

To Whom It May Concern:

The Board of Directors and Medical Advisory Committee of the National Lymphedema Network (NLN®) are pleased that you are interested in becoming an NLN Affiliate Training Program and appearing in the NLN Resource Guide (online/in print). Please note that appearing in the NLN Resource Guide constitutes neither an accreditation nor an endorsement by the NLN, its Board of Directors, or Medical Advisory Committee.

### **Current Guidelines**

Although no government-recognized national standards for lymphedema treatment or the accreditation of lymphedema training programs currently exist in the US, the NLN has adopted the standards set by the Lymphology Association of North America (LANA) for their lymphedema therapist certification exam and the National Lymphedema Education Association (NALEA) for program content and instructional design.

Lymphedema training programs that offer a 135 hour (min.) course in the US or abroad, with 1/3 theoretical and 2/3 practical instruction (per LANA/NALEA guidelines), are invited to apply to become an NLN Affiliate Training Program.

NLN Affiliate Training Programs are required to provide NLN Information Packets to all enrolled students upon course completion and to provide brief information about the NLN and its opportunities (including 1 year of free NLN Affiliate Therapist membership upon completion of the course). By applying to become an NLN Affiliate Training Program, applicants agree to follow these guidelines and support and promote the NLN if accepted. Affiliate membership is not simply advertising, but a working relationship between the organization and the Affiliate Training Program.

### **Resource Guide Listing**

In the Resource Guide, a listing of all NLN Affiliate Training Programs appears with codes indicating what the program offers, as well as its own letter code. These codes appear throughout the Resource Guide, indicating the training program completed by each therapist (both individual therapists and treatment center staff). Codes for schools indicate basic important components, like the number of training hours, who is eligible to enroll, etc. Only training programs that apply and are accepted as NLN Affiliate Training Programs will be included in the listing. Therapists trained by courses that are not NLN Affiliate Training Programs are indicated with an asterisk (\*).

Every day the NLN receives numerous calls through its toll-free hotline and website from patients and healthcare professionals nationwide seeking information and/or referrals to therapists, treatment centers, and training programs. Our goal is to offer dependable referrals in each of these areas. Please note that the NLN reserves the right to refuse any application.

Thank you for your interest in becoming an NLN Affiliate Training Program. We look forward to receiving your application.



## NLN AFFILIATE TRAINING PROGRAM INSTRUCTIONS AND REQUIREMENTS

### INSTRUCTIONS:

1. Conduct an informal or formal assessment of how well your organization meets the criteria. Once it appears that all the requirements can be met, proceed with the application.
2. Do NOT send identifying information regarding individual students with any of the application attachments.
3. Be comprehensive in your responses. Additional attachments that support your responses are also acceptable. Inadequate or incomplete responses can delay the processing of an application.
4. Keep a copy of the completed application for your records.
5. Submit application along with year's membership fee.

### APPLICANT REQUIREMENTS

The curricula of NLN Affiliate Training Programs reflect content based on the internationally recognized "gold standard" of lymphedema treatment, Complete (or Combined) Decongestive Therapy. NLN Affiliate Training Programs must satisfy minimum requirements consistent with criteria outlined by the Lymphology Association of North America (LANA, <http://www.clt-lana.org/>) and the National Lymphedema Education Association (NALEA, [www.lymphedemaeducationassociation.org/](http://www.lymphedemaeducationassociation.org/)) to ensure that a standardized level of instruction is provided to prospective lymphedema therapists.

Lymphedema education providers seeking NLN Affiliate Training Program status must satisfy the following criteria (if requested, documentation must be submitted supporting adherence to all outlined criteria):

- Must accept students who are in possession of a current and unrestricted licensure in a related medical field (PT, PTA, OT, COTA, MT [min. 500 hours training], RN, MD, DO, DC, SLP, ATC)
- Must teach Complete Decongestive Therapy (CDT)

### Program requirements regarding course content (syllabus)

- Syllabus must reflect minimum standards as outlined by the Lymphology Association of North America (LANA):
  - 135 hours of coursework, which shall consist of 1/3 theoretical instruction and 2/3 practical lab work from no more than four consecutive cumulative courses from one training program
- NLN Affiliate Training Programs may offer the complete certification course in the following formats:
  - Continuous live meeting (minimum 135 hours, no home-study component)
  - Continuous live meeting (home-study component shall be completed prior to start of live meeting); home-study shall not exceed forty-five (45) hours; one home-study hour shall consist of sixty (60) minutes.
- Written exams shall be administered in no less than one hour (60 minutes) and cover a minimum of thirty (30) questions covering all topics; the pass/fail rate shall be 70% (minimum).
- The practical exam shall cover testing of competency in the following skills:
  - Basic skills in MLD techniques
  - Basic treatment sequences to reflect (at minimum) primary and secondary lymphedema affecting the upper and lower extremities
  - Application of padded short-stretch bandages on the upper and lower extremities
  - Successful treatment of at least one type of lymphedema (primary, secondary, pediatric, palliative, etc.) taught during the certification course
- Syllabus and teaching methods must be aimed directly at the treatment of lymphedema affecting all parts of the body as well as related conditions, such as chronic venous insufficiency, lipedema, inflammatory, and traumatic edema.
- Instruction in the technique known as Complete (or Combined) Decongestive Therapy (CDT) must include the initial decongestive phase (Phase I), the maintenance phase (Phase II), and self-care techniques (self-MLD, self-bandaging, exercises)
- Discussion of intermittent pneumatic compression devices (IPCs), including their role in lymphedema management
- The NLN's Position Paper "The Diagnosis and Treatment of Lymphedema." (<http://lymphnet.org/pdfDocs/nlntreatment.pdf>)

The following checklist serves as a guideline for completing the process satisfactorily:

- \_\_\_ Mission statement for the school/program
- \_\_\_ Syllabus (general course outline)
- \_\_\_ Course objectives

## **NATIONAL LYMPHEDEMA NETWORK STATEMENT OF PURPOSE/MISSION DEFINITION**

### **ORGANIZATION PURPOSE**

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The NLN is a non-profit, tax-exempt organization established in 1988. Comprising healthcare professionals, researchers, lymphedema patients, and patient advocates, the NLN is dedicated to making authoritative information on risk reduction practices and treatment of lymphedema available to the medical community, lymphedema patients, and the general public. The mission of the NLN is to create awareness of lymphedema through education and to promote and support the availability of quality medical treatment for all individuals at risk for or affected by lymphedema.

The NLN strives to:

- Make lymphedema a household word nationwide;
- Support the establishment of nationwide standards for lymphedema treatment, training, and reimbursement, with the goal of eventually accrediting NLN Affiliate Therapists and Treatment Centers;
- Educate the medical community, medical schools, legislators, insurance companies, and the general public about lymphedema and available treatments;
- Create a climate of awareness, understanding, and support for the patients who live with this condition.

In addition, the NLN supports research into the causes and possible alternative treatments for this often incapacitating condition and is dedicated to actively supporting public policy and legislative issues regarding lymphedema (and related conditions) in the US.

**FOR OFFICE USE ONLY**

Date Recv'd: \_\_\_\_\_  
 Ck# \_\_\_\_\_  Charged  
 All licenses/certs: **Y N**  
 Approved by: \_\_\_\_\_  
 School Code/s: \_\_\_\_\_  
 LANA certified? **Y N**  
 Support Group App? **Y N**

## NLN Affiliate Training Program Application

Please print clearly.

Today's Date \_\_\_\_\_

School Name \_\_\_\_\_  
 Owner/CEO \_\_\_\_\_  
 Course Director (including credentials) \_\_\_\_\_  
 Contact Person for membership/renewal \_\_\_\_\_  
 Address \_\_\_\_\_  
 City, State, Zip Code \_\_\_\_\_  
 Daytime phone (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_  
 Email \_\_\_\_\_  
 Website \_\_\_\_\_

Please indicate how you would like your listing to appear in the NLN's Resource Guide.

School Name \_\_\_\_\_  
 Home Office (City, State) \_\_\_\_\_  
 Phone \_\_\_\_\_  
 Email \_\_\_\_\_  
 Website \_\_\_\_\_  
 Director \_\_\_\_\_  
 Course Length (Hours, Days) \_\_\_\_\_  
 Classes Held (Across US, etc) \_\_\_\_\_

**Please submit the following with your application:**

*(note: we are unable to process incomplete applications)*

**Proof of credentials**

Please provide current documentation (copy) of each instructor's primary professional license (PT, OT, MT, MD, etc.) Provide any supportive documents related to the instructor's background, including schools attended for CLT certification (copy of certificate of completion), LANA certification (copy of certificate), etc. All documents must be copies of the original.

If a school/program is taught by multiple instructors, please provide proof of each instructor's certification and professional license.

**Mission Statement**

Please provide a statement of purpose for the existence of your lymphedema education programming and organization. This mission statement provides valuable insight regarding your perceived role as a continuing education provider. The mission statement must appear somewhere within your promotional materials in plain view of prospective students. Please attach a copy as it appears in literature or on your website.

**Syllabus**

Please provide a detailed course outline. This includes all topics covered in the theoretical and practical instruction elements of the program.

- Course objectives**  
Please provide general course objectives. Objectives must appear somewhere in course materials for reference by prospective students and continuing education providers.
- Course evaluation methods**  
Please describe how your school/program is evaluated by students who have graduated. Completed evaluation documents are considered anonymous unless the student elects otherwise and must be archived for reference or audit. Explain how your school/program uses this information for self-assessment. Please attach a sample evaluation form.
- Certificate of course completion**  
Please provide an original sample of the Certificate of Completion issued to graduates of your program.
- Proof of advertisements and brochures**  
Please attach copies of course advertisements and brochures used to market courses that are offered by your school. These must include the most current representations of the programs offered. If web advertising is used, please send recent links/screenshots.
- Schedule of classes**  
Please attach a schedule of all courses offered for the current year. If your program has a history of one or more years, please provide a schedule of classes conducted in the last 12 months.
- Proof of internet presence**  
Please provide an active link to your website. Web content should accurately reflect the documents submitted with this application. If you do not possess a website, please note this on your application.
- Proof of incorporation**  
Please provide a copy of your business license.
- Organizational structure**  
Please describe how your business is structured from a personnel standpoint. Are you a sole operator? Or do you have several instructors and office staff? Who is the educational director? Do you have a medical director?

**Affiliate Compliance Agreement**

As an applicant to become an NLN Affiliate Training Course, the school/educational director agrees to:

1. Provide accurate and truthful information to the NLN in all transactions to the best of his/her knowledge
2. Conduct all continuing education activities in an ethical manner that respects the rights and worth of the individuals we serve.
3. Provide full and accurate disclosure of information about programs, services, and fees in promotions and advertising.
4. Furnish requested information and work cooperatively with the NLN in a respectful and timely fashion.

**I warrant that the statements provided in this application are true, and if found to be otherwise, I understand and agree that my NLN Affiliate Membership status will be terminated immediately without compensation.**

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Signature	Position/Title	Date
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**The following required items must accompany your application:**

- \_\_\_\_\_ Enclosed is a list of all instructors and all professional licenses and certificates.
- \_\_\_\_\_ Enclosed is a copy of our curriculum and related materials (confidential).
- \_\_\_\_\_ Enclosed are promotional materials about our school and program.
- \_\_\_\_\_ Charge \$550 to the credit card:  
(or pay online at <http://lymphnet.org/store/affiliate-membership-training-programs>)  
 Amex  Disc  M/C  Visa  
Card number: \_\_\_\_\_ Expiration date: \_\_\_\_\_  
Customer code: \_\_\_\_\_ Signature: \_\_\_\_\_

**Thank you for your interest and support. ♦ We look forward to working with you.**