

Perioperative Online Education

2021 Order Form and Invoice



FACILITY INFORMATION

Facility Name: _____
Business Address 1: _____
Business Address 2: _____
City: _____ State/Province: _____
Postal Code: _____ Country: _____
Phone: _____ Health Care System: _____

ADMINISTRATOR/CONTACT INFORMATION

First Name: _____ Last Name: _____
Credentials: _____ Title: _____
Phone: _____ Email: _____

ORDER DETAILS

AMBULATORY MODULES	PRICE	QTY.	Total \$
ASC Postoperative Patient Care	\$99		
ASC Preoperative Patient Care	\$99		

ASEPTIC PRACTICE MODULES	PRICE	QTY.	Total \$
Environmental Cleaning	\$99		
Surgical Hand Antisepsis and Scrub Attire	\$99		
Patient Skin Antisepsis	\$99		
Sterile Technique	\$99		
Surgical Draping	\$99		

PATIENT AND WORKER SAFETY MODULES	PRICE	QTY.	Total \$
Medications	\$99		
Patient Safety	\$99		
Surgical Specimens	\$99		
Transmissible Infection Prevention	\$99		
Safe Use of Equipment	\$99		
Endoscopic Surgery	\$99		

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ORDER DETAILS (Cont'd)

PATIENT CARE MODULES	PRICE	QTY.	Total \$
Anesthesia	\$99		
Assessment	\$99		
Hemostasis Management	\$99		
Postanesthesia Care	\$99		
Wound Closure and Healing	\$99		
Patient Positioning	\$99		
Organizational Influences and Patient Outcomes	\$99		
Surgical Instruments	\$99		

STERILIZATION AND DISINFECTION MODULES	PRICE	QTY.	Total \$
The Sterilization Process	\$99		

GENERAL MODULES	PRICE	QTY.	Total \$
Professionalism	\$99		
Health Care Information Management	\$99		
Patient and Family Education	\$99		
Introduction to the PNDS (Free)	-		
Certificate in the Fundamentals of Evidence-Based Practice	\$99		
Prep for CNOR Online	\$99		
Medication Safety Assessment (Adult)	\$99		
Guidelines Assessment	\$99		

SPECIALTY MODULES	PRICE	QTY.	Total \$
Safe Administration of Moderate Sedation	\$99		
Care of the Pediatric Patient in Surgery	\$99		
Preceptor Certificate Program	\$99		
Laser Safety Certificate Program	\$99		

FINANCIAL MODULES	PRICE	QTY.	Total \$
Nursing Leadership Resources: Budgeting	\$99		
Nursing Leadership Resources: Statistics	\$99		
Nursing Leadership Resources: Financial Statements	\$99		

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METHODS OF PAYMENT

Option 1

Pay Online - Email your completed form to orders@aorn.org. A quote with a payment link will be sent to you. DO NOT email credit card information. Emails with credit card information are automatically deleted.

Option 2

Pay by Mail - Send check or complete the credit card payment form on page 5 and mail complete form to the address below.

ORDER PROCESS

1. Complete order form and submit with payment to AORN (a purchase order is not considered payment).
2. Order will be processed and agreement activated after AORN receives both completed order form and payment.
3. Administrator/Contact will receive the registration email.

By signing or typing my name below, I agree to the [AORN Terms and Conditions](#) for this purchase and any future purchases. If the product purchased is for use by my facility, I am authorized by my facility to bind my facility to the terms of this agreement.

Type or sign here: _____

Date: _____

MAIL ORDER FORM:

AORN B2B
Dept #1385
P.O. Box 30106
Salt Lake City, UT 84130-0106

QUESTIONS?

Contact Experience Services
US Phone: 1-800-755-2676
International Phone: 1-303-755-6300

FOR OFFICE USE ONLY
Version: 01339-0620
Facility Name:
Account #: