



Clinical Registration Request

Return completed Registration Forms along with your payment to:

Email: register@infusionknowledge.com **Fax:** 727-442-6874 **Mail:** P.O. Box 8649, Clearwater, FL 33758

If completing this application electronically, you must "tab" through the fields to fill in your personal information. Otherwise you may print the application and fill out. Thank you.

Please complete all of the following information:

Full Name (to appear on course certificate): _____

Professional Designation (i.e. RN, ARNP, etc.): _____ License # _____

Home Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Social Security # _____ Birth Date (month & day only) _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ *Day of Class Phone: _____
**In case we need to reach you on the morning of class.*

Employer: _____ Department: _____

How did you hear about this class? _____

Method of Payment

Check or Money Order Visa MasterCard Discover AmEx

Name (as it appears on credit card): _____

Address of Card Holder (if different than above): _____

Card # _____ Exp.: _____ Security Code: _____

Authorized Signature (initial if sending electronically): _____

What class are you registering for?

- I.V. Therapy Clinical (1 day) - \$499
- General Practice PICC-Midline Clinical (1 day) - \$799
- Advanced Practice MST-Ultrasound PICC Clinical (2 days) - \$1979 *
- Advanced Practice MST-Ultrasound PICC Clinical (3 days) - \$2929 *
- MST-Ultrasound Skills Revalidation (1 day) - \$999 *

*Pricing effective 1/1/11

Date Scheduled: _____

Once we receive your Registration Request, Infusion Knowledge will call with date availability.

I have enclosed copies of the following required documentation:

- Valid Nursing License
- Proof of Professional Liability Insurance (*minimum of 1 million / 3 million malpractice policy*)
- Current CPR Card
- Transcript indicating completion of required BayCare Online Orientation component (*see attached for information on how to complete*) – Does not apply to GENERAL PICC Clinicals.

For I.V. Therapy Clinicals:

- Documentation of completion of an I.V. Therapy Education Program (*or an approved equivalent*) within the past 12 months.

Date the above class was completed: _____

For General PICC Clinicals:

- Documentation of completion of PICC 101: PICC-Midline Education; and PICC 102: Save That PICC (*or approved equivalents*) within the past 6 months.

Dates the above classes were completed: _____

For Advanced PICC Clinicals and/or MST-Ultrasound Revalidation:

- Documentation of completion of PICC 101: PICC-Midline Education; PICC 102: Save That PICC; and PICC 103: Advanced Placement of PICC's (*or approved equivalents*) within the past 6 months.

Dates the above classes were completed: _____

Amount Enclosed: \$ _____

I have included all required documentation as indicated above; including documentation that I have completed the BayCare online orientation / training component (*if applicable*).

I understand that I must wear proper clinical attire and cell phones/beepers must be turned off upon entering any healthcare facility.

I understand the availability of insertions cannot be guaranteed on any given day, and refunds may only be given if no live sticks are attempted.

I understand this Clinical opportunity is offered in conjunction with *St. Petersburg College* and my payment and registration information will be forwarded to them for processing (does not apply to GENERAL PICC Clinicals).

Signature of Student: _____ **Date:** _____

Cancellation Policy

Cancellation is subject to *St. Petersburg College* policies.

Please call *Infusion Knowledge, Inc.* at 1-800-337-1545 with questions.

Directions for Completing the BayCare Online Orientation / Training:

In accordance with the Policy and Procedures of *Morton Plant Mease Health Care*, the facility where most of our Clinical experiences take place, you are required to complete an online orientation / training component.

NOTE: If you are attending a GENERAL Practice PICC Clinical, this requirement does not apply to you.

In order to access the BayCare Online Learning Center (OLC) you must first request a username and password; go to <http://baycare.org/onlinetraining>. Attached are additional instructions to follow to obtain a username and password and to login to the OLC.

Once your registration is completed and verified, you will be sent an e-mail from BayCare Information Services that will contain your OLC username and password. *It is essential that you have a valid e-mail address before beginning the registration process.* The OLC username and password will be activated the day after you register.

Once you have received your username and password; login to the OLC at <http://baycare.org/onlinetraining>. Then look under Catalog / Non Team Member / Student or Instructor and complete the "Code of Conduct" and "Team Member Essentials Annual Training" courses.

Please make sure you complete the training on a computer with access to a working printer.

When you have completed the required OLC courses, print your transcript and submit with your Registration Form and other required documents.

Once we have received your Registration Form and required documentation, you will be sent a Registration Confirmation with all the details pertaining to your Clinical Day. You will also receive information related to one additional component that will need to be completed via the OLC, prior to your Clinical Day.

Thank you in advance for your cooperation in completing this necessary training as required by *Morton Plant Mease Healthcare* (our clinical site).

Online Learning Center *Getting Started*
Accessing the Online Learning Center - NON-TEAM MEMBER

v.2

This new OLC will require non-team members* to register for a specific OLC Username and password. You must have a valid e-mail address to complete the registration process.

Note: Any Non-Team Members with an active Network UserID and password must register to receive a new OLC Username and password.

* Non-team members are categorized as students, volunteers, instructors, residents, contractors, vendors, Allied Health Practitioners, etc.

Requesting OLC Username and Password

Request OLC Username and Password

1. Select **ONE** of the following options:
 - a. From a BayCare facility:
 - i. From the desktop, double-click Internet Explorer to open the BayCare Intranet
 - ii. From the Education tab, select **Non-Team Member Training**
 - iii. On the **Online Learning Center** page, under **Non-Team Members**> "You have NOT registered for OLC Username and password...", select link
 - iv. From the **Mandatory Training for Non-Team Members** page, click **Click Here to Register**
 - b. From a non-BayCare facility:
 - i. Open an **Internet Explorer** browser window
 - ii. In the address bar type <http://baycare.org/onlinelearning> and press **Enter**
 - iii. From the **Non-Team Member Training** page, under "You have NOT registered for an OLC Username and password..." select link
 - iv. From the **Mandatory Training for Non-Team Members** page, click **Click Here to Register**
2. On the **BayCare Online Learning Center Non-Team Member Registration** page, complete all applicable fields. Fields marked with a red asterisk (*) are mandatory.
3. If you are eligible to receive contact hours, complete the **Professional License information** fields.
4. Click **Submit**

The screenshot shows the registration form with the following elements and annotations:

- Title:** BayCare Online Learning Center Non Team Member Registration
- Fields:**
 - Last Name: * (Mandatory)
 - First Name: * (Mandatory)
 - Professional license information must be entered exactly as it appears on your license to ensure proper reporting to CE Broker. (Annotation)
 - License Code #: Select license code... (Dropdown menu)
 - Florida License #:
- Annotations:**
 - A box labeled "Mandatory fields as marked" points to the Last Name and First Name fields.
 - A callout box states: "Professional License Information must be completed to earn contact hours".

The Thank You page opens to confirm submission

