CERTIFIED AESTHETIC NURSE SPECIALIST (CANS)
RECERTIFICATION THROUGH CONTINUING EDUCATION

Recertification
You have decided to renew your certification by continuing nursing education rather than taking the examination. Recertification through continuing nursing education contact hours is accomplished by accumulating **45 contact hours** during the 3-year CANS certification period. Contact hours do not have to be accumulated in all categories; however, a minimum of 2 contact hours must be specifically related to patient safety. Any combinations of the following activities are acceptable; however, a minimum of 30 contact hours must be earned in at least one or more of the core specialties of Plastic/Aesthetic Surgery, Ophthalmology, Dermatology, or Facial Plastic Surgery (ENT).

Applications for renewal of your Certified Aesthetic Nurse Specialist (CANS) credential by continuing nursing education must be received 30 days in advance of the certification expiration date. Applications received with 29-15 days of expirations are subject to a late fee. Any applications received after this time can be automatically rejected. A completed application, appropriate forms, supporting materials, and fee must be submitted at one time. Incomplete applications will be returned to the candidate. The decision that recertification requirements have been met will be based solely on the submitted material.

If recertification is approved, the applicant will receive a new certificate, wallet-size card indicating certified status, and expiration date.

If recertification is denied, applicants may apply to re-take the CANS examination or they may appeal the ruling. If appeal is denied, applicants may apply to take the CANS examination. If applicant does not meet renewal criteria and does not pass the examination, recertification will not be awarded.

Recertification by proof of 45 contact hours will be denied for any of the following reasons:
- Falsification of application.
- Misrepresentation.
- Failure to meet criteria for 45 contact hours of credit.
- Failure to meet criteria for 30 credits in the core specialties
- Failure to meet practice criteria (employment under the supervision of a Board certified physician within one of the four core specialties of Plastic/Aesthetic Surgery, Ophthalmology, Dermatology, or Facial Plastic Surgery (ENT).
- Lack of current RN licensure.
- Failure to apply by deadline.
- Failure to supply requested additional material by deadline.
- Failure to meet work experience eligibility requirements.
Retired Status (CANS-R)
The Retired designation is intended both to recognize certified nurses’ years of service in the specialty and to acknowledge their dedication to having been certified. Retirement from clinical practice can take place for many reasons; however, many nurses would like to stay connected to their certification. Retired status will also be granted to those RNs that have left the core specialties, but wish to maintain their certification with a goal to return to the specialty.

The CANS-R designation is renewable every 3 years by submitting your application and fee.

The CANS-R may once again resume their CANS credential as long as they have been practicing in Plastic Surgery for at least two years and can submit 45 hours of continuing education, with 30 hours specifically in the core specialties per the Recertification Guidelines.

Certified Aesthetic Nurse Specialists are responsible for notifying the PSNCB National Office of any contact or address changes. CANS candidates are also responsible for tracking their recertification dates.

If you have any questions concerning the recertification process, please contact the Plastic Surgical Nursing Certification Board National Office

PSNCB
500 Cummings Center, Suite 4550
Beverly, MA 01915
Phone (978) 927-8330
Toll Free (877) 337-9315
Fax (978) 524-8890
INSTRUCTIONS FOR RECERTIFICATION BY CONTINUING EDUCATION

This handbook contains the instructions and forms necessary for you to apply for CANS renewal through continuing education. Please review all materials, including examples, before beginning to fill out forms. You may duplicate forms if additional space is needed. Please make a personal copy of all application material before submitting and retain the copy until you have received official notification of recertification.

To recertify by continuing education, all candidates must meet the specified eligibility requirements and provide proof of 45 approved contact hours. Compliance with eligibility requirements related to work experience must be documented on the application form. Proof of 45 contact hours are documented on five forms, one for each acceptable method of collecting contact hours. Continuing education certificates must be attached to each appropriate form to be considered complete. If you determine that you do not have a copy of the contact hour certificate, you are responsible for requesting a copy from the provider of the continuing education program. PSNCB will not obtain certificates for applicants or process incomplete applications.

