



# WPC Candidate Examination Handbook

SEPTEMBER 2023

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 WCP™ credential.

The aspiration of the NAWCO is to unify wound care providers & practitioners from different educational and clinical backgrounds along the health care continuum in an effort to streamline the delivery of quality wound care. All candidates that become certified with NAWCO have a duty to treat patients according to the patient's desires, within the bounds of accepted treatment, and to protect the patient's confidentiality. Any NAWCO certified professional should perform all duties with professional responsibility, integrity, objectivity, due care, and with the patient's best interests in mind.

The NAWCO offers the "Wound Prevention Certified™ (WPC®) Certification Examination" to measure the academic and technical competence of eligible candidates in the area of Wound Prevention Management beyond their basic knowledge. The WPC credential is performed in accordance with legislation code and practice guidelines as determined by each respective professional state regulatory/licensing board. Therefore, WPC certification alone does not determine a clinician'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 Prevention 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](http://www.nawccb.org).

WE RECOMMEND YOU KEEP THIS CANDIDATE HANDBOOK FOR REFERENCE THROUGHOUT THE APPLICATION AND EXAMINATION PROCESS. 02/2023

## **Checklist**

- Read the Handbook cover to cover.
- Understand ALL National Alliance of Wound Care and Ostomy® policies.
- Understand the WPC® 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 \$280.00, 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: [support@nawccb.org](mailto:support@nawccb.org)

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## **The Purpose**

Proper wound care involves a team of professionals with various skills and levels of understanding. Rounding out the team, the CNA/MA/CCHA/LNA/PCT/PCA/EMT/CCP/Paramedic is an important and often forgotten member. Of all healthcare providers, these clinicians spend the greatest amount of their time at the bedside providing hands on care. The first to notice when a “red area” develops, when food intake is low, and when hydration is a problem. NAWCO sees the value of this very important team member and promotes empowerment of this clinician through continued education and certification.

Becoming certified allows you to enhance your professional skills, establish credibility with employers, and improve your career opportunities. You will likely become more confident performing your duties in healthcare settings, especially related to the area of wound care.

## **Objectives of WPC Certification**

The purpose of the Wound Prevention Certified (WPC) certification is to distinguish passing candidates amongst others in similar professional fields and enhancing the clinician’s skill in wound prevention and skin care. By passing the WPC® exam through NAWCO, the candidate will:

- Demonstrate their comprehension of skin management and wound prevention.
- Be formally recognized individuals who demonstrate proficiency and mastery of knowledge, expertise, and skills in wound prevention management above basic requirements.
- Provide a standard of knowledge required for certification based upon clinical practice, recommendations and other evidence based practice and research in wound prevention.
- Establish and measure the level of preventive knowledge required for certification in wound prevention management.
- Promote personal growth in prevention and management of skin and wounds.

## **Scope of Practice**

The role of the WPC is based upon expert evidence based clinical knowledge and skills

that are practiced in acute, outpatient, long-term care, and home care settings.

The focus of the WPC® is on high quality care to achieve optimum patient outcomes for healing as well as preventing wounds.

In order to assure appropriate and thorough wound care, a holistic comprehensive approach is utilized. All factors affecting healing, including considerations of systemic, psychosocial, and local factors are reviewed. The WPC® follows a plan of care, provides patient education, and utilizes prevention measures through continuing participation in the care of wound care patients and any related skin complications, appliance needs, positioning requirements, and psychosocial support.

Wound care management requires the skills of the interdisciplinary team that includes the WPC®, physician, nurse, physical therapist, occupational therapist, social worker, dietitian, and other health care disciplines or providers depending upon each individual patient assessment.

The WPC® scope of practice is performed in accordance with professional standards and job responsibilities.

- a. CNA/MA/CCHA/LNA/PCT/PCA/EMT/CCP/Paramedic duties are determined by individual states and it is up to the individual to ensure they are following state guidelines and not performing duties outside the scope of practice.
- b. CNA/MA/CCHA/LNA/PCT/PCA/EMT/CCP/Paramedic collaborates with other wound care team members to promote the facility or agency quality improvement program.
- c. Observes patient’s response to preventative measures and reports any changes to the charge nurse or supervising clinician according to agency or facility guidelines.
- d. Implements preventative care as ordered, monitors skin status, and provides direct care as established by the individualized plan of care.

## **Eligibility Requirements**

The WPC® certification is designed and intended solely for a CNA/MA/CCHA/LNA/PCT/PCA/CCP/EMT/Paramedic. Any individual who meets all of the described eligibility requirements set forth by NAWCO may take the exam. The certification is highly recommended to all non licensed clinicians involved in wound care. To be considered eligible to become Wound Prevention Certified (WPC) the candidate must meet each of the following criteria and provide any related documentation:

### **Experience:**

1. Possess one of the listed professional certifications/licenses: All certifications/licenses must be current, active, and in good standing.
  - a. Certified Home Healthcare Aide (CHHA)
  - b. Certified Medical Assistant (CMA)
  - c. Certified Nursing Assistant (CNA)
  - d. Licensed Nursing Assistant (LNA)
  - e. Medical Assistant (MA)
  - f. Personal Care Assistant (PCA)
  - g. Personal Care Technician (PCT)
  - h. Certified Clinical Perfusionist (CCP)
  - i. Emergency Medical Technician (EMT)
  - j. Paramedic

**OR**

2. Currently enrolled in a certification training program simultaneously with a skin and wound prevention management course. Successful candidates will be eligible to sit for the WPC examination when both training courses have been completed.

**AND**

### **Training:**

1. Successful completion of skin management and wound prevention course that is at least 14 hours in length. (All candidates regardless of experience must take a skin management and wound prevention course.)

### **Additional Requirements:**

1. Completion of application and required supporting documentation.
2. Payment of required fees.

3. Receive passing score on the NAWCO® WPC® Examination.

## **Ineligible Candidates**

Candidates will be ineligible to take the WPC exam if one of the following is true:

- Payment has not been received in full.
- The candidate does not have an acceptable healthcare certification/license in good standing.
- The candidate falsified any information on the application form.

## **Skin Management and Wound Prevention Training Course**

The Certification Committee provides criteria that must be met by acceptable courses.

- Approved courses must be relevant to the WPC Exam domains.
- The course can be delivered online or onsite.
- The course must be a minimum of 14 hours of course work.

If NAWCO deems a candidate ineligible to sit for the exam, the examination fee will be refunded to the candidate. The NAWCO application processing fee is non-refundable even if the candidate is ineligible to sit for the WPC examination.

## **Credentials**

Upon successful completion of the Certification examination, candidates may use the initials WPC®, Wound Prevention Certified, to designate their status. Credentials are awarded for a five (5) year period following obtaining a passing score on the examination.

Upon expiration of credentialing term, a WPC is required to recertify with the NAWCO® to maintain their credentials.

“WPC®” is the official certification mark of the Wound Prevention Certified sponsored by the National Alliance of Wound Care and Ostomy®.

## **Credential 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

WPC® using the credential verification search feature located at [nawccb.org](http://nawccb.org).

## Certificate of Certification

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

## Application Process

Initial (First Time) WPC® Certification

**Application.** The WPC® Certification Examination application is located in this booklet and online at [nawccb.org](http://nawccb.org).

1. Complete the NAWCO® WPC® examination application either online or via paper.
2. If you are attending a skin management and wound prevention training course, please keep in mind that separate fees will apply.
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 8.
4. Submit all of the above along with \$280 to:

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

- Within approximately 1-2 weeks of receipt of the Certification Examination 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®.

## Examination Administration

The Wound Prevention Certified 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 WPC®, certification program and all its essential activities.

**A passing score of 79% is required to become certified.**

Occasionally, NAWCO will offer paper/pencil exams. A candidate who chooses to attend an on-location course instead of taking the computerized program will be given the option to take a paper exam. The paper exam will cover the same material that is found on the computerized exams. Candidates will have one and one half hours (90 minutes) to complete the paper exams. The paper exams will be proctored by a NAWCO representative, and then sent immediately to NAWCO for scoring.

The WPC® examination is administered at computer based testing facilities managed by Prometric. Prometric has testing sites in the United States and other countries. Contact Prometric at 1-866-773-1114.

## Approved Fees

### Processing Fee\*

Non-refundable with each application submission      \$ 30.00

### Examination Fee

|                           |          |
|---------------------------|----------|
| Initial Certification     | \$250.00 |
| Recertification           | \$250.00 |
| Re-examination            | \$250.00 |
| Re-Instatement (Late Fee) | \$200.00 |

All certification and examination fees are payable to: National Alliance of Wound Care and

Ostomy®.

