



STATE OF ALABAMA DEPARTMENT OF
PUBLIC HEALTH

Scott Harris, MD, FACP, FIDSA
State Health Officer

**I certify that I have completed the training: Maternal Fetal Medicine
Telehealth Visit Review Video Training for ADPH Nurses.**

Signature _____

Date _____

Print this form and a copy of your official transcript for your records.

* Please do not send in this form with your CE material.
This copy is for your personal records only.