Continuing Education
The chart below indicates how many Continuing Education (CE) credits are required for your annual re-certification. The list that follows details the many possible ways of achieving CE credits (for even more information, please visit the Certification section of IAHCSMM.org). All CE credits must have been earned in the past year, since your last renewal. (Please do not submit your renewal to IAHCSMM until all necessary CE credits have been obtained.)

<table>
<thead>
<tr>
<th>Credit Type</th>
<th>CE Credits Required</th>
</tr>
</thead>
<tbody>
<tr>
<td>CRCST</td>
<td>12</td>
</tr>
<tr>
<td>CIS</td>
<td>6</td>
</tr>
<tr>
<td>CER</td>
<td>6</td>
</tr>
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<td>CHL</td>
<td>6</td>
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<tr>
<td>CCSVP</td>
<td>6</td>
</tr>
</tbody>
</table>

Continuing Education (CE) credits are determined by hours used for learning:
1 hour equals 1 CE credit, ½ hour equals ½ CE credit, ¼ hour equals ¼ CE credit

1 In-Services or Staff Meetings
- Attendance must be after your last renewal date
- Topics must directly relate to CS or job performance
- Submission of any in-services/staff meetings must be provided on either hospital letterhead or the back of this form, and include:
  - Your complete name
  - Your manager/supervisor/educator’s title, complete printed name & signature
  - The topic, duration & date of each in-service or staff meeting
  
  **Example:** Staff Meeting | Patient Safety Goals | 30 min (0.5 CE credits) | 6/28/2018

2 Self-Study Lesson Plans/Quizzes
- Quizzes must be taken after your last renewal date
- Your score on a quiz must be 70% or higher in order to receive credit
- Credit value is only given once per passing score of each quiz (quizzes can only be repeated if a failing score was previously received)
- Quizzes graded online through IAHCSMM.org are worth 2 CE credits each & are automatically documented in your account
- Quizzes graded by Purdue University are worth 2 CE credits each & a copy of your Purdue cumulative transcript must be submitted
- Quizzes graded by your supervisor/educator are worth 1 CE credit each & require you to submit a copy of the quiz, which must include: your complete name, your supervisor/educator’s title, complete name & signature, and your score
- Pre-Approved, non-IAHCSMM quizzes require you to submit a score sheet or certificate of completion from the quiz provider (vendor, magazine, alternative agency, etc) which must indicate the provider, topic, date of completion, CE value & your name

3 IAHCSMM Annual Conference; Chapter or Regional Meetings; Conferences or Seminars
- Attendance must be after your last renewal date
- Attendance at the IAHCSMM Annual Conference is automatically documented in your account; no additional paperwork is needed for CE credit
- All other conferences/seminars/meetings must be through a recognized professional organization & have IAHCSMM pre-approved CE credit; a Certificate of Attendance must be submitted to IAHCSMM & include the event’s title & date(s), your name, and the CE credits achieved

4 Technical, Community, or Secondary College Courses
- Course completion must be after your last renewal date
- Course must relate directly to knowledge that can be applied to CS or job performance
- Successful completion of a course is worth 6 CE credits
- At least 6 weeks prior to your renewal date you must submit the following:
  - A copy of the course description from the institution’s catalog or a copy of the course syllabus or learning objectives
  - A copy of your final grade transcripts (must indicate name & location of school, topic studied, dates attended, length of course, and proof of passing the course with a C or better)

Certification & Membership Documents
In order to provide added security, and meet the standards of accreditation, your certificate is your primary certification verification document. Upon renewing you will receive a new certificate every year, for each of your IAHCSMM certifications. Wallet size membership cards are issued to those who opt to continue their membership. The card will indicate your membership status, account ID#, and renewal date, but will not indicate any certifications held.

Certification Grace Period
If your complete renewal (both your re-certification fee and all CE credits) is not received by your expiration date, your certification(s) will be suspended. You will then have 6 weeks in which to submit all past-due fees and CE credits. During this suspension period you are not considered certified and cannot use the title of CRCST, CIS, CER, CHL, CCSVP or any other designations you may hold. If your complete renewal is not received by the end of this 6 week grace period your certification(s) will be revoked. No further extensions will be available. At that point you would be required to test in order to re-obtain any and all certifications.

To avoid having your certification(s) suspended, or possibly revoked, IAHCSMM strongly encourages you to renew prior to your expiration date.
**In-Service/Staff Meeting Submission Form**

1 hour equals 1 CE credit, ½ hour equals ½ CE credit

*Revised Jan 2019*

**Please Remember**

In-service and/or staff meeting attendance must occur within the past year, since your last renewal date, and must directly relate to CS or job performance. Documentation must be provided on either this form or on hospital letterhead and include (1) your complete name, (2) your direct supervisor/educator’s complete name, title & signature, and (3) the topic, duration & date of each in-service or staff meeting.

Additionally, **if you are applying any conferences or seminars toward your renewal, you must submit a copy of the Certificate(s) of Attendance.** Likewise, **if you have completed any non-IAHCSMM online vendor/nursing lessons, you must submit a copy of the Certificate(s) of Completion.**

**Examples:**

- **In-Service/Staff Meeting Topic:** Patient Safety Goals
  - Duration: ½ Hour
  - Date: 6/28/2018

- **In-Service/Staff Meeting Topic:** Staff Meeting
  - Specific Topic Required

- **In-Service/Staff Meeting Topic:** Too Short
  - Exact Date Required

**Certificant’s Name:** ____________________________________________

**In-Service/Staff Meeting Topic:** ____________________________________________

**Duration:** ____________ **Date:** ____________

**Certificant’s Id#:** ____________________________

**In-Service/Staff Meeting Topic:** ____________________________________________

**Duration:** ____________ **Date:** ____________

**Supervisor’s Printed Name:** ____________________________________________

**Supervisor’s Signature:** ____________________________________________

**Supervisor’s Work Title:** ____________________________________________

**Supervisor’s Phone:** ____________________________________________

**SUPERVISOR, PLEASE NOTE:** If the certificant is submitting a hospital transcript please provide your name, title & signature directly on the transcript.

**Total Amount of Continuing Education (CE) Credits from In-Services & Staff Meetings**