



ADVANCED PRACTICE PROVIDER FELLOWSHIP ACCREDITATION™ APPLICATION ADDENDUM FORM

Complete all sections and submit via email to appfa@ana.org.

PARTICIPATING SITES

List the eligible sites that participate in the Program and corresponding Site Coordinators (SCs), if applicable.

6

SITE NAME

STREET

CITY

STATE

ZIP

GEOGRAPHIC LOCATION

SC NAME (AS IT APPEARS ON PA/APRN LICENSE) AND CREDENTIALS

LICENSE NUMBER

STATE OF ISSUE

7

SITE NAME

STREET

CITY

STATE

ZIP

GEOGRAPHIC LOCATION

SC NAME (AS IT APPEARS ON PA/APRN LICENSE) AND CREDENTIALS

LICENSE NUMBER

STATE OF ISSUE

8

SITE NAME

STREET

CITY

STATE

ZIP

GEOGRAPHIC LOCATION

SC NAME (AS IT APPEARS ON PA/APRN LICENSE) AND CREDENTIALS

LICENSE NUMBER

STATE OF ISSUE

9

SITE NAME

STREET

CITY

STATE

ZIP

GEOGRAPHIC LOCATION

SC NAME (AS IT APPEARS ON PA/APRN LICENSE) AND CREDENTIALS

LICENSE NUMBER

STATE OF ISSUE

10

SITE NAME

STREET

CITY

STATE

ZIP

GEOGRAPHIC LOCATION

SC NAME (AS IT APPEARS ON PA/APRN LICENSE) AND CREDENTIALS

LICENSE NUMBER

STATE OF ISSUE

11

SITE NAME

STREET

CITY

STATE

ZIP

GEOGRAPHIC LOCATION

SC NAME (AS IT APPEARS ON PA/APRN LICENSE) AND CREDENTIALS

LICENSE NUMBER

STATE OF ISSUE

12

SITE NAME

STREET

CITY

STATE

ZIP

GEOGRAPHIC LOCATION

SC NAME (AS IT APPEARS ON PA/APRN LICENSE) AND CREDENTIALS

LICENSE NUMBER

STATE OF ISSUE

13

SITE NAME

STREET

CITY

STATE

ZIP

GEOGRAPHIC LOCATION

SC NAME (AS IT APPEARS ON PA/APRN LICENSE) AND CREDENTIALS

LICENSE NUMBER

STATE OF ISSUE

14

SITE NAME

STREET

CITY

STATE

ZIP

GEOGRAPHIC LOCATION

SC NAME (AS IT APPEARS ON PA/APRN LICENSE) AND CREDENTIALS

LICENSE NUMBER

STATE OF ISSUE

15

SITE NAME

STREET

CITY

STATE

ZIP

GEOGRAPHIC LOCATION

SC NAME (AS IT APPEARS ON PA/APRN LICENSE) AND CREDENTIALS

LICENSE NUMBER

STATE OF ISSUE

NON-PARTICIPATING SITES

List the sites that **DO NOT** participate in the Program.

6

SITE NAME

11

SITE NAME

7

SITE NAME

12

SITE NAME

8

SITE NAME

13

SITE NAME

9

SITE NAME

14

SITE NAME

10

SITE NAME

15

SITE NAME

ADDENDUM FOR MULTI-SITE PROGRAMS ONLY

NUMBER OF LEARNERS IN APPLICATION REVIEW TIMEFRAME*

- 1 List each site included on addendum pages above under the “site name” row in accordance with site names.
- 2 Denote which specialty or service line(s) are eligible for accreditation review by placing the year the program started for each specialty or service line in the corresponding column of the following tables.
 - a. Refer to specialty or service line definitions in the *APPFA Application Manual* to ensure proper classification of units/ practice settings into approved categories.
- 3 Indicate how many learners have participated in each specialty or service line during the application review timeframe by placing a number in the second column of the tables:
 - a.* New programs must indicate the number of learners in each workplace setting during the 24-months (2-year period) prior to the application form submission;
 - b.* Reaccrediting programs must indicate the number of learners in each specialty or service line during the 48-months (4-year period) prior to the application form submission.
 - c. All specialty or service line(s) included on the application must have a minimum of one learner participant during the 24- or 48-month timeframe.

ELIGIBILITY REMINDER: A *minimum of one* learner must have completed the program *at the site* to be eligible for accreditation. Additionally, a *minimum of one* learner must have completed the program *within the specialty or service line* to be eligible for accreditation.

ELIGIBILITY VERIFICATION

SITE NAME	6.		7.		8.		9.		10.	
SPECIALTY OR SERVICE LINE	Year Program Started at Specialty/Service Line	Number of Learners in Application Review Timeframe	Year Program Started at Specialty/Service Line	Number of Learners in Application Review Timeframe	Year Program Started at Specialty/Service Line	Number of Learners in Application Review Timeframe	Year Program Started at Specialty/Service Line	Number of Learners in Application Review Timeframe	Year Program Started at Specialty/Service Line	Number of Learners in Application Review Timeframe
Medical										
Surgical										
Medical-Surgical										
Oncology										
Step Down										
Critical Care										
Labor & Delivery										
Ante/Postpartum										
Labor, Delivery, Recovery and Postpartum (LDRP)										
Neonatal Intensive Care Unit (NICU)										
Pediatrics										
Pediatric Intensive Care Unit (PICU)										
Operating Room										
Post Anesthesia Recovery Unit (PACU)										
Same Day/Ambulatory Procedure										
Psychiatric										
Rehabilitation										
Ambulatory										
Emergency Department										
Specialty Practice										
Acuity Adaptable (Universal Bed)										
Long Term Care										
Preoperative										
Home Care										
Hospice										
Centralized Function										
APP Specialty <small>Provide name(s) of Specialty</small>										
Primary Care										
Other – Contact AFFPA Team.										
Total # of Learners per Specialty or Service Line(s) in Review Timeframe										

ELIGIBILITY VERIFICATION (CONTINUED)

SITE NAME	11.		12.		13.		14.		15.	
SPECIALTY OR SERVICE LINE	Year Program Started at Specialty/Service Line	Number of Learners in Application Review Timeframe	Year Program Started at Specialty/Service Line	Number of Learners in Application Review Timeframe	Year Program Started at Specialty/Service Line	Number of Learners in Application Review Timeframe	Year Program Started at Specialty/Service Line	Number of Learners in Application Review Timeframe	Year Program Started at Specialty/Service Line	Number of Learners in Application Review Timeframe
Medical										
Surgical										
Medical-Surgical										
Oncology										
Step Down										
Critical Care										
Labor & Delivery										
Ante/Postpartum										
Labor, Delivery, Recovery and Postpartum (LDRP)										
Neonatal Intensive Care Unit (NICU)										
Pediatrics										
Pediatric Intensive Care Unit (PICU)										
Operating Room										
Post Anesthesia Recovery Unit (PACU)										
Same Day/Ambulatory Procedure										
Psychiatric										
Rehabilitation										
Ambulatory										
Emergency Department										
Specialty Practice										
Acuity Adaptable (Universal Bed)										
Long Term Care										
Preoperative										
Home Care										
Hospice										
Centralized Function										
APP Specialty <small>Provide name(s) of Specialty</small>										
Primary Care										
Other – Contact AFFPA Team.										
Total # of Learners per Specialty or Service Line(s) in Review Timeframe										