

REGISTRANT PORTAL USER GUIDE

Recording Completed Practical Training for Interns

June 20, 2025

1.	og into the <u>CPNL Registrant Portal</u> .		
1.	Log into the <u>CPNL Registrant Portal</u> .	Registrant Portal ireddy@nlpb.ca Ireddy@nlpb.ca <tr< td=""><td>EN Q</td></tr<>	EN Q
	Powered by Thenlia Cloud		

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

COLLEGE OF PHARMACY							
OF NEWFOUNDLAND AND LABRADOR							
lome	Home						
Profile							
Registrant Information							
Employment Information	Your Inform	ation					
Educational Background	First Name			Last Name		Middle Name	
Certificate of Registration	Julie			Reddy			
Other Pharmacy Registrations	Telephone			Empil			
Professional Liability Insurance	(700) 555	1777		iroddy@nlnb.ca			
First Aid/CPR Certifications	(100) 555-			Jieddy@mpb.ca			
Registration							
Document Upload							
Professional Development	Registratio	ns					
Practical Training							
Registration Renewal	Registration	ype	Registration Number	Registration Status	Registration Effective Date	e Registration Expiration	n Date
Authorizations	Pharmacy In	ern	I-9999	Active	01/01/2025	12/31/2025	
Requests							
Name Change Request							
Document Request	Outstandir	g Invoices					
Status Change Request							_
Application to be Designated Pharmacist-in-Charge of Existing Pharmacy	Total	\$0.00				Vi	ew
nuelees 9 Dessints							

3. Click the View button next to your registration for which you have been approved to complete practical training.

						🖂 Messages 📔 Julie Reddy 🗸	I Î
COLLEGE OF PHARMACY							
Home	Practical Training						
Profile							
Registrant Information	Below are the registration	classes for which you are approved to co	mplete practical training.				
Employment Information	Registration Number	Registration Type	Registration Status	Effective Date	Expiration Date		
Educational Background	1-9999	Pharmacy Intern	Active	01/01/2025	12/31/2025	Q View	
Certificate of Registration							
Other Pharmacy Registrations							
Professional Liability Insurance							
First Aid/CPR Certifications							
Registration							
Document Upload							
Professional Development							
Practical Training							
Registration Renewal							
Authorizations							
Requests							
Name Change Request							
Document Request							
Status Change Request							
Application to be Designated Pharmacist-in-Charge of Existing Pharmacy							
Invoices & Receipts							

4. Scroll to the *Practical Training Program Reports* table and click the *View* button next to your current practical training period.

Home	Practical Training Prog	gram Summary				
Profile						
Registrant Information	Upon completion, you are require	red to document the start date, end date, and total hou	rs of your practical training program	with each approved	d Preceptor.	
Employment Information	The total practical training progr	am hours, by preceptor, and a list of program reports a	are displayed below.			
Educational Background	Total Counts					
Certificate of Registration	Registration Number	Registration Type	Registration Status	Expir	v Date	Total Hours
Other Pharmacy Registrations		Disease later	Active	40.00	10005	N/A
Professional Liability Insurance	1-8888	Pharmacy Intern	Active	12/3	1/2025	N/A
First Aid/CPR Certifications						
Registration	By Preceptors					
Document Upload	Preceptor	Practical Training Approved Date			Total Hour	s
Professional Development	Julie Reddy	06/20/2025			N/A	
Practical Training						
Registration Renewal	Desetion L Training Deserve	- Davasta				
Authorizations	Fractical training Frogram	n Reports				
Requests	Anticipated Start Date	Practical Training Completion Deadline	Preceptor	Total Hours	Status	
Name Change Request	05/01/2025	11/01/2025	Julie Reddy	N/A	Not Submitted	Q View
Document Request						
Status Change Request						
Application to be Designated Pharmacist-in-Charge of Existing Pharmacy						
Invoices & Receipts	< Back					
Account Settings						

5.	Scroll to	the	Record	of (Compl	etion	Reports	table	and	click	the	+Add	New	Report
				- 1										

Registrant Information	You can see additional comments & feedback about the practica	al training period below:		4
Employment Information	Preceptor Name	Julie Reddy		
Educational Background	Anticipated Start Date	05/01/2025		
Certificate of Registration	Anticipated Start Date	03/01/2023		
Other Pharmacy Registrations	Practical Training Completion Deadline	11/01/2025		
Professional Liability Insurance				
First Aid/CPR Certifications	Status	Not Submitted		
Registration	Approved Date	N/A		
Document Upload	Approved Date	19075		
Professional Development	Total Hours	0		
Practical Training	Evaluation Summany	N/A		
Registration Renewal	Evaluation Summary	IN/PA		
Authorizations				
Requests	Upload Files	1 Choose Files		
Name Change Request				
Document Request	Record of Completion Reports			
Status Change Request	Actual Start Date	Actual End Date	Total Hours	
Application to be Designated Pharmacist-in-Charge of Existing Pharmacy		No Reports Submitted		
Invoices & Receipts				
Account Settings		+ Add New Report		
·				
	< Back		Submit for Approval	

6. Fill out all the required fields in the Record of Completion Report and click the *Submit* button. For *Pharmacy Technician Interns only, upload your completed prescription tracking log before submitting the report.*

		🔤 Messi	ages Julie Reddy ~
of REAL ON DEALD AND EXAMPOIN			
Home	Record of Completion Report		
Profile	Record of completion Report		
Registrant Information			
Employment Information	Note: All information with a red asterisk (*) is required.		
Educational Background	Actual Start Date *	05/01/2025	
Certificate of Registration			
Other Pharmacy Registrations	Actual End Date *	06/13/2025	
Professional Liability Insurance	Total Hours *	140	
First Aid/CPR Certifications			
Registration	Comments and Feedback *	The staff at the pharmacy were very welcoming and my preceptor was very helpful.	9 1
Document Upload			
Professional Development	Completed Prescription Tracking Log	Choose Files	
Practical Training	(Fharmacy rechnician Gandidates only)		
Registration Renewal			
Authorizations			
Requests	< Back		Submit
Name Change Request			
Document Request			
Status Change Request			
Application to be Designated Pharmacist-in-Charge of Existing Pharmacy			
Invoices & Receipts			

Registrant Information	You can see additional comments & feedback about t	he practical training period below:
Employment Information	Describe Marrie	Iulia Dadelu
Educational Background	Preceptor Name	Julie Reddy
Certificate of Registration	Anticipated Start Date	05/01/2025
Other Pharmacy Registrations	Practical Training Completion Deadline	11/01/2025
Professional Liability Insurance	Tractical training completion beautife	11/01/2025
First Aid/CPR Certifications	Status	Not Submitted
Registration	Approved Date	Ν/Α
Document Upload	, pprotect back	
Professional Development	Total Hours	140
Practical Training	Evaluation Summary	N/A
Registration Renewal	,	
Authorizations		
Requests	Upload Files	▲ Choose Files
Name Change Request		
Document Request	Record of Completion Reports	

Actual End Date

06/13/2025

Total Hours

Q View

140

+ Add New Report

Actual Start Date

05/01/2025

< Back

Status Change Request

Invoices & Receipts

Account Settings

Application to be Designated Pharmacist-in-Charge of Existing Pharmacy