



**This certificate is awarded to**

Name:

RN License Number:

For participation in and completion of:

**Introduction to Orthopedic Primary Care**

Date:

**Contact Hours: 1**

Provider approved by the California Board of Registered Nursing, Provider # 17398, for 1 contact hour. This certificate must be retained by the licensee for a period of four years after the course concludes.

*AJ Benham, DNP, NP*

*Kathleen A. Geier, DNP, NP*

Program Directors