



Certified Occupational Health Nurse - Specialist | COHN-S
Certified Occupational Health Nurse | COHN
Case Management | CM
Recertification Handbook



PLEASE NOTE: All information contained in these guidelines have been extracted from the American Board for Occupational Health Nurses, Inc. (ABOHN) bylaws, policies and procedures, and the American Association of Occupational Health Nurses (AAOHN) [Standards of Practice](#) which have been adopted by the Board. The above mentioned bylaws and policies are maintained at the ABOHN office. Upon request, additional information on any item addressed can be obtained from the ABOHN office.

ABOHN's online directory is open and available to the public. ABOHN publishes name, location, active credential, credential award date, and credential expiration date.

The information you provide to ABOHN may be used for a variety of analyses to study the roles and practice of occupational health nursing; however, results will be reported in the aggregate form only..

Revocation of Certification

ABOHN may revoke a certification for substantial misrepresentation on the application, fraud during the examination, or failure to meet the criteria for certification or recertification. The certification holder will be notified of the reasons for revocation and are entitled to request an appeal process reviewed by the ABOHN Board of Directors.

The review and appeals process is available to individuals seeking a reconsideration of a decision regarding revocation of ABOHN certification. All appeals must be made in writing. The Appeals Form can be found on our website, www.abohn.org under the Certification Tab. Please contact the ABOHN office if you require further information about the appeals process.

1.0 Introduction

Recertification encourages the certified occupational health nurse to continue activities essential to maintain and improve the knowledge required for practice through continuing education in topics related to occupational health. The purpose of the recertification program is to ensure that certified individuals demonstrate a continuing commitment to expand their knowledge and enhance their professional competency within their certification specialty of occupational health nursing.

Candidates who are unable to meet the criteria for recertification may have their certification status withdrawn. Examination may be required to regain certification status after withdrawal, and all eligibility criteria must be met for re-examination. Please contact the ABOHN office for more information.

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 the COHN, COHN-S, or CM credentials.

On-line submission is the preferred, most secure, and efficient method of recertification processing. If the applicant cannot use the on-line portal, please contact ABOHN for a paper copy. Please make sure that all information is clearly legible.

Application must be postmarked by the date of recertification.

Although ABOHN sends courtesy reminder notices to the preferred email address on file, **it is ultimately the credential holder's responsibility to understand and know when their annual renewal/5-year recertification is due. Late applications require a late fee and the excuse of not receiving any "notices" is not sufficient.**

It is also the responsibility of credential holders to advise ABOHN of email address changes.

2.0 Recertification Eligibility Requirements and Criteria

- **Active licensure** as a registered nurse or its international equivalent is required. A copy of your current RN license must accompany the application. If your state prohibits you from copying your license, a written verification from your state board of nursing is an acceptable alternative. 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-base basis.
- **Occupational health nursing experience** means actively engaged in occupational health nursing for compensation. Completed graduate degrees or baccalaureate completion programs may be considered for a portion of the occupational health nursing experience requirement. For additional information, please see page 6. A job description must be provided with the recertification documentation.
- **Documented continuing education** related to occupational health must be earned within the five-year period preceding the application deadline. **ALL COURSES MUST BE COMPLETED BY THE APPLICATION DEADLINE.** For a list of alternatives to continuing education classes, please see page 8. Please note: 10% of recertifications are audited by ABOHN annually which includes review of continuing education documentation. **Unless instructed to do so, you do not have to submit hard-copy certificates of completed CEs.**
- **A completed application with fee** by the recertification expiration date.

Before you begin completing your application, it is recommended to gather and copy the aforementioned documents.

If you have changed your name from what appears on your license, degrees, or contact hours, please submit a copy of your legal change of name status (marriage certificate, divorce decree, etc.).

KEEP YOUR ORIGINAL DOCUMENTS! All documentation submitted with your application becomes the property of ABOHN, Inc. and cannot be returned to you.

2.1 Recertification Requirements for the COHN and COHN-S Credentials

- **Active licensure** as a registered nurse (RN), or an international equivalent.

In the last five years prior to recertification:

- **3,000 hours** of occupational health nursing practice, and
- **50 continuing nursing education (CNE)** contact hours in occupational health.

2.2. Recertification Requirements for the Case Management Credential

- **10 continuing nursing education (CNE)** contact hours in occupational health case management.

3.0 Guide to Code Numbers

Please use the following codes as you complete your application:

Business Category

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

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

Job Codes, Titles, Descriptions

Use the following list to code your current job title/description. Select the title that most closely matches your primary job responsibility or that which represents the majority of your time, not just your official company title. If your job description does not match any of the options listed, enter “12” and write out your job title/description on the application. The following descriptions are derived from the *AAOHN Nursing Rolls found at:*

<https://www.aohn.org/Practice/Become-an-Occupational-Health-Nurse#role>

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

3.1 Current Employment

Employment must meet the AAOHN (*American Association of Occupational Health Nurses*) definition of occupational health nursing as outlined in the [AAOHN Standards of Practice](#).

3.2 Work Experience

You must be able to demonstrate 3,000 hours of work experience in occupational health nursing for paid compensation over the five year period preceding your application. This should be completed for each occupational health nursing position held in the past five-year period. Duplicate this page if/as needed. Begin with your current or most recent position and label it #1. No more than 40 hours per week can be reported. Full time employment equals 2,080 hours per year.

The written description of your job duties should enable the reviewer to determine if your job conforms to the definition of occupational health nursing as referenced above.

- ABOHN verifies employment on a percentage of all applications received and when questions arise. Please provide the name, title and telephone number of the person who can verify your employment for each job listed.

Time spent in a graduate/baccalaureate/certificate program dedicated to the field of Occupational and Environmental Health and Safety (OEHS) may be considered for a portion of the occupational health nursing work experience requirement. The degree must be completed within the five-year period prior to application in order to be considered. In using education in lieu of work hours, **a transcript must be submitted** with the application. The maximum number of hours that can be applied are:

- 3000 hours work credit for attaining a Master's Degree, PhD, or DNP, dedicated to the field of Occupational and Environmental Health and Safety (OEHS). These programs MUST include a semester/quarter of practical experience and an occupational health related project.
- 2000 hours work credit for attaining a Bachelor's or Certificate program dedicated to the field of Occupational and Environmental Health and Safety (OEHS). These programs have basic industry content with limited or no practical experience and are considered equivalent to one year of graduate study.
 - 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**. Time spent in degree-granting programs prior to becoming a registered nurse cannot be used for work experience credit.
- For a list of currently accepted programs, please visit the [Alternate Work Hour link](#) found on the ABOHN website (<https://www.abohn.org/certification/cohn-cohn-s-eligibility/alternative-work-hours>)
 - If your program is not listed, please contact the ABOHN office for approval **BEFORE** you submit your applications. ABOHN will review your program for acceptance to our guidelines.

3.3 Core Credential Continuing Education

ALL applicants for recertification must provide a list of 50 continuing nursing education contact hours related to occupational health in the five year time period preceding the application deadline. Continuing education courses must be related to occupational health but **do not** require approval from the American Nurses Credentialing Center (ANCC) or the American Association of Occupational Health nurses (AAOHN). In determining if a course is related to occupational health, the Board uses the "Test Content Outline" located in the Blueprint for the COHN and COHN-S examinations.

For the purpose of certification and recertification, continuing education is considered to be post-basic professional education that will enhance the quality and effectiveness of occupational health practice.

Unless instructed to do so by a red **AUDIT** stamp indicated in your reminder email, you do NOT

have to submit certificates of attendance for continuing education. If instructed to submit documentation, the certificate must contain the following information:

- Attendee's name
- Course title
- Date or dates on which the course was given
- Course provider
- Number of contact hours awarded

The course title should provide an indication of the content of the course. If the title is not specific, such as "What's New in 2025", please attach a course outline or brochure that details the topics covered in the course.

The following course work is acceptable:

- A maximum of 16 hours for ACLS courses
- A maximum of 8 hours ACLS instructor courses
- A maximum of 30 hours for EMT courses
- A maximum of 15 hours for post basic computer courses
- A maximum of 8 hours for First Aid Instructor courses
- A maximum of 8 hours for CPR instructor courses

A course with identical content and objectives taken more than once during the same renewal cycle will only be counted once.

The following course work is NOT ACCEPTABLE: this list is NOT exhaustive.

- Basic nursing courses
- Basic CPR and CPR renewal courses
- Basic general computer software courses, e.g. Word, Excel, PowerPoint, etc.
- Pediatric courses
- Employer orientation programs
- Basic EKG/dysrhythmia courses
- Basic IV courses
- On the job training related to new policies, procedures, or equipment
- College/University courses unrelated to the role of the occupational health nurse as defined by ABOHN exam blue print.

Formulas for Calculating Contact Hours are:

- 1 CNE (Continuing Nursing Education) = 60 minutes of classroom instruction
- 1 contact hour = 60 minutes of classroom instruction
- 1 CEU (Continuing Education Unit) = 10 contact hours
- 1 CERP (Continuing Education Recognition Point) = 1 contact hours
- 1 CEARP (Continuing Education Approved Recognition Point) = 1 contact hour
- 1 CME (Continuing Medical Education unit) = 1 contact hour
- 1 semester credit = 15 contact hours
- 1 trimester credit = 12 contact hours
- 1 quarter credit = 10 contact hours

ABOHN cannot accept or give credit for course work when no hours for the activity have been assigned by the sponsoring agency. A letter from the sponsoring agency listing the hours can be accepted.

3.4 Alternatives to Continuing Education

Contact hours in each of the following categories may be substituted for continuing education credit. All alternatives to continuing education must be entered on the Continuing Education table of the application.

A. Professional Presentations

Documentation of professional presentations related to occupational health may be submitted as an alternative to continuing education for a maximum of 10 hours during an application period. Documentation must include a brochure or letter from the sponsor of the presentation that describes the title and time of your presentation. The presentation, or the program, of which it was a part, must represent the contact hours granted. This information should be reflected on the brochure, or the applicant can submit a copy of a certificate or transcript that indicates approval of contact hours. One hour of presentation is equal to one contact hour.

B. Publications

Published manuscripts related to occupational health may be submitted as an alternative to continuing education for a maximum of 10 hours in each application period. Manuscripts published in a peer reviewed journal may be submitted for five contact hours. Manuscripts published in a non-peer reviewed periodical may be submitted for one contact hour. Documentation must include a copy of the published manuscript, and if appropriate, evidence that the journal is peer reviewed. Manuscripts accepted for publication, or in press, but not yet published will not be accepted.

C. Board/Committee Service

Evidence of service on a local/state/national board or professional organization related to occupational health nursing may be substituted for up to a maximum of 20 hours per recertification period. Documentation must include a letter from the organization.

D. Precepting

Evidence of service as a formal preceptor for students in the field of occupational health may be submitted for a maximum of 10 hours in each recertification period. The following criteria must be met:

The course must be offered by an accredited college or university:

- The theme, topic or objectives must be related to OHN as defined in the examination Blueprints and/or Test Specifications;
- The preceptor must spend at least 5 hours of face-to-face interaction with the student;

- The student must generate learning objectives consistent with the purpose of the experience;
- A formal evaluation of the experience must occur and include the student, the preceptor and the clinical advisor or faculty coordinator.
- Contact hours applicable for recertification will be awarded according to the length of the course:
 - Semester—6 contact hours;
 - Trimester—4 contact hours;
 - Quarter—3 contact hours.

3.5 Case Management Continuing Education

Proof of 10 hours of continuing nursing education related to case management in the five year period preceding the application deadline must be submitted. This must be in addition to the 50 continuing nursing education hours that submitted for COHN or COHN-S recertification. List case management certificates of attendance. Continuing education courses must be related to occupational health case management but do not require approval from the American Nurses Credentialing Center (ANCC) or the American Association of Occupational Health Nurses (AAOHN). In determining if a course is related to occupational health case management, the Board uses the “Case Management Core Content Area” in the Blueprint for the Case Management examination.

3.6 After You Complete the Application

Review the following checklist prior to mailing your application.

Have you:

- Answered all questions?
- Attached a copy of current nursing license or written verification?
- Attached a copy of job description?
- Listed continuing education hours in occupational health nursing and provided documentation if subject to **AUDIT**?
- Listed continuing education hours in case management if applicable?
- Attached copies of diploma/transcripts/degrees earned in the past five years, if applicable?
- Attached copies of published articles, precepting experience, letter with board experience, item writing and/or presentations being used in lieu of continuing education hours or work experience, if applicable?
- Made a complete copy of your application for your files?
- Included payment for recertification?

Completed applications and supporting documentation can either be mailed or submitted online to:

American Board for Occupational Health Nurse

PO Box 39

Palos Heights, IL 60463

Phone 630-789-5799 Fax 630-789-8901

www.abohn.org

info@abohn.org

Your completed application must be submitted with the appropriate fee for recertification. For applications received after the date of recertification expiration indicated on the email you receive from the ABOHN office, a \$100 late fee must be included.

3.6 ABOHN's Policy and Procedure for Processing Applications

- Each application is carefully reviewed by ABOHN. Once the application is reviewed, applicants who meet the eligibility criteria will receive proof of recertification. If an application is deemed incomplete, the applicant is notified of the specific deficiency and requested to submit additional materials.
- The Board has the right to reconsider the eligibility of any application when additional material/information is received.

3.7 Current ABOHN Fee Schedule:

- | | |
|---|-----------------|
| • Yearly fee for COHN and COHN-S credential | \$150.00 |
| • Yearly fee for Case Management credential | \$50.00 |
| • Late fee | \$100.00 |

ALL FEES ARE NON-REFUNDABLE.

Recertification application and documentation are due every 5th year.

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AMERICAN BOARD FOR OCCUPATIONAL HEALTH NURSES, INC.

PO Box 39 Palos Heights, Il 60463

RECERTIFICATION APPLICATION

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 actual or perceived race, color, religion, national origin, age, disability, gender, gender identity, sexual orientation, veteran status, marital status, or other legally protected categories.

PLEASE TYPE OR PRINT YOUR APPLICATION! Each item on this form **must** have a response. If **“not applicable”**, print **“N/A”**. Incomplete responses will result in delay and possible disqualification. Applications must include the application fee.

1. DATE OF APPLICATION _____ 2. CERTIFICATION NUMBER _____

3. CURRENT CERTIFICATION: COHN COHN-S CM

4. Name:

First _____ Last _____ Middle _____

Maiden _____

Other Last Names Used _____

5. PREFERRED Email (*mandatory*) _____

6. HOME ADDRESS

Street _____ Apt/Unit _____

City _____ State _____ Zip _____

Country _____

Telephone _____

7. CURRENT EMPLOYER

Name _____

Address _____

City _____ State _____ Zip _____

Country _____ Telephone _____

8. SALARY (for group analysis use only) Part-time: hours per week _____ Hourly Rate \$ _____

Full time: Annual Salary \$ _____

9. BUSINESS CATEGORY OF EMPLOYMENT

(See Section 3.3 "Guide to Code Numbers") enter the number that corresponds to your business category)

10. JOB TITLE _____ CODE # _____

(See Section 3.3 Guide to Code Numbers") enter the actual title and appropriate code number

11. CHECK ALL EDUCATION COMPLETED

1. Associate Degree

5. Master's in nursing

2. Diploma

6. Master's in public health

3. Baccalaureate in Nursing

7. Othe Master's

4. Other Baccalaureate

8. Doctorate

12. EXPERIENCE IN OCCUPATIONAL HEALTH NURSING

You must have completed 3,000 hours of work in occupational health nursing within the last 5 years. List occupational health nursing work experience **in the last 5 years ONLY**.

Full-time employment for one year equals 2,080 hours. Refer to the 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.

- **Name of Employer:** _____
 - **Address:** _____
 - **Major Product/Service:** _____
- **Position Title:** _____
- **Dates Employed:** From _____ TO _____
(previous 5-years only) MM/DD/YY MM/DD/YY
- **Total hours in the past 5 years only**_____
- **Description of Job Duties & Target Population:**

- **Person who can verify employment:**
Name: _____
 - **Title:** _____
 - **Telephone #:** _____
 - **E-mail Address:** _____

13. CONTINUING EDUCATION IN OCCUPATIONAL HEALTH

You must provide proof of 50 hours of continuing education related to occupational health in the last five-year period. Refer to your Recertification Guidelines for appropriate course content and alternatives to continuing education. All CNEs and alternatives to CNE contact hours should be listed on this page. **Include copies of your certificates upon submission of your application ONLY IF REQUESTED DUE TO AUDIT.** You may duplicate this page if more space is needed. LIST CERTIFICATES OF ATTENDANCE

| | Date (s) | Title of Offering | Sponsoring Agency | Contact Hours | For ABOHN Use |
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If you have an ABOHN case management credential the following form must be completed.

13.a CONTINUING EDUCATION IN CASE MANAGEMENT

You must provide proof of 10 hours of continuing education related to case management for case management recertification. This must be in addition to the 50 contact hours that you submit for your COHN or COHN-S recertification. Please list your case management certificates of attendance on this page. **Include copies of your certificates upon submission of your application ONLY IF REQUESTED DUE TO AUDIT.** Refer to the Recertification Guidelines for alternatives to continuing education. You may duplicate this page if more space is needed. **LIST CERTIFICATES OF ATTENDANCE**

| | Date (s) | Title of Offering | Sponsoring Agency | Contact Hours | For ABOHN Use |
|-----------------------|----------|-------------------|-------------------|---------------|---------------|
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14. PROFESSIONAL NURSING EDUCATION (only if acquired in the last five years.)

If you have completed a degree in the last five years and would like it reflected in your file please provided the information here. Basic nursing education and advanced degrees that have been previously submitted do not need to be documented again. Please ATTACH COPIES OF DEGREES OR FINAL TRANSCRIPITS TO THIS APPLICATION.

15. PUBLISHED IN DIRECTORY

YES NO

ABOHN's online directory is open and available to the public. ABOHN publishes name, location, active credential, credential award date, and credential expiration date. If you do NOT want your information to be made publicly available, please be sure to select "NO" above.

16. AUTHORIZATION STATEMENT

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 documents 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.

One certified, I agree to pay all non-refundable fees and meet such standards as required by ABOHN to maintain certification status and, if selected above, to be listed in the directory of certified occupational health nurses by the **American Board for Occupational Health Nurses, Inc.**

I understand that ABOHN may use my name on social media platforms, newsletters, or other communications for promotion of Occupational Health Nursing certification, while following the guidelines included in our privacy policy, unless I opt out in writing to info@abohn.org.

17. SIGNATURE

DATE

Before submitting this application:

- Please make a copy of this application for your records.

Please include copies of:

- RN License
- Continuing education certificates if requested by AUDIT
- Current job description(s)
- Advanced education or final transcripts (if applicable)

AMERICAN BOARD FOR OCCUPATIONAL HEALTH NURSES, INC.

PO Box 39

Palos Heights, IL 60463

PHONE 630-789-5799

SECURE FAX 630-789-8901

WWW.ABOHN.ORG - INFO@ABOHN.ORG

CREDIT CARD PROCESSING FORM

DATE:

NAME:

NAME ON CREDIT CARD: (IF DIFFERENT THAN ABOVE)

BILL TO ADDRESS: (INCLUDING ZIP CODE)

TYPE OF CREDIT CARD:

AMERICAN EXPRESS

MASTERCARD

VISA

DISCOVER

CREDIT CARD NUMBER:

EXPIRATION DATE:

SECURITY NUMBER ON BACK OF CARD (3 OR 4 DIGITS)

FOUR DIGIT SECURITY NUMBER ON FRONT OF CARD FOR AMERICAN EXPRESS:

AMOUNT TO BE CHARGED TO THE CARD: \$

EMAIL ADDRESS FOR RECEIPT: