

NAPNES

1940 Duke St. • Suite 200 • Alexandria, VA 22314

NAPNES Pharmacology Re-Certification - Candidate Information

PHILOSOPHY

It is the responsibility of certified nurses to maintain their professional competence. Through the re-certification program, certified LPN/VNs have the opportunity to maintain their certified status. The purpose of the re-certification program is to demonstrate ongoing and current learning, and to maintain competence.

In order to comply with this philosophy, the NAPNES Pharmacology Certification™ Board has developed the re-certification program with the goal of promoting continued competency by offering a systematic plan of learning through continuing education. **Re-certification is required every 3 years.**

ELIGIBILITY

To be eligible for NAPNES Pharmacology re-certification, you must:

1. hold a current NAPNES Pharmacology Certification™ card
2. have a current LPN/VN license
3. complete one of the five (5) options for demonstrating current competence (i.e., documentation of continuing education or retake and pass the Pharmacology certification examination)

Note: NAPNES membership is not required to be certified by NAPNES. However, **only NAPNES members qualify** for the member rate. Please be sure to include a copy of your current membership card (different from the certification card) if you request the member rate.

PLEASE READ THESE INSTRUCTIONS CAREFULLY

We are happy to help you with questions but it is very difficult if you have not read the instructions before you call. We will be happy to respond to written questions as well.

DEMONSTRATING CURRENT COMPETENCE

There are five (5) options available through which the NAPNES Pharmacology Certified LPN/VN can demonstrate current competence for re-certification. You must satisfy **one**:

1. Re-Certification by Examination

To be re-certified through re-examination, you must meet the eligibility requirements (described above), apply for and pass the NAPNES Pharmacology Certification™ examination. If you wish to maintain your certification through this option, you must retake the NAPNES Pharmacology certification examination and score 75% or higher at least two (2) months prior to the date on which your re-certification is due.

2. Re-Certification through Continuing Education

To apply for Re-certification through continuing education, you must meet all eligibility requirements for any **one** of the following and send the required documentation to NAPNES no later than two (2) months prior to your certification expiration date: (Re-certification application enclosed)

- a. **Documentation of a minimum of fifty (50) contact hours** of continuing nursing education thirty-five (35) of which **MUST** be in Pharmacology. Copies of certificates or letters which includes dates of sessions and the number of contact hours earned for each session must be attached. Contact hours must total a minimum of fifty (50).
- b. **Documentation of a minimum of fifty (50) contact hours** of continuing nursing education **ALL** of which must be in clinical nursing. Applicant must enclose copies of certificates or letters which include dates of sessions and the number of contact hours earned for each session.
- c. **Documentation of three semester hours** in pharmacology within the last five (5) years. Certificates or letters which include dates of sessions and the number of contact hours earned must be included. Note: When sending documentation of contact hours, only send copies of certificates. **DO NOT SEND ORIGINAL ORIGINAL DOCUMENTS.** NAPNES IS NOT RESPONSIBLE FOR RETURNING ANY DOCUMENT.
- d. **Documentation of no fewer than 1500 hours of nursing practice in the area of administering medication, earned within the last five (5) years.** Nurses who were once certified by NAPNES, and have performed the required number of practice hours qualify immediately, provided their immediate supervisor/employer attests to their performance in this area. Confirmation must be in the form of a typed letter, on organization letterhead, signed by the applicant's supervisor. **It must include:**
 - Name of LP/VN applicant and license number, **and**
 - A statement by the supervisor that the LPN has at least 1500 hours in medicine administration (this includes patient teaching about medication) within the last 5 (five) years, **and**
 - Supervisor's name and position, **and**
 - Daytime phone of supervisor/employer if different from letterhead. (If you worked for different institutions you may need statements from more than one employer to document a minimum of 1500 hours of medication administration the last five (5) years.)
 - **Note: A general statement of number of hours worked in the facility does not meet this requirement.**

All re-certification options REQUIRE documentation of previous certification by NAPNES. (i.e., a copy of the old NAPNES card) NAPNES does not re-certify another organization's test.

FEES

- **\$50 for NAPNES members** (must enclose copy of current membership card – not the same as pharmacology card.)
- **\$100 for non-members.**

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Payment of fees can be made in the form of a check or money order made payable to NAPNES and must be enclosed with the option of Re-certification through Continuing Education applications. A penalty fee will be assessed to any applicant whose check is returned for non-sufficient funds. Remittance of fees thereafter must be in the form of a money order or certified check. When the option of re-certification through re-examination is used, the application fee is paid to NAPNES at the time the request is made for re-examination. Testing fee (\$60) is paid Online on the day of testing.

Do not send testing fee to NAPNES. NAPNES and Online Testing are two separate businesses and have no mechanism for accepting each other's fees. Everything will have to be returned to you, causing unnecessary delay in your process.

Continuing Education Criteria

The following criteria must be met if you choose any of the continuing education options:

1. Programs must be sponsored by one of the following organizations/institutions:

- State board or association of nursing
- Hospitals/Long-term care facilities/Other health care related facility
- Nursing, medical or health care organization
- College/University -- For academic credit, one quarter equals 10 contact hours and one semester hour equals 15 contact hours.
- Nursing, medical or health care magazine CE by correspondence.

2. Programs must be awarded contact hours, CEU credits, or academic credits and documented by a certificate made out in your name.

- General components for evaluation by the NAPNES Pharmacology Board are subject matter, appropriateness of content and whether it is germane to nursing care including administration of medicine.
- Contact hours must be earned during the period of certification during the five (5) calendar years leading up to the expiration date of your certification.
- Only contact hours earned within the dates of certification period can be used toward the next re-certification period.
- If more than 50 hours of continuing education are earned within a specific re-certification period, the extra hours cannot be used for the next re-certification period.
- The purpose of the re-certification program is to demonstrate ongoing and current learning, and to maintain competence. Similarly, if an application is filed early, credits earned later that year can not be applied for the next re-certification period. Credits for each re-certification must be earned within the application period of re-certification.

Documentation of Continuing Education

Documentation of continuing education can include the following:

1. Copies of certificates of attendance at continuing education offerings. Certificates must include:

- Your name
- Title of program
- Date of program
- Contact hours/credit awarded
- Accrediting or acceptable sponsoring agency.

Send only **copies** of the certificates of attendance. Keep the originals for your files. **Documentation cannot be returned.**

If any of the above information is missing from the certificate, you must also provide a letter from the program provider or a copy of the program agenda that verified the missing information. The title of the program must clearly indicate the content or subject area. If the title is not self-explanatory, you must also enclose a copy of the program agenda. If a certificate is not available, a letter or other written verification from the program provider outlining the above information will be accepted.

2. An academic transcript, grade report, or letter from instructor showing successful completion must list your name, course, date and school offering the course. The title of the course must indicate the content area addressed in the course. If the title is not self-explanatory, you must also enclose a copy of the description from the school's course catalog or a letter from the course instructor to verify content area.

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### **REVOCATION OF CERTIFICATION/DENIAL OF RE-CERTIFICATION**

Revocation is automatic upon an investigation that concludes that an LPN/VN obtained certification using false or fraudulent information to obtain that certification, upon notification of revocation or suspension of the certified nurses LPN/VN license by the issuing state. Revocation of certification may also occur if an LPN/VN is terminated by an employer for cause and termination is sustained through the appeals process.

In the event the LPN/VN license is suspended or revoked by the licensing state, the certified nurse is not eligible for re-certification until such time that the LPN/VN license is reinstated and documentation of reinstatement is provided. Documents will be submitted to the NAPNES Pharmacology Certification Board and the Board will determine the appropriate course of action.

#### **Appeal Process**

If a candidate for certification or re-certification believes that any certification process or decision is inequitable, the candidate can appeal the decision to the NAPNES Pharmacology Certification Board. The date and place for the hearing shall be determined by the certification board. A fee of \$500 is required in advance for calling an appeals meeting.

If a candidate for certification or re-certification believes the appeal process or result is inequitable, the matter may be submitted to arbitration upon request of the candidate. An independent arbiter will be selected and the decision of the arbiter shall be final and binding for both parties. Expense for the arbitration and arbiter shall be the responsibility of the non-prevailing party. Proceedings pursuant to the arbitration shall be governed by the law of the state in which the NAPNES Pharmacology Certification Board has its principal office.

**Failure to include all required information and documentation with application causes unnecessary delay.**

**NAPNES RE-CERTIFICATION APPLICATION**

**Effective January 2004**

**Please Fill Out This Form Completely**

Name: \_\_\_\_\_

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

LP/VN License #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Date of Graduation from LP/VN Program: \_\_\_\_\_

Name of School or Program: \_\_\_\_\_

Date of Original Certification: \_\_\_\_\_

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

My employer is sending a letter  Yes  No  
Has your name changed since your last certification?  Yes  No

Without the following information, processing of your application will be delayed unnecessarily. Please take the time to follow directions and send all required information.

**Did you:**

- Include all information on the application form?
- Include appropriate fee?  
 \$100.00 Non-Members, or  \$50.00 Members

Note: If you do not include a copy of your current membership card (this is different from your old pharmacology/long-term care card), you MUST include the non-member fee.

- Provide *copies* of:
  - Current certification card, and
  - Current membership card (if a member), and
  - Current LP/VN license, and
- Plainly mark the re-certification option you are using
- Note that your employer is sending a letter if it is not included with application (applies only to option 5)
- Provide documentation of name change (divorce decree or marriage certificate?)

PLEASE ENCLOSE COMPLETE INFORMATION