A minimum of 30 of the 45 contact hours must be specifically related to nursing within the four core specialties of Plastic/Aesthetic Surgery, Ophthalmology, Dermatology, or Facial Plastic Surgery (ENT). Additionally, a minimum of 2 contact hours must be specifically related to general patient safety. This can be accumulated in any category and can include, but is not limited to the Joint Commission National Patient Safety Goals (www.jointcommission.org). Contact hours may be accumulated through any of the categories of continuing education activities provided the content is Plastic/Aesthetic Surgery, Ophthalmology, Dermatology, or Facial Plastic Surgery (ENT).

To be acceptable for recertification, the contact hours awarded must be continuing education in nursing and be provided or approved by one of the following:

- The American Society of Plastic Surgical Nurses (ASPSN)
- Organizations accredited by the American Nurses’ Credentialing Center-Commission on Accreditation (ANCC-COA) the credentialing body of the American Nurses Association.
- The state board of nursing in California, which requires that the organization have approved provider status in their state if the continuing education activity is held IN THE STATE. Contact hours are accepted by those state boards of nursing if the licensee attends the activity OUTSIDE the state. Mandatory states are those states that require continuing education credit for re-licensure. Other than the above mentioned states, mandatory states accept contact hours from organizations that have accreditation status from the ANCC-COA or whose educational activities are approved by an organization with ANCC-COA accreditation status.
- The Council of Continuing Education

Category A: Core Specialty Programs (30 Hours Minimum): This group encompasses Plastic/Aesthetic Surgery, Ophthalmology, Dermatology, or Facial Plastic Surgery (ENT) programs offering continuing education credit in nursing. These programs must be specific to your corresponding practice. To qualify, a program must indicate that a single continuing education unit equals 10 educational contact hours. A copy of the certificate awarded must be submitted as proof of attendance. Credit will be given according to the number of contact hours awarded. CANs who present Core Specialty programs which are awarded continuing education credit may receive credit for the number of contact hours awarded for the presentation.

Category B: Academic Courses: This group encompasses programs that address the broad area of health care and nursing related courses offered by an accredited educational institution. It is not necessary that the course content be within the concepts related to the four core specialties. If the applicant has been accepted into an accredited Bachelor of Science in Nursing (BSN) program or Masters of Science in Nursing (MSN) he/she can apply all academic credit work toward the 15 general contact hours required for recertification unless specifically relating to Plastic/Aesthetic Surgery, Ophthalmology, Dermatology, or Facial Plastic Surgery (ENT). The 30 contact hours in the Core Specialties are still required.

Category C: Professional Publications: This group encompasses the publication of materials relevant to the Core Specialties in a recognized professional journal, newsletter, or by a recognized publishing house. The format shall be a manuscript, research paper, book chapter, or book. Authorship or co-authorship of a book equals 15 contact hours. A book chapter, manuscript or article-paper equals 5 contact hours. A copy of the publication must be submitted as part of the application for recertification.

Category D: Independent Study: This group encompasses continuing education offerings for self-study that have been awarded contact hours. Credit will be given according to the number of contact hours awarded to each offering, including journal articles (journal articles must have been published within the three-year certification period). A copy of the certificate awarded must be submitted as documentation.

Category E: General Nursing and Health Care Programs: This group encompasses programs that address a broad area of health care, general nursing, and continuing education activities planned to meet the individual’s potential for professional growth. A copy of the certificate that details the number of contact hours awarded must be submitted as documentation of attendance. Healthcare programs specific to core specialty topics but not designed for nursing (i.e., Continuing Medical Education [CME]) may apply at the discretion of the PSN Board. All information would have to be submitted and reviewed for approval.

Proof of 45 contact hours may be submitted from the following activities:
Commonly Asked Questions about Recertification

1. I have returned to school to work on my BSN/MSN. Will courses I take while working on my degree meet the criteria for recertification?
   All of your courses will meet the criteria Category B: Academic Courses. **NOTE:** One semester credit equals 15 contact hours; one quarter credit equals 10 contact hours. To receive credit for any courses you take, you must provide an official transcript. These credits, unless specifically related to one of the four core specialties, will not count toward the 30 Core Specialty credit hours.

2. I attended a plastic surgical program that offered continuing medical education (CME) credit, but not nursing contact hours. Will this be accepted as credit toward recertification?
   Possibly. If you were officially registered for a program that offered CMEs and not nursing contact hours, and if the program was specific to one of the four core specialties and is relevant to your practice, you can submit a letter, accompanied by all supporting documentation, requesting the PSNCB review and accept the CMEs toward recertification.

3. Can I receive credit for a published abstract?
   No, but you may be able to earn contact hours for the presentation of your abstract. Many groups offering educational programs print program abstracts in a meeting publication or journal. These are not accepted as a publication, but the author may receive continuing education credit if it is awarded for the presentation of the abstract at an educational meeting. For example, if your abstract is accepted for the ASPSN National Meeting, it is printed in the *PSN Journal* and you are given time during the meeting to present the abstract. The session at the meeting is awarded nursing contact hours by ASPSN. You may receive the same number of contact hours as your audience for your presentation. If, however, you present an abstract at a meeting that only offers CME, you will not receive credit.

4. I am the second author of an article relating to one of the four core specialties published in a recognized professional journal. Do I receive partial or full credit for publication?
   Yes, if listed as an author, you receive full credit. Authorship of an article/chapter that meets the specified criteria equals 5 contact hours.

5. Do all Core Specialty nursing contact hours have to be awarded by ASPSN?
   No. However, ASPSN is an excellent resource for approved core specialty nursing educational program. In addition, ASPSN offers contact hours through continuing education articles for independent study. To use the credits from the ASPSN Convention in the fall or Aesthetic Symposium in the spring for your recertification, the dates of the meeting must fall before the date your application is to be submitted (30 days prior to recertification) unless otherwise approved in advance.
   Other nursing groups also provide quality programs that may be related to plastic surgical nursing or fall in the general nursing category. The consumer of continuing education should carefully assess the nature of the source of continuing educational approval for any program. Programs approved for contact hours by an ANCC-COA provider unit such as ASPSN and state nurses’ associations will always be an excellent choice.

6. I sat for the exam on the 15th of the month and attended a continuing education program over the next 3 days. Now that I have passed the exam, will I be able to use the approved contact hours from that program for recertification?
   Yes. Approved programs attended within 30 days of the date the exam was taken and passed may be submitted. Programs attended prior to that time are not accepted.

7. I submitted my CANS recertification application in April, my certification expires in June. In May I attended an educational program awarding nursing contact hours. Can I use those contact hours for my next recertification cycle in 3 years?
   No. Contact hours earned during the period of your certification can be used only during the current recertification period.

8. I have more contact hours of continuing education than the required amount. Should I list and provide evidence of all offerings I attended in case some contact hours are not accepted?
   Yes. List all the hours you have accumulated.

9. What will happen if I am unable to meet the continuing education requirements for recertification?
   You may recertify by taking the examination or lose your CANS credential.

10. I am also a CPSN, can I use the same continuing education, if applicable, for both certifications?
    Yes. As long as the continuing education activity meets the criteria for both certifications, it can be submitted as part of both recertification materials. CPSN and CANS recertification packets should always be sent separately with copies of the activity included in both.

**SPECIAL DISABILITY ARRANGEMENTS**

In accordance with the Americans with Disabilities Act, C-NET will provide special exam accommodations for any certification candidate with documentation of a diagnosed disability. There are several steps to this process. They must be completed as described to receive special accommodation(s) for a certification exam.

