time Ticket section tells you when you are allowed to register for classes for the upcoming semester.
  - b. The upcoming term(s) will be listed with any holds or other issues that may prevent registration.
- 3) Click **Look Up Classes**. Choose the correct **term** and click **Submit**. Click **Advanced Search**.



- 4) Choose **NUR-Nursing** from the scrolling Subject list. Click **Advanced Class Search**. This will list all courses offered in the School of Nursing that you need for the BSN program.
- 5) You will scroll through the list, clicking the **left side checkbox** for one section of each course on your Program of Study for that term.
  - a. For example, your first semester (Spring 2024) requires you enroll in
    - i. NUR 310, Concepts of Professional Nursing
    - ii. NUR 311L Nursing Skills Development I
    - iii. NUR 312L, Health Assessment Across the Lifespan
    - iv. NUR 313L, Concepts of Professional Nursing Practicum
    - v. NUR 315, Population Focused Health Care

## vi. NUR 318, Pathophysiology

- b. You will choose one section (one checkbox) for each of these courses to complete your Fall 2023 schedule.
- c. If there is a "0" in the "Rem" (i.e., remaining seats) column, you will not be able to enroll in that section and should choose another section of the same course for registration.



Select	CRN	Subj	Crse	Sec	Cmp	Cred	Title	Days	Time	Cap	Act	Rem
<input type="checkbox"/>	66608	NUR	100	2D	01	3.000	Student Success in Nursing	TR	12:30 pm-01:45 pm	30	11	19
<input type="checkbox"/>	66609	NUR	100	2E	01	3.000	Student Success in Nursing	TR	02:00 pm-03:15 pm	30	2	28
<input type="checkbox"/>	66610	NUR	100	2F	01	3.000	Student Success in Nursing	TR	03:30 pm-04:45 pm	30	0	30

- 6) Once you have chosen the checkboxes for all courses on your Program of Study upcoming semester, you will click **Register** at the bottom of the screen. Read the Registration Message and click **Continue** if you agree.

☐ 66607 NUR 100

**Register** Add to WorkSheet New Search

- 7) This will redirect you to your enrollment screen – "Register, Add or Drop Classes".
- Registration errors may appear and will list the reason for the error (full course, etc.). Please read those error messages carefully to complete your enrollment.
  - If no errors appear and you see all classes on your Program of Study listed as **\*\*Web Registered\*\*** under **Status**, your enrollment is **COMPLETE!**



## ACADEMIC CALENDAR

### SUMMER 2025

<b>Summer 2025</b>	
Assigned Time Registration	March 24 – April 4, 2025
Open Registration	April 7 – May 4, 2025
Classes Begin	May 12, 2025
Late Registration (after classes begin)	May 12 – 19, 2025
Last Day to Drop/Add (without paying full tuition & fees)	May 19, 2025
Memorial Day Holiday	May 26, 2025
Juneteenth Holiday	June 19, 2025
Last Day to Withdraw from a Course	July 3, 2025
Independence Day Holiday	July 4, 2025
Last day of Class	August 8, 2025
Final Exams	August 11 – 15, 2025
Commencement	August 16, 2025
Grades Due (by midnight)	August 18, 2025
Grades Available Online	August 20, 2025

**UAB**  
**SCHOOL OF NURSING**  
The University of Alabama at Birmingham

**Office of Student Success**  
**Important Contacts**

BSN/DNP (NP & Nurse Anesthesia), MSN/DNP, PhD Program Manager

Ms. Jacque Lavier

205-934-3115

fax 205-934-5490

[jlavier@uab.edu](mailto:jlavier@uab.edu)

Director of Student Success

Mr. John Updegraff

205-975-3370

fax 205-934-5490

[jupde22@uab.edu](mailto:jupde22@uab.edu)

Registration Issues

Mr. Kevin Jerrolds, Registrar

205-934-7605

fax 205-934-5490

[sonregistrar@uab.edu](mailto:sonregistrar@uab.edu)

Ms. Latasha Harris, Assistant Registrar

205-934-6778

fax 205-934-5490

[sonregistrar@uab.edu](mailto:sonregistrar@uab.edu)

Drug Screen / Background Check Issues

Ms. Pat Little

205-996-7130

fax 205-934-5490

[sonstudaffrs@uab.edu](mailto:sonstudaffrs@uab.edu)

HIPAA and OSHA Issues

Ms. Mary Leopard

205-975-7529

fax 205-934-5490

[mleopard@uab.edu](mailto:mleopard@uab.edu)

Scholarships

Ms. Stephanie Hamberger

205-934-5483

fax 205-996-7157

[ssallen@uab.edu](mailto:ssallen@uab.edu)

UAB Student Health – Medical Clearance

Send questions through patient portal or call main number at 205-934-3580

[https://studentwellness.uab.edu/login\\_directory.aspx](https://studentwellness.uab.edu/login_directory.aspx)

UAB Student Health Insurance Information

<https://www.uab.edu/students/health/insurance-waivers/student-health-insurance-plan>

United HealthCare Portal

United HealthCare Portal:

Mandatory Plan is Policy #2019-505-1

Optional Plan is Policy #2019-505-2

# ESSENTIAL STUDENT RESOURCES



## Student Counseling Services

**Offers free and confidential support to achieve well-being**

### **Location:**

3rd Floor Learning Resource Ctr  
1714 9th Avenue South  
Birmingham, AL 35233

- Individual and group counseling
- Crisis and emergency support
- Prevention and outreach programming
- Online resources and distance counseling

**To schedule an appointment, call: 205-934-5816**

## UAB Cares



**Delivers supports for students in crisis or considering suicide**

- Identify related community resources
- Connect with crisis hotlines (rape response, domestic violence, LGBT, etc.)
- Talk to a trained, live crisis counselor 24-7

**To connect with a crisis counselor: Text “UAB” to 741-741**



## Student Assistance & Support

**Assists students through life challenges to support diverse needs**

- Student advocacy
- University and community connections
- Individualized support
- Resilience and accountability
- Distressed student referrals

**Location:** Hill Student Center  
Suite 303, 1400 University Blvd  
Birmingham, AL 35233

**Phone:** 205-975-9509

**Email:** [studentoutreach@uab.edu](mailto:studentoutreach@uab.edu)

## Regions Institute for Financial Education



**Provides financial literacy resources and programming**

- Saving goals
- One-on-one financial counseling
- America Saves Pledge
- Interest-free student microloans
- Financial literacy presentations
- Credit management
- Debt reduction
- Spending plans



## Student Health Services

Offers primary and specialty care appointments for healthcare needs

**Location:**

1714 9th Ave South  
Birmingham, AL 35233

**Hours:** Mon-Thurs 8-5, Fri 9-5

- Immunizations and prescriptions
- Triage nurse on call
- Telemedicine visits (AW Touchpoint)
- Student insurance and waivers

To schedule an appointment, call: **205-934-3580** or access the patient portal

## Blazer Kitchen

Provides an on-campus food pantry and food insecurity referrals



**1613 Location:**

\*\*\*appointment required\*\*\*

1613 11th Ave. S  
Birmingham, AL 35205

**Phone:** 205-996-2040

**Hours:** [please check website](#)

**Hill Student Center Location:**

\*\*\*appointment required\*\*\*

Suite 303, 1400 University Blvd  
Birmingham, AL 35233

**Phone:** 205-975-9509

**Hours:** Mon-Fri, 8 am-5 pm



## Disability Support Services

Facilitates an accessible university experience for all students

**Location:** Hill Student Center, Suite 409

1400 University Blvd  
Birmingham, AL 35294

**Phone:** 205-934-4205

**Hours:** Mon-Fri 8 am-5 pm

- Sign language interpreters
- Books in alternative formats
- Note-taking assistance
- Testing/housing accommodations
- Assistive technology software

For questions about DSS accommodations, email: [dss@uab.edu](mailto:dss@uab.edu)

## UAB Police and Public Safety



For emergencies, please call **205-934-3535** or **911**

For non-emergency situations, please call **205-934-4434**