

## Adrian Hordon

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**From:** Kristina Esposito <kristina.esposito@ajj.com>  
**Sent:** Wednesday, July 01, 2015 2:32 PM  
**To:** Adrian Hordon  
**Subject:** Re: Form submission from: Contact Us

She does have a CMSRN certification and it will expire 10/31/2015.

Thank you,

Kristina Esposito  
Association Services Coordinator  
AMSN & MSNCB  
East Holly Avenue, Box 56, Pitman, NJ 08071-0056  
P: [866-877-2676](tel:866-877-2676) F: [856-589-7463](tel:856-589-7463)  
[kristina.esposito@ajj.com](mailto:kristina.esposito@ajj.com)  
[www.amsn.org](http://www.amsn.org) and [www.msncb.org](http://www.msncb.org)

Register for the 2015 AMSN Convention  
Paris Hotel in Las Vegas, NV Sept. 24th-27th

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**From:** "Adrian" <[Adrian.Hordon@thompsonhealth.org](mailto:Adrian.Hordon@thompsonhealth.org)>  
**To:** "Kristina Esposito" <[kristina.esposito@ajj.com](mailto:kristina.esposito@ajj.com)>  
**Sent:** Wednesday, July 1, 2015 1:16:51 PM  
**Subject:** RE: Form submission from: Contact Us

Hi Kristina,

Her name is Kathy Wethington (Katherine). She has since retired, but if you could tell us the dates of her previous certification (evidence would be fantastic as well!), we would appreciate it!

Thank you,

Adrian

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**From:** Kristina Esposito [<mailto:kristina.esposito@ajj.com>]  
**Sent:** Wednesday, July 01, 2015 11:55 AM  
**To:** Adrian Hordon  
**Subject:** Re: Form submission from: Contact Us

Adrian,

Thank you for reaching out to us. I can confirm for you whether or not this nurse has a current CMSRN certification and the expiration date if you can provide their name.

Thank you,

Kristina Esposito  
Association Services Coordinator  
AMSN & MSNCB  
East Holly Avenue, Box 56, Pitman, NJ 08071-0056  
P: [866-877-2676](tel:866-877-2676) F: [856-589-7463](tel:856-589-7463)  
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**From:** "Adrian via AMSN" <[amsn@ajj.com](mailto:amsn@ajj.com)>  
**To:** [amsn@ajj.com](mailto:amsn@ajj.com)  
**Sent:** Monday, June 29, 2015 5:51:58 PM  
**Subject:** Form submission from: Contact Us

Submitted on June 29th, 2015  
Submitted by anonymous user: 204.69.151.229  
Submitted values are:

First Name: Adrian  
Last Name: Hordon  
Email: [adrian.hordon@thompsonhealth.org](mailto:adrian.hordon@thompsonhealth.org)

Comments:

Greetings! My name is Adrian Hordon, MSN RN, Clinical Nurse Educator and Magnet Program Director for FF Thompson Hospital in Canandaigua, NY. We are currently up for Magnet re-designation, and require evidence of one of our nurses' involvement with AMSN. This nurse has since retired and cannot show proof of her previous registration, so I am hoping you can help provide the missing information for our documentation. Could someone please contact me to discuss? I can be reached by the above email, or by phone: 585-396-6398.

Thank you so much in advance!

Warm Regards,

Adrian Hordon

The results of this submission may be viewed at:  
<https://www.amsn.org/node/201/submission/5117>