1. When completing the application for the certification exam you are applying for, enter “Testing Accommodation” in the space provided for “Exam Site” on age 1 of the application. As most accommodations require separate rooms, there is not a publicly listed exam date for you to request.
2. Please mail the application at least 10 weeks before you wish to sit for the exam. Submit your completed application with payment to:
   Special Testing Department-Nursing C-NET
   35 Journal Square, Suite 901
   Jersey City, NJ 07306

Once your application is determined to be complete and eligible for the certification exam, we will contact you and forward the necessary documentation to begin the accommodation coordination process.”
RECERTIFICATION REQUIREMENTS

PSNCB recertification by continuing education is obtained by accumulating 45 contact hours with a minimum of 30 contact hours in within the four core specialties recognized as Plastic/Aesthetic Surgery, Ophthalmology, Dermatology, or Facial Plastic Surgery (ENT) during the three-year CANS certification period. Contact hours do not have to be accumulated in all categories; however, a minimum of 2 contact hours must be specifically related to general patient safety. Any combination of the following activities is acceptable.

The following is a brief description of the continuing education activities approved for contact hours.

**Category A: Core Specialty Programs:** This group encompasses programs offering continuing education credit in nursing related to Plastic/Aesthetic Surgery, Ophthalmology, Dermatology, or Facial Plastic Surgery (ENT). These programs must be specific to Plastic/Aesthetic Surgery, Ophthalmology, Dermatology, or Facial Plastic Surgery (ENT) nursing practice. To qualify, a program must indicate that a single continuing education unit equals 10 educational contact hours, or the program must use the recognized value of CERP (continuing education recognition point) in which one educational contact hour equals one CERP. (One CEU equals ten educational contact hours, which equal ten CERPs. CERPs may not be converted to CEUs). A copy of the certificate awarded must be submitted as proof of attendance. Credit will be given according to the number of contact hours awarded. CANS candidates who present programs related to Plastic/Aesthetic Surgery, Ophthalmology, Dermatology, or Facial Plastic Surgery which are awarded continuing education credit may receive credit for the number of contact hours awarded for the presentation. (Minimum of 30 contact hours required per three-year period).

**Professional Publications** – This group encompasses the publication of content relevant to the Core Specialties Plastic/Aesthetic Surgery, Ophthalmology, Dermatology, or Facial Plastic Surgery (ENT). The content must be published in a recognized professional journal or newsletter or by a recognized publishing house. The format shall be an article, book and/or research paper. Authorship of a book/chapter equals 15 contact hours. An article/paper equals 5 contact hours.

**Presentations** – This group encompasses participation as an instructor/trainer in Plastic/Aesthetic Surgery, Ophthalmology, Dermatology, or Facial Plastic Surgery (ENT) programs. The presentation may be delivered to professional nurses, other health care professionals or lay people. One educational presentation equals 3 contact hours. Contact hours will be awarded ONLY for initial or a one-time presentation of any program.

**Category B: Academic Courses:** This group encompasses programs that address the broad area of health care and nursing related courses offered by an accredited educational institution. It is not necessary that the course content be Plastic/Aesthetic Surgery, Ophthalmology, Dermatology, or Facial Plastic Surgery (ENT) nursing concepts. If the applicant has been accepted into an accredited Bachelor of Science in Nursing (BSN) program, academic credits can be applied to the 15 general contact hours required for recertification. **NOTE:** One semester credit equals 15 contact hours; one quarter credit equals 10 contact hours. To receive credit for any courses you take, you must provide an official transcript.

**Category C: Professional Publications:** This group encompasses the publication of materials relevant to Plastic/Aesthetic Surgery, Ophthalmology, Dermatology, or Facial Plastic Surgery (ENT) nursing in a recognized professional journal, newsletter, or by a recognized publishing house. The format shall be a manuscript, research paper, book chapter, or book. Authorship or co-authorship of a book equals 15 contact hours. A book chapter, manuscript or article-paper equals 5 contact hours. A copy of the publication must be submitted as part of the application for recertification.

**Category D: Independent Study:** This group encompasses continuing education offerings for self-study that have been awarded contact hours. Credit will be given according to the number of contact hours awarded to each offering, including journal articles (journal articles must have been published within the three-year certification period). A copy of the certificate awarded must be submitted as documentation.

**Category E: General Nursing and Health Care Programs:** This group encompasses programs that address a broad area of health care, general nursing, and continuing education activities planned to meet the individual’s potential for professional growth. A copy of the certificate that details the number of contact
hours awarded must be submitted as documentation of attendance. Health Care Programs specific to Plastic/Aesthetic Surgery, Ophthalmology, Dermatology, or Facial Plastic Surgery (ENT) but not designed for nursing may apply at the discretion of the PSNCB. All information would have to be submitted and reviewed for approval.
**FORM 1**  
**CATEGORY A: CORE SPECIALTY PROGRAMS**

Form 1 pertains to Plastic/Aesthetic Surgery, Ophthalmology, Dermatology, or Facial Plastic Surgery (ENT) programs offering contact hours for nursing. These programs must be specific to nursing practice. Continuing education programs that have been completed should be listed on this form and documentation (*copy of continuing education certificate*) should be attached to this form. (Form 1 may be copied if more space is needed to list programs.)

1. Column (1): list the official title of the program.  
2. Column (2): list the date of the program.  
3. Column (3): record the name of the accrediting body or approval board.  
4. Column (4): record the location in which the program was held.  
5. Column (5): record the number of contact hours awarded as documented on the program certificate.  
6. Add the total hours for this category and record in the subtotal area.  
7. Attach documentation.

**SAMPLE – FORM 1:**

<table>
<thead>
<tr>
<th>(1) Title of Program</th>
<th>(2) Date of Program</th>
<th>(3) Accrediting Body or Approval Board</th>
<th>(4) Location</th>
<th>(5) Number of Approved Contact Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>ASPSN 40th National Meeting</td>
<td>10/2014</td>
<td>ASPSN</td>
<td>Chicago</td>
<td>20.5</td>
</tr>
<tr>
<td>ASPSN Regional Meeting</td>
<td>6/2013</td>
<td>ASPSN</td>
<td>Tennesse</td>
<td>10</td>
</tr>
</tbody>
</table>

Name: ___  
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FORM 2
CATEGORY B: ACADEMIC COURSES

This group encompasses programs that address the broad area of health care and nursing related courses offered by an accredited educational institution. It is not necessary that the course content be nursing concepts related to core specialty. If the applicant has been accepted into an accredited Bachelor of Science in Nursing (BSN) program, he/she can apply all academic credit work toward the 45 contact hours required for recertification.

1. Column (1): record the official title of the course.
2. Column (2): list the institution where the course was provided.
3. Column (3): list date the course was completed.
4. Column (4): list the number of semester or quarter credit hours awarded for the course.
5. Column (5): designate the multiplication factor to be used for calculation of the total contact hours for each course. For each semester of credit earned, multiply by 15 (3 semester credit hours x 15 = 45 total approved contact hours toward recertification). For each quarter credit hour earned, multiply by 10 (3 quarter credit hours x 10 = 30 total approved contact hours).
6. Add the total hours for this category and record in the subtotal area.
7. Attach official transcript.

SAMPLE – FORM 2:

<table>
<thead>
<tr>
<th>Course Title</th>
<th>Institution</th>
<th>Date Completed</th>
<th># of Credit Hours</th>
<th>Worth x 15 for each semester hr. x 10 per quarter hour</th>
<th>Total Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Leadership in Nursing</td>
<td>Georgia State University</td>
<td>12/2013</td>
<td>3 quarter hours</td>
<td>X 10</td>
<td>30</td>
</tr>
<tr>
<td>Collaborative Practice in Nursing</td>
<td>Texas Woman’s University</td>
<td>8/2013</td>
<td>2 semester hours</td>
<td>X 15</td>
<td>30</td>
</tr>
</tbody>
</table>

Name: ____________________________ Subtotal this page: 60
FORM 3
CATEGORY C: PROFESSIONAL PUBLICATIONS

This category encompasses the publication of material relevant to Plastic/Aesthetic Surgery, Ophthalmology, Dermatology, or Facial Plastic Surgery (ENT) nursing in a recognized journal, newsletter, or by a recognized publishing house. The format shall be an article, book chapter, book, or research paper. Authorship of an article, research paper, or book chapter equal contact hours. Authorship of a book equals 15 contact hours. A copy of the publication must be attached.

1. Column (1): list the title of the individual article, chapter, research paper, or book.
2. Column (2): list the title of the publication in which the article or chapter appeared.
3. Column (3): list the date of the publication.
4. Column (4): list a designation of the type of publication (article, research paper, chapter, or book).
5. Column (5): calculate the number of contact hours: each article, book chapter, research paper = 5 contact hours. Each book = 15 contact hours.
6. Attach documentation.

SAMPLE – FORM 3:

<table>
<thead>
<tr>
<th>Article, Chapter, Book Title</th>
<th>Title of publication (chapter or article) or publisher (of book)</th>
<th>Date of publication</th>
<th>Type of publication</th>
<th>Contact hour (5 hrs. for article or chapter, 15 hrs. for book)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Neuromodulators</td>
<td>PSN Journal</td>
<td>1/2014</td>
<td>Journal or Article</td>
<td>5 hrs.</td>
</tr>
</tbody>
</table>

Name: Subtotal this page: 10
FORM 4
CATEGORY D: INDEPENDENT STUDY

This category encompasses approved continuing education programs designed for self-study. Credit will be given according to the number of contact hours awarded to each program including journal continuing education articles are time-limited and must have been published/released within the 3-year period. All independent study programs are time-limited. A copy of the certificate awarded must be attached to this form. List each home study program as indicated below.

1. Column (1): list the title of the program.
2. Column (2): list the date the program was completed.
3. Column (3): list the accrediting body or approval board.
4. Column (4): designate the type of program.
5. Column (5): record the number of contact hours awarded as documented on the program’s continuing education certificate. Number should reflect the same number.
6. Add the total hours for this category and record in the subtotal area.
7. Attach documentation.

SAMPLE – FORM 4:

<table>
<thead>
<tr>
<th>Column (1)</th>
<th>Column (2)</th>
<th>Column (3)</th>
<th>Column (4)</th>
<th>Column (5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title of Program</td>
<td>Date &amp; Year Of Program</td>
<td>Accrediting Body or Approval Board</td>
<td>Type of program (Journal) article audio conference, etc.)</td>
<td>Number of approved contact hours</td>
</tr>
<tr>
<td>Complications Case Study</td>
<td>12/2014</td>
<td>ASPSN</td>
<td>PSN Journal article</td>
<td>1.5</td>
</tr>
</tbody>
</table>

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This group encompasses programs that address a broad area of health care, general nursing, and continuing education activities planned to meet the individual nurse’s potential for professional growth. A copy of the certificate which details the number of nursing contact hours awarded must be submitted as documentation of attendance.

1. Column (1): list the title of the program.
2. Column (2): list the date of the program.
3. Column (3): list the accrediting body or approval board.
4. Column (4): list the location of the program.
5. Column (5): record the number of contact hours awarded as documented on the certificate received.
6. Total the number of contact hours for on each page in the subtotal area.
7. Attach documentation.

**SAMPLE – FORM 5:**

<table>
<thead>
<tr>
<th>(1) Title of Program</th>
<th>(2) Date &amp; Year Of Program</th>
<th>(3) Accrediting Body or Approval Board</th>
<th>(4) Type of program (Journal) article audio conference, etc.)</th>
<th>(5) Number of approved contact hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Complications Case Study</td>
<td>12/9/2014</td>
<td>ASPSN</td>
<td>Journal CE article</td>
<td>1.5</td>
</tr>
</tbody>
</table>

Name:   

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THE FOLLOWING PAGES CONTAIN THE ACTUAL RECERTIFICATION APPLICATION

THESE PAGES ARE TO BE REMOVED FROM THE BOOKLET

RETURN ONLY THE FOLLOWING PORTION OF THE BOOKLET
Application for Recertification by Continuing Education Credit for Certified Aesthetic Nurse Specialist

Please print or type all information requested.

1. Full Name: ________________________________________________________________

2. Name as it should appear on your certificate: __________________________________

3. Expiration of current certification: ________/_______

4. Mailing Address:

   ________________________________________________________________
   ________________________________________________________________

5. Phone: (____) ________ (____) ________

   Home (area code) Number  Work (area code) Number

6. Email: ______________________________________________________________

7. RN License State _______________________________________________________

   NOTE: Applicant must hold a current full and unrestricted Registered Nurse license in the U.S. or its territories

8. Years of experience as RN in one of the core specialties: _________________

9. Are you currently employed as an RN in one of the four core specialties of Plastic/Aesthetic Surgery, Ophthalmology, Dermatology, or Facial Plastic Surgery (ENT)?

   YES ☐  NO ☐

   During your work experience, did you work at least 1,500 hours total under the direct supervision of a Board Certified physician within one of the four core specialties of Plastic/Aesthetic Surgery, Ophthalmology, Dermatology, or Facial Plastic Surgery (ENT)?

   YES ☐  NO ☐

10. Check the appropriate current nursing field:

    (check all that apply)

    ☐ (1) Lasers/Light Based Therapies  ☐ (3) Skin Care  ☐ (5) Plastic/Aesthetic Surgery
    ☐ (2) Dermal Fillers  ☐ (4) Neuromodulators  ☐ (6) Other (Specify)

    Check the appropriate practice setting:

    ☐ (1) MedSpa  ☐ (3) Outpatient Clinic  ☐ (5) Education/Training
    ☐ (2) Hospital  ☐ (4) Physician’s Office  ☐ (6) Other (Specify) _____

11. Check the appropriate fee and submit payment with this application:

    ☐ $150 ASPSN Member  ☐ $225 Non-member
**Form 1**

**Category A: Core Specialty Nursing Programs**

Minimum of 30 credits required for recertification

<table>
<thead>
<tr>
<th>(1) Title of Program</th>
<th>(2) Date of Program</th>
<th>(3) Accrediting Body or Approval Board</th>
<th>(4) Location</th>
<th>(5) Number of Approved Contact Hours</th>
<th>(6) Safety Credit?</th>
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**ATTACH DOCUMENTATION**
# FORM 2
## CATEGORY B: ACADEMIC COURSES

<table>
<thead>
<tr>
<th>(1)</th>
<th>(2)</th>
<th>(3)</th>
<th>(4)</th>
<th>(5)</th>
<th>(6)</th>
<th>(7)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Course Title</td>
<td>Institution</td>
<td>Date Completed</td>
<td># of credit hours</td>
<td>Worth x 15 for each semester hr. X 10 per quarter hr.</td>
<td>Total Hours</td>
<td>Safety Credit?</td>
</tr>
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ATTACH DOCUMENTATION
FORM 3  
CATEGORY C: PROFESSIONAL PUBLICATIONS  
(Articles You Have Written)

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<td>Type of Publication</td>
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ATTACH DOCUMENTATION
## FORM 4
**CATEGORY D: INDEPENDENT STUDY**

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<th>(4) Type of Program (Journal, article, etc.)</th>
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ATTACH DOCUMENTATION
Enter the total number of contact hours for:

FORM 1: _____
FORM 2: _____
FORM 3: _____
FORM 4: _____
FORM 5: _____
TOTAL: _____

I hereby apply for renewal of certification and verify that all information is correct. The renewal fee is attached. Please make checks or money orders payable to the Plastic Surgical Nursing Certification Board [PSNCB]. Credit cards are not accepted.

Signature of Candidate__________________________________________________________

Date____________________________

Attach a Copy of Current Registered Nursing License (required)

Number_________________________ State_________________________

To be completed by your Supervising Physician within one of the four core specialties:

________________________________________ is/has been employed in one of the four core specialties as identified in the CANS eligibility requirement for a minimum of 1,500 at least three years.

I further attest that I am a Board Certified Physician in one of the following core specialties:

☐ Plastic/Aesthetic Surgery    ☐ Ophthalmology
☐ Dermatology                ☐ Facial Plastic Surgery (ENT)

________________________________________

Supervising Physician (please print name)

________________________________________

(City)  (State)  (Zip)

Supervising Physician Signature __________________________ Date ____________

Please return completed application to:

PSNCB
500 Cummings Center, Suite 4550
Beverly, MA 01915