The National Alliance of Wound Care and Ostomy® (NAWCO®) is a non-profit organization that is dedicated to the advancement and promotion of excellence in wound care through the certification of wound care practitioners in the United States. The Certification Committee of the NAWCO® is the governing body of the WCC® credential. The aspiration of the NAWCO® is to unify wound care providers & practitioners from different educational backgrounds along the health care continuum in an effort to streamline the delivery of quality wound care.

The NAWCO® offers the "Wound Care Certification Examination" to measure the academic and technical competence of eligible candidates in the area of Skin and Wound Care Management above their basic licensure. The WCC® acts in accordance with legislation code and practice guidelines as determined by each respective professional state regulatory/licensing board. Therefore, WCC® certification alone does not determine a practitioner’s scope of practice.

NAWCO® does not discriminate against any individual on the basis of race, color, creed, age, sex, national origin, religion, disability, marital status, parental status, ancestry, sexual orientation, military discharge status, source of income or any other reason prohibited by law. Individuals applying for the examination will be judged solely on the published eligibility requirements.

This handbook contains information regarding the Wound Care Certification examination process of the National Alliance of Wound Care and Ostomy®.

The information contained in this Candidate Handbook is the property of National Alliance of Wound Care and Ostomy® and is provided to candidates who will be taking the certification examination. Copies of this handbook may be downloaded for single personal use, but no part of this handbook may be copied for preparing new works, distribution or for commercial use. NAWCO® does not provide permission for use of any part of the handbook.

To avoid problems in processing your application, it is important that you follow the guidelines outlined in this handbook and comply with our required deadlines. If you have any questions about the policies, procedures, or processing of your application after reading this handbook, please contact the National Alliance of Wound Care and Ostomy®. Additional copies of the handbook may be obtained from our website: www.nawccb.org.

WE RECOMMEND YOU KEEP THIS CANDIDATE HANDBOOK FOR REFERENCE THROUGHOUT THE APPLICATION AND EXAMINATION PROCESS. 12/2021

Checklist

- Read the Handbook cover to cover.
- Understand ALL National Alliance of Wound Care and Ostomy® policies.
- Understand the WCC® eligibility requirements and the application process.
- Read and agree to be bound by the NAWCO® Code of Ethics, Standards of Practice, Candidate Agreement and the policies and procedures outlined in this handbook.
- Fill out the application form in its entirety.
- Complete work experience verification section that documents work experience related to wound care.
- Sign your application form.
- Submit application/examination fees of $380.00, made payable to NAWCO®.
- Make a copy of your entire application packet for your records. (Your original records will not be returned to you.)
- Contact information
  - National Alliance of Wound Care and Ostomy®
  - 11817 Crestview Blvd
  - Kokomo, IN 46901 or fax to: 1-800-352-8339 or email: sr.admin@nawccb.org

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**Objectives of Certification**

The objective of the certification is to promote consumer protection and confer peer and public recognition to those individuals who prove proficient in their practice.

The objective of WCC certification is to provide assurance to the public by promoting the delivery of safe and effective skin and wound management by:

1. Recognizing formally those individuals who demonstrate proficiency and mastery of essential knowledge, expertise, and skills in skin and wound management above basic licensure.
2. Providing a standard of knowledge required for certification based upon clinical practice recommendations and other evidence-based practice and research in the field of skin and wound management.
3. Establishing and measuring the level of knowledge required for certification in skin and wound management.
4. Promoting continued professional growth in skin and wound management.

**Scope of Practice**

The National Alliance of Wound Care and Ostomy® provides certification to various disciplines in healthcare. The scope of practice for the Wound Care Certified (WCC®) health care professional is performed in accordance with legislation code and scope of practice as determined by each respective professional state regulatory board along with prospective employer mandated guidelines.

The scope of practice established by the National Alliance of Wound Care and Ostomy® provides each certified health care provider with an understanding of their role and responsibilities as a member of the interdisciplinary wound care team. The WCC® provides direct hands-on and/or consultative skin and wound management in all health care settings. As with any specialty, certification does not supersede state practice acts nor does it permit a clinician to practice beyond their individual knowledge or expertise.

**Advanced Practice Registered Nurse (APRN)**

Role: The APRN works independently or in collaboration with a physician (according to state practice acts and facility/agency policies) to lead the interdisciplinary wound care team to plan and provide care for the patient at risk of or with wound care needs. Responsibilities include but are not limited to:

- Abides by state practice acts, regulations, and laws established within the state/states of licensure, and facility or agency-based credentialing and privileging requirements to prescribe medications, order tests and treatments, and make necessary referrals.
- Independently or in collaboration with the physician comprehensively assesses and establishes wound diagnosis, prognosis, and wound care treatment.
- As a leader, provides oversight, assistance and guidance to other members of the interdisciplinary wound care team to establish and provide a comprehensive approach to wound management that includes all disciplines and promotes optimum outcomes.
- Provides bedside treatments to include conservative sharp debridement, when indicated and permitted by state practice acts and facility policy.
- Independently, or in collaboration with other interdisciplinary wound care team members, develops and implements wound prevention, skin management, and wound treatment programs and provides corresponding education to patients, family members/caregivers, and facility/agency staff.
- Collaborates with other wound care professionals to promote research and assess findings to establish updated, relevant approaches to improve wound prevention and wound care practices.
- Collaborates with other wound care team members to promote the facility or agency quality improvement program.
Registered Nurse (RN)
Role: The RN plays a key role in oversight of the patient at-risk of or with wound care needs. Responsibilities include but are not limited to:

a. Abides by state practice acts, regulations, and laws established within the state/states of licensure.

b. Develops and implements wound prevention, skin management, and wound treatment programs and provides corresponding education to patients, family members/caregivers, and facility/agency staff.

c. In conjunction with prescribing providers orders (physician, APRN, physician assistant), provides consultation and/or hands-on care for wound prevention or management. Performs comprehensive assessments and reassessments to determine the most appropriate and cost-effective use of wound management products and resources. Hands-on care may include conservative sharp debridement/chemical cauterization with a provider order, per facility guidelines and if allowed according to individual state practice act.

d. Delegates appropriate wound prevention and wound care actions to LPN/LVNs and unlicensed assistive personnel (e.g. health technicians, nursing assistants).

e. As an interdisciplinary wound care team member, collaborates to establish individualized, comprehensive care plans that promote wound prevention and healing.

f. Establishes, reevaluates and revises facility policies, procedures, and guidelines governing wound care, based on needs, evidenced-based trends, and industry changes.

g. Observes patient’s response and wound status, reporting any changes to the provider or supervising clinician, according to facility or agency guidelines.

h. Provides and reinforces education to patients, family members/caregivers, and facility/agency staff regarding preventative measures, interventions, and individualized patient treatment plans.

i. As a patient advocate, promotes facility/agency-based quality improvement that addresses wound prevention and the specialized complex needs of the wound care patient.

Licensed Practical Nurse/Licensed Vocational Nurse (LPN/LVN)
Role: Under the supervision, delegation, and guidance of the registered nurse or prescribing provider (e.g. physician, APRN, or physician’s assistant), the LPN/LVN provides the prescribed care to the patient at-risk of or with wound care needs. Responsibilities include but are not limited to:

a. Abides by state practice acts, regulations, and laws established within the state/states of licensure.

b. As an interdisciplinary wound care team member, provides input for care plan consideration that promotes wound prevention and healing.

c. Implements preventative care, monitors skin status, and performs wound treatments per orders in the individualized patient’s treatment plan.

d. Provides and reinforces education to patients, family members/caregivers, and facility/agency staff that is consistent with the established care plan for preventative measures, interventions, and individualized patient treatments.

e. Observes patient’s response and wound status, reporting any changes to the registered nurse or supervising clinician, according to facility or agency guidelines.

f. Contributes to the facility or agency quality improvement program, as assigned.

Physical Therapist (PT)/Occupational Therapist (OT)
Role: The PT and OT plays a key role in oversight of the patient at-risk of or with wound care needs while working under the guidance of a prescribing provider (e.g. physician, APR, Physician Assistant). Responsibilities include but are not limited to:

a. Abides by state practice acts, regulations, and laws established within the state/states of licensure.

b. As part of the interdisciplinary wound care team, contributes to the establishment and revision of the individualized, comprehensive care plan to promote wound prevention and healing.
healing, provides input for care plan consideration and implementation per established protocols.

c. In conjunction with prescribing providers orders (physician, APRN, physician assistant), provides consultation and/or hands-on care for wound prevention or management.

d. Delegates appropriate actions for adjunctive modalities specific to therapy administration, as part of an established individualized plan of care, to PT assistants and OT assistants.

e. Assesses, recommends, and provides adjunctive modalities specific to therapy administration within the state’s scope of practice for therapy clinicians.

f. Assesses and makes recommendations for support surface selection.

g. Provides and reinforces education, consistent with therapy-related aspects of the individualized care plan (e.g. proper positioning, mobility), to patients, family members/caregivers, and facility/agency staff.

h. Observes patient’s response and wound status, reporting any changes to the supervising clinician, according to facility or agency guidelines.

i. Contributes to the facility or agency quality improvement program, as assigned.

Physical Therapy Assistant (PTA)
Role: The PTA plays a key role in oversight of the patient at-risk of or with wound care needs while working under the supervision of a Physical Therapist (PT). Responsibilities include but are not limited to:

a. Abides by state practice acts, regulations, and laws established within the state/states of licensure.

b. As part of the interdisciplinary wound care team, contributes to the establishment and revision of the individualized, comprehensive care plan to promote wound prevention and healing, provides input for care plan consideration and implementation per established protocols.

c. In conjunction with prescribing provider’s orders (physician, APRN, physician assistant), and supervision of the PT, provides consultation and/or hands-on care for wound prevention or management.

d. Initiates appropriate actions for adjunctive modalities specific to therapy administration, as part of an established individualized plan of care, and as directed by the PT.

e. Assesses, recommends, and provides adjunctive modalities specific to therapy administration within the state’s scope of practice for PTAs.

f. Assesses and makes recommendations for support surface selection.

g. Provides and reinforces education, consistent with therapy-related aspects of the individualized care plan (e.g. proper positioning, mobility), to patients, family members/caregivers, and facility/agency staff.

h. Observes patient’s response and wound status, reporting any changes to the supervising clinician, according to facility or agency guidelines.

i. Contributes to the facility or agency quality improvement program, as assigned.

Occupational Therapy Assistant/Licensed (OTA)
Role: The OTA plays a key role in oversight of the patient at-risk of or with wound care needs while working under the supervision of an Occupational Therapist (OT). Responsibilities include but are not limited to:

a. Abides by state practice acts, regulations, and laws established within the state/states of licensure.

b. As part of the interdisciplinary wound care team, contributes to the establishment and revision of the individualized, comprehensive care plan to promote wound prevention and healing, provides input for care plan consideration and implementation per established protocols.

c. In conjunction with prescribing provider’s orders (physician, APRN, physician assistant), and supervision of the OT, provides consultation and/or hands-on care for wound prevention or management.

d. Initiates appropriate actions for adjunctive modalities specific to therapy administration,
as part of an established individualized plan of care, and as directed by the OT.

e. Assesses, recommends, and provides adjunctive modalities specific to therapy administration within the state’s scope of practice for OTAs.

f. Assesses and makes recommendations for support surface selection.

g. Provides and reinforces education, consistent with therapy-related aspects of the individualized care plan (e.g. proper positioning, mobility), to patients, family members/caregivers, and facility/agency staff.

h. Observes patient’s response and wound status, reporting any changes to the supervising clinician, according to facility or agency guidelines.

i. Contributes to the facility or agency quality improvement program, as assigned.

