MEDICAL CERTIFICATION



Board of Registry®

ASCP Certification: The Standard of Excellence 2100 West Harrison Sueer Chicago, Illinois 60612-3798 T 312.738.1336 F 312.738.5808 www.ascp.org

Certificate of Authenticity

Primary Source Reliance

January 19, 2006

To Whom It May Concern:

Please be advised that the American Society for Clinical Pathology has entered into a formal agency agreement with Credentials Inc. of Northfield, Illinois to perform written verifications of awarded certificates from our Institution. Credentials Inc. shall respond to all inquiries for verification of certificates awarded, on behalf of the American Society for Clinical Pathology. Credentials Inc. has been granted the authority to respond to all such requests from interested Third Parties on our behalf. The American Society for Clinical Pathology warrants that the results of the inquiries delivered by Credentials Inc., acting as our agent, are based on our records. Credentials Inc. should be considered as a primary source provider for verification of certificates awarded for the American Society for Clinical Pathology, just as if the information had been provided directly by our office.

Should you have any questions or concerns with this Certification of Authenticity, please contact the undersigned.

Name of Institution: City, State:

Name.

Signature:

Title:

Geraldine Piskorski Johns

American Society for Clinical Pathology Board of Registry

Director, Certification Activities

Date:

January 19, 2006

Chicago, Illinois

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American Society of Clinical Pathologists

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1995

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certification mus established in 1983 by the Consortium of Indiana Medical Aaboratory Aducators



DUCATIONAL

Verification Form/Certificate of Continuing Education

NAME: 1

ADDRESS: CITY, STATE, ZIP:

Attended 14 hours of "Comprehensive Intravenous Therapy for Nurses" on and , 2007 at , OH. The segments attended included

the following objectives:

Objectives:

3.

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- 1. Identify the terms used and practices of infection control relevant to IV therapy.
- Discuss the anatomical and physiologic considerations when initiating and maintaining IV therapy

Outline and demonstrate the five steps involved in precannulation in IV therapy including the behaviors indicative of individual and family support during the procedure.

- Verbalize and demonstrate the five steps in cannulation of a vein when initiating IV therapy.
- Outline and demonstrate the five steps involved in postcannulation in IV therapy including the implementation of individual teaching.
- Outline and demonstrate the five steps involved in postcannulation in IV therapy including the implementation of individual teaching.
- Discuss the causes, assessment and management of nine complications associated with IV therapy and the associated terms.
- Evaluate INS guidelines and selected institutional policies in relationship to RN and LPN practice.
- Discuss the causes, assessment and management of six systemic complications related to the administration of IV fluids.
- Demonstrated the venipuncture procedure, documentation of IV therapy and use of accessory equipment in individuals receiving IV therapy.

This certificate documents the objectives covered during the educational sessions. It does not award official continuing education hours as defined by the Ohio Nurses Association (OBN-001-91), an accredited approver by the American Nurse Credentialing Center's Commission on Accreditation.

Program Coordinator

Educational

EMEROFNCY MEDICAL SERVICES

EMS Certification Information



Select Query Type . Certification No . SSN

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Certification Verification now shows 'Pending' in the certification status. If you go to 'Certification Verification' on the website you may see that there is a certification listed as pending on your record. This simply means that you have recently submitted an application to our office to renew your present certification. Since your present card is still 'active', the new card can not take effect until expiration of your current certification. The word 'Pending' simply means this certification is pending the expiration of your current certification. This is to confirm to each applicant and your employer that we have received and processed your application for renewal.

No. 1 2

Certification Title Intermediate Level I Firefighter Expiration Date /21/2009

Server Date & Time: 12/3/2007 2:13:01 PM

American Society for Clinical Pathology

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2007 ASCP Member ID: 604

р II. т. н Certification No.

Expiration Date No Expiration





American Society for Clinical Pathology

33 West Monroe, Suite 1600 Chicago, IL 60603-5617 www.ascp.org

Customer Services 1.800.267.2727 (option 2) Outside U.S.: 312.541.4890 Fax: 312.541.4472 info@ascp.org



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Geraldine Piskorski

Signature:

Name.

Director, Certification Activities

Date:

Title:

January 19, 2006

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Select Query Type C Certification No @ SSN

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Search Reset

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Certification No.: No. Certification Title 1 Intermediate

Expiration Date 06/14/2009

Server Date & Time: 11/8/2007 9:59:05 AM

https://www.dps.state.oh.us/ems/cert.asp

EMERGENCY MEDICAL SERVICES

EMS Certification Information



Select Query Type Certification No SSN

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