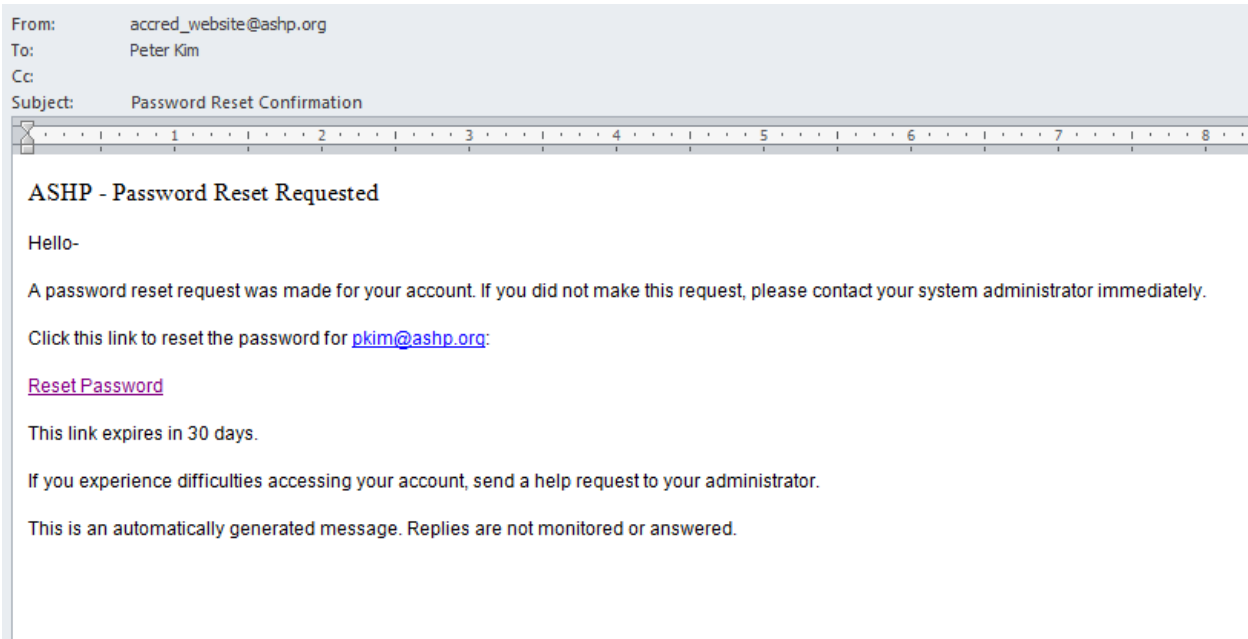


## Technician Program

### Log into Portal for the first time

Click [Reset Password](#) from the Registration Confirmation email from [accred\\_website@ashp.org](mailto:accred_website@ashp.org)



Reset your password



### Reset your Password

Please enter and confirm your new password.

[Return to the login screen.](#)

## Updating Demographics as a Program Representative

Log into Fabric using your email and password at <https://accreditation.ashp.org/>






Log into your accredited program account  
Please Log In by providing your Email Address and Password.

  
  
  
[Can't Log In or forgot your password?](#)

Choose the “Program Representative” persona. (NOTE: A person must be associated as a trusted contact for a program in order to have access to the dashboard for that program.)

Choose your Persona...

-  My Items
-  Program Representative
-  Staff

Please select a Program from the list if there are multiple programs.

Program Representative Dashboard

Your Programs

Please select a Program from the list below.

McGuire VA Medical Center

[Hunter Holmes McGuire VA Medical Center](#)

38101

Richmond, Virginia

Milan Institute - Las Vegas

[Milan Institute - Las Vegas](#)

NV-07

Las Vegas, Nevada

If you do not see the Program you are looking for, please contact your representative and ask them to grant you access.

[Choose Persona](#) | [Logout](#)

From the program dashboard, click the “Demographics” tab at the top of the screen.

The screenshot shows the 'Demographics' tab selected in the navigation bar. A blue arrow points to the 'HOME' tab, and another blue arrow points to the 'DEMOGRAPHICS' tab. The main content area is divided into two columns. The left column contains a notification: 'You are assigned to more than 1 Program.' Below this is the program details for 'Milan Institute - Las Vegas' (NV-07), including the primary contact information for Feliciano D. Cesa, Director of the Pharmacy Technician Education and Training Program. The right column contains sections for 'Current Activities' (0) and 'Notifications' (No New Notifications), with a 'VIEW ALL' link.

HOME DEMOGRAPHICS

**You are assigned to more than 1 Program.**

**Milan Institute - Las Vegas**  
NV-07  
Milan Institute - Las Vegas  
Las Vegas, Nevada

**Primary Contact**  
Feliciano D. Cesa  
Director, Pharmacy Technician Education and Training Program  
fcesa@milaninstitute.edu  
(702) 671-4242  
Las Vegas, NV

**ACCREDITATION STATUS**  
Accredited  
Final  
Aug 8, 2012

**0 Current Activities**  
There are no activities for your Program.

**Notifications**  
No New Notifications  
[VIEW ALL](#)

Click “Edit” in the demographic category you wish to edit. There are six categories (Certificate, Degree, Enrollment, Experimental Training Sites, Faculty or Staff, and Technician Training Demographics).