**Physician**

Role: The physician works independently or in collaboration with an APRN/PA to lead the interdisciplinary wound care team to plan and provide care for the patient at-risk of or with wound care needs. Responsibilities include but are not limited to:

a. Abides by state practice acts, regulations, and laws established within the state/states of licensure, and facility or agency-based credentialing and privileging requirements to provide patient care.

b. Independently or in collaboration with the APRN or PA, the physician establishes wound diagnosis, prognosis, and wound care treatment.

c. Orders appropriate referrals and tests, when indicated.

d. As a leader, provides oversight, assistance and guidance to other members of the interdisciplinary wound care team to establish a comprehensive approach to wound management that includes all disciplines and promotes optimal outcomes.

e. Collaborates with the APRN, PA, RN and other wound care team members to develop a wound prevention plan.

f. Provides bedside treatments to include conservative sharp debridement when needed.

g. Works with the interdisciplinary team to educate patients, family members/caregivers, and facility/agency staff regarding preventative measures, interventions, and individualized patient treatment plans.

h. Collaborates with other wound care professionals to promote research and assess findings to establish updated, relevant approaches to improve wound prevention and wound care practices.

i. Collaborates with other wound care team members to promote the facility or agency quality improvement program.

**Physician Assistant (PA)**

Role: The PA works independently or in collaboration with a physician (according to state practice acts and facility/agency policies) to lead the interdisciplinary wound care team to plan and provide care for the patient at risk of or with wound care needs. Responsibilities include but are not limited to:

a. Abides by state practice acts, regulations, and laws established within the state/states of licensure, and facility or agency-based credentialing and privileging requirements to prescribe medications, order tests and treatments, and make necessary referrals.

b. Independently or in collaboration with the physician comprehensively assesses and establishes wound diagnosis, prognosis, and wound care treatment.

c. As a leader, provides oversight, assistance and guidance to other members of the interdisciplinary wound care team to establish and provide a comprehensive approach to wound management that includes all disciplines and promotes optimum outcomes.

d. Provides bedside treatments to include conservative sharp debridement, when indicated and permitted by state practice acts and facility policy.

e. Independently, or in collaboration with other interdisciplinary wound care team members, develops and implements wound prevention, skin management, and wound treatment programs and provides corresponding
education to patients, family members/caregivers, and facility/agency staff.

f. Collaborates with other wound care professionals to promote research and assess findings to establish updated, relevant approaches to improve wound prevention and wound care practices.

g. Collaborates with other wound care team members to promote the facility or agency quality improvement program.

**Eligibility Requirements**

Applicants for the NAWCO® WCC® certification examination must meet all of the following criteria:

1. Hold an active unrestricted license as a Registered Nurse, Licensed Practical/Vocational Nurse, Nurse Practitioner, Physical Therapist, Physical Therapist Assistant, Occupational Therapist, Occupational Therapy Assistant, Doctor of Podiatric Medicine, Physician or Physician Assistant.

2. Must meet one education and one experience requirement.

**a. Education Requirement**

i. Option A: Successful graduate of skin and wound management training course. The course must be relevant to the WCC exam domains, a minimum of 20 hours of coursework, and may be delivered in person or online. NAWCO will require proof of completion of training by way of the Certificate of Completion awarded upon completion of the course or other official confirmation of completion from the education provider.

   OR

ii. Option B: Current active certification with Wound Ostomy Continence Nursing Certification Board (WOCNCB®) as a “CWCN®”, “CWON®” or “CWOCN®” or current active certification with American Board of Wound Management (ABWM®) as a “CWS®” or “CWSP®”. Experience Requirement

**b. Experience Requirement**

i. Option A: Have completed 120 hours of hands-on clinical training with approved preceptor. (Detailed program information is located in the Preceptor Manual, available at www.nawccb.org.)

   OR

   ii. Option B: Have completed two (2) years full-time or four (4) years part-time experience in an approved profession...
with ongoing, active involvement in the care of wound care patients or in management, education or research directly related to wound care (CDR®).

3. Applicants must agree to adhere to the NAWCO® Code of Ethics.

4. Completion of application and required supporting documentation.

5. Payment of required fees.

6. Receive passing score on the NAWCO® WCC® Examination.

**Fees**

$30.00 non-refundable processing fee is required with all application submissions and examination fees.

- Initial Certification: $350.00
- Recertification: $350.00
- Re-examination: $350.00
- Lapsed Credential Reinstatement: $350.00
- Lapsed Credential Late Fee: $300.00

Candidates can apply and pay online. If mailing payment, make check or money order payable to: National Alliance of Wound Care and Ostomy®.

If for any reason you are deemed ineligible to sit for the exam, the $350 examination fee will be refunded within two (2) weeks. **Refunds will not be issued for any reason once you are deemed eligible to sit for the exam.**

Initial eligibility is determined when applications are processed. The indicated intent to complete eligibility requirements on the application is considered. The approval for examination is only received once proof of the intended requirements have been submitted. Failure to complete any intended requirements does not constitute ineligibility nor is it grounds for refund.

**Code of Ethics**

The Code of Ethics of the National Alliance of Wound Care and Ostomy® serves as a guide if conduct for all WCC®, DWC®, OMS, NWCC™, AWCC®, WPC™, and LLE® practitioners. Their fundamental objectives are to enhance overall quality of life, dignity, and well-being of every individual needing skin and wound management services, and the treatment of wounds based upon each individual assessment.

WCC®, DWC®, OMS, NWCC™, AWCC®, WPC™ and LLE® practitioners have an obligation to act in ways that will merit the trust, confidence, and respect of healthcare professionals and the general public. Therefore, WCC®, DWC®, OMS, NWCC™, AWCC®, WPC™, and LLE® practitioners should embrace an exemplary system of professional values and ethics.

**Ethical Responsibilities**

“As a WCC®, DWC®, OMS, NWCC™, AWCC®, WPC™ and LLE®, partitioner, I shall within the scope of my authority”:

- Hold the safety and welfare of patients as my highest goal.
- Promote, advocate for and strive to protect the health, safety and rights of the patients in my care.
- Perform my work with honesty, diligence and responsibility.
- Execute my work according to scientific standards of objectivity, accuracy and integrity.
- Treat each patient in a caring and respectful fashion, mindful of individual differences and cultural and ethnic diversity.
- Protect the confidentiality of all information obtained in the course of professional service.
- Engage only in those services for which I have the necessary knowledge, skills and experience.
- Refer patients to other professionals when specialized knowledge or expertise is needed to serve patients fully or the patient is not effecting reasonable progress with healing.
- Participate on an interdisciplinary care team and contribute to decisions that affect the well-being of patients by drawing on my knowledge, values and experiences.
- Advocate to the public and health care professionals, the importance of risk assessment and prevention of alterations in skin integrity.
- Continue to advance my knowledge and understanding of current and emerging wound care practices through education and training.
• Treat colleagues with respect and represent their qualifications, views and obligations accurately and fairly.

• Respect patients’ rights to treatment with informed and voluntary consent.

• Respect patients’ rights to refuse, modify or terminate treatment regardless of prior consent.

• Avoid any interest, activity or influence that might be in conflict with my obligation to act in the best interests of patients or the profession.

• Refuse any gifts or benefits that are intended to influence a referral, decision or treatment and are purely for personal gain and not for the good of the patient.

• Contribute time and professional expertise to activities that promote skin, wound and/or ostomy management education to other healthcare professionals and consumers. These activities may include teaching, research, consultation, service, legislative testimony, presentations to the community and participation in professional organizations.

• Collaborate with other health care professionals and the public in promoting community, national and international efforts to meets needs of wound care and/or Ostomy patients.

Skin and Wound Management Certification Training Courses

“The NAWCO Certification Committee does not accredit, approve, endorse, or recommend any education or training programs and/or products designed or intended to prepare candidates for WCC Certification. The Committee has no involvement in the development or delivery of such programs or products.”

NAWCO offers the Certification Examinations to measure the academic and technical competence of eligible candidates in the area of wound, lymphedema, diabetic, ostomy, and nutritional management beyond their basic knowledge.

The course must be relevant to the WCC Exam domains, and can be delivered online or onsite. A single course must be a minimum of 20 hours of course work.

To receive credit for the contact hours, the educational program must be approved/accredited by either the state board governing your primary license (or any state board governing the professional license type under which you practice), the American Nurses Credentialing Center (ANCC®), American Physical Therapy Association, (APTA®), Accreditation Council for Continuing Medical Education (ACCME®), Council on Podiatric Medical Education (CPME®), American Medical Association (AMA®), or the Commission on Dietetic Registration (CDR®).

Credentials

After meeting all eligibility requirements and successful completion of the Certification examination, candidates may use the initials WCC®, Wound Care Certified, to designate their status in all correspondence and professional relations. Credentials are awarded for a five (5) year period following obtaining a passing score on the examination.

Proper Use of Credentials

The credential is typically used after the certificant’s name following the highest academic degrees and licensure (e.g., Mary Smith, Ph.D., WCC or Mary Smith, WCC).

The certification mark(s) may be used only as long as certification is valid. Upon expiration of credentialing term, a WCC® is required to recertify with the NAWCO® to maintain their credentials.

“WCC®” has been registered with the United States Patent and Trademark Office as the official certification mark of the National Alliance of Wound Care and Ostomy®.

Certificate of Certification

The NAWCO® will award an official numbered certificate to all candidates upon passing the NAWCO® certification examination, denoting status as WCC®, Wound Care Certified. The Certificate will be electronically downloadable and printable on the Certificant’s Login section of the NAWCO® website.

Credential of Certification Verification

To ensure public safety and ethical practices, the National Alliance of Wound Care and Ostomy® provides credential verification. Interested parties, including the general public, can verify WCC® using the credential verification search feature located at nawccb.org.
**Application Process**

**Education Pathway**

1. Complete the NAWCO® WCC® examination application found online at [nawccb.org](http://nawccb.org).

2. If you are attending a skin & wound management training course, you will incur additional fees payable to the education provider.

3. Once you successfully complete the NAWCO® approved course, you have two (2) years from the date of course completion or a total of four (4) examination attempts in which to pass the examination, whichever comes first. For further information on retesting, see our Retesting Policy on page 17.

4. If mailing information, submit all of the above along with $380 to:
   - National Alliance of Wound Care and Ostomy®
   - 11817 Crestview Blvd
   - Kokomo, IN 46901
   - Or fax to: 1-800-352-8339
   - Or email: sr.admin@nawccb.org

**Preceptor Pathway**

1. Complete the NAWCO® WCC® certification application online.

2. Successful graduate of a skin and wound management training course that meets eligibility criteria established by the Certification Committee.

3. Complete a minimum of 120 hours of hands-on clinical training with an NAWCO approved clinical preceptor after completion of the Wound Management Training Course.

4. Completion of application and required supporting documentation. Detailed program information is located in the Preceptor manual, available on our website at [www.nawccb.org](http://www.nawccb.org).

5. Submit all the above along with $380 to:
   - National Alliance of Wound Care and Ostomy®
   - 11817 Crestview Blvd
   - Kokomo, IN 46901
   - Or fax to: 1-800-352-8339
   - Or email: sr.admin@nawccb.org

**Application Key Points**

- Application forms should be submitted at least one month prior to requested examination date.
- Upon receipt of the completed application the certification office will review the information and determine the applicant’s eligibility to sit for the examination.
- An application is considered complete only if all information requested is complete, legible and accurate. Sufficient wound care experience must be provided with appropriate signatures on the application form.
- Within approximately 1-2 weeks of receipt of the application, a confirmation notice of eligibility with a unique authorization number will be sent to the candidate via email.
- Applicants who are determined to be ineligible to sit for the exam may appeal the decision by submitting a written letter of appeal to the Certification Committee within 30 days of the eligibility decision. Applicants may request a copy of the appeal policy from NAWCO®.

**Revocation of Certification**

NAWCO® may revoke individual WCC® Certification upon the occurrence of any one or more of the following events:

- Any restrictions such as revocation, suspension, probation to other sanctions of the professional license held by certificant.
- Violation of established Certification Committee rules, requirements, and/or policies.
- Violation of NAWCO Code of Ethics
- Conviction of a felony or other crime of moral turpitude under federal or state law in a matter related to the practice of, or qualifications for, wound care.
- Gross negligence, willful misconduct, or other unethical conduct in the performance of services for which the individual has achieved a NAWCO certification.
- Fraud, falsification, or misrepresentation in an initial application or renewal application for certification.
• Falsification of any material information requested by the Certification Committee.
• Misrepresentation of NAWCO certificant status.
• Cheating on any certification examination.
• Actual or potential adverse publicity, false advertising or other information, emanating from a third party or parties, about Applicant, the services provided by Applicant, or the use of the Marks by Applicant causes NAWCO®, in its sole judgment, to believe that the reputation of the NAWCO® will be adversely affected.

All certificates include a statement that the certificate is the sole property of the Committee and must be returned upon request. When disciplinary actions result in the revocation of an individual’s certification the Committee will require the return of any certificates issued.

**Appeals**
A candidate whose eligibility for initial certification or recertification has been denied may request reconsideration of the decision.

Within thirty (30) days from receipt of notice of a determination by the Certification Committee that a certificant violated the certification program policies and/or rules, the affected certificant may submit to the Certification Committee in writing a request for an appeal.

The appeal should include the decision that is being appealed, the basis for the appeal (including the reasons the candidate feels he or she is eligible for certification/recertification and how he or she complies with the published eligibility requirements), and any relevant and supporting documentation.

**Complaints & Discipline**
Complaints against a WCC® may be submitted by any individual or entity. Complaints should be reported to the Certification Committee in writing to either the NAWCO® office, or email to certmanager@nawccb.org, and should include the name of the person submitting the complaint, the name of the person the complaint is regarding along with other relevant identifying information, a detailed description of factual allegations supporting the charges, and any relevant supporting documentation. Information submitted during the complaint and investigation process is considered confidential and will be handled in accordance with the Certification Committee’s Confidentiality policy. Inquiries or submissions other than complaints may be reviewed and handled by the Certification Committee or its staff members at its discretion. The Disciplinary and Complaints Policy can be found at the end of this handbook.

**Recertification**
Certification is awarded for a five (5) year period following successful passing of the examination. Upon expiration of the credentialing term, a WCC® is required to recertify with the NAWCO® to maintain their credentials. A WCC® may recertify by examination, training, mentoring, or by continuing education. Details of the options will be emailed to candidates within one year of expiration of credential. They may also be accessed at the NAWCO® website: nawccb.org.

Please keep your email address updated with NAWCO® at all times.

**Reinstatement of Lapsed Credentials**
Reinstatement of a lapsed credential is not the same process as recertification. Requirements for reinstatement of lapsed WCC® credentials include all of the following criteria:

1. Active unrestricted license as a Registered Nurse, Licensed Practical/Vocational Nurse, Nurse Practitioner, Physical Therapist, Physical Therapist Assistant, Occupational Therapist, Occupational Therapy Assistant, Physician Assistant, or Physician.

2. Previous WCC® certification.

3. Active involvement in the care of wound care patients, or in management, education or research directly related to wound care for at least two (2) years full-time or four (4) years part-time within the past five (5) years.

4. Completion of application.

5. Payment of required fee. $380.00 for reinstatement of certification and $300.00 for late fee. (Total $680.00)

6. Choice of one of the following pathways:
   a. Successful graduate of skin and wound management training course that meets
criteria established by Certification Committee.

b. Receive passing score on examination within two (2) years or four (4) attempts (whichever comes first) of credential lapse*.

c. Complete the continuing education verification form. (A minimum of 60 contact hours per requirements must be documented). This form can be found at nawccb.org.

i. Copies of original “certificates of completion” forms from each continuing education program entered on your continuing education verification form may be requested.

ii. Certificate of completion forms must include your name, date, program title, provider, approved accrediting organization, and the number of contact hours awarded.

7. A WCC® that successfully meets the requirements of the chosen and accepted pathway, within 2 years of the credential lapsing, will maintain their original certification number.

8. A WCC® that does not successfully meet the requirements within 2 years of the credential lapsing, will receive a new certification number when all eligibility criteria have been met.

Final Ruling on Lapsed Credentials
1. Reinstatement attempt WITHIN 2 YEARS through Examination Pathway:

a. Unsuccessful: If examination pathway is chosen, after two years or four attempts, you will no longer be able to reinstate your lapsed credential.

b. You will be required to wait one year and meet all of the eligibility requirements again for certification under one of the existing initial certification options.

2. Reinstatement attempt AFTER 2 YEARS:

a. A credential that has lapsed beyond 2 years will not be reinstated.

b. If you fail to apply to reinstate your credential within two years of the credential expiration, you can apply immediately and must meet all eligibility requirements again for certification under one of the existing certification options.

c. A new certification number will be issued to successful candidates.

3. If you can demonstrate that you were falsely imprisoned, held hostage or otherwise held against your will, on active duty out of the US in the military, or in a coma, and as a result, unable to complete your recertification prior to credential lapse, then you may reinstate your credential via any of the recertification options available.

Examination Administration
The Wound Care Certification Examination is sponsored by the National Alliance of Wound Care and Ostomy®. The independent NAWCO® Certification Committee has been established to develop and maintain the WCC® certification program and all its essential activities.

Scoring the Examination
The performance standard, meaning the skills and abilities required to pass the WCC exam is the same. However, candidates may be administered different forms, or groups of items, of the WCC exam. Because items may differ in how hard or easy they are, the passing score, or the score required to pass the exam, may differ slightly from one form to the next.

Standard setting is the process by which the passing performance, or passing score, is determined on an exam. Standard setting for the WCC exam was completed by a group of subject matter experts (SMEs) selected to represent the field of wound care professionals. This group was guided through a formal process that included discussing the meaning of passing the exam in regard to the minimum knowledge skills and abilities required of a candidate and then translating that information into performance on the WCC exam.

As is common practice, the standard setting included one form of the WCC exam. To apply the passing score to subsequent forms of the exam, a statistical process called equating is employed.

Equating accounts for the differences in items and item difficulties on forms and makes adjustments.
such that the passing score on each form reflects equivalent performance on the exam. This process of equating is essential to the fairness of the WCC exam program as it provides equivalent expectations of “passing” performance over time and across forms of the exam.

Computerized versions of the examination are administered at computer-based testing facilities managed by Prometric, which has testing sites in the United States and other countries.

Live remote proctoring (LRP) administrations are a mode of test administration that allows approved candidates the ability to take the certification exam at a location and time of their choosing using the candidate’s own computer. The administration is monitored in real time by a remote proctor who observes the candidate and enforces the exam administration rules throughout the exam. LRP administrations are available to candidates who are able to meet technical/software and administration set up requirements. Technology requirements and a link to perform a system check are available on the NAWCO web site and should be reviewed closely prior to scheduling an exam appointment.

Proctored paper and pencil examinations are available in various scheduled locations around the US for those attending live classes. For current testing site locations please contact admin@nawccb.org.

Content of Examination

The certification exam is an objective, multiple-choice test consisting of up to 110 questions and is available in a computerized format or paper & pencil format with a total testing time of two (2) hours. Candidates are only scored on 100 questions for exams that consist of 110 questions, as 10 questions are not scored. Those 10 questions are used to create future exams.

The questions for the certification examination are prepared by the NAWCO® Certification Committee and teams of Subject Matter Experts (SMEs). The examination questions are written to assess cognitive levels of knowledge, comprehension, application and analysis related to skin and wound management.

The content for examination questions is based upon job practice analyses conducted to ensure the content is current, job-related and representative of the responsibilities of wound care practitioners. Each question is subjected to editing for grammar, bias, and technical adequacy by experts from the testing agency.

The passing point is determined by the Certification Committee relying on recommendations from standard setting procedures conducted by NAWCO®’s psychometric vendor, Alpine Testing Solutions. As stated above, the standard setting method applied by NAWCO® is a criterion-referenced process that involves a committee of subject matter experts making judgments about the difficulty of each exam question relative to a defined level of performance for the minimally qualified candidate.

The examination is weighted in the following breakdown:

- Patient and Wound Information 27%
- Plan of Care 40%
- Legal 14%
- Skin 19%

Rules for the Examination

1. A candidate who informs a Test Site Administrator that he or she does not wish to continue taking the examination being administered may not complete the examination later that day. If the candidate re-takes the examination at a later date, he or she must submit the reexamination fee.

2. Candidates who arrive late for the examination may not take the examination.

3. Disruptive behavior is cause for dismissal from the test site by the Test Site Administrator. No refunds will be given to candidates expelled for disruptive behavior.

4. No visitors are permitted in testing rooms (including children).

5. Candidates may not bring coats, book bags, luggage, etc. to their examination desks.

6. Only the individual named on the registration roster will be permitted to take the examination. No substitutions are allowed for registered candidates.

7. Candidates must present valid US Gov. issued picture identification that matches the name on the authorization at check-in. The name and photo on the identification must match the candidate and the authorization provided.
by NAWCO. Examples of acceptable identification include driver’s license, passport, military ID card, or other state-issued ID. Unacceptable identification includes an employment ID, student ID, etc. Candidates testing via LRP must present the valid identification to the web-cam for proctor validation.

8. Candidates testing via LRP will be required to conduct a room scan for unauthorized content as part of the check-in procedures with the test proctor. During this scan, the candidate must present the entire room, desk and behind the monitor/camera. The validation time spent by the proctor prior to the start of the exam does not count against the candidate’s allotted testing time.

9. Examination Misconduct - Before, during and after examination section, all examinees are expected to conduct themselves in an ethical manner and to avoid hampering the ability of fellow examinees around them to perform independently on the examination.

10. NAWCO and its testing partners maintain test administration and test security standards that are designed to ensure all candidates are provided the same opportunity to demonstrate their abilities. Before, during and after examination, all candidates are expected to conduct themselves in an ethical manner.

If the proctor observes the candidate violating the exam day rules, the candidate will be immediately notified. If irregular behavior continues after a warning from the proctor, is extreme, or indicates cheating, the exam session will be immediately terminated and the incident reported to the NAWCO.

Incidents of reported cheating will be investigated by the NAWCO®. If a candidate is found to have cheated, that candidate’s exam will not be scored, and the candidate will be barred from taking any further NAWCO® examinations indefinitely. Incidents of reported cheating will be investigated by the NAWCO®. If a candidate is found to have cheated, that candidate’s exam will not be scored, and the candidate will be barred from taking any further NAWCO® examinations indefinitely.

11. To take the examination via live-remote proctoring, candidates must download monitoring software as prompted by the testing vendor. The testing computer’s cache is deleted before testing and after testing. Candidate key strokes and behavior are monitored, and irregular behavior may result in termination of the exam or cancellation of exam scores. LRP administrations are continuously monitored by the proctor as well as recorded via audio and video for purposes of maintaining exam security and integrity.

12. Failure to Appear - If you fail to appear for the examination, you will forfeit the entire examination fee. Waivers of exam fee forfeiture will be considered in the case of medical emergencies.

13. Medical or Other Emergencies - Waivers of withdrawal penalties or exam fee forfeiture will be considered in the case of medical emergencies. Requests for such waivers must be made in writing and supported by appropriate physician documentation. Requests must be received within three weeks following the examination. They will be reviewed on a case-by-case basis.

14. Candidates are encouraged to wear a watch to the examination to pace themselves as the testing sites may not provide a clock.

15. Any cell phones brought into the testing center are to be turned off and placed under/away from the desk along with the candidate’s other personal items.

16. There are no scheduled breaks during the exam administration. On site and test center testers may use the restroom if needed by raising a hand to inform proctor. Only one tester may leave the room for a restroom break at a time. All belongings must remain. The testing booklet must be closed and remain in the room (for paper and pencil testing). The timer will not stop and additional time will not be added to accommodate the candidate’s break. Candidates testing via live-remote proctoring are not allowed to take a break. Taking an unauthorized break will result in termination of the exam, and no refunds will be granted. Candidates should plan accordingly.

Accommodation Procedures
An applicant may request a change in examination procedures or process due to disability, handicap, or other reason. The forms “Request for Special
Accommodations” and “Documentation of Disability Needs” (located toward the back of this handbook) must be completed and received at least six weeks prior to the requested examination date. The request must be specific as to the nature of the problem. The applicant is responsible for demonstrating that the request should be granted.

When extra time is an approved special testing accommodation for a candidate testing via LRP, this will be provided by the testing vendor. Other special testing accommodations, if authorized by NAWCO, must be provided by the candidate. In some instances, the specific testing accommodation requested may not be able to be granted due to the inherent nature of the LRP administration. In cases where an otherwise-approved special testing accommodation may not be available for a LRP administration, the candidate may take the exam in one of the other available administrations offered to WCC candidates.

NAWCO will reply to each candidate requesting a special testing accommodation with the decision.

Examination Results
Your exam results will indicate “pass” or “fail”. Pass/fail status is determined by the total number of items a candidate answers correctly (total raw score). Candidates who do not pass the exam receive information on their performance in each content domain area. A candidate’s performance on the examination is not compared to the performance of others taking the examination.

All score reports will include a “pass” or “fail” result. Score reports for unsuccessful candidates will also include:

- Candidate ID Number
- A table that identifies the name of each exam content area along with the approximate percentage of scored content related to this content area.
- The score in each content area (percentage score) is provided so that the candidate may better understand the relative strengths and weaknesses of their performance, and not to be used to determine Pass/Fail outcome.
- The information is provided as descriptive feedback only and not intended to predict future test performance. Decisions about candidate performance on the test (Pass/Fail) are based on the total score which is more reliable that any content area score.

Review of Examinations
For security reasons, examination materials are not available for review by the candidate. Neither the testing corporation nor the NAWCO® will discuss specific questions on any of the examinations. Comments about questions should be directed in writing to the NAWCO® Certification Committee. The NAWCO® will review comments relating to the exam but will not make a written response to comments.

Candidates who believe their examination results were improperly recorded or their examination graded inaccurately may request that their examination be hand scored. To request examination hand scoring, candidates should submit a written request complete with signature to NAWCO®. This request must be postmarked no later than 100 days after the test administration date.

Retesting Policy
Candidates who take the WCC® certification examination and are unsuccessful may retake the examination for a total of three (3) additional reexamination attempts within two (2) years of attending the skin and wound management course, or within two (2) years of the original examination date. After four (4) attempts, the candidate is required to wait for a period of one (1) year prior to taking the exam again.

Candidates who allow the two (2) year time limit to expire, but who do not exhaust the four (4) exam attempts, are not required to wait one (1) year prior to reapplying to take the exam again. However, all unsuccessful candidates must meet
both an Education and an Experience eligibility option in order to retake the examination.

Candidates are encouraged to self-study or attend a wound management-training course during this time. Unsuccessful candidates are not eligible for any refunds.

Reexamination
1. The NAWCO® is notified by the testing company of all non-passing scores.
2. The National Alliance of Wound Care and Ostomy® will contact you by email with instructions and an application for re-examination. The application can also be downloaded on the NAWCO® website at www.nawccb.org
3. Each reexamination application submitted must be accompanied by the $380 fee.
4. Reexamination application forms will be processed upon receipt.
5. Submit all of the above along with $380 to:
   National Alliance of Wound Care and Ostomy®
   11817 Crestview Blvd
   Kokomo, IN 46901
   Or fax to: 1-800-352-8339
   Or email: sr.admin@nawccb.org

Examination Disclosure
The examination and answer sheets remain solely the property of the NAWCO®. These materials are confidential and are not available for review by any person or agency for any reason.

Confidentiality
NAWCO® strictly protects the security of your personal information and honors your choices for its intended use.

We carefully protect your data from loss, misuse, unauthorized access or disclosure, alteration, or destruction. Though we make every effort to preserve user privacy, we may need to disclose personal information when required by law wherein we have a good-faith belief that such action is necessary to comply with a current judicial proceeding, a court order or legal process.

If we are required by law to release your confidential information, you will be notified by email at the address we have on file, unless prohibited by law. Otherwise, your personal information is never shared outside the company without your permission. Inside the company, data is stored in password-controlled servers with limited access. NAWCO® does not release information to anyone as to whether a particular candidate has applied or what their exam results were.

Anyone may obtain basic certification information including name, city, state, original certification date, current certification date, certification expiration date, and certification status by using the credential verification feature on the home page of our website: www.nawccb.org. If a certificant wishes NAWCO® to verify his or her certification status in writing for an employer, a request signed by the certificant must first be received by the NAWCO® office. Refer to NAWCO® privacy policy.

Candidates choosing to test via live remote proctoring are required to submit their photo identification to the webcam for identity verification, complete a room/environmental scan with the web cam to verify exam set up rules are adhered to, download monitoring software from the vendor to maintain security of the exam session, must be continuously monitored via audio and video throughout the exam session, and understand that the audio and video recordings will be stored for up to one year and may be used in the event of a possible or suspected test irregularity incident. Candidates will attest to understanding the requirements of the LRP administration prior to beginning the exam by completing a User Agreement. Computer Examination Procedures

Computer Based Testing Test Procedures
Scheduling Your Examination Appointment
- The NAWCO® will send you a notice of eligibility once you are approved for the exam. Following that, you will receive an email from Prometric with instructions on scheduling your computer-based testing examination on the Prometric website.
- A listing of available testing centers with detailed maps may be viewed at
  - https://www.isoqualitytesting.com/locations.aspx
• Make note of your unique NAWCO® eligibility authorization number that will be included with your NAWCO® notice of eligibility email. Without this number you cannot schedule your exam.

• To gain admission to the testing center:
  ○ Present a current US Government issued photo ID that includes your current name exactly as it is listed on your examination authorization.
  ○ Acceptable IDs include: driver’s license, valid passport, military ID card with photo, state issued photo ID. (Unacceptable ID’s include employment ID, student ID, etc.
  ○ Bring the PRINTED authorization letter emailed from Prometric. Displaying the letter on a phone or other device is not accepted, and exam admission will be denied.

Reschedule of Examination Appointments

If you need to cancel your examination appointment or reschedule to a different date, you must contact Prometric at 1-866-773-1114 no later than 30 days prior to your scheduled time. If your appointment falls either on a Monday or the day after a holiday, you must call the last business day prior to your appointment to reschedule. If you reschedule your appointment after 30 days, but before 5 days of your scheduled exam, Prometric may charge a change fee. Changes made within 5 days of a scheduled exam will be charged, unless the reason is excused by Prometric. It is up to the candidate to provide documentation directly to Prometric for any excused circumstances.

If a candidate fails to arrive for a scheduled appointment or cancels without giving the required notice, the candidate will incur a rescheduling fee of $125.

Exam Tutorial
Prior to attempting the examination, you will be provided with a brief tutorial on the system process. The time you use for this tutorial is NOT counted as part of your examination time. When you are comfortable with the computer testing process, you may quit the tutorial and begin the timed examination.

The tutorial is not Ostomy related and assists only in understanding how the computer-based training process works.

Following the tutorial, you will begin the actual examination.

Timed Examination
Two (2) hours are allotted to complete the examination. If you are unsure of a question, you can skip the question and go back to it as long as you have not exhausted the 2 hours allotted to take the exam.

Examination Results
After you finish the examination, you are asked to complete a short evaluation of the testing experience. Upon completion of the evaluation, you are instructed to report to the testing supervisor to receive your examination results.

Your exam report will indicate “pass” or “fail.” Successful candidates may begin using the “WCC®” credential immediately and will be able to print their WCC® Certification Certificate, wallet ID card and congratulations letter within 2 weeks of the examination date. No candidate exam results will be given by telephone or facsimilie for any reason. Score reports are released ONLY to the candidate at the testing center. Score reports are kept on file for five years.

Live Remote Proctored Procedures

Scheduling Your Examination Appointment
The NAWCO® will send you a notice of eligibility once you are approved for the exam. Following that, you will receive an email from Prometric with instructions for scheduling your LRP exam appointment with Prometric.

Pending available appointments, the exam may be taken 24/7 in a candidate’s own home or office.
Before scheduling an exam appointment, candidates must review the technology requirements and exam rules specific to LRP administration to ensure compatibility. Candidates must meet the following technology requirements in order to take the exam via LRP:

- **Device:** Desktop computer, laptop, or Chromebook required. Tablets and cell phones will not meet the requirements.
- **Operating System:** Windows 7 or later, Mac OS X 10.8 or later
- **Internet Connection:** .5 Mbps or greater
- **Hardware:** 2GB or more of RAM, Microphone, Speakers (wired allowed, Bluetooth headsets are not supported), Webcam
- **Web Browser:** most current version of Google Chrome
- **Screen Resolution:** 1024 x 768 is the minimum required

Candidates can perform their own systems check by going to [https://rpcandidate.prometric.com/](https://rpcandidate.prometric.com/) and clicking on “Check Now.”

Sitting for the WCC exam will involve connecting to a site outside of your network security settings and requires software download. If you are planning to take the exam at work, please speak to your IT Department to confirm the download is permitted.

**Reschedule of Examination Appointments**

If you need to cancel your examination appointment or reschedule to a different date, you must contact Prometric at 1-866-773-1114 no later than 30 days prior to your scheduled time. If your appointment falls either on a Monday or the day after a holiday, you must call the last business day prior to your appointment to reschedule. If you reschedule your appointment after 30 days, but before 5 days of your scheduled exam, Prometric may charge a change fee. Changes made within 5 days of a scheduled exam will be charged, unless the reason is excused by Prometric. It is up to the candidate to provide documentation directly to Prometric for any excused circumstances.

Candidates who arrive late for the examination may not take the examination. If a candidate fails to appear for the examination, the entire examination fee is forfeited.

**Security**

NAWCO and its testing partners maintain test administration and test security standards that are designed to ensure all candidates are provided the same opportunity to demonstrate their abilities. Before, during and after examination, all candidates are expected to conduct themselves in an ethical manner. LRP administrations are continuously monitored by the proctor and are recorded.

To take the examination via live-remote proctoring, candidates must download monitoring software as prompted by the testing vendor. The testing computer’s cache is deleted before testing and after testing. Candidate key strokes and behavior are monitored, and irregular behavior may result in termination of the exam or cancellation of exam scores. Candidates may not attempt to record, copy, or otherwise compromise exam content.

If the proctor observes the candidate violating the exam day rules, the candidate will be immediately notified. If irregular behavior continues after a warning from the proctor, is extreme, or indicates cheating, the exam session will be immediately terminated and the incident reported to the NAWCO.

Incidents of reported cheating will be investigated by the NAWCO. If a candidate is found to have cheated, that candidate’s exam will not be scored, and the candidate will be barred from taking any further NAWCO examinations indefinitely.

All LRP exam administrations are continuously monitored by the proctor and video and sound recorded. Recordings are available to NAWCO and are stored for 30 days by the test administration vendor. If the administration is flagged for suspected cheating, the recording is stored for one year.

**Exam Tutorial**

Prior to attempting the examination, you will be provided with a brief tutorial on the system process. The time you use for this tutorial is NOT counted as part of your examination time. When you are comfortable with the computer testing process, you may quit the tutorial and begin the timed examination.
The tutorial is not Ostomy related and assists only in understanding how the computer-based training process works.

Following the tutorial, you will begin the actual examination.

**Timed Examination**

Two (2) hours are allotted to complete the examination. If you are unsure of a question, you can skip the question and go back to it as long as you have not exhausted the 2 hours allotted to take the exam.

**Examination Results**

After you finish the examination, you are asked to complete a short evaluation of the testing experience. Upon completion of the evaluation, you will receive your exam results notification. Your exam report will indicate “pass” or “fail.”

Successful candidates may begin using the “WCC®” credential immediately and will be able to print their WCC® Certification Certificate, wallet ID card and congratulations letter within 2 weeks of the examination date. No candidate exam results will be given by telephone or facsimile for any reason. Score reports are released ONLY to the candidate at the testing center. Score reports are kept on file for five years.

**Paper & Pencil Test Procedures**

**Admission**

Approved candidates (See Application Process section) will be emailed a confirmation notice of eligibility prior to the examination date. If you elect to change your testing location (Example: Onsite to LRP) after that time, a $75 administrative fee will apply.

The candidate ID number is included on this approval with the candidate’s name and address. To gain admission to the testing center, you MUST present a US Government issued photo ID that matches the name on the approval. Acceptable ID’s include: driver’s license, valid passport, military ID card with photo, state issued photo ID. (Unacceptable forms are employment ID, student ID, etc.) ID must be current and include candidate’s current name and address.

**Reporting Time**

The time, date, and location of the paper and pencil examination are printed on the candidate’s course confirmation. All candidates should report to testing location at the reporting time for registration and check-in. Two (2) hours are allotted for candidates to complete the examination.

Candidates may wear a watch to help pace themselves if they so desire. Latecomers may be admitted to the examination at the discretion of the test location supervisor, as long as the test has not been started, but candidates will not be permitted to work beyond the time scheduled for completion of the examination.

**Answer Sheets**

Candidates will be required to enter examination answers onto a Scantron® answer form. Care should be taken to complete this form accurately to assure prompt reporting of test results. Fill in each ‘bubble’ completely and neatly. Answers that are not dark enough or that do not fill the circle completely may not scan properly. Erasures should be complete.

The Scantron answer form requires the use of a #2 pencil (provided at test site). Corresponding answers to examination questions are to be indicated on the answer form. No credit will be awarded for answers marked in the test book.

**Examination Cancelation**

NAWCO® will make every effort to provide the examination onsite when scheduled. In the event of inclement weather or low volume, NAWCO will at its discretion cancel the onsite examination administration. If the examination is canceled by NAWCO®, the candidate will have two options to take the examination. The candidate may wait until the exam is scheduled in the area again, or they may be processed to take the computerized exam at Prometric at no additional charge.

**Examination Results**

Examination results are sent via email within 7-10 business days of exam date. Email must be confirmed at testing site. Your exam results will indicate “pass” or “fail”. Hard copy results are not available. Within two (2) weeks of receiving your emailed examination results, you will be able to download and print your certification certificate, a printable wallet ID card and your official congratulations letter. No candidate exam results will be given by telephone or facsimile for any reason. Exam results are released ONLY to the candidate via the email address.
Preparation for the Examination
Examination questions are not based on any sole source for content. NAWCO® suggests that applicants closely review the examination content outline as a guideline for study preparation.

Review of current wound care journals, wound care text books, and reference materials will help prepare for the test.

References for Study
The following reference list may be helpful in preparing for the examination. This list does not attempt to include all the acceptable references available, nor is the examination based solely on these sources. The NAWCO® does not sponsor or endorse any one reference over another. Some of the references can be accessed online, while others are available at local book stores.


"Wound, Ostomy, and Continence Nursing Secrets,” by Catherine Milne, Lisa Q. Corbett, and Debra Duboc; Publisher Hanley & Belfus, 2002.


Advances in Skin & Wound Care Journal, Published by Lippincott, Williams, & Wilkins.

Ostomy/Wound Management Journal, Published by HMP Communications

Examination Content Blueprint

Domains and Objectives
Domain 1 - Patient and Wound Information
- 1.01 - Apply procedural concepts to obtain patient history
- 1.02 - Analyze wound characteristics
- 1.03 - Identify wound types, probable etiology, and stage or grade, if appropriate
- 1.04 - Determine indications of compromised wound healing

Domain 2 - Plan of Care
- 2.01 - Select appropriate wound care treatment options
- 2.02 - Verify the effectiveness of the plan of care and recommend appropriate revisions
- 2.03 - Determine steps for wound bed preparation and management
- 2.04 - Determine need for diagnostic testing and subsequent action
- 2.05 - Determine need for nutritional intervention
- 2.06 - Determine educational plan
- 2.07 - Determine preventative strategies to mitigate risk factors

Domain 3 - Legal
- 3.01 - Apply legal and institutional guidelines to ensure accurate documentation
- 3.02 - Apply standards of care and best practices
- 3.03 - Apply legal concepts to the wound care practice

Domain 4 - Skin
- 4.01 - Analyze skin integrity across patient lifespan
- 4.02 - Describe structures and functions of normal skin
- 4.03 - Differentiate treatment options for abnormal skin conditions
- 4.04 - Describe phases of wound healing
- 4.05 - Analyze the impact of circulatory and lymphatic systems on wound healing

Sample Examination Questions
1. Which of the following occurs in the inflammatory phase of wound healing?
   a. Granulation
   b. Fibroplasia
c. Angiogenesis  
d. Migration of neutrophils to the site

2. Which of the following phases of wound healing characterize chronic wounds?  
   a. Inflammatory and proliferative  
   b. Inflammatory and maturation  
   c. Hemostasis and proliferative  
   d. Hemostasis and maturation

3. Which of the following is an indication for using a foam dressing?  
   a. Scant serosanguinous drainage  
   b. Intact stable eschar on heel  
   c. Stage IV tunneling wound with moderate exudate  
   d. Hypergranulation tissue

4. Mr. Edwards, a non-ambulatory patient has a full thickness venous ulcer on his right medial calf. The ulcer bed is 100% red granulation tissue with significant drainage. Which of the following dressing materials would be the best choice for treatment?  
   a. Hydrogel dressing and Unna’s Boot  
   b. Alginate and multilayer elastic compression bandaging  
   c. Hydrocolloid and Unna’s Boot  
   d. Saline gauze and multilayer compression bandaging

5. Which of the following symptoms are associated with wound infection?  
   a. Increased exudate, necrotic tissue, odor, granulation  
   b. Odor and albumin 3.5 gm/dL, protein 7 gm/dL, BUN 18mg/dL  
   c. Necrotic tissue and WBC -10 K/ul  
   d. Quantitative culture of >100,000 bacteria per gram

6. Three wound complications are:  
   a. Infection, hemorrhage, approximation  
   b. Dehiscence, epithelialization, evisceration  
   c. Infection, dehiscence, evisceration  
   d. Contraction, abscess, fistula formation

7. A surgical wound closed with surgical staples is an example of:  
   a. Primary intention  
   b. Secondary intention  
   c. Tertiary intention  
   d. Artificial intention

8. Which of the following is a form of selective debridement?  
   a. Whirlpool  
   b. Sharp surgical  
   c. Wet-to-dry  
   d. Biosurgical

9. A 26-year-old woman who has had type 1 diabetes for 3 years. She is able to feel a monofilament on both of her feet; however her heels are very dry and cracked. You should advise her to:  
   a. Soak her feet in warm water every day for 30 minutes  
   b. Apply powder or cornstarch to her feet  
   c. Use lotion on the dry, cracked areas  
   d. Use a callus remover daily

10. You suspect your patient has osteomyelitis. What lab tests would help confirm this diagnosis?  
    a. Hgb A1c, prealbumin, CBC  
    b. CBC, BMP, albumin  
    c. Calcium level, CBC, PT/INR  
    d. CBC, ESR, C-reactive protein

Answers: 1(d), 2(a), 3(d), 4(b), 5(d), 6(c), 7(a), 8(d), 9(c), 10(d)
Disciplinary & Complaints Policy

Introduction
In order to maintain and enhance the credibility of the NAWCO certification programs, the Certification Committee has adopted the following procedures to allow individuals to bring complaints concerning the conduct of NAWCO Certificants to the Certification Committee.

In the event a certificant violates the NAWCO Certification Committee certification rules or the Code of Ethics, requirements, and/or policies the Certification Committee may reprimand or suspend the individual or may revoke certification.

Information regarding the complaint process will be available to the public via the NAWCO web site or other published documents. A complete copy of this policy will be made available to any individual upon request.

Grounds for Sanctions
The grounds for sanctions under these procedures may include, but are not necessarily limited to:

- Any restrictions such as revocation, suspension, probation to other sanctions of the professional license held by certificant.
- Violation of established Certification Committee rules, requirements, and/or policies.
- Violation of the NAWCO Code of Ethics.
- Conviction of a felony or other crime of moral turpitude under federal or state law in a matter related to the practice of, or qualifications for, wound care.
- Gross negligence, willful misconduct, or other unethical conduct in the performance of services for which the individual has achieved a NAWCO certification.
- Fraud, falsification, or misrepresentation in an initial application or renewal application for certification.
- Falsification of any material information requested by the Certification Committee.
- Misrepresentation of NAWCO certificant status.
- Cheating on any certification examination.

Actions taken under this policy do not constitute enforcement of the law, although referral to appropriate federal, state, or local government agencies may be made about the conduct of the certificant in appropriate situations. Individuals initially bringing complaints are not entitled to any relief or damages by virtue of this process, although they will receive notice of the actions taken.

Complaints

Complaint Submission
Complaints may be submitted by any individual or entity. Complaints should be reported to the Certification Committee in writing using the Complaint Communication Form. Form#: ADM116.1 and should include the name of the person submitting the complaint, the name of the person the complaint is regarding along with other relevant identifying information, a detailed description of factual allegations supporting the charges, and any relevant supporting documentation. Information submitted during the complaint and investigation process is considered confidential and will be handled in accordance with Committee’s Confidentiality policy. Inquiries or submissions other than complaints may be reviewed and handled by the Committee or its staff members at its discretion.

Preliminary Review
Upon receipt and preliminary review of a complaint involving the certification program the certification program staff member in consultation with the Committee Chair may conclude, in their sole discretion, that the submission:

- contains unreliable or insufficient information, or
- is patently frivolous or inconsequential.

In such cases, the certification program staff member and Committee Chair may determine that the submission does not constitute a valid and actionable complaint that would justify bringing it before the Certification Committee for investigation and a determination of whether there has been a violation of substantive requirements of the certification process. If so, the submission is disposed of by notice from the certification program staff member and the Certification Committee Chair to its submitter. All such preliminary dispositions by the Committee Chair, including complaints submitted...
anonymously, are reported to the Committee at its next meeting.

Preliminary review will be conducted within 15 business days of receipt of the complaint.

If a submission is deemed by the certification program staff member and Certification Committee Chair to be a valid and actionable complaint, the Committee Chair will see that written notice is provided to the certificant whose conduct has been called into question. The certificant whose conduct is at issue also will be given the opportunity to respond to the complaint. The Chair also will ensure that the individual submitting the complaint receives notice that the complaint is being reviewed by the Certification Committee.

Complaint Review
For each complaint that the Chair concludes is a valid and actionable complaint, the Certification Committee authorizes an investigation into its specific facts or circumstances to whatever extent is necessary in order to clarify, expand, or corroborate the information provided by the submitter.

Review Committee Appointment and Responsibilities
The Certification Committee Chair appoints a Review Committee of three or more individuals, who may or may not be members of the Certification Committee to investigate and make an appropriate determination with respect to each such valid and actionable complaint; the Review Committee may review one or more such complaints as determined by the Chair. The Review Committee initially determines whether it is appropriate to review the complaint under these Procedures or whether the matter should be referred to another entity engaged in the administration of law. The timeline for responses and for providing any additional information will be established by the Review Committee. The Review Committee may be assisted in the conduct of its investigation by other members of the Review Committee or by the Certification Committee and/or NAWCO staff or legal counsel. The Chair exercises general supervision over all investigations.

Both the individual submitting the complaint and the certificant who is the subject of the investigation (or his or her employer) may be contacted for additional information with respect to the complaint. The Review Committee, or the Committee on its behalf, may at its discretion contact such other individuals who may have knowledge of the facts and circumstances surrounding the complaint.

All investigations and deliberations of the Review Committee and the Certification Committee are conducted in confidence, with all written communications sealed and marked “Personal and Confidential,” and they are conducted objectively, without any indication of prejudgment. An investigation may be directed toward any aspect of a complaint which is relevant or potentially relevant. Formal hearings are not held, and the parties are not expected to be represented by counsel, although the Review Committee and Certification Committee may consult their own counsel.

Members of the Review Committee will be reimbursed for reasonable expenses incurred in connection with the activities of the Review Committee.

Certificants who are found to bring frivolous complaints against other certificants or NAWCO may be subject to disciplinary action by the Committee, up to and including revocation of certification.

Determination of Violation

Review Committee Recommendation
Upon completion of an investigation, the Review Committee recommends whether the Certification Committee should make a determination that there has been a violation of Certification Committee policies and rules. When the Review Committee recommends that the Certification Committee find a violation, the Review Committee also recommends imposition of an appropriate sanction. If the Review Committee so recommends, a proposed determination with a proposed sanction is prepared under the supervision of the Chair and is presented by a representative of the Review Committee to the Certification Committee along with the record of the Review Committee’s investigation.

Certification Committee Determination

Complaint Dismissal
If the Review Committee recommends against a determination that a violation has occurred, the complaint is dismissed with notice to the certificant, the certificant’s employer (if involved in the investigation), and the individual or entity
who submitted the complaint; a summary report is also made to the Certification Committee.

Determination of Violation

The Certification Committee reviews the recommendation of the Review Committee based upon the record of the investigation. The Certification Committee may accept, reject, or modify the Review Committee's recommendation, either with respect to the determination of a violation or the recommended sanction to be imposed. If the Certification Committee makes a determination that a violation has occurred, this determination and the imposition of a sanction are promulgated by written notice to the certificant, and to the individual submitting the complaint, if the submitter agrees in advance and in writing to maintain in confidence whatever portion of the information is not made public by the Committee.

All determinations by the Certification Committee that violations have occurred will be reported to the NAWCO Board of Directors by the Chair of the Certification Committee.

In certain circumstances, the Certification Committee may consider a recommendation from the Review Committee that the certificant who has violated the certification program policies or rules should be offered an opportunity to submit a written assurance that the conduct in question has been terminated and will not recur. The decision of the Review Committee to make such a recommendation and of the Certification Committee to accept it are within their respective discretionary powers. If such an offer is extended, the certificant at issue must submit the required written assurance within thirty days of receipt of the offer, and the assurance must be submitted in terms that are acceptable to the Certification Committee. If the Certification Committee accepts the assurance, notice is given to the certificant's employer and to the submitter of the complaint, so long as the submitter agrees in advance and in writing to maintain the information in confidence.

Sanctions

Any of the following sanctions may be imposed by the Committee upon a certificant whom the Certification Committee has determined to have violated the policies and rules of its certification program(s), although the sanction applied must reasonably relate to the nature and severity of the violation, focusing on reformation of the conduct of the member and deterrence of similar conduct by others:

- written reprimand to the certificant;
- suspension of the certificant for a designated period; or
- termination of the certificant's certification.

For sanctions that include suspension or termination, a summary of the final determination and the sanction with the certificant's name and date is published by the Certification Committee. This information will be published only after any appeal has either been considered or the appeal period has passed.

Reprimand in the form of a written notice from the Chair normally is sent to a certificant who has received his or her first substantiated complaint. Suspension normally is imposed on a certificant who has received two substantiated complaints. Termination normally is imposed on a certificant who has received two substantiated complaints within a two year period, or three or more substantiated complaints. The Certification Committee may at its discretion, however, impose any of the sanctions, if warranted, in specific cases.

Certificants who have been terminated will have their certification revoked and may not be considered for NAWCO certification in the future. If certification is revoked, any and all certificates or other materials requested by the Certification Committee must be returned promptly to the Committee.

Appeal

Request for Appeal

Within thirty (30) days from receipt of notice of a determination by the Certification Committee that a certificant violated the certification program policies and/or rules, the affected certificant may submit to the Certification Committee in writing a request for an appeal.

Appeal Committee

Within fourteen (14) days of the receipt of a request for appeal, the Chair of the Certification Committee will send written notification of receipt to the appellant. The Chair of the Certification Committee establishes an appellate body consisting of at least three, but not more than five, individuals. This Appeal Committee may review one or more appeals, upon request of the Chair. No current members of the Review Committee or the Certification Committee may
serve on the Appeal Committee; further, no one with any personal involvement or conflict of interest may serve on the Appeal Committee.

Members of the Appeal Committee may be reimbursed for reasonable expenses incurred in connection with the activities of the Committee.

Basis for Appeal
The Appeal Committee may only review whether the determination by the Certification Committee of a violation of the certification program policies and/or rules was inappropriate because of:

- material errors of fact, or
- failure of the Review Committee or the Certification Committee to conform to published criteria, policies, or procedures.

Appeal Procedure
Only facts and conditions up to and including the time of the Certification Committee’s determination as represented by facts known to the Certification Committee are considered during an appeal. The appeal will not include a hearing or any similar trial-type proceeding. Legal counsel is not expected to participate in the appeal process, unless requested by the appellant and approved by the Committee and the Appeal Committee. The Certification Committee and Appeal Committee may consult legal counsel.

The Appeal Committee conducts and completes the appeal within ninety (90) days after receipt of the request for an appeal. Written appellate submissions and any reply submissions may be made by authorized representatives of the member and of the Certification Committee.

Submissions are made according to whatever schedule is reasonably established by the Appeal Committee. The decision of the Appeal Committee either affirms or overrules the determination of the Certification Committee, but does not address a sanction imposed by the Certification Committee. The decision of the Appeal Committee, including a statement of the reasons for the decision, is reported to the Certification Committee and the NAWCO Board of Directors.

The Appeal Committee decision is binding upon the Certification Committee, the certificant who is subject to the termination, and all other persons.

Resignation
If a certificant who is the subject of a complaint voluntarily surrenders his or her certification(s) at any time during the pendency of a complaint under these Procedures, the complaint is dismissed without any further action by the Review Committee, the Certification Committee, or an Appeal Committee established after an appeal. The entire record is sealed and the individual may not reapply for certification. However, the Certification Committee may authorize the Chair to communicate the fact and date of resignation, and the fact and general nature of the complaint which was pending at the time of the resignation, to or at the request of a government entity engaged in the administration of law.

Similarly, in the event of such resignation, the certificant’s employer, if involved in the investigation, and the person or entity who submitted the complaint are notified of the fact and date of resignation and that Certification Committee has dismissed the complaint as a result.

Reconsideration of Adverse Eligibility & Recertification Decisions

Submitting a Request for Reconsideration
A candidate whose eligibility for initial certification or recertification has been denied may request reconsideration of the decision.

The appeal must be submitted in writing to the certification program staff member within 30 days of the initial decision of the Certification Committee. The appeal should include the decision that is being appealed, the basis for the appeal (including the reasons the candidate feels he or she is eligible for certification/recertification and how he or she complies with the published eligibility requirements), and any relevant and supporting documentation. https://www.nawccb.org/wp-content/uploads/2018/10/CC201.1-Request-for-Reconsideration-Eligibility-.pdf

Candidates testing at a computer based testing center or via live remote proctoring with complaints about the examination processes or their testing experience should utilize the comment area(s) directly following the exam.
administration. Candidates taking the exam by paper and pencil are instructed to write any complaints regarding the examination process or their testing experience on the back of the Scantron. Candidates may also direct complaints to the certification program staff member directly.

Candidates who fail the exam and believe irregular testing conditions, significant technical problems, or violation of Certification Committee policy were a contributing factor may file a request for reconsideration to the Committee. All reconsideration requests must be made in writing and postmarked or emailed no later than 30 days after the exam score report was issued. All requests must describe the suspected error or problem.

Reconsideration requests regarding the examination content outline are not accepted. However, feedback from candidates regarding the content of the exam or specific questions may be submitted via the comment screen during the exam administration, and this feedback will be reviewed and considered by SMEs as part of the ongoing item review and test development process. Candidates taking the exam via paper and pencil may submit feedback directly to the certification staff member.

The certification program staff member will review the reconsideration request and obtain additional information from the test administration vendor and/or proctor as needed (for example to confirm that a reported disruption did occur).

Examination Results Appeal
An Individual who believes his/her examination score was improperly recorded or his/her examination was graded inaccurately may request that the examination be hand-scored. To request examination hand scoring, the individual must complete a Request for Hand scoring NAWCO Examination Form#: CC201.2.

When a request for hand scoring is received, the certification program staff will be assigned to hand score the candidate’s examination. The hand scored results are final.

The Certification Committee may charge an administrative fee for hand scoring exams.

Review Process

Initial Review
The certification program staff member will review the request within 15 days. If the issue can be resolved at the staff level the staff member will make a determination and will notify the Committee of the result.

Review by the Certification Committee
If the issue cannot be resolved by the certification program staff member, he/she may refer the request to the Certification Committee. The request also will be referred to the Committee if the applicant does not accept a determination by the certification program staff member or if the applicant can provide additional information and/or documentation that was not available previously to the certification program staff member.

The Committee may review eligibility appeals and make determinations via teleconference meetings, via email, or other means as the committee deems appropriate as long as all committee members have the opportunity to participate in the review and decision. The Certification Committee will review, make a determination, and respond to appeal letters within 45 days after receipt of the appeal. All responses will be in writing via email. All decisions of the Certification Committee are final.
# WCC® Certification Options at a Glance

## #1 Eligible Licenses

Active unrestricted license: RN, LPN/LVN, NP, PA, PT, PTA, OT, OTA, MD, DO, DPM

<table>
<thead>
<tr>
<th>Eligibility Requirements</th>
<th>All Candidates</th>
</tr>
</thead>
<tbody>
<tr>
<td>#1 Eligible Licenses</td>
<td>✔</td>
</tr>
</tbody>
</table>

## #2 Eligibility Requirements:

(Candidates must meet 1 Education Requirement and 1 Experience Requirement)

### Education: (Must meet 1 of the options listed below)

<table>
<thead>
<tr>
<th>Education</th>
<th>All Candidates</th>
</tr>
</thead>
<tbody>
<tr>
<td>Option A: Graduation from a skin and wound management education course that meets certification committee criteria</td>
<td>✔</td>
</tr>
<tr>
<td>OR</td>
<td>✔</td>
</tr>
<tr>
<td>Option B: Current active CWCN, CWON, CWOCN (from the Wound Ostomy Continence Nursing Certification Board (WOCNCB), or CWS certification (from the American Board of Wound Management (ABWM))</td>
<td>✔</td>
</tr>
</tbody>
</table>

### Experience*: (Must meet 1 of the options listed below)

<table>
<thead>
<tr>
<th>Experience*</th>
<th>All Candidates</th>
</tr>
</thead>
<tbody>
<tr>
<td>Option A: Have completed 120 hours of hands-on clinical training with approved NAWCO preceptor</td>
<td>✔</td>
</tr>
<tr>
<td>OR</td>
<td>✔</td>
</tr>
<tr>
<td>Option B: Have completed two (2) years full-time or four (4) years part-time experience in an approved profession with ongoing, active involvement in the care of wound care patients or in management, education, or research directly related to wound care</td>
<td>✔</td>
</tr>
</tbody>
</table>

*EXPERIENCE: Full-time is considered 40 hours per week. Part-time is considered less than 40 hours per week.

## #3 Choose Your Options

<table>
<thead>
<tr>
<th>Education</th>
<th>Experience</th>
</tr>
</thead>
<tbody>
<tr>
<td>Course or Existing Certification</td>
<td>Preceptor or 2 years FT or 4 years PT</td>
</tr>
</tbody>
</table>

## #4 Additional Requirements

<table>
<thead>
<tr>
<th>Necessary for all Applicants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Applicants must agree to adhere to the NAWCO® Code of Ethics</td>
</tr>
<tr>
<td>Completion of application and required supporting documentation</td>
</tr>
<tr>
<td>Full payment of required fees</td>
</tr>
<tr>
<td>Passing score on WCC® Certification exam</td>
</tr>
</tbody>
</table>

The certification committee requires that one option from each requirement be met. For Example: If applying to take the examination, and you intend to take a course and have 2 years of full time experience, you would meet the requirements for Education by Option A and Experience by Option B.

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# WCC® Lapsed Credentials Options at a Glance

## #1 Eligibility

| WCC® Lapsed Certification less than 2 years after expiration date | ✔ | ✔ | ✔ |
| Current License as RN, LPN/LVN, NP, PA, PT, PTA, OT, OTA, MD, DO, DPM | ✔ | ✔ | ✔ |

## #2 Experience*: In the past 5 years

| At least 2 years full-time or 4 years part-time in wound care | ✔ | ✔ | ✔ |

*EXPERIENCE: (Full-time is considered 40 hours per week. Part-time is considered 20-39 hours per week.)

