



# Organization of Wound Care Nurses & Allied Healthcare Professionals

S. MAC ARTHUR BLVD, STE. 105-281, COPPELL, TEXAS 75019 | PHONE: 972-584-7616 | FAX: 214-853-5364 820  
EMAIL: [info@woundcarenurses.org](mailto:info@woundcarenurses.org) | WEBSITE: [www.woundcarenurses.org](http://www.woundcarenurses.org)

**Subject:** Verification of Board Certification & Credentials

**Verification Inquiry No:** N/A

Thank you for your recent inquiry to the Organization for Wound Care Nurses & Allied Health Care Professionals (OWCNAHP) Certification Board regarding the Certification Status of the below listed Clinician. OWCNAHP Certification Board verifies the following information:

Full Name	State	Certification	Date Issued	Expiration Date
Imari Davis	CA	Wound Care Sales Professional	01/18/2025	01/18/2030

If you have any questions or concerns regarding this information, please contact us via email: [info@woundcarenurses.org](mailto:info@woundcarenurses.org).

*Ali Pitafi MD*

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President