# Table of Contents

- About ABOHN ........................................ 1  
- Ethics ........................................... 1  
- AOHN’s Definition of Occupational Health Nursing ... 2  
- About COHN Certification .......................... 2  
- Statement of Nondiscrimination .................... 2  
- About This Handbook .................................. 2  
- About ABOHN’s Testing Agency, AMP ................. 2  
- The Certification Examination ....................... 2  
  - Examination Construction .......................... 2  
  - Examination Content ................................ 3  
  - Core Content Areas for the COHN Examination .... 5  
- Examination Eligibility Requirements ................ 6  
- Examination Application ............................ 6  
  - Application Completion Guidelines .................. 6  
  - General Instructions ................................ 7  
  - Guide to Code Numbers ............................. 7  
  - Job Title Codes .................................... 7  
  - Employment ....................................... 8  
  - Work Experience ................................... 8  
  - Professional Nursing Education .................... 9  
  - Application Checklist ................................ 9  
- Scheduling an Examination Appointment .............. 9  
  - International Testing ............................... 10  
- Examination Appointment Changes/Failure to Report or to Schedule an Examination ......................... 10  
- Examination Accommodations ....................... 10  
- Telecommunication for the Deaf ..................... 10  
- Fees ........................................... 10  
  - Fee Payments .................................... 10  
  - Application Fee ................................... 10  
  - Examination Fee .................................. 10  
  - Examination Authorization Extension Fee ......... 10  
- Declined Credit Cards, Returned Checks, and Handling Fees ........................................... 10  
- No Refunds ....................................... 10  
- How to Prepare for the Examination ................. 11  
  - Passing Candidates Examination Preparation ...... 11  
  - Certification Self-Assessment Test (CSAT) ........ 11  
  - Examination Preparation Plan ..................... 11  
- On the Day of Your Examination ..................... 12  
  - Identification ..................................... 12  
  - Inclement Weather or Emergency ................... 12  
  - Security .......................................... 12  
  - Personal Belongings ............................... 12  
  - Examination Restrictions ......................... 12  
  - Misconduct ...................................... 13  
  - Practice Examination .............................. 13  
  - Timed Examination ................................ 13  
- References ......................................... 14  
- Taking the Examination .............................. 16  
  - Experimental Questions and Guessing ............. 16  
  - Sample Examination Questions ..................... 16  
- Following the Examination .......................... 16  
  - If You Pass the Examination ....................... 17  
  - If You Do Not Pass the Examination ............... 17  
  - Confidentiality .................................... 17  
  - Duplicate Score Report ............................ 17  
  - Scores Canceled by ABOHN or AMP ............... 17  
- Revocation of Certification .......................... 17  
  - Appeals Process .................................. 17  
- Retaining Certification ............................. 18  
- COHN Application .................................. 19  
- Request for Special Examination Accommodations .... 25  
- Documentation of Disability-Related Needs .......... 26  

Copyright © 2013 by the American Board for Occupational Health Nurses, Inc. All rights reserved. Any duplication or reproduction of all or any portion of these materials without the express written permission of the American Board for Occupational Health Nurses, Inc. is prohibited.

Rev. 8/5/2013
About ABOHN
The American Board for Occupational Health Nurses, Inc., ABOHN was established as an independent nursing specialty certification board in 1972. ABOHN was formed to develop and conduct a program of certification for qualified occupational health nurses. ABOHN is the sole certifying body for occupational health nurses in the United States and awards four credentials: Certified Occupational Health Nurse (COHN), Certified Occupational Health Nurse – Specialist (COHN-S), Case Management (CM), and Safety Management (SM).

Certification is a process by which a non-governmental agency or association validates, based on predetermined standards of nursing practice, an individual registered nurse's qualifications, knowledge and practice in a defined functional or clinical area of nursing. ABOHN’s certifications are voluntary programs designed to inform and protect consumers by identifying those nurses who have demonstrated mastery in occupational health nursing through education, experience and knowledge. ABOHN does not offer an entry-level certification.

The work of ABOHN is managed by a Chief Executive Officer and is governed by a Board of Directors composed of Certified Occupational Health Nurses and a non-nurse public member. As an independent board, ABOHN is separate and autonomous from all other specialty and professional membership groups but maintains collaborative relationships with these organizations.

ABOHN Vision Statement: “ABOHN Certification is recognized and valued as the standard to maximize the health and safety of workers worldwide.”

ABOHN’s Mission is to promote a standard of excellence in occupational health nursing through credentialing.

Principles and Values: To accomplish its mission and vision, ABOHN commits its resources to achieving the following principles and values:

- Establish and promote credentialing standards for professional occupational health nurses;
- Publicly recognize individuals who demonstrate that they meet these standards;
- Elevate the quality of occupational health nursing practice;
- Stimulate the development of improved educational standards and programs in the field of occupational health nursing;
- Encourage occupational health nurses to continue their professional education;
- Perform the above unrestricted by consideration of nation, origin, race, creed, disability, color, age and gender;
- Create value for employers, their employees and the occupational health professional; and
- Seek inclusivity by partnering with organizations that share ABOHN’s mission and values.

ABOHN’s purposes are to:

- Establish standards and examinations for professional nurses in occupational health;
- Elevate and maintain the quality of occupational health nursing services;
- Stimulate the development of improved educational standards and programs in the field of occupational health nursing;
- Encourage occupational health nurses to continue their professional education; and
- Perform the above unrestricted by consideration of national origin, race, creed, disability, color, age or sex.

Ethics
ABOHN considers the American Association of Occupational Health Nurses (AAOHN) Code of Ethics for Occupational Health Nurses foundational for nursing practice, providing a framework for making ethical decisions and fulfilling responsibilities to the public, colleagues and the profession. For additional information on the Code of Ethics, please visit the AAOHN website at www.aaohn.org.

The following ABOHN certification programs have been accredited by the National Commission for Certifying Agencies (NCCA), the accreditation arm of the Institute for Credentialing Excellence (ICE):

- Certified Occupational Health Nurse (COHN)
- Certified Occupational Health Nurse-Specialist (COHN-S)
- Case Management (CM)

The Safety Management credential is offered to COHN or COHN-S certified occupational health nurses with safety responsibilities. ABOHN collaborated with the Board of Certified Safety Professionals (BCSP) to produce an examination validated through the ABOHN practice analysis study to represent the significant knowledge, skills and abilities of occupational health nurses with safety responsibilities.

ABOHN is a member of the Institute of Credentialing Excellence (ICE) and a charter member of the American Board of Nursing Specialties (ABNS).
AAOHN’s Definition of Occupational Health Nursing

Occupational and environmental health nursing is the specialty practice that provides for and delivers health and safety programs and services to workers, worker populations and community groups. The practice focuses on promotion and restoration of health, prevention of illness and injury and protection from work related and environmental hazards. Occupational and environmental health nurses (OHNs) have a combined knowledge of health and business that they blend with healthcare expertise to balance the requirement for a safe and healthful work environment with a “healthy” bottom line.

About COHN Certification

After the eligibility requirements have been met, the candidate for Certified Occupational Health Nurse (COHN) is required to achieve a passing score on the national examination. Upon successful completion of the examination, a certificate is issued that states that the candidate has met the standards for board certification as a Certified Occupational Health Nurse and the COHN credential is awarded. Only those nurses who have met all of the criteria (have been successful on the examination and are in Active Status with ABOHN) are entitled to use this credential.

To maintain the COHN certification, certificants must continue to meet the eligibility requirements, recertify every five years, and pay the associated fees. Part of the examination fee covers the cost of the successful candidate’s first year of certification maintenance. COHNs are billed for the certification maintenance fee for the remaining four years of their five-year certification period at the time they pass the examination. All certified nurses are listed in the ABOHN website Directory of Certified Occupational Health Nurses.

Statement of Nondiscrimination

ABOHN does not discriminate among applicants and candidates on the basis of age, gender, race, color, religion, national origin, disability or marital status.

About This Handbook

This handbook provides information needed to apply and prepare for the Certified Occupational Health Nurse (COHN) Examination. It includes the following:

• eligibility requirements
• examination policies
• test blueprint
• sample questions
• study references
• examination application

Please retain this handbook after applying for the examination – it may be needed at a later date.