If for any reason you are deemed ineligible to sit for the exam, the \$250 examination fee will be refunded within two weeks

\*Processing fee is non-refundable.

## **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 retake 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.
8. 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.
9. 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.
10. 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.

11. 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.
12. Candidates are encouraged to wear a watch to the examination to pace themselves as the testing sites may not provide a clock.
13. 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.

### **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.

### **Examination Results**

Your exam results will indicate "pass" or "fail". Examination results are sent via email directly to the candidate within 7-10 business days of the exam date. The candidate must provide an email address on the examination application. 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.

Candidates taking the computerized version of the examination will receive their results immediately following the completion of the exam and will be

able to download their documents online within two (2) weeks of their exam date. Exam results are kept on file for five years.

## Review of Examinations

For security reasons, examination materials are not available for review. 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 complete a signature form available from the NAWCO® website. This request must be postmarked no later than 100 days after the test administration date.

## 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.

## Retesting Policy

Candidates who take the Wound Prevention Certified Examination and are unsuccessful will receive instructions and a re-examination application by email from the National Alliance of Wound Care and Ostomy®.

Unsuccessful candidates can retake the examination for a total of three (3) additional re-examination attempts within two (2) years of attending a skin management and wound prevention course. After four (4) attempts, you are 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 all eligibility requirements in order to retake the examination. Candidates are encouraged to self-study or attend a skin and 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](http://www.nawccb.org)
3. Each re-examination application submitted must be accompanied by the \$280 fee.
4. Re-examination application forms should be submitted at least one month prior to requested examination date.
5. Submit all of the above along with \$280 to:  
National Alliance of Wound Care and Ostomy®  
11817 Crestview Blvd  
Kokomo, IN 46901  
Or fax to: 1-800-352-8339  
Or email: [admin@nawccb.org](mailto:admin@nawccb.org)

## 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](http://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.](#)

## **Computer Examination**

### **Procedures**

#### **Scheduling Your Examination**

##### **Appointment**

- The NAWCO® will email 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.)
  - **The PRINTED confirmation letter from Prometric. Showing the email on a phone or device is not accepted.**

##### **Accommodation Procedures**

An applicant may request special accommodation directly through NAWCO®. Please refer to the NAWCO® Candidate Handbook for Information.

## **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 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.

### **Security**

NAWCO® and Prometric maintain test administration and test security standards that are designed to assure that all candidates are provided the same opportunity to demonstrate their abilities. The assessment center is continuously monitored by surveillance equipment for security purposes.

### **Practice Test**

Prior to attempting the examination, you will be given the opportunity to practice taking a test on the computer. The time you use for this practice test is NOT counted as part of your examination time. When you are comfortable with the computer testing process, you may quit the practice test and begin the timed examination.

The practice test is not wound related and assists only in understanding how the computer-based training process works.

### **Timed Examination**

Following the practice test, you will begin the actual examination. Before beginning, instructions for taking the examination are provided on-screen. Ninety minutes 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 90 minutes allotted to take the exam.

### **Examination Results**

After you finish the examination, you are asked to complete a short evaluation of your 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 “WPC®” credential immediately and will be able to print their WPC® Certification Certificate, wallet ID card and congratulations letter within two (2) weeks of the examination date. No candidate exam results will be given by telephone or facsimile for any reason. Exam results are released ONLY to the candidate at the testing center. Exam results are kept on file for five years.

## **Live Remote Proctored 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 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/> and clicking on “Check Now.”
- LRP exams should ONLY be taken from a personal computer with a private internet connection. While some company computers/networks may pass the initial system checks, the actual exams will not launch from these devices or networks. **You will be responsible for a \$125 rescheduling fee if you attempt an examination from a corporate device or network that can’t be administered.**

### **Reschedule of Examination**

#### **Appointments**

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.

### **Timed Examination**

Before beginning, instructions for taking the examination are provided on- screen. Ninety minutes 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 90 minutes allotted to take the exam.

### **Examination Results**

After you finish the examination, you are asked to complete a short evaluation of your 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 “WPC®” credential immediately and will be able to print their WPC® Certification Certificate, wallet ID card and congratulations letter within two (2) weeks of the examination date. No candidate exam results will be given by telephone or facsimile for any reason. Exam results are released ONLY to the candidate at the testing center. Exam results are kept on file for five years.