## #3 Requirements

| Successful completion of NAWCO® approved Skin and Wound Management Course | ✔ |
| Passing score on WCC® Certification exam | ✔ |
| 60 contact hours of continuing education related to wound or skin care management | ✔ |

## Additional Requirements

| Completion of reinstatement application and required supporting documentation | ✔ |
| Full payment of required fees | ✔ |

## #4 Choose your Option

| Select the option to reinstate your lapsed WCC® Certification | Training Option | Exam Option | Continuing Education Option |

## Final Rule on Lapsed Credential:

If the credential has lapsed more than two years from the expiration date, certificant will be processed as a new candidate and all eligibility criteria must be met including a passing score on the certification exam.
WCC® Certification Program-Candidate Agreement / Statement of Understanding

Purpose
National Alliance of Wound Care and Ostomy® (NAWCO®) is dedicated to the advancement and promotion of excellence in the delivery of wound care and skin management to the consumer.

NAWCO® has established a formally documented program under which individuals may take examinations to demonstrate competence relating to their proficiency in skin and wound management. This program includes the WCC® professional Wound Care Certified certification credentials. Successful participants in this program may become authorized to use the WCC® certification.

Definitions
Applicant means the individual who, in consideration for being allowed to take the certification examinations offered by NAWCO®, agreed to the terms of this NAWCO® Certification Program Candidate Agreement (“Agreement”).

Marks means the service mark and logo pertaining to the certification credential WCC® that the Applicant has completed.

Nondisclosure
Applicant shall not disclose to any third party or use any information concerning any certification examination of NAWCO®, including, but not limited to questions, form of questions, or answers. The foregoing obligations of nondisclosure and nonuse are binding on Applicant until such time, if ever, as the specific information covered by the obligations are made generally available to the public. The foregoing obligations of nondisclosure and nonuse shall survive termination or expiration of this agreement and all NAWCO® certification programs for any reason. Further, any reported incidence of disclosure of exam item content will be fully investigated by the NAWCO® as a Breach of Contract and Copyright Infringement and shall result in immediate termination of the individual’s WCC® Credential.

Certification
Applicant’s certification credential is based on Applicant’s successful completion of the required testing and Applicant’s compliance with this Agreement and the requirements described in the corresponding NAWCO® trademark guidelines, the terms of which are incorporated herein by reference and which may be changed from time to time by NAWCO® in its sole discretion. Applicant acknowledges that NAWCO® has the right to change at any time the requirements for obtaining or maintaining any certification and/or to discontinue any certification is NAWCO®’s sole discretion. Once certification is granted, Applicant may maintain Applicant’s certification by completing, within the time frame specified by NAWCO®, all continuing certification requirements, if any, that correspond with Applicant’s WCC® credential. Applicant is responsible for keeping Applicant informed of NAWCO®’s continuing certification requirements and for maintaining Applicant’s certification. If Applicant does not complete the continuing certification requirements within the time frame specified by NAWCO®, Applicant’s certification for that credential will be revoked without further notice, and all rights pertaining to that certification (including the right to use the applicable Marks) will terminate. Applicant retains Applicant’s certification status if Applicant leaves Applicant’s current employment and/or begins working with a new organization. However, Applicant may not transfer Applicant’s certification status to another person. Applicant agrees to make claims regarding certification only with respect to the scope for which the certification has been granted. Applicant agrees to discontinue use of the WCC® credential and promotion of the certification immediately upon expiration, suspension or withdrawal of certification.

Applicant further swears to notify the NAWCO® in writing within 10 business days if they learn they are no longer eligible to hold the WCC® credential, such as in the event of suspension, placement of restrictions upon or revocation of the primary professional license. In the event of revocation of the credential, the applicant agrees the printed copy of the certification certificate will be destroyed.

NOTWITHSTANDING ANYTHING IN THIS AGREEMENT TO THE CONTRARY, NAWCO® HAS THE RIGHT NOT TO GRANT, CONTINUE, OR RENEW APPLICANT’S CERTIFICATION IF NAWCO® REASONABLY DETERMINES THAT APPLICANT’S CERTIFICATION OR USE OF THE CORRESPONDING MARKS WILL ADVERSELY AFFECT THE NAWCO®. THIS
AGREEMENT APPLIES TO WCC® CERTIFICATION OBTAINED BY APPLICANT.

Grant and Consideration
Subject to the terms and conditions of this Agreement, NAWCO® grants to Applicant a non-exclusive, personal and nontransferable license to use the Marks solely in connection with providing services corresponding to the certification credential Applicant has achieved. Applicant may use the Marks on such promotional, display, and advertising materials as may, in Applicant’s reasonable judgment, promote the services corresponding to Applicant’s certification credential and which are permitted by the terms of the NAWCO®’s trademark guidelines corresponding to the certification credential. Applicant may not use the Marks for any purposes that are not directly related to the provision of the services corresponding to Applicant’s particular certification. Applicant may not use the Marks of WCC® unless Applicant has completed the certification requirements for the WCC® certification credential and has been notified by NAWCO® in writing that Applicant has achieved certification status of WCC®. NAWCO® reserves the right to revise the terms of this Agreement from time to time. In the event of a revision, Applicant’s signing or otherwise manifesting assent to a new agreement may be a condition of continued certification.

Term and Termination
Term-This Agreement will commence immediately upon Applicant’s acceptance of the terms and conditions of this Agreement prior to taking a certification examination. Either party may terminate this Agreement without cause by giving thirty (30) days or more prior written notice to the other party. Termination by NAWCO® - Without prejudice to any other rights it may have under this Agreement or in law, equity, or otherwise, NAWCO® may terminate this Agreement upon the occurrence of any one or more of the following events (“Default”):

1. If Applicant fails to perform any of Applicant’s obligations under this Agreement;
2. If any Government agency or court finds that any services as provided by Applicant are defective or improper in any way, manner or form; or
3. If actual or potential adverse publicity or other information, emanating from a third party or parties, about Applicant, the services provided by Applicant, or the use of the Marks by Applicant causes NAWCO®, in its sole judgment, to believe that NAWCO®’s reputation will be adversely affected. In the event of a Default, NAWCO® will give Applicant written notice of termination of this Agreement.

4. Applicant fails to meet recertification criteria prior to expiration date of their credentials.

In the event of a Default under (2) or (3) or above, NAWCO® may immediately terminate this Agreement with no period for correction and without further notice. In the event of a Default under (1) or (4) above, or at NAWCO®’s option under (2) or (3) above, Applicant will be given thirty (30) days from receipt of notice in which to correct any Default. If Applicant fails to correct the Default within the notice period, this Agreement will automatically terminate on the last day of the notice period without further notice.

Effect of Termination
Upon termination of this Agreement for any reason, Applicant will immediately cease all display, advertising, and other use of the Marks and cease all representations of current certification. Upon termination, all rights granted under this Agreement will immediately and automatically revert to NAWCO®.

Conduct of Business
Applicant shall: exercise its independent business judgment in rendering services to Applicant’s customers; avoid deceptive, misleading, or unethical practices which are or might be detrimental to NAWCO® or its products; and refrain from making any representations, warranties, or guarantees to customers on behalf of NAWCO®. Without limiting the foregoing, Applicant agrees to not misrepresent Applicant’s certification status or Applicant’s level of skill and knowledge related thereto.

Indemnification by Applicant
Applicant agrees to indemnify and hold NAWCO® harmless against any loss, liability, damage, cost or expense (including reasonable legal fees) arising out of any claims or suits made against NAWCO® by reason of Applicant’s performance or nonperformance under this Agreement; arising out of Applicant’s use of the Marks in any manner whatsoever except in the form expressly licensed

National Alliance of Wound Care and Ostomy® WCC® Candidate Examination Handbook © 2022
under this Agreement; and/or for any personal injury, product liability, or other claim arising from the promotion and/or provision of any products or services by Applicant. In the event NAWCO® seeks indemnification under this Section, NAWCO® will notify Applicant in writing of any claim or proceeding brought against it for which it seeks indemnification under this Agreement. In no event may Applicant enter into any third party agreements which would in any manner whatsoever affect the Rights of, or bind, NAWCO® in any manner, without the prior written consent of NAWCO®. This Section shall survive termination or expiration of this Agreement and all NAWCO® certification programs for any reason.

Disclaimer of Warranties; Limitation of Liabilities

NAWCO® makes, and Applicant receives, no warranties or conditions of any kind, express, implied or statutory, related to or arising in any way out of any certification examination, any NAWCO® certification program, or this Agreement. NAWCO® specifically disclaims any implied warranty of merchantability, fitness for a particular purpose and non-infringement of any third party rights. In no event shall NAWCO® be liable for indirect, consequential, or incidental damages (including damages for loss of profits, revenue, data, or use) arising out of this Agreement, any NAWCO® certification program, or incurred by any party, whether in an action in contract or tort, even if NAWCO® has been advised of the possibility of such damages. NAWCO®'s liability for damages relating to any certification examination, any NAWCO® certification program, or this Agreement shall in no event exceed the amount of application fees actually paid to NAWCO® by Applicant. Some jurisdictions do not allow limitations of the liability so certain of these limitations may not apply; however, they apply to the greatest extent permitted by law. Applicant acknowledges and agrees that NAWCO® has made no representation, warranty, or guarantee as to the benefits, if any, to be received by Applicant from third parties as a result of receiving certification. This Section shall survive termination or expiration of this Agreement and all NAWCO® certification programs for any reason.

General Provisions

Indiana law, excluding choice of law provisions, and the laws of the United States of America govern this Agreement. Failure to require compliance with a part of this Agreement is not a waiver of that part. If a court of competent jurisdiction finds any part of this Agreement unenforceable, that part is excluded, but the rest of this Agreement remains in full force and effect. Any attempt by Applicant to transfer or assign this Agreement or any rights hereunder is void. Applicant acknowledges and agrees that Applicant and NAWCO® are independent contractors and that Applicant will not represent Applicant as an agent or legal representative of NAWCO®. This Agreement and all documents incorporated herein by reference are the parties’ complete and exclusive statement relating to their subject matter. This Agreement will not be supplemented or modified by any course of dealing or usage of trade. Any modifications to this Agreement must be in writing and signed by both parties. Applicant agrees to comply, at Applicant’s own expense, with all statutes, regulations, rules, ordinances, and orders of any Governmental body, department, or agency which apply to or result from Applicant’s rights and obligations under this Agreement.
## WCC® Certification Application

ANY MISSING OR INCOMPLETE INFORMATION MAY CAUSE DELAY IN PROCESSING - (12/2021)

### 1. PRINT NAME (as it appears on your professional license)
- Last:
- First:
- MI:

### 2. MAILING ADDRESS
- Street:
- City:
- State/Province:
- Country:
- Zip/Postal Code:

### 3. DATE OF BIRTH
- Mobile Phone#:
- Evening Phone#:
- Personal Email: Required

### 4. APPLICATION TYPE:
- □ Initial Certification
- □ Lapsed Credential
- □ Preceptor

### 5. PROFESSIONAL TITLE (List all that apply, LPN, RN, PT, etc)
- License Type:
- License Number(s):
- State:

### 6. EDUCATION:
- (Diploma, BS, BSN, etc.)

### 7. PLACE OF EMPLOYMENT (Hospital, LTC, LTAC, etc.)

### 8. LICENSED EXPERIENCE/PRACTICE WOUND CARE
- □ < 2 years
- □ 2 to 5 years
- □ > 5 but < 10 years
- □ > 10 years

### 9. EDUCATION
- □ Online Course (Enter Course Title & Provider) Course:
- Title
- Provider

### 10. EXAMINATION METHOD:
- □ On Site following Course
- □ Computerized Version at PROMETRIC Testing Centers
- □ Live Remote Proctoring

### 11. ADA ACCOMMODATIONS
- □ YES, special arrangements will be necessary for me to complete the examination. (If yes, complete forms in handbook and submit to NAWCO)

### 12. APPLICATION-CERTIFICATION FEES
- □ Non-Refundable Processing Fee. $30.00
- Certification Fee… $3,500.00
- Lapsed Late Fee…$300.00
- BalanceDue: _______________

### 13. WORK EXPERIENCE VERIFICATION: All candidates must complete the following section(s) to document required wound care related work experience. Missing or incomplete information will cause delay in processing. Misrepresentation discovered pre or post certification may result in denial or revocation of credential.

- Employer:
- Employer Full Address: ____________________________________________________________
- Employment Dates From:_____/_____/______ to:_____/_____/______
- Supervising Name:______________________________ Supervisor Phone #: _______________
- Current Employer? □ Full Time □ Part Time

---

National Alliance of Wound Care and Ostomy® WCC® Candidate Examination Handbook © 2022
### WCC® Examination Application page 2

**Applicant Name:**

**Employer**

**Employer Full Address**

**Employment Dates From:** ___ / ___ / ___ to: ___ / ___ / ___

- [ ] Current Employer?
- [ ] Full Time
- [ ] Part Time

**Supervisor Name:** ______________________

**Supervisor Phone #:** ____________________

### 16. Agreement Authorization and Certification Information Release

I hereby affirm that I have been a ________ actively and directly involved in the delivery of wound care or in Management, Education or Research directly related to wound care for a: (Please check one)

- [ ] MINIMUM of two years full-time or four years part-time within the past five years.
- [ ] MINIMUM of four years full-time within the past five years. (Required for Experiential Option)

I further affirm that I am currently licensed to practice as a ______ (License Type) in the state of______.

I further affirm that no licensing authority has current disciplinary action pending against my license to practice in the aforementioned or any other state, and that my license to practice is not currently suspended, restricted or revoked by any state or jurisdiction.

I authorize the National Alliance of Wound Care and Ostomy® to make whatever inquires and investigations that it deems necessary to verify my credentials and professional standing. I further allow the National Alliance of Wound Care and Ostomy® to use information from my application and subsequent examination for the purpose of statistical analysis, provided my personal identification with that information has been deleted.

I hereby understand the National Alliance of Wound Care and Ostomy® will publish my name, professional license type, city, state, past and present certification status under the NAWCO® WCC® Certification Directory, in print and electronic versions of a worldwide directory of NAWCO® WCC® Certified Practitioners. I release the NAWCO®, its subsidiaries and affiliates and their employees, successors and assigns from any claims of damages for libel, slander, invasion of rights of privacy or publicity, and any other claim based on the publication or release of any Certification Information as specified in this Certification Information Release.

I agree to make claims regarding certification only with respect to the scope for which the certification has been granted. I agree to discontinue use of the WCC® credential and promotion of the certification immediately upon expiration, suspension or withdrawal of certification. I further swear to notify the NAWCO® in writing within 10 business days if I learn I am no longer eligible to hold the WCC® credential, such as in the event of suspension, placement of restrictions upon or revocation of the primary professional license. I understand that failure to notify the NAWCO® of any of the above listed disciplinary actions will result in revocation of certification and/or denial of recertification. In the event of revocation of the credential, I agree to destroy the Certificate of Certification.

By signing this agreement, I hereby swear and attest to all the contents of the Candidate Agreement/Statement of Understanding contained within the NAWCO® WCC® Candidate Handbook. As the applicant, I declare that the foregoing statements are true. I understand false information may be cause for denial or loss of the credential.

**Applicant’s Signature** ______________________

**Today’s Date** ______________________
15. PAYMENT: CREDIT CARD AUTHORIZATION FORM: Complete this section ONLY if paying by Credit Card

<table>
<thead>
<tr>
<th>Explanation of Fees:</th>
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<tr>
<td>☑ Non-Refundable Processing Fee. ..................$30.00</td>
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<tr>
<td>Certification Fee ..................................$350.00</td>
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<tr>
<td>Lapsed Late Fee (If Applicable) ....................$300.00</td>
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I, ________________________________, hereby authorize the National Alliance of Wound Care and Ostomy to charge my credit card account for the amount of $________________ for ____________________________.

- Visa
- MasterCard
- American Express (NO DISCOVER)

Credit Card Number______________________________ Expiration Date_____ / _____ Security Code* __________

*3-digit code found on signature strip at the end of a series of numbers

Credit Card Billing Address: (Address where cardholder receives bill)

Street__________________________________________

__________________________________________ City________ State________

Zip________________________ Email:________________ Telephone:__________

Cardholder Signature:__________________________ Date: __________________
Request for Special Examination Accommodations

Please complete/return this form and the “Documentation of Disability-Related Needs” on the next page at least six (6) weeks prior to test date, so your accommodation for testing can be processed efficiently. The information you provide and any documentation regarding your disability and your need for accommodation in testing will be considered strictly confidential and will not be shared with any outside source without your express written consent. If you have existing documentation of the same or similar accommodation provided for you in another test situation, you may submit such documentation instead of having the reverse side of the form completed by an appropriate professional.

Applicant Information:

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<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Middle Name</th>
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Special Accommodations

I request special accommodations for the ______ / ______ administration of the NAWCO® Credential examination.

Month Year

Please provide (check all that applies):

- Accessible testing site
- Special seating
- Large print test (available for paper & pencil proctored examination only)
- Circle answers in test booklet (available for paper & pencil proctored examination only)
- Extended testing time (available for computer examination at a PSI testing center - max 2 hours)
- Separate testing area (table only at PSI testing center)
- Other special accommodations (please specify)

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Comments:

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Signed: ___________________________ Date: ___________________________

Return this form with your examination application to:

National Alliance of Wound Care and Ostomy®
11817 Crestview Blvd
Kokomo, IN 46901
Or fax to: 1-800-352-8339
Or email: sr.admin@nawccb.org
Documentation of Disability-Related Needs

If you have a learning disability, a psychological disability, or other disability that requires an accommodation in testing, please have this section completed by an appropriate professional (education professional, doctor, psychologist, psychiatrist) to certify that your disabling condition requires the requested test accommodation. If you have existing documentation of the same or similar accommodation provided for you in another test situation, you may submit such documentation instead of completing the “Professional Documentation” portion of this form.

Professional Documentation

I have known _______________________________________ since _____ / _____ / _____

(Applicant)

in my capacity as _____________________________________________________________.

(Professional Title)

The applicant discussed with me the nature of the test to be administered. It is my opinion that because of this applicant’s disability described below, he/she should be accommodated by providing the special arrangements identified on the Special Examination Accommodation Form.

Comments:

_____________________________________________________________________________________________

_____________________________________________________________________________________________

_____________________________________________________________________________________________

Signed:

_________________________________________________________ Title:_____________________________

Printed Name: _____________________________________________________

Address:

_____________________________________________________________________________________________

_____________________________________________________________________________________________

Telephone Number: __________________________________ Email: ________________________________

License # (If applicable):_______________________________ Date: _________________________________

Return this form with your examination application and request for special examination accommodations to:

National Alliance of Wound Care and Ostomy®
11817 Crestview Blvd
Kokomo, IN 46901
Or fax to: 1-800-352-8339
Or email: sr.admin@nawccb.org
Continuing Education Verification Record

Instructions: Use this form to document your contact hours/continuing professional education units. Refer to Candidate Handbook for specific instructions for completion of this form.

1. Submitting for Experiential Pathway or Lapsed Credential - Include copies of Certificates of Completion

2. Submitting for Recertification - Complete form, certificate copies not required unless requested by NAWCO.

(Contact Hour Equivalencies: 1 CH is approximately 50 - 60 minutes of actual education time. 1 CH = 1 CPEU)

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Record of Contact Hours/Continuing Professional Education Units

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<th>Title/Subject Matter/Content</th>
<th>Date</th>
<th>Sponsor/Provider/Institution</th>
<th>Location</th>
<th>CH/CPEU</th>
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Total contact hours

I hereby acknowledge that the above stated activities and contact hours are valid and represent my continued education in the area of skin, wound and/or nutrition management if applicable. I also understand that my misrepresentation or falsification of these activities could lead to denial of my NAWCO® credential.

Signature: ___________________________ Date: ___________________________
NAWCO® Reexamination Application

1. PRINT NAME: (As listed on your Professional License) ALL ITEMS MUST BE COMPLETED TO BE ELIGIBLE FOR RE-EXAM
   LAST: ___________________________ FIRST: ___________________________ MIDDLE: ___________________________

2. MAILING ADDRESS: (Street, City, State & Zip Code)
   ____________________________________________________________ ______________________________________$

3. DAYTIME TELEPHONE #_________________________________________ 4. E-MAIL: ___________________________

5. SELECT CREDENTIAL FOR RE-EXAM: □ WCC □ DWC □ LLE □ OMS □ NWCC
   6. □ ADA Please contact me

7. PROFESSIONAL TITLE (LPN, RN, PT, etc) License Type:___________License#(s):___________________
   State:_________________ORIGINAL Issue Date:_________________ Expiration Date:_________________

8. APPLICATION-CERTIFICATION FEES:
   ☑ Non-Refundable Processing Fee & Examination Fee ...... $380.00
   □ 1st Retest □ 2nd Retest □ 3rd Retest

9. RETEST #: (Indicate attempt #)

10. CREDIT CARD AUTHORIZATION FORM: Complete this section ONLY if paying by Credit Card
    I, ___________________________, hereby authorize the National Alliance of Wound Care and Ostomy to charge my credit card account for the amount of $ ________ for ______________________.
    ☐ Visa ☐ MasterCard ☐ American Express (NO DISCOVER)
    Credit Card Number ___________________________ Expiration Date _______ / _______ Security Code* ___________________________
    *3-digit code found on signature strip at the end of a series of numbers
    Credit Card Billing Address: (Address where cardholder receives bill)
    Street ________________________________________________________
    City ________________________________________________________ State: ___________________________ Zip: ___________________________
    Email: ________________________________________________________ Telephone: ___________________________
    Cardholder Signature: ___________________________ Date: ___________________________

11. CERTIFICATION INFORMATION RELEASE (Directory Listing Inclusion) and AGREEMENT AUTHORIZATION
    I hereby authorize the National Alliance of Wound Care and Ostomy® its licensees, successors, and assigns (collectively NAWCO® right to publish and release my name, past and present certification status, and state/province (collectively “Certification Information”) under the NAWCO® Certification Directory in print and electronic versions of a worldwide directory of NAWCO® Certified Practitioners.
    I release the NAWCO® its subsidiaries and affiliates and their employees, successors, and assigns from any claims of damages for libel, slander, invasion of rights of privacy or publicity, and any other claim based on the publication or release of any Certification Information as specified in this Certification Information Release.
    I further affirm that I am currently licensed to practice as a(n) _______ in the state of _______. I further affirm that no licensing authority has current disciplinary action pending against my license to practice in the aforementioned or any other state, and that my license to practice is not currently suspended, restricted or revoked by any state or jurisdiction.
    I authorize the National Alliance of Wound Care and Ostomy® to make whatever inquiries and investigations deemed necessary to verify my credentials and professional standing. I further allow the National Alliance of Wound Care and Ostomy® to use information from my application and subsequent examination for the purpose of statistical analysis, provided my personal identification with that information has been deleted.
    I have read and understand all the information provided in the NAWCO® Candidate Handbook. I declare that the foregoing statements are true. I understand false information may be cause for denial or loss of the credential. I agree to make claims regarding certification only with respect to the scope for which the certification has been granted. I agree to discontinue use of the credential and promotion of the certification immediately upon expiration, suspension or withdrawal of certification. I further swear to notify the NAWCO® in writing within 10 business days if I learn I am no longer eligible to hold the credential, such as in the event of suspension, placement of restrictions upon or revocation of the primary professional license.
    By signing this agreement, I hereby swear and attest to all the contents of the Candidate Agreement/Statement of Understanding contained within the Candidate Handbook. I further agree to abide by the policies and procedures and the NAWCO® Code of Ethics as set forth in the NAWCO® Candidate Handbook and all conditions included in the NAWCO® Candidate agreement.

Applicant Signature ___________________________________________ Date: ___________________________
RETURN COMPLETED APPLICATION WITH FEES TO:

National Alliance of Wound Care and Ostomy®
11817 Crestview Blvd
Kokomo, IN 46901
Or fax to: 1-800-352-8339
Or email to: sr.admin@nawccb.org