DEMOGRAPHICS

CERTIFICATE

[Edit](#)

Prerequisite course work	Didactic course work
No Data	316 / 31.6
Laboratory course work	Experiential Training
284 / 14.2	160/ 5.33
Lecture class size	Laboratory class size
20	20
Spaces per entering class	General education courses
5	No Data
Clinical	Total Hours of Program
No Data	No Data
Other	
No Data	

DEGREE

Make the necessary changes and click the “Save” button to save

DEMOGRAPHICS

CERTIFICATE

[Edit](#)

Prerequisite course work	Didactic course work
<input type="text"/>	<input type="text" value="316 / 31.6"/>
Laboratory course work	Experiential Training
<input type="text" value="284 / 14.2"/>	<input type="text" value="160/ 5.33"/>
Lecture class size	Laboratory class size
<input type="text" value="20"/>	<input type="text" value="20"/>
Spaces per entering class	General education courses
<input type="text" value="5"/>	<input type="text"/>
Clinical	Total Hours of Program
<input type="text"/>	<input type="text"/>
Other	
<input type="text"/>	

Click on the link below.

<https://accreditation.ashp.org/directory/#/program/technician>

Search for your program.

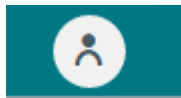
Review the changes in the online directory

If you experience any technical problems or have any questions please send a message to [ASD@ashp.org](mailto:ASD@ashp.org) with the SUBJECT: Self Service Portal Problem.

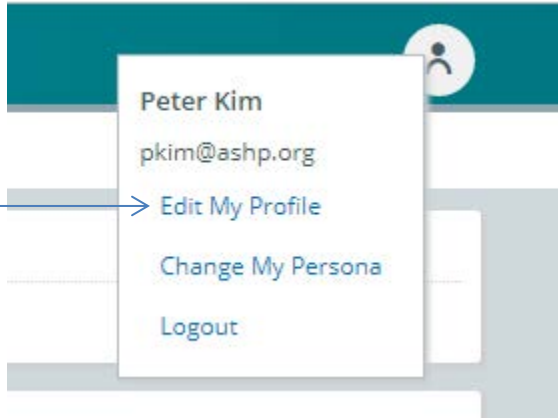
**Additional Instruction** –You can edit your profile information, making changes to the profile information does not change Online Directory Information. You will need to contact [ASD@ashp.org](mailto:ASD@ashp.org) to modify any online directory contact information.

### **Editing Your Profile Information**

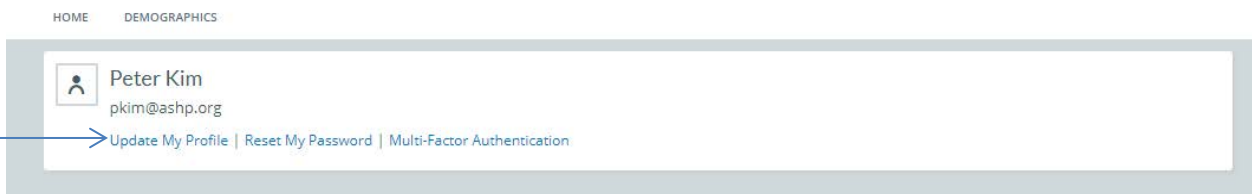
Click on the Icon on top right



Click [Edit My Profile](#)



Click [Update My Profile](#)



Make the necessary changes and click [Save Button](#) to save

## **TECHNICIAN ONLINE DIRECTORY SELF-PORTAL UNEDITABLE FIELDS**

**Program** (*name, address, phone and fax numbers, website, etc.*) – Send updates/changes to [asd@ashp.org](mailto:asd@ashp.org) to include the program code.

**Program Director** (*name, address, phone number, fax number, email address, and mailing address*) Send updates to [asd@ashp.org](mailto:asd@ashp.org) to include the program code. Send program director change notification to [asd@ashp.org](mailto:asd@ashp.org) to include program director's academic & professional record form and curriculum vitae to include full contact information.

**Program Contact Person** (*name, address, phone number, fax number, email address, and mailing address*) Send updates/changes to [asd@ashp.org](mailto:asd@ashp.org) to include the program code.

## **TECHNICIAN ONLINE DIRECTORY SELF-PORTAL EDITABLE FIELDS**

### **Program Description**

#### **Program Information**

Prerequisite course work	<i>Hours (contact/credit)</i>
Didactic course work	<i>Hours (contact/credit)</i>
Laboratory course work	<i>Hours (contact/credit)</i>
Experiential training	<i>Hours (contact/credit)</i>

Lecture class size

Laboratory class size

Spaces per entering class

#### **Faculty/Staff**

Pharmacists

Technicians

Lab/clerical support

Other (*specify*)

#### **Enrollment**

Application deadline date

Starting date

Interview required (Yes or No)

Class scheduling (*i.e., full-time, part-time, daytime, evening*)

Flexible scheduling allowed: (Yes or No)

Tuition costs \$

Book/supply costs \$

Uniform costs \$

Lab/other fees \$

Liability insurance \$

Other (*specify*): \$

**Special Program Features** (*i.e., hands-on skill development, computer experience, state-of-*

*the-art lab, financial aid, job placement, assistance with state registration, preparation for certification examination, distance learning)*

**Requirements for Acceptance** (*H.S. diploma or GED equivalency, admissions testing, interview, transcript, letter(s) of recommendation, etc.*)

## **Experiential Training**

### **Number and types of experiential training sites:**

Community pharmacy

Hospital

Home health care

Managed care

Other (*specify*)

### **General location of training sites**

**Special requirements of training sites** (*drug test, daytime/evening/weekend rotations, TB skin test, Rubella titre, immunizations, first aid/CPR certification, proof of medical insurance coverage, physical, etc.*)

## **Academic Degree Awarded**

## **Additional Requirements**