

NLPB Registrant Portal

<u>User Guide</u> Renewing Your Registration

Updated October 18, 2023



1. Log into the <u>NLPB Registrant Portal</u>.

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2. Once you have logged into your profile, click on *Registration Renewal* on the side menu.

Home	Home					
Profile						
Registrant Information						
Employment Information	Your Information					
Educational Background	First Name		Last Name		Middle Name	
Certificate of Registration	Julie		Reddy			
Other Pharmacy Registrations	Telephone		Email			
Professional Liability Insurance	(709) 555-5555		jreddy@nlpb.ca			
First Aid and CPR Certification						
Registration						
Document Upload						
Professional Development	Registrations					
Registration Renewal		5 1 K K N I	D 14 6 000	D. 14 6 57 6 D.		
Authorizations	Registration Type	Registration Number	Registration Status	Registration Effective Date	Registration Expiration Date	
Requests	Pharmacist	99-9999	Active	10/10/2022	11/30/2023	
Name Change Request						
Document Request						
Status Change Request	Outstanding Invoic	es				
Invoices & Receipts	Tetal 00.00				10	
	iotal \$0.00				View	



3. Click the *Start Renewal* button for the appropriate Registration Type.

					Julie Reddy (25
s 🗹 NEWFOUNDLAND & LABRADOR					
PHARMACY BOARD					
Home	Registration Renewal				
Profile					
Registrant Information	Registration Renewals open for a lin	nited time in the fall of the year and are othe	erwise not accessible. All profes	sional development requirer	ments must be met and recorded, and all outstanding
Employment Information	fees must be paid before you can re later.	new. If renewals are open, please follow the	e step-by-step instructions to co	nplete the renewal process	s. You will be able to save your progress and return to it
Educational Background	For assistance, please contact us at	t registration@nlpb.ca.			
Certificate of Registration	Your current registration information	is listed below:			
Other Pharmacy Registrations					
Professional Liability Insurance	Registration Type	Registration Number	Status	Expiry Date	
First Aid and CPR Certification	Pharmacist	99-9999	Active	11/30/2023	Start Renewal
Registration					
Document Upload					
Professional Development					
Registration Renewal					
Authorizations					
Requests					
Name Change Request					
Document Request					
Status Change Request					
Invoices & Receipts					
Account Settings					



4. Review and update your Personal Profile, Mailing Address, Contact Information, and Current Employment Details as necessary, then click *Save & Continue*.

		Julie Reddy (25
PHARMACY BOARD		
ome	Registration Renewal	
rofile	1 Descent Destin	0
Registrant Information	1 Personal Profile	Step 1 or 10
Educational Packaround		
Certificate of Registration	Note: All information with a red asterisk	(*) is required.
Other Pharmacy Registrations		
Professional Liability Insurance	Personal Profile	
First Aid and CPR Certification	Last Name	Reddy
egistration	First Name	Julie
Document Upload		
Professional Development	Middle name	
Registration Renewal	Birthdate	07/03/1989
Authorizations	Gandar	Female
equests	Gender	
Name Change Request	Sex at Birth *	Female
Document Request	Language Of Care *	English × French ×
Status Change Request	Ethnicitu ¥	
voices & Receipts	Lanicity -	vrine ×
ccount Settings	Indigenous Identity *	Not Applicable ==
	Mailing Address	
	Street Address *	1 Main Street
	Street Address 2	
	City/Town *	Metropolis
	Province *	Newfoundland and Labrador
	Postal Code *	A1A 1A1
	Contact Information	
	Phone Number *	(709) 555-5555
	Other Diversity Number	
	Other Phone Number	
	Primary E-mail *	jreddy@nlpb.ca
		Note: The email address entered here is for communication purposes only. The email used for login purposes can be changed
		under Account Settings.
	0	
	Current Employment Details	
	Employment Status *	Employed
	Seeking Employment *	In profession v
	< Previous	Save & Continu



5. Review and update your employment information as necessary, then click the *Save & Continue* button to proceed. For instructions on updating your employment information, please refer to the <u>NLPB Registrant Portal User Guide – Adding/Updating Employment Information</u>.

Note: *Please ensure the Employment End Date field is completed for any employers for which you no longer work.*

	Julie Reddy (25
Se V NEWFOUNDLAND & LABRADOR	
PHARMACT BOARD	
11-ma	Paulatentian Damand
Profile	Registration Renewal
Profile Registrant Information	2 Employment Information Step 2 of 10
Employment Information	
Educational Background	
Certificate of Registration	Employment Information
Other Pharmacy Registrations	Your employment history (if any) is listed below. If you are applying for registration, please provide details regarding where you will be practicing in Newfoundland and Labrador (if known).
Professional Liability Insurance	Employer Name Primary Employment Employment Start Date Employment End Date
First Aid and CPR Certification	NLPB, 145 Kelsey Drive, St. John's Yes 03/16/2021 Update Delete
Registration	
Document Upload	+ Add New Records
Professional Development	
Registration Renewal	
Authorizations	
Requests	< Previous Save & Continu
Name Change Request	
Document Request	
Status Change Request	
Invoices & Receipts	
Account Settings	



 Review and update your education information as necessary, to ensure all pharmacy-related education is recorded, then click the *Save & Continue* button to proceed. For instructions on updating your education information, please refer to the <u>NLPB Registrant Portal User Guide –</u> <u>Adding/Updating Education Information</u>.

Note: If you have recently graduated, please ensure the I have not yet graduated checkbox is unchecked for the appropriate record.

				Julie Reddy (2
NEWFOUNDLAND & LABRADOR				
Home	Registration Renewal			
Profile				
Registrant Information	3 Educational Background			Step 3 of 10
Employment Information				
Educational Background				
Certificate of Registration	Please provide details of your initial pharmacy degree and your program in which you are enrolled.	r highest level of education in pharmacy (if different). If yo	u have not yet graduated, please p	provide details of the pharmacy
Other Pharmacy Registrations				
Professional Liability Insurance	Education Institution	Education Level	Program	
First Aid and CPR Certification	Education institution	Education Lever	Program	
Registration	Memorial University of Newfoundland	PharmD	Pharmacy	Update
Document Upload				
Professional Development		+ Add New Records		
Registration Renewal				
Authorizations				
Requests				
Name Change Request	< Previous			Save & Contin
Document Request				
Status Change Request				
Invoices & Receipts				
Account Settings				



7. To renew registration for 2023, select *Active* from the *Requested Status* drop-down field. Click the *Save & Continue* button to proceed.

			Julie Reddy (25) 👻 📗
ST NEWFOUNDLAND & LABRADOR			
Home	Registration Renewal		
Profile	5		
Registrant Information	4 Status Change Request		Step 4 of 10
Employment Information			
Educational Background	All information with a red actorick $(*)$ is required		
Certificate of Registration	Note: An information with a red asterisk (·) is required		
Other Pharmacy Registrations	License Type *	Pharmacist	
Professional Liability Insurance	Application Status *	Active	
First Aid and CPR Certification			
Registration	Requested Status *	Active	~
Document Upload			
Professional Development			
Registration Renewal	< Previous		Save & Continue >
Authorizations			
Requests			
Name Change Request			
Document Request			
Status Change Request			
Invoices & Receipts			
Account Settings			



8. Review and the Professional Development Summary, ensuring you have 15 *Total CEUs Submitted* and 0 *Total Remaining CEUs Required* as well as at least 7.5 *Current Units* in *Accredited Learning*.

To add or change professional development activities, click the Professional Development link to pause the renewal process and navigate to the Professional Development section of the portal. To resume the renewal process, click the Continue button next to the appropriate registration on the Registration Renewal page.

						Julie Reddy (2
ST NEWFOUNDLAND & LABRADOR PHARMACY BOARD						
Home	Registration Renewal					
Profile						
Registrant Information	5 Professional Development	Summary				Step 5 of 10
Employment Information						
Educational Background	Below is your Professional Developme	ent Summary for the most recent PD per	iod.			
Certificate of Registration	To add or change a professional devel	lopment activity, please visit the Profess	ional Developmen page.			
Other Pharmacy Registrations	PD Period Status: Open					
Professional Liability Insurance	Registration Type PD Peri	.od Minimun	I Units Required	Total CEUs Submitted	Total Remaining CEUs	Required
First Aid and CPR Certification	Pharmacist 11/30/20	022 - 11/30/2023 15		15	0	
Registration	Credits By Category					
Document Unload						
Professional Development	Category	Minimum Units	Required	Maximum Units	Curren	nt Units
Periotection Renewal	Accredited Learning	7.5		N/A	10	
	Non-Accredited Learning	0		N/A	5	
Autorizations						
Requests						
	Learning Activities					
Document Request						
Status Change Request	PD Category Activity	y Provider	Program Accredited By		Date of Completion	Number of Credits
Invoices & Receipts	Non-Accredited Learning Pharm	nacy Continuing Education Provider	Non-accredited		08/09/2023	5
Account Settings	Accredited Learning Pharm	nacy Continuing Education Provider	The Canadian Council of C	Continuing Education (CCCEP)	04/04/2023	10
						_
	< Previous					Save & Contine



9. Review and update your first aid and CPR certification as necessary, then click the *Save & Continue* button to proceed.

Note: *Proof of current First Aid and CPR certification is only required for registered pharmacy professionals who are authorized to administer drug therapy by inhalation or injection.*

			Julie Reddy (25) V
S V NEWFOUNDLAND & LABRADOR			
Home	Registration Renewal		
Profile			
Registrant Information	6 First Aid and CPR Certification		Step 6 of 10
Employment Information			
Educational Background			
Certificate of Registration	Note: All Information with a red asterisk (*) is r	duirea.	
Other Pharmacy Registrations	First Aid and CPR Certification		
Professional Liability Insurance			
First Aid and CPR Certification	Provider Name	St John Ambulance	
Registration	Issue Date	10/01/2023	Ê
Document Upload	Expiration date	10/01/2025	m
Professional Development	Expiration data		
Registration Renewal	Upload First Aid and CPR Certification	▲ Choose Files	
Authorizations		Certification_20231017_Registration Certificate.JPG	×
Requests			
Name Change Request			
Document Request	/ Providence		Cours & Coordinus &
Status Change Request	< Previous		Save & Continue >
Invoices & Receipts			
Account Settings			



10. Review and update your professional liability insurance as necessary, then click the *Save & Continue* button to proceed. For instructions on updating your professional liability insurance, please refer to the <u>NLPB Registrant Portal User Guide – Adding/Updating Professional Liability Insurance</u>.

Note: Please ensure that the certificate and documentation on file is up to date before proceeding.

						Julie Reddy (25
WEWFOUNDLAND & LABRADOR						
Home	Registration Rene	ewal				
Profile	7 Destandand III	1.114 · I				017640
Registrant Information	7 Protessional Lia	ibility Insurance				Step / of 10
Employment Information						
Educational Background	Current professional liah	pility insurance (PLI) is required	for all professionals, pharmacy stude	ents, and pharmacy interns registered v	vith NLPB. You must provide proo	f of insurance by uploading
Certificate of Registration	a certificate of insurance	e and providing policy details.				
Other Pharmacy Registrations	If you have already subr	nitted a copy of your certificate	of insurance, please confirm that it is ate for an existing PLL policy, please s	elect the EDIT button		
Professional Liability Insurance	If you have a new policy	that has not been submitted to	the NLPB, please select the ADD N	EW button.		
First Aid and CPR Certification	Provider Name	Policy Number	Occurrence Amount	Aggregate Amount	Expiration Date	
Registration	ADC Income	40002075	2000000	4000000	07/04/2024	T dia
Document Upload	ABC Insurance	ABC23675	200000	400000	07/01/2024	Eur
Professional Development			. Add	New Peeerde		
Registration Renewal			7 Add	New Records		
Authorizations						
Permets						
Name Change Request						
Descret Descret	< Previous					Save & Continu
Document request						
Status Change Request						
Invoices & Receipts						
Account Settings						



11. Read and select 'Yes' or 'No' in answer to the declarations, then click the *Save & Continue* button to proceed.

Note: An answer of 'Yes' to any declarations may require additional information and document uploads.

			Julie Reddy (25) 🗸
HARMACY BOARD			
Home Profile Registrant Information Employment Information Educational Background Centificate of Registration Other Pharmacy Registrations Professional Liability Insurance First Aid and CPR Certification	B Declarations 8 Declarations Note: All information with a red asterisk (*) is required. 1. Have you ever been found guilty or convicted of an offence under any provincial or federal statute in Canada or another country * 2. Are you the subject of a current proceeding relating to an offence under any provincial or federal statute in Canada or another country *	 Yes ● No Yes ● Na 	Step 8 of 10
Registration Document Upload Professional Development Registration Renewal Authorizations Request Name Change Request Document Request Status Change Request Invoices & Receipts Account Settings	< Previous		Save & Continue)



12. Read and indicate whether you agree to the attestations by checking the appropriate checkboxes, then click the *Save & Continue* button to proceed.

Note: You must agree to all attestations to continue with the renewal process.

		Julie Reddy (25) 🗸
HEWFOUNDLAND & LABRADOR		
Home	Registration Renewal	
Profile	Registration Renewal	
Registrant Information	9 Attestations	Step 9 of 10
Employment Information		
Educational Background		
Certificate of Registration	Note: All information with a red asterisk (*) is required.	
Other Pharmacy Registrations	The information contained in this application is complete and correct and I recognize that providing false or incomplete information on this application may be	e cause for revocation of
Professional Liability Insurance	registration. *	
First Aid and CPR Certification	I will provide the Registrar with the details of any of the following that occur or arise after my registration: *	
Registration	 A charge relating to an offence under any provincial or federal statute in Canada or another country. A finding of will be considered in a charge to a offence under our provincial or charged statute in Considered and the country. 	
Document Upload	 A mining or guilt or conviction in relation to an onerce under any provincial or rederal statute in Canada or another country. A finding of guilt or suspension by a professional governing body in another province or territory of Canada or another country. 	
Professional Development		
Registration Renewal	I will abide by the requirements of the Pharmacy Act, its Regulations, and the Bylaws, Standards of Practice, and Standards of Pharmacy Operation establish and Labrador Pharmacy Board.	ned by the Newfoundland
Authorizations		
Requests	I have reviewed and understand the NLPB Policy on Collection, Use and Disclosure of Registrants' Personal Information and confirm that I consent to disclosure of my personal information in accordance with this policy.	the collection, use, and
Name Change Request		
Document Request	I agree to practice only within the limits of my own competence and have taken action to maintain competence in relation to any expanded scopes for which	I am authorized. 🕈
Status Change Request	I have been engaged in the practice of pharmacy for a minimum of four hundred and twenty (420) hours in the last two calendar years and understand that I	may be required to provide
Invoices & Receipts	verification of such, upon request. *	
Account Settings	I have completed a minimum of 15 continuing education units this past year, of which at least half are from accredited programs, and I have documented the portfolio, in accordance with the NLPB Interpretation Guide - Professional Development Requirements for Pharmacists and Pharmacy Technicians.	se activities in my learning
	I have obtained membership in the Pharmacists' Association of Newfoundland and Labrador, as required by section 21(3)(a) of the Pharmacy Act, 2012 and responsible for ensuring that this membership is maintained throughout the year.	understand that I am
	I have obtained professional liability insurance in accordance with the NLPB Interpretation Guide - Professional Liability Insurance Requirements for R that I am responsible for ensuring that this coverage is maintained throughout the year. I have uploaded a copy of my current annual certificate of coverage a policy renewal I am required to upload the new certificate and update my policy information in the NLPB Registrant Portal.	egistration and understand and understand that upon
	< Previous	Save & Continue >



13. The payment screen summarizes the fees applicable to the renewal process. Select either *Cheque*, *Credit Card*, or *Money Order* from the *Method of Payment* drop-down field. Please note, credit cards will be processed online, while cheques or money orders must be sent to the address provided.

PHARMACY BOARD			
ome	Registration Renewal		
rofile	-		
Registrant Information	10 Payment		Step 10 of 10
Employment Information			
Educational Background			
Certificate of Registration	Fee Breakdown		
Other Pharmacy Registrations	Invoice Item		Amount
Professional Liability Insurance	Annual Pharmacist Registration Renewal	Fee	\$1,094.26
First Aid and CPR Certification	HST		\$164.14
egistration	Test		\$4.050.40
Document Upload	Iotal		\$1,230.40
Professional Development	Method of Payment		
Registration Renewal	Please select method of payment		
Authorizations	By submitting this payment, I agree, that if r Newfoundland and Labrador Pharmacy Bo	ny application is approved, I am responsible for paying any applicable annual registra rrd does not provide refunds on fees	ation or licensing fees as per the current Schedule of Fees. The
equests	noniourialità and castador i harmady soc		
Name Change Request	Method of Payment	Select	~
Document Request		Select	
Statue Change Request		Cheque	
Status Ghange Request	< Previous	Credit Card	
voices & Receipts			

14. Click the Pay by... button to proceed with payment and submit your renewal.

Educational Background					
Certificate of Registration	Fee Breakdown				
Other Pharmacy Registrations	Invoice Item An				
Professional Liability Insurance	Annual Pharmacist Registration Renewal Fee	\$1,094.26			
First Aid and CPR Certification	HST	\$164.14			
Registration	Total	\$1 258 40			
Document Upload	10MH	01,200.00			
Professional Development	Method of Payment				
Registration Renewal	Please select method of payment				
Authorizations	By submitting this payment, I agree, that if my application is approved, I am responsible for paying any applicable annual registration or licensing fees as per the current Schedule of Fees. The Newfoundiand and J abrador Pharmary Roard does not novide refunds on fees.				
Requests	· · · · · · · · · · · · · · · · · · ·				
Name Change Request	Method of Payment Cheque	×			
Document Request	Amount Due \$1,258.40				
Status Change Request	Cheque/money order Payment				
Invoices & Receipts	If paying by cheque, make payment payable to:				
Account Settings	Newfoundland and Labrador Pharmacy Board				
	Suite 201				
	145 Kelsey Drive				
	St. John's, NLA1B 0L2				
	Canada				
	< Previous	Pay By Cheque/Money Orde			



15. You will receive an email to confirm that your renewal has been submitted. Please note, renewals are not approved until full payment of fees have been received.

		Julie Reddy (25) 🗸
NEWFOUNDLAND & LABRADOR		
THAIMACT BOARD		
Home	Registration Renewal	
Profile		
Registrant Information		
Employment Information	✓ Submitted	
Educational Background	Thank you for completing your renewal. If you have questions about your renewal please contact us at registration@nlpb.ca.	
Certificate of Registration	For payments, please visit the Involces & Receipts section on the menu.	
Other Pharmacy Registrations		
Professional Liability Insurance		
First Aid and CPR Certification		
Registration		
Document Upload		
Professional Development		
Registration Renewal		
Authorizations		
Requests		
Name Change Request		
Document Request		
Status Change Request		
Invoices & Receipts		
Account Settings		