

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF PUBLIC AND BEHAVIORAL HEALTH Helping people. It's who we are and what we do.



Ihsan Azzam, Ph.D., M.D. Chief Medical Officer

Attestation of Safe Injection Training

In accordance with NRS Chapter 653, persons engaged in radiation therapy or radiologic imaging must attest to knowledge of and compliance with the guidelines of the Centers for Disease Control and Prevention concerning the prevention of transmission of infectious agents through safe and appropriate injection practices.

If needed Safe Injection Training is linked below:

https://nvophieonlinetrainings.articulateonline.com/ContentRegistration.aspx?DocumentID=6be65da9-bd5c-4f9c-b6ef-1c8e9dd4a8de&Cust=77069&ReturnUrl=/p/7706940194

Applicant's First Name	Last Name	MI.	SSN	or APIN ¹	
Street Address	City		State	Zip Code	_
Name of Employer					_
Employer's Address	City		State	Zip Code	_
Phone Number	Fax Number	P	ersonal En	nail Address	-
¹ Required pursuant to NRS 622.23	38(3) and 653.550(1)(a): Social	Security or Alternat	ive Persona	Ily Identifying	Number
_	e of and compliance with t ng the prevention of trans practices.	•			
Name:		Title:			
(Printed	d)				
Signature:		Date:			
					Rev. 07/2021