

CFCS RECEIPTING REQUIREMENTS

Preceptor Requirements (Must show proof of)

Podiatrist (DPM)

OR

Nurses with these credentials: CFCS (AFCNA®) or CFCN (WOCNCB) Certificate

Precepting Teaching Requirements

Discussion and hands on practice with:

- ✓ Bits, burrs, or other mechanical sanding attachments
- ✓ Mechanical sanders (Rotary tools, efiles)
- ✓ Nippers, curettes, black files and similar instruments.

Demonstration of foot care techniques on the patient by preceptor prior to allowing student to perform independent care on the patient.

30 hours direct patient care by the student with preceptor watching and guiding.

Preceptor will provide all appropriately disinfected instruments and rotary tools (sanders) for use on clients during precepting sessions.

Discussion and demonstration of appropriate sanitizing (e.g. cold disinfection, autoclaving and repackaging procedure for tools).

Precepting is documented by the Preceptor on evaluation form which needs to be submitted with the Student's completed application packet. **Preceptor Foot Care Student Competency Form attached on the next page.**



AMERICAN FOOT CARE NURSES ASSOCIATION

Preceptor Foot Care Student Competency Form

Foot Care Student Information

Name	Date
Nursing Lic#	Email Address

Preceptor Information *(Needs to be: DPM, CFCN, CFCS) (or MD, DO, NP with foot care training)*

Name	Institution
Credentials	Contact Information

Training Dates – Location - Hours (Hours MUST equal 30 to be applicable to test)

Location/Date/Hours

Evaluation of the Students Skills

<i>Please indicate how well the Student:</i>	Poor	Fair	Satisfactory	Good	Excellent
Demonstrated knowledge of the importance of following “Universal Precautions” relevant to routine foot care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrated knowledge of the importance of patient/client education to help them maintain good lower extremity health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrated a good working relationship and communication skills with the patient/client during the treatment session	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrated the ability to perform a lower extremity physical examination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrated an understanding of the structure of healthy skin and nails and the ability to recognize abnormal findings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrated an understanding of the equipment and materials used to perform routine foot care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrated an understanding of issues surrounding instrument disinfection, prevention of cross-contamination, patient/client and personal protective equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrated the ability to use instruments appropriately to achieve toenail and callous trimming and reduction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrated an understanding of appropriate care for iatrogenic lesions. This should include control of bleeding, cleansing the lesion site, medicating and dressing the lesion site	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Preceptor Comments

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Verification of Review

Student Signature	Date
Preceptor Signature	Date

Student Skills Checklist

- Discuss the meaning of “Conservative Care”
- Discussion regarding hands on practice of equipment, burs, E-files, Rotary Tools (sander), vacuum sander.
- Discussion of procedures and protocols of foot care, infection control, treatment guidelines for hemostasis and infection control, and disinfection guidelines (CDC guidelines)
- Hands-on demonstration of appropriate sanitizing, cold disinfection, and repackaging procedure for tools. Discussion of Autoclaves. Especially if required by their state.
- Demonstration of foot care by the preceptor.
- 30 hours of hands-on foot care performed by the student with preceptor oversight.
- Instruction regarding client documentation, record keeping, scheduling, time management.
- Continuing Education: How many CEs are required to test for CFCS and subsequent renewal of the certification.

***OPTIONAL TOPICS

- Business considerations: license, accounting, keeping records, taxes, EIN number. (Specific to the state)
- Marketing considerations: business cards, rack cards, bio, who, where, and how to market your services (if applicable).
- Review of sources to get supplies (optional)
- Review of CFCS or CFCN exam outline (Optional)

Links to both certification websites:

WOCNCB <https://www.wocncb.org>

AFCNA <https://AFCNA.org/certification>

Student Completion Criteria

*****IF THE STUDENT IS CONSIDERING WOCNCB CERTIFICATION (CFCN) REFER TO THE WOCNCB WEBSITE FOR THEIR SPECIFIC CRITERIA**