About ABOHN’s Testing Agency, AMP

ABOHN has established a contract with Applied Measurement Professionals, Inc. (AMP) to assist in the development, administration, scoring and analysis of its COHN examination.

The Certification Examination

Examination Construction

ABOHN’s contract with Applied Measurement Professionals, Inc. (AMP) includes provision of the technical assistance needed to construct and validate the certification examination. The ABOHN Board of Directors periodically conducts an occupational health nursing (OHN) practice analysis. The study surveys certified and non-certified OHNs to determine the significance of specified tasks to OHN practice. The current occupational health nursing practice analysis information is used to identify OHN roles, develop the COHN Examination Content Outline, and to determine the percent distribution of the questions for each role. Therefore, the subject matter and the relative importance of each topic on the examination reflect the data validated by this periodic study. Thus, the ABOHN examinations are firmly grounded in the knowledge, skills, and abilities essential for the delivery of effective, proficient occupational health and safety practice.

ABOHN selects Certified Occupational Health Nurses who represent the diversity of occupational health nursing practice and employment to serve on its Board of Directors and its examination committees. These committees draft the examination’s multiple-choice questions, which are then edited and validated by AMP and approved by the ABOHN Board for inclusion on the examination.

The ABOHN Board of Directors and AMP review all examination items or questions for subject matter, validation, difficulty level, relevance, and importance for current practice. All questions are evaluated, classified, and revised by the COHN examination committee and AMP for conformance to psychometric principles. Examples of the question format “Sample Examination Questions” are found in this handbook. The sample questions do not reflect the full range of content or scope of difficulty levels of the questions on the examination.
Examination Content
The COHN examination is composed of multiple-choice questions and is based upon two factors. First, the four (4) OHN roles identified by the most recent practice analysis are used as the examination’s four (4) major categories: clinician, coordinator, advisor, and case manager. Secondly, ABOHN uses the premise that OHN incorporates the four nursing process steps:

- Assessment,
- Planning,
- Implementation, and
- Evaluation.

The weight/percentage of questions from each major role and the number of questions from each nursing process step is shown in the COHN Test Blueprint chart that follows. The following activity statements for each step were validated by ABOHN’s 2011 Practice Analysis.

COHN Test Blueprint

I. Clinician Role (48)
   A. Assessment
      1. Obtain an occupational and environmental health history
      2. Participate in post-offer/pre-placement health assessments
      3. Assess health needs of workers and worker populations (i.e., health risk assessment, changing demographics)
      4. Conduct health surveillance of individuals/groups for specific hazards (e.g., hearing conservation, respiratory protection, laser safety)
      5. Monitor new developments related to emerging health care issues
      6. Assess employees with work restrictions or limitations and make appropriate job placement recommendations (i.e., fitness for duty)
      7. Identify physical requirements to fulfill essential job functions
   B. Planning
      1. Interpret results of screening tests and refer as indicated
      2. Recommend changes in job/work to accommodate workers’ health status
   C. Implementation
      1. Use and maintain an employee health recordkeeping system
      2. Recognize and respond to ethical issues in practice
      3. Provide treatment of work-related injuries or illnesses
      4. Provide direct care for non-work related illnesses and injuries for workers
   D. Evaluation
      1. Evaluate the quality of care provided by internal occupational health services
      2. Evaluate injuries, illnesses or incidents using root cause analysis

II. Coordinator Role (41)
   A. Assessment
      1. Monitor laws and regulations affecting nursing practice (e.g., licensure, practice acts)
      2. Analyze injury, illness, and accident data
      3. Use material safety data sheets
      4. Identify staffing requirements
      5. Conduct work site walk-through surveys/assessments to identify hazards
      6. Perform ergonomic evaluation
      7. Assess and report on the organization’s regulatory compliance with applicable standards (e.g., OSHA)
   B. Planning
      1. Collaborate with other disciplines to protect and promote worker health and safety
      2. Recommend appropriate personal protective equipment
      3. Coordinate medical and/or drug testing for DOT compliance
      4. Develop occupational health and safety policies and procedures
      5. Design/develop the budget for occupational health and/or safety
      6. Establish goals and objectives for an occupational health and safety program
      7. Develop/implement nursing protocols
      8. Incorporate knowledge of cultural beliefs/practices in implementing programs and services
      9. Establish guidelines related to workplace violence
      10. Apply principles of ergonomics to worksite design
      11. Collaborate in the development and implementation of emergency preparedness plans
   C. Implementation
      1. Use and maintain an employee health recordkeeping system
      2. Recognize and respond to ethical issues in practice
      3. Provide treatment of work-related injuries or illnesses
      4. Provide direct care for non-work related illnesses and injuries for workers
      5. Provide health promotion, disease prevention screening tests (e.g., cancer screening, blood pressure monitoring, cholesterol)
      6. Refer employees to an employee assistance program
      7. Provide individual counseling services for workers
      8. Perform audiometry
      9. Perform pulmonary function testing
      10. Perform vision testing
      11. Assure confidentiality of personal health information and comply with established codes of ethics and legal or regulatory requirements
      12. Maintain OSHA-required logs and documents
C. Implementation
1. Coordinate health promotion and disease prevention strategies and programs
2. Coordinate surveillance programs
3. Incorporate computer technology into management practices
4. Use computer software applications for employee health information management (i.e., informatics)
5. Recommend control measures for exposures/hazards
6. Apply regulatory standards and guidelines
7. Prepare and provide testimony or documentation for legal proceedings (e.g., workers’ compensation, dismissal, EEOC)
8. Participate in administrative proceedings related to occupational health
9. Prepare business reports for management
10. Implement policies and procedures for maintenance of confidentiality
11. Select (hire) staff
12. Develop and implement workplace substance abuse programs
13. Establish and monitor compliance with infection control guidelines
14. Coordinate/serve on interdisciplinary committees/teams
15. Provide resources and information to meet the health and safety needs of the company
16. Manage the first responder program
17. Apply management systems principles to health and safety programs
18. Participate in audits (e.g., health, safety, environmental, organizational)

D. Evaluation
1. Demonstrate the value of services provided (e.g., case management, occupational health services)
2. Conduct quality management/improvement program(s) for occupational health and safety (e.g., benchmarking, best practices)
3. Evaluate staff performance
4. Interpret the data obtained during a work site walkthrough survey assessment

III. Advisor Role (22)
A. Assessment
1. Conduct educational and training needs assessments
2. Obtain management support for educational programs

B. Planning
1. Interpret needs assessment results for program planning
2. Select teaching methods and content based on the characteristics of learners (e.g., apply adult learning principles, cultural differences)
3. Develop teaching strategies to effectively communicate risks to workers
4. Plan/implment new employee occupational health and safety orientation programs
5. Develop and deliver education and training programs (i.e., health and safety)

C. Implementation
1. Educate and train workers about basic health and wellness (e.g., self-care, complementary/alternative medicine, stress management)
2. Educate management at all levels about occupational health and safety programs
3. Educate and train occupational health and safety staff
4. Serve as a preceptor or mentor for students/health care professionals
5. Train employees on proper use of personal protective equipment
6. Serve on professional and community boards

D. Evaluation
1. Communicate the results and outcomes of educational and training programs

IV. Case Manager Role (24)
A. Assessment
1. Identify work-related cases that are appropriate for case management
2. Identify non work-related cases that are appropriate for case management

B. Planning
1. Develop case management plans for individuals
2. Develop and/or coordinate a network of resources for case management
3. Develop a multidisciplinary plan of care in collaboration with the employee and his/her support systems

C. Implementation
1. Manage short-term or long-term disability cases
2. Implement integrated disability management strategies (i.e., STD, LTD, FMLA, workers’ compensation, ADA)
3. Manage workers’ compensation cases
4. Refer disabled employees for rehabilitation
5. Coordinate administration of case management with vendors and community resources
6. Administer or manage a workers’ compensation program
7. Administer the FMLA program

D. Evaluation
1. Monitor progress of workers in work-conditioning programs
2. Monitor outcomes of care in keeping with the treatment plan
3. Evaluate health care delivery to employees provided by external providers
4. Analyze workers’ compensation data
Core Content Areas for the COHN Examination

The Core Content outline is a compilation of subject areas that are important to the practice of occupational health nursing. Many of these areas could reasonably be expected to be represented on the COHN certification examination. In combination with the COHN Test Blueprint areas, the Core Content list can serve as an excellent means to organize study and preparation for the COHN examination.

**CHEMICAL HAZARDS**
- solvents, cutting oils (e.g., benzene)
- asbestos, silica, cotton dust
- heavy metals (e.g., lead, cadmium, nickel, chromium, mercury)
- carbon monoxide, methane
- cyanide, hydrogen sulfide
- chlorine, toluene isocyanates (i.e., sensitizing agents)
- ethylene oxide
- pesticides (e.g., organophosphates)
- reproductive hazards
- carcinogens
- latex allergy
- toxicology terms (e.g., acute/chronic/dose/PEL)
- exposure routes (e.g., inhalation/absorption/ingestion/injection)
- target organs (e.g., neurotoxins/hepatotoxins)
- medical surveillance
- other chemical hazards

**BIOLOGIC HAZARDS**
- food and water borne pathogens
- tuberculosis
- immunizations/tetanus
- bloodborne pathogens (e.g., HIV, hepatitis B)
- travel medicine
- other biologic hazards

**PHYSICAL HAZARDS/ERGONOMICS**
- noise vibration/hearing loss
- radiation (e.g., ionizing/lasers/infrared/microwaves/NRC)
- heat/cold stress
- electrical
- upper extremity disorders/algorithms
- back disorders
- work station design (e.g., VDTs)
- job task analysis

**PSYCHOPHYSIOLOGIC/STRESS**
- violence (e.g., critical incident stress debriefing – CISD)
- shift work
- fitness for duty/job placement (e.g., transitional work/return to work)
- stress/time management
- employee assistance programs (e.g., drug abuse/alcoholism)
- drug screening/chain of custody/hair samples
- aging workers
- cultural differences
- disaster planning

**SAFETY AND INDUSTRIAL HYGIENE ISSUES**
- safety walkthrough
- splash exposure
- sampling (e.g., area/personal)
- indoor air quality/radon
- personal protective equipment (e.g., respirators/gloves/clothing/hearing protection)
- engineering controls (e.g., automation/substitution/isolation/distancing)
- administrative controls (e.g., rotation/shift adjustment/training)
- other safety hazards

**STANDARDS AND REGULATIONS**
- hazard communication
- MSDSs
- DOT
- confined space
- lock out/tag out
- OSHA standards (e.g., respiratory protection)
- ADA (e.g., job placement)
- FMLA
- HIPAA
- Bloodborne Pathogens

**EMERGENCY RESPONSE**
- burn care
- eye injuries
- cardiac emergencies/AEDs
- strains and sprains
- crush injuries/amputation/bleeding
- head injuries

**DISEASE MANAGEMENT**
- dermatitis
- occupational asthma/acute respiratory distress
- pulmonary function testing
- case management/clinical outcomes
- diabetes
- asthma
- cholesterol
- hypertension
- disease state management
- chronic pain management
- wound care
**HEALTH EDUCATION/PROMOTION**
- smoking cessation
- counseling/health promotion (e.g., Healthy People 2020 objectives)
- confidentiality
- AIDS education
- counseling
- adult learning theory
- levels of prevention
- literacy/language issues
- communicating risk
- health risk assessment

**MANAGEMENT PRINCIPLES**
- ethics
- legal/regulatory practice aspects
- principles of management/communication

**INFORMATION MANAGEMENT/RECORDKEEPING**
- confidentiality
- workers’ compensation
- policy and procedures/protocols
- recordkeeping
- research designs

**CLINICAL PRACTICE**
- pre-placement evaluation
- screening test results analysis
- performing screening tests
- clinical assessment
- return to work assessment
- work restriction management

**Examination Eligibility Requirements**
The COHN examination is offered to those occupational health nurses whose practices involve clinician, coordinator, advisor and case manager roles.

Eligibility requirements for the COHN examination include:

- **In the past 5 years:**
  - a current, unrestricted RN license or an international equivalent;
  - 3,000 hours of experience in occupational health nursing;
  - the completion of a certificate program in occupational health nursing for academic credit.
  - (ABOHN requires documentation of the certificate program to show a certificate program for academic credit was earned.)

**Examination Application**

There are two ways to apply for the COHN examination:

1. **Online:** (For credit card payments only.) If you wish to apply online, go to [www.abohn.org](http://www.abohn.org). Under the Certification tab, mouse over the COHN tab and click on the Online application tab. After you fill in the application, but before you send it, please make a copy for yourself.

2. **By mail:** You may download an application from either the [www.abohn.org](http://www.abohn.org) or [www.goAMP.com](http://www.goAMP.com) websites, or call the ABOHN office at 630-789-5799 to request an application to be sent to you. Send your completed application and fee payment (personal check, business check, cashier’s check, or money order) made payable to the American Board for Occupational Health Nurses, Inc., or credit card information (American Express, Discover, VISA, MasterCard) form.

An application is considered complete only when a qualified applicant has provided all requested information; that information is legible and accurate; the application is accompanied with all the necessary supporting documentation; and the application includes the appropriate application fee payment.

**Application Completion Guidelines**

**Document Copies**

Before you begin to complete your application, copy the following documents:

- **Registered Nursing License** – Written verification from your state board of nursing is required. Your license must show your current name, expiration date, and the name of the agency that issued the license. Licensure from other countries will be considered on a case-by-case basis.

- **Job Description(s) if applicable**

- **Work Experience** – A minimum of 3,000 hours of occupational health nursing work experience earned during the five years prior to the application. Work experience means actively engaged in occupational health nursing for compensation; or

- **Documentation** of the completion of a certificate program for academic credit that has been earned within the past five years.

If your current name is different than the one that appears on your license or certificate, you must provide proof of a legal name change. Please write your current name in the upper right hand corner of each document.

**Keep Your Original Documents!** All documents submitted with your application become the property of ABOHN, Inc. and cannot be returned.
General Instructions
The application form may be printed, typed, computer generated or submitted online at www.abohn.org. Regardless of the submission method that you use, please make sure that all information is clearly legible. Computer-generated forms must include each item that is on the printed application form.

All applicants must submit copies of their license, job descriptions and any other needed documentation to the ABOHN office. We will accept the documentation via:

1. email: info@abohn.org
2. fax: 630-789-8901
3. mail: ABOHN
   201 E. Ogden Ave, Suite 114
   Hinsdale, Il 60521

If you are submitting your hard copy application, please do not staple documentation to your application form and please refrain from binding your completed application. Instead, please secure the document with a large clip or rubber band. Make a copy of your completed application for your records.

Guide to Code Numbers
Please use the following codes to complete your application.

Job Title Codes
Instead of selecting your official company title, please select the title that most closely matches your primary job responsibility, or the one which represents the majority of your work time. If your job description does not match any of the options listed, enter code number “11” and write out your job title/description on the application. The following printed descriptions are derived from the AAOHN Core Curriculum for Occupational Health Nursing.

<table>
<thead>
<tr>
<th>CODE</th>
<th>TITLE</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Clinician</td>
<td>Provides direct client care within the scope of the applicable states’ nurse practice act.</td>
</tr>
<tr>
<td>2</td>
<td>Case Manager</td>
<td>Coordinates health care services for workers from the onset of an injury or illness to a safe return to work or an optimal alternative.</td>
</tr>
<tr>
<td>3</td>
<td>Occupational Health Services Coordinator</td>
<td>Assesses the health and safety needs of a worker population and the health and safety of the worksite.</td>
</tr>
<tr>
<td>4</td>
<td>Health Promotion Specialist</td>
<td>Manages a multilevel, wide-ranging health promotion program that supports the corporate business objectives.</td>
</tr>
<tr>
<td>5</td>
<td>Manager/Administrator</td>
<td>Directs, administers, and evaluates occupational health services that are consistent with the organization’s goals and objectives.</td>
</tr>
<tr>
<td>6</td>
<td>Nurse Practitioner</td>
<td>Assesses the health status of workers through health histories, physical assessments, and diagnostic tests.</td>
</tr>
<tr>
<td>7</td>
<td>Corporate Director</td>
<td>Serves as a corporate manager and policy maker within an organization.</td>
</tr>
<tr>
<td>8</td>
<td>Consultant</td>
<td>Serves as an advisor for evaluating and developing occupational health and safety services.</td>
</tr>
<tr>
<td>9</td>
<td>Educator</td>
<td>Develops, implements and evaluates curricula and clinical experiences appropriate for the professional educational development of occupational health nurses.</td>
</tr>
<tr>
<td>10</td>
<td>Researcher</td>
<td>Develops, implements and analyzes research related to the health and safety of working populations.</td>
</tr>
<tr>
<td>11</td>
<td>Other (Specify Title)</td>
<td>Job duties not covered by above. Please list on application.</td>
</tr>
<tr>
<td>12</td>
<td>Safety Manager</td>
<td>Plans, organizes, implements and evaluates hazard control activities that meet organizational safety objectives and reduces risks to people, property and the environment.</td>
</tr>
</tbody>
</table>
**Education Codes**

Please enter all the Education Codes that correspond to your educational preparation.

0. Other (please specify)  
1. Associate Degree  
2. Diploma  
3. Baccalaureate in Nursing  
4. Other Baccalaureate  
5. Master’s in Nursing  
6. Master’s in Public Health  
7. Other Master’s  
8. Doctorate

**Business Codes**

Select the number that most closely describes the business in which you are employed.

1. Agriculture/Forestry/Fisheries  
2. Mining  
3. Construction  
4. Transportation  
5. Communications  
6. Utility Services  
7. Wholesale & Retail Trade  
8. Finance  
9. Insurance & Real Estate  
10. Federal Government  
11. State Government  
12. Local Government  
13. Hospital/Medical Centers  
14. College/Universities  
15. Textile Mill Products  
16. Lumber/Wood Products  
17. Paper/Allied Products  
18. Chemicals/Allied Products  
19. Rubber/Misc. Plastic/Leather Products  
20. Primary Metal/Fabricated Metal Products  
21. Professional/Scientific/Control Instruments  
22. Machine, Non-Electrical  
23. Aerospace  
24. Electrical Machinery  
25. Food/Kindred Products  
26. Apparel/Finished Products  
27. Oil Refining/Related Industries  
28. Stone/Clay/Glass/Concrete Products  
29. Amusement/Recreational Services  
30. Miscellaneous Manufacturing Industries  
31. Miscellaneous Services  
32. Non-classifiable Establishments  
33. Self-employed

**Employment**

Employment must meet AAOHN’s definition of occupational health nursing and must result in paid compensation. However, for the purpose of examination eligibility, otherwise eligible full-time students who are pursuing an occupational health related degree are considered to be in “current employment”. Volunteer work activities and other educational programs’ clinical experiences that fail to provide financial compensation are not considered employment.

Copies of your current or most recent job description must be submitted with your application if you are using the employment as your occupational health nurse experience.

**Work Experience**

For the five-year period prior to your application, you must demonstrate that as a registered nurse, you earned paid compensation for 3,000 hours of occupational health nursing work experience that meets AAOHN’s definition of occupational health nursing. No more than 40 hours per week may be submitted for consideration and full-time employment is considered to be equal to 2,080 hours per year.

Occupational health nursing experience should be documented for each occupational health nursing position that you have held during the preceding five-year period. If you have held more than one position during the previous five-years and you are using the hardcopy application, duplicate the work experience page. Begin with your current or most recent position, label it #1 and enter the information. Number any previous positions that you have held during the previous five-years, label the duplicated pages to correspond to each position’s assigned number, and enter each position’s information. If you are online continue to use the provided spaces to enter information for each additional position.

For each listed position, please provide the name, title, and telephone number of the person who can confirm your employment. ABOHN uses the information to verify a percentage of applicants’ employment and to clarify information when questions arise.

Your submitted written description of your job duties should enable the reviewer to determine whether your job conforms to AAOHN’s definition of occupational health nursing. Please review the definition prior to submitting your job description(s) and/or writing your explanation/description for job titles for which you have entered the Job Title code number, “11. Other”.

Time spent in the completion of a certificate program in occupational health nursing for academic credit, baccalaureate completion or graduate program related to occupational health may be used for the occupational health nursing work experience requirement. However, to be eligible for work
experience consideration, the certificate must have been completed within the five-year period prior to application. Time spent in degree-granting programs prior to the time that you became a registered nurse will not be accepted for occupational health nursing work experience credit.

The maximum number of hours of occupational health nursing work experience credit that may be requested is:

- 750 hours for a baccalaureate completion program, or a non-occupational health related Master’s degree; and/or
- 2,000 hours for an occupational health related graduate degree from a National Institute for Occupational Safety and Health (NIOSH) funded Education and Research Center (ERC) program.

Professional Nursing Education

Since the COHN examination eligibility criteria lack a baccalaureate or advanced degree requirement, you are not required to submit a copy of a degree or final transcript documentation. However, if you have earned a degree that you want included in your ABOHN record, you may list your degree(s) in this section and submit the documentation.

Application Checklist

Prior to submitting your written or online application, please review the following checklist.

- Have you answered all the questions?
- Have you included a copy of your current nursing license, its written verification?
- Have you included a copy of your current or most recent job descriptions?
- Have you included copies of any certificate program in occupational health for academic credit or any degrees that you want included in your ABOHN record?
- Have you made a complete copy of your application and its supporting documentation for your files?
- If you are submitting a written application, have you refrained from stapling or binding your completed application? If not, please remove the staples or binding.

Mail your completed written application and all supporting documents or submit your online application and mail your supporting documentation to:

American Board for Occupational Health Nurses, Inc.
201 E. Ogden, Suite 114
Hinsdale, IL 60521-3652
Phone: 630-789-5799

If your application is found to have deficiencies, you will be contacted by telephone or email. If your application meets the eligibility criteria, you will receive notification and an invoice for the examination fee.

Scheduling an Examination Appointment

Application fees are good for 90 days from the date of approval by the ABOHN office. The Examination fee must be paid within 90 days of the date of the invoice from the ABOHN office and is good for 120 days. If you fail to schedule an appointment and sit for your examination before the expiration date, your examination authorization will be voided and you will have to reapply. You may schedule an examination appointment with AMP by one of the following methods. Be prepared to confirm a date and location for testing.

1. Schedule online. Visit AMP’s website at www.goAMP.com and select “Schedule/Apply for an Exam” to schedule an examination appointment.

   OR

2. Call AMP at 888-519-9901 to schedule an examination appointment.

The examinations are delivered by computer at 190 AMP Assessment Centers nationwide. The examinations are scheduled by appointment only, Monday through Saturday at 9:00 a.m. and 1:30 p.m. Individuals are scheduled on a first-come, first-served basis. Refer to the chart below.

<table>
<thead>
<tr>
<th>If you call AMP by 3:00 p.m. Central Time on...</th>
<th>Your examination may be scheduled as early as...</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday</td>
<td>Wednesday</td>
</tr>
<tr>
<td>Tuesday</td>
<td>Thursday</td>
</tr>
<tr>
<td>Wednesday</td>
<td>Friday/Saturday</td>
</tr>
<tr>
<td>Thursday</td>
<td>Monday</td>
</tr>
<tr>
<td>Friday</td>
<td>Tuesday</td>
</tr>
</tbody>
</table>

After the appointment is made, you will be given a time to report to the Assessment Center. Please make a note of it since an admission letter will not be sent. You will only be allowed to take the examination for which the appointment has been made. No changes in examination type will be made at the Assessment Center. UNSCHEDULED CANDIDATES (WALK-INS) WILL NOT BE ADMITTED to the Assessment Center.
International Testing

Our testing provider AMP has a secure web-based network of international sites. With more than 83 sites across 35 countries, the international network offers the ability to take our examination around the globe.

Examination Appointment Changes/Failure to Report or to Schedule an Examination

<table>
<thead>
<tr>
<th>If the Examination is scheduled on . . .</th>
<th>AMP must be contacted by 3:00 p.m. Central Time to reschedule the Examination by the previous . . .</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday</td>
<td>Wednesday</td>
</tr>
<tr>
<td>Tuesday</td>
<td>Thursday</td>
</tr>
<tr>
<td>Wednesday</td>
<td>Friday</td>
</tr>
<tr>
<td>Thursday</td>
<td>Monday</td>
</tr>
<tr>
<td>Friday</td>
<td>Tuesday</td>
</tr>
</tbody>
</table>

A candidate who wishes to reschedule his/her examination appointment, must contact AMP (888-519-9901) and ABOHN (630-789-5799) office at least TWO business days prior to the scheduled testing session or they will forfeit the examination fee and be required to reapply and submit required fees to reschedule the examination.

Examination Accommodations

ABOHN and AMP comply with the Americans with Disabilities Act (ADA) and are interested in ensuring that individuals with disabilities are not deprived of the opportunity to take the examination solely by reason of a disability, as required and defined by the relevant provisions of the law. Special testing arrangements may be made for these individuals, provided that an appropriate request for accommodation is received by ABOHN at least 45 days before the desired examination date and the request is approved. To make a request for a special examination accommodation, please complete the Request for Special Examination Accommodations form included in this handbook, obtain an appropriate health professional's signature, and submit the completed form with the examination application.

Telecommunication for the Deaf

AMP is equipped with Telecommunication Devices for the Deaf (TDD) to assist deaf and hearing-impaired candidates. TDD calling is available 8:30 a.m. to 5:00 p.m. (Central time) Monday-Friday at 913-895-4637. This TDD phone option is for individuals equipped with compatible TDD machinery.

Fees

A current fee schedule may be found on ABOHN’s website (www.abohn.org).

Fee Payments

Fee payments may be made by business checks, personal checks, cashier’s checks, or money orders made payable to ABOHN, or by credit card (VISA, MasterCard, American Express and Discover). Cash is not an acceptable payment method.

Application Fee

The application fee payment must accompany each completed application.

Examination Fee

To become an examination candidate, an approved applicant’s examination fee must be RECEIVED in the ABOHN office by the deadline.

Examination Authorization Extension Fee

A 60-day, one-time examination authorization extension may be purchased for an additional cost. Please go to www.abohn.org for information.

Declined Credit Cards, Returned Checks, and Handling Fees

When a credit card transaction is declined, or a check is returned for non-sufficient funds, ABOHN charges a handling fee. When re-submitting your payment, you must send a certified check or money order for the amount due, which should include the additional handling fee. ABOHN’s current fee schedule is available on the ABOHN website (www.abohn.org).

No Refunds

Candidates failing to arrive at the Assessment Center on the date and time that they are scheduled for examination will forfeit their examination fees and must reregister by contacting ABOHN. Examination fees may NOT be transferred to another appointment. Candidates arriving more than 15 minutes late for an appointment will not be admitted, will forfeit their examination fee, and must contact ABOHN.
How to Prepare for the Examination

Passing Candidates Examination Preparation

Passing candidates use a variety of study techniques including independent and group study. Many others choose review courses or computer programs. Based on previous information the average times used to study by passing Candidates are:

- study time prior to the examination is 20 weeks
- average number of study hours per week is 10 hours
- total hours of study for the exam is 136 hours
- average hours for independent study is 104 hours

The most frequently used textbooks reported by COHN examination passers are:

- “AAOHN Core Curriculum Study Guide”, AAOHN
- “Occupational Health Nursing”, Bonnie Rogers
- “AAOHN Core Curriculum for Occupational Health Nursing”*

*Please note: Although the AAOHN Core Curriculum provides an excellent overview of the aspects of occupational health nursing practice, it is not intended as an exclusive source of information for the examination.

The most frequently used journals reported by COHN passers include:

- AAOHN Journal
- Compliance Magazine
- American Journal of Nursing (AJN)

Certification Self-Assessment Test (CSAT)

The COHN Certification Self-Assessment Test (CSAT) contains thorough descriptions of the ABOHN examination and helpful suggestions for preparation. It provides 50 questions that use the same format as actual examination questions and are representative of the knowledge areas and activities that form the Test Blueprint. For more information about how to purchase a CSAT, please visit the ABOHN website or call the office (630-789-5799).

Examination Preparation Plan

Since occupational health nursing practice is so varied and the certification examination is designed to represent a broad reflection of practice, no two professionals will prepare for the examination in exactly the same way. In this handbook, we have gathered several resources that may help you to prepare to take the examination. The following are included: COHN Test Blueprint, core content outline, study references and sample examination questions.

To help you to determine your own study plans, the following steps are recommended:

1. Perform an occupational health knowledge self-assessment. ABOHN recommends using the examination specifications on the COHN Test Blueprint and Core Content list.
2. Classify activities and core topic areas for intense study, and identify those areas where a simple review would be sufficient.
3. Establish a realistic weekly study schedule. First, schedule topics that will need intense study. Save review only topics for later in your study schedule.
4. Gather resources with which to study. The included “Study References” represent a partial listing of books, journals and other materials that have been used to write examination questions. This list can help you to identify resources that may be used to address identified learning needs, but it is not intended to be a mandatory, exclusive reading list.
5. Consider forming a study group, or selecting a study partner. Working with study partners that have varied occupational health nursing backgrounds can be especially helpful.
6. Many certification candidates have found that review courses can be helpful to prepare for the examination. Review courses may be used to identify weaknesses that direct initial study, or as a final review prior to the examination.

ABOHN compiles a list of occupational health related courses and continuing education resources and uses it to create the “Education Resource Guide” that is provided to candidates. ABOHN neither offers, nor recommends specific courses, or the use of specific study materials to prepare for the examination.
On the Day of Your Examination

On the day of your examination appointment, report to the Assessment Center no later than your scheduled testing time. Once you enter the building, look for the signs indicating AMP Assessment Center Check-In. IF YOU ARRIVE MORE THAN 15 MINUTES AFTER THE SCHEDULED TESTING TIME YOU WILL NOT BE ADMITTED.

Identification

To gain admission to the assessment center, you must present two forms of identification. The primary form must be government issued, current and include your name, signature and photograph. Temporary ID is not accepted. You will also be required to sign a roster for verification of identity.

- Examples of valid primary forms of identification are: driver’s license with photograph; state identification card with photograph; passport; military identification card with photograph.
- The secondary form of identification must display your name and signature for signature verification (e.g., credit card with signature, social security card with signature, employment/student ID card with signature).
- If your name on your registration is different than it appears on your identification, you must bring proof of your name change (e.g., marriage license, divorce decree or court order).

Inclement Weather or Emergency

In the event of inclement weather or unforeseen emergencies on the day of an examination, AMP will determine whether circumstances warrant the cancellation, and subsequent rescheduling, of an examination. The examination will usually not be rescheduled if the Assessment Center personnel are able to open the Assessment Center.

You may visit AMP’s website at www.goAMP.com prior to the examination to determine if AMP has been advised that any Assessment Centers are closed. Every attempt is made to administer the examination as scheduled; however, should an examination be canceled at an Assessment Center, all scheduled candidates will receive notification regarding rescheduling or reapplication procedures.

If power to an Assessment Center is temporarily interrupted during an administration, your examination will be restarted. The responses provided up to the point of interruption will be intact, but for security reasons the questions will be scrambled.

Security

ABOHN and AMP maintain examination administration and 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 audio and video surveillance equipment for security purposes.

The following security procedures apply during the examination:

- Examinations are proprietary. No cameras, notes, tape recorders, Personal Digital Assistants (PDAs), pagers or cellular/smart phones are allowed in the testing room. Possession of a cellular/smart phone or other electronic devices is strictly prohibited and will result in dismissal from the examination.
- No calculators are allowed.
- No guests, visitors or family members are allowed in the testing room or reception areas.

Personal Belongings

No personal items, valuables or weapons should be brought to the Assessment Center. Only wallets and keys are permitted. Large coats and jackets must be left outside the testing room. You will be provided a soft locker to store your wallet and/or keys with you in the testing room. You will not have access to these items until after the examination is completed. Please note the following items will not be allowed in the testing room except securely locked in the soft locker.

- watches
- hats
- wallets
- keys

Once you have placed your personal belongings into the soft locker, you will be asked to pull out your pockets to ensure they are empty. If you bring personal items that will not fit in the soft locker, you will not be able to test. The site will not store or be responsible for your personal belongings.

If any personal items are observed or heard (cellular/smart phones, alarms) in the testing room after the examination is started, you will be dismissed and the administration will be forfeited.

Examination Restrictions

- Pencils will be provided during check-in.
- You will be provided with one piece of scratch paper at a time to use during the examination, unless noted on the sign-in roster for a particular candidate. You must return the scratch paper to the supervisor at the completion of testing, or you will not receive your score report.
• No documents or notes of any kind may be removed from the Assessment Center.
• No questions concerning the content of the examination may be asked during the examination.
• Eating, drinking or smoking will not be permitted in the Assessment Center.
• You may take a break whenever you wish, but you will not be allowed additional time to make up for time lost during breaks.

Misconduct
If you engage in any of the following conduct during the examination you may be dismissed, your scores will not be reported and examination fees will not be refunded. Examples of misconduct are when you:
• create a disturbance, are abusive, or otherwise uncooperative;
• display and/or use electronic communications equipment such as pagers, cellular/smart phones, PDAs;
• talk or participate in conversation with other examination candidates;
• give or receive help or are suspected of doing so;
• leave the Assessment Center during the administration;
• attempt to record examination questions or make notes;
• attempt to take the examination for someone else;
• are observed with personal belongings, or
• are observed with notes, books or other aids without it being noted on the roster.

Violation of any of the above provisions results in dismissal from the examination session. The candidate’s score on the examination is voided and examination fees are not refunded. Evidence of misconduct is reviewed to determine whether the candidate will be allowed to reapply for examination.

If a re-examination privilege is granted, the candidate may need to submit a new application. However, all granted re-examination privileges will be subject to an additional application fee and examination fee.

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

Timed Examination
Following the practice examination, you will begin the actual examination. Instructions for taking the examination are accessible on-screen once you begin the examination. The examination contains 135 questions plus 25 pretest questions. Three hours are allotted to complete the examination. The following is a sample of what the computer screen will look like when candidates are taking the examination.

Which of the following terms describes a concept that emphasizes the comprehensive management of patient care of a specific disease type?

A. vertically integrated patient care
B. co-operative care
C. point of care
D. patient focused care

The computer monitors the time you spend on the examination. The examination will terminate if you exceed the time limit. You may click on the “Time” button in the lower right portion of the screen to monitor your time. A digital clock indicates the time remaining for you to complete the examination. The time feature may also be turned off during the examination.

Only one question is presented at a time. The question number appears in the lower right portion of the screen. The entire question appears on-screen (i.e., stem and four options labeled – A, B, C and D). Indicate your choice by either entering the letter of the option you think is correct (A, B, C or D) or clicking on the option using the mouse.

Your answer appears in the window in the lower left portion of the screen. To change your answer, enter a different option by typing in the box or by clicking on the option using the mouse. During the examination time limit, you may change your answers as many times as necessary.

To move to the next question, click on the forward arrow (>) in the lower right portion of the screen. This action will move you forward through the examination question by question. If you wish to review any question or questions, click the backward arrow (<) or use the left arrow key to move backward through the examination.
You may leave a question unanswered and return to it later. You may also bookmark questions for later review by clicking in the blank square to the right of the Time button. Clicking on the hand icon advances to the next unanswered or bookmarked question on the examination. To identify all unanswered and bookmarked questions, repeatedly click on the hand icon. When you have completed the examination, the number of questions you answered is reported. If you have not answered all questions and you have time remaining, return to the examination and answer those questions. Be sure to answer each question before ending the examination. **There is no penalty for guessing.**

You may provide online comments for any question by clicking on the button displaying an exclamation point (!) to the left of the Time button. This opens a dialogue box where you may enter your comments.

The examination will be timed; you will have three (3) hours of actual examination time. The computer will indicate the time remaining on the screen. If you find it distracting, the time feature may be turned off during the examination. The time limit is intended to allow candidates to complete the entire examination by working quickly and efficiently.

**References**

The American Board for Occupational Health Nurses, Inc. has prepared the following list of references that are examples of resources that may be used to prepare for the certification examination. This is not an all-inclusive list, but one that represents the types of materials that may have been used as references for the examination items. Applicants are advised to identify the areas of content in which they feel less knowledgeable and to focus their study on those areas, as well as a general overview of the content described in the Test Blueprint. Useful references may be obtained from professional organizations and public and university libraries. ABOHN neither sells, nor lends references. ABOHN cannot recommend any specific course(s) or other resources that may prepare you for the examination.

**OCCUPATIONAL HEALTH NURSING AND GENERAL OCCUPATIONAL HEALTH**


*Please note: Although the AAOHN Core Curriculum provides an excellent overview of the aspects of occupational health nursing practice, it is not intended as an exclusive source of information for the examination.*

**DISEASE MANAGEMENT/EMERGENCY CARE**


JCAHO. (2002). *The guide to emergency management in health care*. Oak Brook Terrace, IL.


**TOXICOLOGY, EPIDEMIOLOGY AND INDUSTRIAL HYGIENE**


National Institute for Occupational Safety and Health (NIOSH) (2012). *Pocket guide to chemical hazards*.


SAFETY/ERGONOMICS


CASE MANAGEMENT


MISCELLANEOUS


Regulatory Resources


NIOSH reports and publications

OSHA guidelines, alerts and publications

Journals and Periodicals

American Journal of Health Promotion

American Journal of Nursing

BNA Environment, Health and Safety

CDC, Morbidity and Mortality Weekly Report (MMWR)

Employee Health and Fitness

Hospital Employee Health Journal

Journal of Nursing Administration

Journal of Occupational and Environmental Medicine

Nursing Research

Occupational and Environmental Medicine Report

Occupational Health and Safety

Workplace Health & Safety (formerly AAOHN Journal, Slack Publications CDC/NIOSH publications at http://www.cdc.gov/niosh/pubs/)

WEBSITES

Agency for Toxic Substances & Disease Registry: www.atsdr.cdc.gov

American Industrial Hygiene Association: www.aiha.org

American Public Health Association: www.apha.org

Center for Disease Control: www.cdc.gov

CDC/Travelers’ Health: www.cdc.gov/travel


Department of Transportation (DOT): www.dot.gov

Department of Health & Human Services: www.hhs.gov

Council for Accreditation in Occupational Hearing Conservation: www.caohc.org


Occupational Safety Health Administration Standards: www.osha.gov

World Health Organization Travel Health: www.who.int/en

Taking the Examination
Experimental Questions and Guessing

Several questions on the examination are experimental or “pretest” items. They are considered experimental because they have not been used on a previous examination, nor has their performance been evaluated. Therefore, until those evaluations can be conducted, the items will not be used for scoring your examination. Since these items are combined with the other questions and are not marked as experimental questions, you will be unable to determine which items are experimental. Therefore, you should answer all questions to the best of your ability. No penalty is applied for guessing incorrectly. Therefore, if you are unsure about an answer, you should make an educated guess.

Sample Examination Questions

Each item has four responses, only one of which is correct. The sample questions that follow are examples of typical questions and the format used.

1. The biological monitoring data for workers exposed to cadmium must be interpreted in light of which of these possible compounding factors?
   A. history of smoking
   B. amount of alcohol intake
   C. history of drug abuse
   D. amount of seafood intake

2. A company institutes Continuous Quality Improvement (CQI) procedures for all departments. Which of these behaviors by the occupational health nurse is consistent with the principles of CQI?
   A. The nurse provides employees with printed brochures during the program.
   B. The nurse maintains records of employees’ attendance at programs.
   C. The nurse schedules mandated programs for employees.
   D. The nurse seeks suggestions for improvement from employees.

3. A nurse is analyzing data from a blood pressure screening program. Of the 200 employees screened, 50 employees, or 25%, had elevated blood pressures.
   This blood pressure screening included employees diagnosed with hypertension both before and after the screening program. The figure represents the
   A. specific rate.
   B. morbidity rate.
   C. prevalence rate.
   D. incidence rate.

Answers to sample questions
1. A
2. D
3. C

Following the Examination

After you finished the examination, you are asked to complete a short evaluation of your testing experience. Then, you are instructed to report to the examination proctor to receive your score report. Scores are reported in written form only, in person or by U.S. mail. **Scores are NOT reported over the telephone, by electronic mail or by facsimile.**

Your score report will indicate a “pass” or “fail.” Additional detail is provided in the form of raw scores by major content category. A scaled score is the number of correctly answered questions; a scaled score is statistically derived from the raw score. Your pass/fail status is determined by your raw score. Your total score determines whether you pass or fail. Even though the examination consists of 160 questions, your score is based on 135 questions. Twenty five questions are “pretest” questions.

The methodology used to set the minimum passing score for the examination is the Angoff method, applied during the performance of a Passing Point Study by a panel of content experts. The experts evaluated each question on the respective examination to determine how many correct answers are necessary to demonstrate the knowledge and skills required for the certification designation. The score is based on the candidate’s ability to pass the examination, not on the performance of other candidates.
If You Pass the Examination
ABOHN will send official notices to candidates who have achieved passing scores on the ABOHN COHN examinations. A COHN wall certificate and COHN wallet card to show that they have earned the right to use the COHN designation after their names will be sent to them. Additionally, their names and credentials are published in the ABOHN online Directory of Certified Occupational Health Nurses.

If You Do Not Pass the Examination
If you do not achieve a passing score on the COHN examination, you may contact ABOHN to reapply to take the examination. You will need to resubmit an application along with the necessary back up information and application and exam fee. Although ABOHN imposes no limit upon the number of times that an individual may apply or take the COHN examination, ABOHN requires unsuccessful candidates to wait at least 45 days before they apply to retake the examination. If you have any questions about reapplying to take the examination, please contact the ABOHN office.

Confidentiality
Under no circumstances will individual examination scores be reported to anyone but the individual who took the examination. Aggregate scores without personally identifiable markers will be used by the respective examination committees in collaboration with the testing consultants to set the passing points for the examination and to analyze performance of individual questions.

All information provided to ABOHN, including job descriptions, may be used for a variety of analyses to study certified occupational health nurses and their practice. However, information sharing will be limited to data reports that are in aggregate form, or documents that lack personally identifiable information.

Upon written or telephone request for verification of certification, an authorized ABOHN representative will provide the following information:

- “Our records indicate that ____________ is currently certified.”
  Or
- “Our records do not indicate that anyone with the name spelled in the manner that you have provided, is currently certified.”

Unless authorized in writing by the individual whose certification status is being questioned, at no time shall any demographic information, pass/fail information, member data, or other identifying information be given to the calling or requesting individual.

Duplicate Score Report
Candidates may purchase additional copies of score reports at a cost of $25 per copy. Written requests must be submitted to AMP within 12 months of the examination. The request must include the candidate’s name, unique identifier assigned by ABOHN, mailing address, telephone number, examination date, the name of the examination taken and the required fee payable to AMP. Duplicate score reports are mailed within five business days after receipt of the request and fee payment.

Scores Canceled by ABOHN or AMP
ABOHN and AMP are responsible for the integrity of the scores they report. Misconduct by a candidate may cause a score to be suspect. ABOHN is committed to recertifying such discrepancies as expeditiously as possible. If, after investigation, ABOHN discovers that its regulations have been violated, ABOHN may void the violator’s examination results.

Revocation of Certification
The American Board for Occupational Health Nurses, Inc. may revoke a certificate for substantial misrepresentation on the application, fraud in the examination, or failure to meet the criteria for certification or recertification. The certificate holder will be notified of the reasons judged adequate for revocation and will be entitled to be heard by the Board.

Questions and Appeals Process
The American Board for Occupational Health Nurses, Inc., ABOHN provides an opportunity for candidates to question any aspect of the certification program. ABOHN will respond to any question as quickly as possible. Candidates are invited to call 630-789-5799 or send an email message to info@abohn.org for any questions. In addition, ABOHN has an appeals policy to provide a review mechanism for challenging an adverse decision, such as denial of eligibility for the examination or revocation of certification. An application for an appeal is available online at www.abohn.org under the Resource Tab.

It is the responsibility of the individual to initiate the appeal processes by written request or completing the form and sending it to the ABOHN Chief Executive Officer, ABOHN, 201 East Ogden Avenue, Suite 114, Hinsdale, IL 60521-3654 within 30 calendar days of the circumstance leading to the appeal.
Retaining Certification

Part of the examination fee covers the cost of the successful candidates’ first year of certification maintenance.

To maintain “Active” COHN status, recertification is required every 5 years. Recertification eligibility criteria include:

1. Current registered nursing licensure, or its international equivalent;
2. 3,000 hours of occupational health nursing experience (being actively engaged in occupational health nursing for compensation). You do not have to be currently employed at the time you apply for recertification.

Note: Alternative credit for occupational health nursing employment may include:

a. 2,000 hours of experience credit that may be granted for occupational health graduate study completed in a National Institute for Occupational Safety and Health (NIOSH) funded Education and Research Center (ERC).

b. 750 hours of experience credit that may be granted for time spent in a baccalaureate completion or a non-occupational health Master’s degree.

Note: Course work associated with attaining a degree can be used to meet either the continuing education requirement or the experience requirement, but not for both.

3. Documented 50 Continuing Nursing Education (CNE) continuing education hours related to occupational health must be earned within the five-year period preceding the recertification deadline.

Note: The same continuing education alternatives that are available to examination applicants are available for recertification.
AMERICAN BOARD FOR OCCUPATIONAL HEALTH NURSES, INC.
201 East Ogden, Suite 114, Hinsdale, IL 60521
www.abohn.org
APPLICATION FOR EXAMINATION / DO NOT FAX

All information provided on this application will be treated with strict confidence.

ABOHN’s policy is that no individual shall be excluded from the opportunity to participate in the ABOHN credentialing program on the basis of race, national origin, religion, sex, age or disability.

PLEASE TYPE OR PRINT YOUR APPLICATION! Each item on this form must have a response. If “none” or “no” is applicable, so state. Incomplete responses will result in delay and possible disqualification. Applications must include the application fee. Please consult the examination handbook for application completion instructions.

1. WHICH EXAMINATION DO YOU WISH TO TAKE? □ COHN  □ COHN-S

2. HAVE YOU APPLIED FOR AN EXAM WITH ABOHN BEFORE? □ YES  □ NO

3. HAVE YOU TAKEN AN EXAM WITH ABOHN BEFORE? □ YES  □ NO

4. NAME
First _______________________________________________________________
Middle _______________________________________________________________
Last _________________________________________________________________
Maiden Name __________________________________________________________
Other Last Names Used _______________________________________________________________________________________

5. YEAR OF BIRTH _______________________________________________________________________________________

6. E-MAIL PREFERRED (mandatory) _____________________________________________ □ Work
ALTERNATE E-MAIL (non-mandatory) ____________________________________________ □ Work
□ Home

7. HOME ADDRESS Street ____________________________________________ Apt/Unit _________
City __________________________ State ________ Zip __________________________
Country __________________________________________________________________________
Telephone (___) __________________________

8. CURRENT EMPLOYER ____________________________________________________________
Street __________________________________________________________
City __________________________ State ________ Zip __________________________
Country __________________________________________________________________________
Telephone (___) __________________________ FAX (___) __________________________
9. **SALARY** (for group analysis use only) ☐ Part-time: hours per week _____________________ Hourly Rate $ _____________________

☐ Full Time: Annual Salary $ _____________________

10. **BUSINESS CATEGORY OF EMPLOYMENT** (See “Guide to Code Numbers”) _____________________

11. **JOB TITLE** (Use the “Guide” to code number to select the appropriate title, enter actual title and the appropriate code number)

Title _____________________ Code _____________________

12. **TELEPHONE PREFERENCE FOR LISTING IN ABOHN’S ON-LINE DIRECTORY**

☐ HOME ☐ BUSINESS ☐ NEITHER

13. **RN LICENSURE** (Please attach a copy of your RN License to this application)

State/Country ___________ License Number ___________ Expiration Date ___________

14. **EDUCATION** (Check **ALL** education you have completed.)

☐ 1. ASSOCIATE DEGREE

☐ 2. DIPLOMA

☐ 3. BACCALAUREATE IN NURSING

☐ 4. OTHER BACCALAUREATE

☐ 5. MASTER’S IN NURSING

☐ 6. MASTER’S IN PUBLIC HEALTH

☐ 7. OTHER MASTER’S

☐ 8. DOCTORATE

15. **EXAMINATION ACCOMMODATION** ☐ YES ☐ NO

ABOHN makes a good faith effort to provide any reasonable examination accommodation. Consideration of a candidate's request for a disability accommodation is based upon the information received on the application and Special Examination Accommodation Form. Unless ABOHN believes that such an accommodation would create an undue hardship or is contrary to ABOHN’s commitment to diversity and inclusiveness, ABOHN grants such requests.

16. **PROFESSIONAL MEMBERSHIPS** Check those professional organizations in which you hold membership.

☐ AAOHN (American Association of Occupational Health Nurses)

☐ ANA (American Nurses Association)

☐ AOHP (Assoc. of Occupational Health Professionals in Healthcare)

☐ CNA (Canadian Nurses Association)

☐ CMSA (Case Management Society of America)

17. **OTHER CERTIFICATIONS HELD** Check those professional certifications you currently hold.

☐ CSP (Certified Safety Professional)

☐ COHN (Certified Occupational Health Nurse - Canada)

☐ NP (Nurse Practitioner)
### 18. EXPERIENCE IN OCCUPATIONAL HEALTH NURSING

During the 5-year period prior to application, you must have earned 3,000 hours of work (occupational health nursing) experience. Full time employment for one year equals 2,080 hours. Refer to your Candidate Handbook for alternatives to work experience. Begin with your most recent or current position. Reproduce this page if you have held more than one job during the five-year time period. List occupational health nursing work experience in the past 5 years only. **If “none” or “no” is applicable, so state.**

<table>
<thead>
<tr>
<th>POSITION #</th>
</tr>
</thead>
<tbody>
<tr>
<td>DATES EMPLOYED</td>
</tr>
</tbody>
</table>

| TOTAL SERVICE | Years | Months | Total hours |

| POSITION TITLE |

Briefly describe job responsibilities in this position and the target population to which you provide occupational health nursing care or ATTACH A COPY OF YOUR CURRENT JOB DESCRIPTION.

<table>
<thead>
<tr>
<th>NAME OF EMPLOYER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address</td>
</tr>
<tr>
<td>Major Product/Service</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>PERSON WHO CAN VERIFY YOUR EMPLOYMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
</tr>
<tr>
<td>Title</td>
</tr>
<tr>
<td>Telephone #</td>
</tr>
<tr>
<td>E-mail address</td>
</tr>
</tbody>
</table>
19. PROFESSIONAL NURSING EDUCATION

In order to meet the examination’s educational requirements, you must provide proof that a baccalaureate degree has been earned before the application is submitted in order to be eligible to take the COHN-S examination. The degree may be any Bachelor’s Degree. It does not have to be a nursing degree. PLEASE ATTACH COPIES OF DEGREES or FINAL TRANSCRIPTS TO THIS APPLICATION

The completion of Baccalaureate Degree or higher for the COHN-S examination is required.

<table>
<thead>
<tr>
<th>Institution’s Name</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>City, State</td>
<td></td>
</tr>
<tr>
<td>Year of Graduation</td>
<td></td>
</tr>
<tr>
<td>Degree Earned</td>
<td></td>
</tr>
</tbody>
</table>

The following education is required if you do not have experience/work hours in Occupational Health Nursing

Other education completed for COHN or COHN-S Certificate Program in Occupational Health Nursing for Academic Credit (within the past 5 years).

<table>
<thead>
<tr>
<th>Institution’s Name</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>City, State</td>
<td></td>
</tr>
<tr>
<td>Year of completion</td>
<td></td>
</tr>
<tr>
<td>(Must be within the past 5 years)</td>
<td></td>
</tr>
<tr>
<td>Degree Earned</td>
<td></td>
</tr>
</tbody>
</table>

Master’s Degree of education with a concentration in Occupational Health Nursing for the COHN-S examination (within the past 5 years).

<table>
<thead>
<tr>
<th>Institution’s Name</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>City, State</td>
<td></td>
</tr>
<tr>
<td>Year of Graduation</td>
<td></td>
</tr>
<tr>
<td>(Must be within the past 5 years)</td>
<td></td>
</tr>
<tr>
<td>Degree Earned</td>
<td></td>
</tr>
</tbody>
</table>
20. WHERE DID YOU INITIALLY LEARN ABOUT ABOHN CERTIFICATION?
(Check one only)

☐ DIRECT MAILING FROM THE ABOHN OFFICE
☐ EMPLOYER
☐ AAOHN PUBLICATION
☐ AAOHN Conference (American Association of Occupational Health Nurses)
☐ AOHP (Association of Occupational Health Professionals)
☐ CMSA Conference (Case Management Society of America)
☐ OCCUPATIONAL HEALTH & SAFETY PUBLICATION
☐ Other
________________________________________________________________________________________

21. Name of certified Occupational Health Nurse who referred you to sit for the certification examination:
___________________________________________________________________________________________________

22. AUTHORIZATION TO ABOHN

I authorize the American Board for Occupational Health Nurses, Inc. (ABOHN) to request information concerning me from any of the persons or organizations referred to in this application for Board certification.

I hereby attest that all of the information contained in this application, including any attachments that I have submitted, is true and correct to the best of my knowledge. I acknowledge that the ABOHN certification program is entirely voluntary and agree to be bound by ABOHN’s policies and procedures, as they now exist or as they may be amended in the future. I understand that any falsification in this application will be grounds for rejection or revocation of any certificate issued.

If I am certified, I agree to pay such fees and meet such standards as prescribed by ABOHN to maintain certification status by the American Board for Occupational Health Nurses, Inc.

☐ Yes  ☐ No

Signature: _____________________________ Date: _____________________________

Remember before mailing this application:
• Please make a copy of this application for your records

Please include copies of:
• RN license
• Current job description, if applicable
• Advanced education or final transcripts

AMERICAN BOARD FOR OCCUPATIONAL HEALTH NURSES, INC.
201 EAST OGDEN, SUITE 114
HINSDALE, IL 60521-3652
Phone: 630-789-5799    Fax: 630-789-8901
www.abohn.org
Request for Special Examination Accommodations

If you have a disability covered by the Americans with Disabilities Act, please complete this form and the Documentation of Disability-Related Needs on the reverse side so your accommodations for testing can be processed efficiently. The information you provide and any documentation regarding your disability and your need for accommodation in testing will be treated with strict confidentiality.

Candidate Information

ABOHN Assigned Unique Identification Number:______________________

Name (Last, First, Middle Initial, Former Name)

Mailing Address

City State Zip Code

Daytime Telephone Number

Special Accommodations

I request special accommodations for the __________________________________________________ examination.

Please provide (check all that apply):

_____ Reader

_____ Extended testing time (time and a half)

_____ Reduced distraction environment

_____ Please specify below if other special accommodations are needed.

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

Comments: __________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

PLEASE READ AND SIGN:

I give my permission for my diagnosing professional to discuss with AMP staff my records and history as they relate to the requested accommodation.

Signature: __________________________________________________ Date: ____________________________

Return this form with your examination application and fee to:

ABOHN, 201 East Ogden, Suite 114, Hinsdale, IL 60521.

If you have questions, call the ABOHN office at 630-789-5799.
### Documentation of Disability-Related Needs

Please have this section completed by an appropriate professional (education professional, physician, psychologist, psychiatrist) to ensure that AMP is able to provide the required accommodations.

<table>
<thead>
<tr>
<th>Professional Documentation</th>
</tr>
</thead>
<tbody>
<tr>
<td>I have known ____________________________ since _____ / _____ / _____ in my capacity as a</td>
</tr>
<tr>
<td>Candidate Name</td>
</tr>
<tr>
<td>My Professional Title</td>
</tr>
</tbody>
</table>

The candidate discussed with me the nature of the test to be administered. It is my opinion that, because of this candidate’s disability described below, he/she should be accommodated by providing the special arrangements listed on the reverse side.

**Description of Disability:**
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

Signed: _________________________________________________________  Title: _______________________________________
Printed Name: _________________________________________________________________________________________________
Address: _____________________________________________________________________________________________________
______________________________________________________________________________________________________________
Telephone Number: ________________________________ Email Address: _____________________________________________
Date: _____________________________________________ License # (if applicable): ____________________________________

Return this form with your examination application and fee to:  
ABOHN, 201 East Ogden, Suite 114, Hinsdale, IL 60521. 
If you have questions, call the ABOHN office at 630-789-5799.