This booklet will explain the BONENT recertification process. Keep this booklet to track your courses and contact hours. You do not have to submit this booklet unless you are audited, or your certification has expired.

**To Recertify:** You will need to cut out and complete the Recertification Application on page 7 of this booklet and mail it to the BONENT Executive Office. **Do not mail the entire booklet unless you are audited, or if your certification has expired.**

**Expired Certification or Audit:** You will have to submit this completed booklet along with copies of certificates and other required documentation reflecting contact hours to the BONENT Executive Office. Faxed or photocopied recertification booklets will NOT be accepted. The information submitted will be reviewed to determine if it is properly documented and whether it meets BONENT recertification criteria. When this process is satisfactorily completed, certification for an additional four years will be awarded and a wallet card will be issued to you.

**FEES:**
- **Current:** There is no fee to recertify. However, we cannot process your recertification application until all fees for previous years and the current year are paid in full.
- **Lapsed Certification** (within 12 months of your certification expiration date):
  - $100 Lapsed Certification Fee + outstanding Annual Certification Fees.
- **Expired Certification** (from 1 to 8 years of your certification expiration date):
  - $200 Expired Certification Fee.

**NOTE:** A $60 Incomplete Recertification Fee is assessed to individuals who do not submit completed documentation.

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**Summary of Documentation for Recertification**

**Total Contact Hours Submitted** (Please List Details Inside)

<table>
<thead>
<tr>
<th>GROUP A TOTAL (Nephrology)</th>
<th>GROUP B TOTAL (General Health)</th>
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</table>

**Signature** ___________________________ **Date** ___________________________

**Recertification Due Date** ___________________________ **Current Job Position** ___________________________

**Name** ___________________________ **Business Phone** ___________________________

**BONENT ID#** ___________________________ **Years Employed at Current Job**

**Phone** ___________________________ **Thru** ___________________________

**E-mail** ___________________________ **Current Facility Name and Address**

**Home Address** ___________________________ ___________________________

**Check if New Address** □

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*Effective: 01/01/2018*
Recertification Options

Initial certification is the result of having successfully passed the BONENT certification examination and is valid for four years from the date the candidate originally passed the examination. In order to continue certification beyond the initial four-year period, one of the following three options must be followed:

1. Accumulation of 40 Contact Hours
   Recertification for the BONENT-certified candidate using this option means that at least forty (40) contact hours during the four year certification process must be obtained.
   A minimum of thirty (30) out of the 40 contact hours must qualify for Group A

2. Re-examination
   This option should be accomplished during the fourth year of BONENT certification.
   A schedule of examination dates and sites is available on our website www.BONENT.org. The examination fee must be paid at the time the individual registers for the examination. Taking the exam does not exempt you from paying the annual fee. If you pass the exam, you will receive a new BONENT wallet card in the mail.

3. One-time Waiver
   Use the one-time waiver which allows you to automatically recertify without having to accumulate 40 contact hours. This option can only be used once in a lifetime.

Documentation of Contact Hour Credits

All credits submitted for consideration as contact hour credit towards BONENT recertification must be listed in the BONENT “Contact Hours for Recertification” booklet. Audited or expired recertification candidates must provide a certificate, an official transcript, or other documentation indicating successful completion of each course. Transcripts and certificates must include the following information:

- Name of individual taking the course
- Title of the course
- Date the course was taken
- Number of contact hours awarded for credit
- Name of the accredited provider or approver of the program

BONENT has final contact hour approval authority.

Formula for Calculating Contact Hours

One contact hour = sixty (60) minutes of classroom instruction

One semester credit = fifteen (15) contact hours (an official transcript must be submitted to receive credit for these hours)

One quarter credit = ten (10) contact hours (an official transcript must be submitted to receive credit for these hours)

Payment

Each BONENT member will be invoiced an annual certification fee. The fee may be paid by personal check or money order made payable to BONENT, or by credit card (MasterCard, VISA, American Express). BONENT certification fees are invoiced annually and must be paid prior to recertification processing. There is no fee to recertify. However, we cannot process your certification application until you pay your annual fee for the next 12 months.
**Group A**  
**Nephrology Programs**

Seminars, Webinars, Home Study & BONENT Approved CE Programs

- Hours listed in this section must focus on Nephrology.
- Credit is given according to the number of contact hours awarded.