## **Paper & Pencil Examination Procedures**

### **Admission**

Approved candidates (See Application Process) 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 \$125.00 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 location, 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 approved course confirmation. All candidates should report to testing location at the reporting time for registration and check-in. Ninety minutes 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 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 Results**

**Examination results are sent via email within 7-10 business days of exam date.** When taking the pencil and paper exam, the 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 provided.

## **Revocation of Certification**

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

1. Applicant fails to adhere to the NAWCO® code of ethics. (<https://www.nawccb.org/code-of-ethics>).
2. Any Government agency, licensing board or court finds that any services as provided by WPC® are defective or improper in any way, manner or form.
3. Use of certification credentials and/or failure to notify NAWCO® within 10 business days subsequent to revocation, suspension, probation or expiration of the primary professional license of the WPC®.
4. Applicant fails to meet recertification criteria prior to expiration date of their WPC® credentials.
5. Falsification of application materials.
6. 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.

## **Appeals**

Individuals may appeal decisions regarding eligibility, examination results, and disciplinary matters made by the NAWCO® certification program by submitting a written letter of appeal to the NAWCO® Certification Committee within 30 days of the NAWCO® decision or action that is being appealed. Candidates may request a copy of the appeal policy by contacting the NAWCO® office.

## **Complaints & Discipline**

Complaints against a WPC® 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 [cynthia@nawccb.org](mailto:cynthia@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.

## **Recertification**

The WPC certification is awarded for a five (5) year period following successful passing of the examination. Upon expiration of the credentialing term, a WPC® is required to recertify with the NAWCO® to maintain their credentials. The WPC® certification requires recertification every five (5) years. The process of recertification can be completed by one of the following three options:

1. Option 1:  
Completing the Recertification application, submitting proof that you took a Skin Management & Wound Prevention course, and paying in full the NAWCO Recertification application fee. This renewal option will not require taking another exam.
2. Option 2:  
Completing the Recertification application, taking a proctored computer-based WC recertification exam, and paying in full the NAWCO recertification application fee and recertification examination fee in full. This renewal option will not require taking an education course again.
3. Option 3:  
Recertification through continuing education requires twenty-five (25) total contact/clock hours of continuing education. In order to ensure that WPC certificate holders remain current on changing trends, all continuing education must be earned in the five (5) year period that the certification is held.

## Recertification Requirements

All WPC health professionals are eligible for recertification six (6) months prior to their certifications expiration date. NAWCO will contact you twelve (12) months prior to your certification's expiration so it is important that all contact information with the company remains up-to-date at all times.

Recertification will require a completed application as well as current copies of any professional license(s) and certification(s) that the candidate holds at the time of applying for the WPC recertification. In addition, all fees associated with the recertification process must be paid in full.

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: [www.nawccb.org](http://www.nawccb.org). Please keep your email address updated with NAWCO® at all times.

## Reinstatement of Lapsed Credentials

Reinstatement of lapsed credentials is not the same process as recertification. Requirements for reinstatement of lapsed WPC® credentials **WITHIN TWO (2) YEARS OF EXPIRATION**, include all of the following criteria:

1. Currently certified/licensed
2. Have practiced the equivalent of one (1) year full-time or two (2) years part time in the past five (5) years as a CNA/MA.
3. Previous WPC Certification that has lapsed within the past two (2) years.
4. One of the following:
  - Training: Successful completion of a skin management and wound prevention course that meets Certification Committee criteria.
  - Exam: Successful completion of the WPC® certification examination with a passing score.
  - Continuing Education: 25 Contact Hours in skin management and wound prevention within the past five (5) years

5. Completion of application and required supporting documentation
6. Payment of required fees. \$280.00 for certification and \$200.00 reinstatement fee.

A WPC® that successfully meets the requirements of the option chosen, within 2 years of the credential lapsing, will retain their original certification number.

A WPC® that does not successfully meet the requirements or pass the exam 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**:
  - a. Choose one of the three options provided.
  - b. If you have chosen to take the examination, you will have four (4) attempts within the two (2) year period to successfully pass the examination.
  - c. Unsuccessful: After two years or four attempts, you will no longer be able to reinstate your lapsed credential.
  - d. 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. 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.
  - b. 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.

## **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 examination is not based solely on any one source. Some of the references related to skin management and wound prevention can be accessed online, while others are available at local book stores.

## **Content of Examination**

The WPC exam consists of a proctored, computerized/LRP/paper-pencil test with a combination of 75 multiple-choice and true/false questions. Each test question will have either four (4) multiple choice, or two (2) true/false answer selections. Each question will only have one correct answer.

A maximum of one and one half hours (90 minutes) will be allotted to each exam participant, unless special accommodations have been arranged prior to the exam.

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 nutritional 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.

## **Examination Content Outline**

This outline is given only as a possible list of covered exam material. All content listed may not appear on each exam. Main Content Area:

1. **Education, Scope of Practice, & Ethics.** 5%  
Address educational needs of the patient, as identified by the interdisciplinary team.

Understand scope of practice. Educate the patient on treatment plan and risk of non-adherence. Standards of care, defining ethics, code of ethics, patient rights,

2. **Skin Assessment: Risk, Prevention, Intervention.** 10%

Identify layers of the skin, underlying structures, and the circulatory system. Maintaining skin integrity, preventing skin breakdown, interventions for skin issues, appropriate methods for skin cleansing and protection, moisture barrier appropriate use.

3. **Wound Healing and Factors that affect wound healing** 10%

Identification and management of risk factors impacting skin integrity and impeding wound healing. Influences of intrinsic (e.g., age, BMI, bio-burden, co-morbidities, allergies, infection, non-adherence, nutrition/hydration, mobility, cultural beliefs, blood flow, tissue perfusion, necrotic tissue, cognitive impairment, allergies and/or adverse reaction to treatment modalities) and extrinsic ((e.g., infection, medications, pressure, mechanical insult, exposure to moisture, smoking, stress, radiation, cytotoxic solutions, bio-burden, foreign body). factors.

Characteristics of infected wounds, chronic vs acute wounds.

4. **Nutrition** 5%

Observe the patient's current nutritional status including, but not limited to, intake pattern, BMI, physical constraints limiting the patient's ability to receive nutrition (e.g., inability to use utensils, impaired or unable to swallow, inability to chew solid food). Reasons for unexplained weight loss. Protein intake, daily nutritional and fluid requirements.

5. **Pressure Injuries - Prevention, Intervention and Treatment** 25%

Staging, prevention, risk factors for developing pressure injuries. Interventions to include: nutrition, support surfaces and skin care. Pressure redistribution: turning and repositioning, and offloading. Reducing friction and shearing forces

6. **Venous, Arterial, Diabetic ulcers and other types of wounds** 10%

Risk factors, characteristics, prevention,

treatment, lower extremity treatment modalities (e.g., compression, debridement, offloading, devices).

**7. Treatment Options/Dressing Choices 15%**

Identifying types of dressings, reason for use, expected outcome from use of dressing. Identification of dressing appearance and changes that occur, proper application for reporting purposes.

**8. Documentation and Regulations in Skin Care 20%**

Demonstrate an understanding of the ethical aspects of wound care. Understand documentation systems, basics, requirements, timelines, and frequency. Provide documentation throughout the process that complies with legal and institutional requirements and expectations for clear, concise, legible, and consistent documentation. Demonstrate an understanding of the legal aspects of wound care (e.g., documentation, negligence, assault, abuse, neglect, scope of practice, harassment, facility protocols and procedures).

Preventative measures that CNA/MA can perform. Reporting to licensed clinicians, and interventions appropriate for CNA/MA.

- a. Fascia
- b. Muscle
- c. Subcutaneous
- d. Ligament

- 4. Which of the following statements is true regarding an obese wound care patient?
  - a. Turning and positioning are not required because of the additional adipose
  - b. Obese patients do not experience malnutrition
  - c. The risk for pressure injury development is lessened by the increased amount of adipose
  - d. Obese patients are at higher risk of breakdown because adipose tissue is poorly vascularized.
- 5. Patients/residents with venous insufficiency should be encouraged to keep their lower extremities in what position while lying down or sitting in a chair?
  - a. Hanging down to increase blood flow
  - b. Slightly below the level of the heart
  - c. Elevated above the level of the heart
  - d. Crossed at the ankles

- 6. Wound healing requires that wound bed tissues remain in what condition?
  - a. Saturated
  - b. Moist
  - c. Dry
  - d. Cool

- 7. A Stage 1 pressure injury presents as a shallow open wound with red or pink wound base.
  - a. True
  - b. False

- 8. The charge nurse reports that a new patient needs special positioning because of a Stage 4 sacral pressure injury. Which of the following best describes a Stage 4 pressure injury?
  - a. Covered with black eschar
  - b. Pink and non-blanchable
  - c. Bone exposed in tissue bed
  - d. Purple in color with skin intact

## **Sample Examination Questions**

- 1. A mechanical wound treatment that utilizes suction, promotes wound healing, and collects wound drainage in a canister is known as?
  - a. Pulse Lavage
  - b. Negative Pressure Wound Therapy
  - c. Ultrasound
  - d. Ultrasonic Debrider
- 2. A patient with a Stage 4 pressure injury to the coccyx area underwent a flap repair for the non-healing pressure injury. What post-surgical care is important for staff to keep in mind?
  - a. Limit movement and pressure to the area
  - b. Ambulate patient as soon as possible
  - c. Keep area open to air
  - d. All of the above
- 3. The layer of tissue located just below the dermis that is yellow in color is known as?

9. You suspect your diabetic patient is non adherent to the dietitian recommended diet and is sneaking food. What should you do?
- Look through his belongings and take the food.
  - Confront the patient and threaten to tell if he doesn't give you the food.
  - Report your suspicions to the charge nurse along with the reason for your suspicions.
  - Nothing. It is not your place to address non-adherence with the patient
10. While changing the brief of your incontinent patient you note the peri area to be denuded. Which of the following best describes denuded?
- Multiple areas appearing scratches and abrasions
  - Open shallow crater exposing subcutaneous tissue
  - Red, small blisters with noted loss of the epidermis
  - Thick white, dry and flakey sloughing areas

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

# WPC Certification Pathways at a Glance



## Eligibility Requirements

| #1 Eligible License/Certification  | Necessary for all Candidates |
|--|------------------------------|
| Active unrestricted license/certification in good standing:<br>CNA/MA/CCHA/LNA/PCT/PCA/EMT/Paramedic<br>(*Students currently enrolled in programs, see #2) | ✓                            |
| #2 Experience in past 3 years (Must meet one of the following)   | Necessary for all Applicants |
| Certified/Licensed clinician with a minimum of<br>1 year work experience in approved healthcare setting  | ✓                            |
| OR   |                              |
| Enrolled in certification training and skin and wound prevention<br>course simultaneously  |                              |
| #3 Education Requirements  | Necessary for all Applicants |
| Successful completion of skin management and wound<br>prevention course that is minimum of 14 hours in length  | ✓                            |
| #4 Additional Requirements   | Necessary for all Applicants |
| Applicants must agree to adhere to the NAWCO® Code of Ethics   | ✓                            |
| Completion of application and required supporting documentation  | ✓                            |
| Full payment of required fees (NAWCO® certification fee is \$280.<br>Additional course fees apply to certification by training option)                     | ✓                            |
| Passing score on WPC® certification examination  | ✓                            |

\*ADDITIONAL FEES APPLY FOR COURSES OFFERED BY EDUCATIONAL PROVIDERS.

WPC Cert 10-23

# WPC Recertification Pathways at a Glance



| Requirements   | All Candidates |
|--|----------------|
| Active unrestricted license: CNA, MA, CMA, PCA, PCT, CHHA, LNA, EMT, Paramedic | ✓              |
| Current WPC® credential <i>(Not lapsed)</i>                                    | ✓              |
| Applicants must agree to adhere to the NAWCO® Code of Ethics                   | ✓              |
| Submission of recertification application                                      | ✓              |

| Additional Requirements (Choose one of the following)   | RECERTIFICATION OPTIONS |      |                      |
|---|-------------------------|------|----------------------|
|   | Training                | Exam | Continuing Education |
| Graduation from skin management and wound prevention course that meets certification committee criteria <i>(Course MUST be completed before your certification expires)</i><br><i>(Additional course fee)</i> | ✓                       |      |                      |
| OR  |                         |      |                      |
| WPC® Certification Exam <i>(Proctored computer-based WPC recertification exam at a Prometric testing center)</i>  |                         | ✓    |                      |
| OR  |                         |      |                      |
| Provide documentation of 25 total contact/clock hours of continuing education in the past 5 years that are skin and wound prevention related  |                         |      | ✓                    |

WPC 9-23

# **WPC 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 WPC® professional Wound Care Certified certification credentials. Successful participants in this program may become authorized to use the WPC® 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 WPC® 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 WPC® 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 WPC® 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 WPC® 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 WPC® 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 WPC® 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 WPC® unless Applicant has completed the certification requirements for the WPC® certification credential and has been notified by NAWCO® in writing that Applicant has achieved certification status of WPC®. 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 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**

Wisconsin 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.



# WPC Initial Examination Application

ANY MISSING OR INCOMPLETE INFORMATION MAY CAUSE DELAY IN PROCESSING - PLEASE PRINT LEGIBLY (01/2023)

|  |                           |   |                         |
|--|---------------------------|---|-------------------------|
| <b>1. PRINT NAME</b> (as it appears on your certification/license)   |                           |   |                         |
| Last:  | First:                    | MI:   |                         |
| <b>2. MAILING ADDRESS</b>  |                           |   | <b>3. DATE OF BIRTH</b> |
| Street:  |                           |   |                         |
| City:  | State/Province:           | Country:  | Zip/Postal Code:        |
| Mobile Telephone:<br>( )   | Evening Telephone:<br>( ) | Email: Personal Required for Confirmation   |                         |
| <b>4. TITLE</b> <input type="checkbox"/> CNA <input type="checkbox"/> MA/MT <input type="checkbox"/> Other _____   |                           | <b>5. EDUCATION:</b> <input type="checkbox"/> HS <input type="checkbox"/> GED <input type="checkbox"/> Other _____  |                         |
| <b>6. PRIMARY PLACE OF EMPLOYMENT</b><br>(Hospital, LTC, LTAC, etc.)<br>_____  |                           | <b>7. ADA ACCOMMODATION</b><br><input type="checkbox"/> YES Special arrangements will be necessary for me to complete the examination. (If yes, contact NAWCO® for instructions.) |                         |
| <b>8. CERTIFICATION PATHWAY:</b> <input type="checkbox"/> Experiential <input type="checkbox"/> Continuing Education <input type="checkbox"/> Training Course  |                           |   |                         |
| <b>9. COURSE TYPE:</b> (Check which one applies.) <input type="checkbox"/> Online <input type="checkbox"/> Onsite  |                           |   |                         |
| <b>10. EXAMINATION TYPE</b><br><input type="checkbox"/> On Site at Skin & Wound Management Course<br><input type="checkbox"/> Computerized Version at Prometric Testing Centers<br><input type="checkbox"/> Remote Proctored |                           | <b>11. APPLICATION EXAMINATION FEES</b><br>Non-refundable processing fee. . . . . \$30<br>Examination Fees . . . . . \$250.00<br><br>TOTAL AMOUNT: _____                          |                         |

**12. WORK EXPERIENCE VERIFICATION:** Complete the following sections to document required work experience. If you are enrolled in a course to obtain your certification/license, and are not currently employed - provide your instructor name and course info.

|   |
|---|
| Employer/Course _____   |
| Employer /Instructor Full Address _____   |
| Employment Dates From: ___ / ___ / ___ to: ___ / ___ / ___ <input type="checkbox"/> Current Employer? <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time |
| Supervisor/Instructor Name: _____ If Employed, You must Specify Full or Part Time   |
| Supervisor/Instructor Phone Number: _____ Supervisor/Instructor Email: _____  |
| Employer/Course _____   |
| Employer /Instructor Full Address _____   |
| Employment Dates From: ___ / ___ / ___ to: ___ / ___ / ___ <input type="checkbox"/> Current Employer? <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time |
| Supervisor/Instructor Name: _____ If Employed, You must Specify Full or Part Time   |
| Supervisor/Instructor Phone Number: _____ Supervisor/Instructor Email: _____  |

NATIONAL ALLIANCE OF WOUND CARE AND OSTOMY®

WPC® Examination Application page 2

**13. AUTHORIZATION AND CERTIFICATION INFORMATION RELEASE**

I hereby affirm that I am an \_\_\_\_\_ (license/certification type) currently recognized to practice in the state of \_\_\_\_\_ .

I further affirm that no certifying/licensing authority has current disciplinary action pending against my certification/ license to practice in the aforementioned or any other state, and that my certification/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, license/certification type, city, state, past and present certification status under the NAWCO® WPC® Certification Directory, in print and electronic versions of a worldwide directory of NAWCO® WPC® Practitioners/Certificants. 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 WPC® 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 WPC® 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® WPC® 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.

I further agree to abide by the NAWCO Code of Ethics.

\_\_\_\_\_

|            |           |      |
|------------|-----------|------|
| Print Name | Signature | Date |
|------------|-----------|------|

Visa                       MasterCard                       American Express (NO DISCOVER)

Credit Card Number \_\_\_\_\_ Expiration Date \_\_\_\_/\_\_\_\_ Security Code\* \_\_\_\_\_  
\*3-digit code found at the end of signature strip

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

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone: \_\_\_\_\_ Cardholder Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## **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:

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Signed:

\_\_\_\_\_ Title: \_\_\_\_\_

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

Address:

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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: [admin@nawccb.org](mailto:admin@nawccb.org)



# NAWCO® Re-Examination Application



This application is to be used when you are applying to retake the examination.

|  |  |
|--|--|
| <b>1. PRINT NAME:</b> (As listed on your Professional License) ALL ITEMS MUST BE COMPLETED TO BE ELIGIBLE FOR RE-EXAM<br><small>LAST: _____ FIRST: _____ MIDDLE: _____</small>   |  |
| <b>2. MAILING ADDRESS:</b> (Street, City, State & Zip Code) _____  |  |
| <b>3. MOBILE TELEPHONE #:</b> _____  | <b>4. E-MAIL:</b> _____  |
| <b>5. SELECT CREDENTIAL FOR RE-EXAM:</b> <input type="checkbox"/> WCC <input type="checkbox"/> DWC <input type="checkbox"/> LLE <input type="checkbox"/> OMS <input type="checkbox"/> WPC <input type="checkbox"/> NWCC <input type="checkbox"/> AWCC  |  |
| <b>6. PROFESSIONAL TITLE:</b> (RN, LPN, CNA, DPM, etc): _____ License/Certification Type: _____<br>Licenses/Certifications: _____ State(s): _____ ORIGINAL Issue Date: _____<br>Expiration Date: _____   |  |
| <b>7. ADA ACCOMMODATION:</b><br><input type="checkbox"/> Please contact me   | <b>8. APPLICATION EXAMINATION FEES:</b><br>Non-Refundable Processing Fee - \$30.00<br>Examination Fee - \$250.00 (WPC only)<br>Examination Fee - \$350.00<br><div style="text-align: right;"><b>TOTAL FEES: \$280.00 Or \$380.00</b></div> |
| <b>9. CERTIFICATION INFORMATION RELEASE (Directory Listing Inclusion) and AGREEMENT AUTHORIZATION</b><br><br>I hereby authorize the National Alliance of Wound Care and Ostomy® its licensees, successors, and assigns (collectively NAWCO®) the 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.<br><br>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.<br><br>I further affirm that I am currently licensed/certified to practice as a(n) _____ in the state of _____. I further affirm that no licensing/certifying authority has current disciplinary action pending against my license/certification to practice in the aforementioned or any other state, and that my license/certification to practice is not currently suspended, restricted or revoked by any state or jurisdiction.<br><br>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.<br><br>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. In the event of non-renewal or revocation of the credential, I agree to destroy the Certificate of Certification.<br><br>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.<br><br>I further agree to abide by the policies and procedures and the Code of Ethics as set forth in the NAWCO Candidate Handbook and all conditions included in the NAWCO Candidate agreement. |  |
| Applicant Signature _____ Date: _____  |  |

**8. CREDIT CARD AUTHORIZATION FORM: Complete this section ONLY if paying by Credit Card**

I, \_\_\_\_\_, hereby authorize the National Alliance of Wound Care and  
(Name exactly as it appears on card)

Ostomy to charge my credit card account for the amount of the fee of \$200.00 plus Application fee of \$30.00.

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 \_\_\_\_\_

Telephone: \_\_\_\_\_ Cardholder Signature: \_\_\_\_\_ Date: \_\_\_\_\_



National Alliance of Wound Care  
and Ostomy®

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