**NOTE:** Minimum of 30 hours required for Group A.

Check the BONENT website for info on Regional Seminars

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<th>Date</th>
<th>Program Title</th>
<th>Location</th>
<th># Contact Hours</th>
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**TOTAL CONTACT HOURS – GROUP A**
BONENT Approved CE Programs

as of 01/01/2018

If you are BONENT certified and you need to complete your recertification, you can submit contact hours from the programs in the list below in Group A.

International

Nephrology Educators Network
Web: www.nen.org.au

National

American Nephrology Nurses Association (ANNA)
East Hollywood Avenue.
P.O. Box 0056
Pitman, NJ 08071-0056
Phone: (888) 600-2662
Phone: (856) 256-2320
Fax: (856) 589-7463
Web: www.annanurse.org

Board of Nephrology Examiners Nursing and Technology
100 South Washington Street
Rockville, MD 20850
Phone: (202) 462-1252 ext 15
Fax: (202) 463-1257
Web: www.BONENT.org

National Kidney Foundation
Phone: 1-800-622-9010
Web: www.kidney.org

Texas

St. Bernadette of Lourdes Training Center
12224 Suite B Almeda Rd.
Houston, TX 77045
Phone: (713) 433-7252
Fax: (713) 433-2222
Web: www.sblchealth.com

Anderson Continuing Education
A maximum of 20 hours accepted in Group A
Web: www.andersonce.com

Please Visit www.Bonent.org for the most updated list of Approved CE Programs
This group includes or accepts continuing education programs designed for General Health Education.

- Credit for these programs will be given according to the number of contact hours or continuing education units awarded to each program, including journal articles.
- Journal articles submitted for credit must be published during the four-year recertification period.
- A copy of the certificate awarded, including the date of completion, must be submitted as documentation of completion.
- Accepted college courses include:
  - Biology
  - Science
  - Nursing
  - Psychology

<table>
<thead>
<tr>
<th>Date</th>
<th>Program Title</th>
<th>Group/Organization</th>
<th># Contact Hours</th>
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TOTAL CONTACT HOURS – GROUP B
1. Affiliated Organizations (Seminars & Online)
You may contact the organizations below for information on seminars, symposiums and conferences that can be listed under Group A.

The American Healthcare Institute
(866) 243-8301

American Heart Association
(800) 242-8721

American Heart Association
(312) 464-5000

American Nurses Association (ANA)
(800) 274-4262

Federal Drug Administration (FDA)
U.S. Department of Health & Human Services, Public Health Service Food and Drug Administration Center for Devices and Radiologic Health
Rockville, MD 20857

North American Transplant Coordinators Organization (NATCO)
(913) 492-3600
www.natco1.org

National Association of Nephrology Technologists (NANT)
(877) 607-6268
www.nant.biz/store

National Kidney Foundation (NKF)
Council of Nephrology Nurses & Technicians (CNNT)
(800) 622-9010
(212) 889-2210

End State Renal Disease Networks:

1. Connecticut, Maine, Massachusetts, New Hampshire, Vermont, Rhode Island
   (203) 387-3332
2. New York — (212) 289-4525
3. New Jersey, Puerto Rico, Virgin Islands
   (609) 490-0310
4. Pennsylvania, Delaware
   (412) 325-2550
5. Virginia, West Virginia, District of Columbia, Maryland
   (804) 794-3757
6. North Carolina, South Carolina, Georgia
   (919) 855-0882
7. Florida — (813) 383-1530
8. Mississippi, Alabama, Tennessee
   (601) 936-9260
9. Illinois, Indiana, Kentucky, Ohio — (317) 257-8265
10. Minnesota, Michigan, North and South Dakota, Wisconsin
    (651) 644-9877
11. Missouri, Iowa, Kansas, Nebraska
    (816) 221-0477
12. Oklahoma, Arkansas, Louisiana
    (405) 942-6000
13. Texas — (972) 503-3215
14. Colorado, Arizona, Nevada, New Mexico, Utah, Wyoming
    (303) 831-8818
15. Washington, Alaska, Oregon, Montana
    (206) 923-0714
16. Northern California, Hawaii, Guam, American Samoa, Saipan
    (415) 472-8590
17. Southern California — (323) 962-2020

2. Publications
The following journals often list short courses, workshops, home study and more structured programs in education columns or calendars of events:

ANNA Journal/ANNA Update
(includes Nephrology Nursing Today – A Continuing Education Series)
(609) 589-2187

Contemporary Dialysis & Nephrology
(818) 704-5555

Dialysis & Transplantation
(818) 782-7278

National Association of Nephrology Technologists (NANT)
(877) 607-6268
www.nant.biz/store

Nephrology News & Issues
(602) 443-4635

Peritoneal Dialysis International
(416) 636-1349

Seminars in Dialysis
(800) 638-6423

Additional Publications Include:
- American Journal of Nursing
- MedaSystems
- Nursing Outlook
- Nursing Life
- RN Magazine
Recertification Application

This Application must be completed to fulfill requirements for recertification. It must be postmarked no later than the last day of the final year of your 4-year recertification period. There is no fee to recertify. However, we cannot process your certification application until all annual fees for previous years and the current year are paid in full. If your certification has expired, you must submit the entire Recertification Booklet.

Note: A $60 incomplete fee will be assessed to all incomplete forms.

Please print in ink.

Name ___________________________ Date of Birth ________/______/______

Last First Certification Expiration Date ___________________________

Address ___________________________________________________________________________

City __________________ State ______ Zip ______________

Email __________________________ SS# [Last 4 digits] ______________

Phone (H) ____________________ (W) ___________ Cell __________

Have you met all requirements for Recertification? (You MUST check one below):

YES ☐ I have completed 40 Contact Hours with 30 in Group A and listed them in the “Contact Hours for Recertification” booklet. (Your paperwork may be randomly selected for audit by BONENT. See below)

NO ☐ (a) I wish to recertify by taking the BONENT exam (Exam Application must be attached with this form)

☐ (b) I wish to use my one time waiver (once in a lifetime)

Audit & Retaining Your Continuing Education Records

Recertification applicants must keep continuing education documents for two years. If selected by BONENT for audit, the recertification applicant must submit proof of having met continuing education requirements (a completed Contact Hours for Recertification folder with certificates). If the recertification applicant is unable to submit the required information, the unverified contact hours will automatically be dismissed. If the recertification applicant fails to respond to an audit, the BONENT Board may consider this as grounds for disciplinary action.

I certify that all information contained in my Application for Recertification by the Certification Board of Nephrology Examiners and Nursing & Technology (BONENT) is true and accurate to the best of my knowledge. I authorize BONENT, its officers, directors, committee members, employees, and agents (“BONENT’s designated parties”) to review my application and other materials related to my recertification and to determine whether I have met BONENT’s standards for recertification.

By signing the Authorization, I acknowledge that I have read and understand BONENT’s rules and standards. I understand and agree to the revocation or any other limitation of my certification if any statements made on this application, other material related to recertification, or hereafter supplied to BONENT are false or inaccurate or if I violate any of the rules or standards of BONENT.

I agree to cooperate promptly and fully in any review of my certification by BONENT, including submitting such documents and information in this application and other materials related to recertification. I authorize BONENT and BONENT’s designated parties to communicate my certification status to any individual, employer, or organization that requests this information. I further authorize and consent for the purpose of statistical analysis, provided I am not personally identified in information released.

I agree to indemnify and hold harmless BONENT and BONENT’s designated parties for any action taken pursuant to the rules and standards of BONENT with regard to my certification and this Application for Recertification.

I understand and agree that if I am granted BONENT’s recertification, it will be my responsibility to remain in compliance with all of BONENT’s rectification standards including the BONENT code of Professional Practice. I understand it is my responsibility to maintain valid certification status by either performing satisfactorily in each of the major content areas of the examination during the fourth year of certification or demonstrating my successful accrual of at least 40 contact hours of continuing education credits.

By signing, I acknowledge that I have read and understand this information and agree to abide by these terms. I declare under penalty of perjury under laws of my state that the foregoing is true and correct.

Signature ___________________________ Date __________

Please mail to: BONENT, 100 South Washington St., Rockville, MD 20850

Send Original, Signed Application Only (NO Photocopies • NO Faxes)