

State Board of Nursing

Nevada Revised Statutes (NRS) Chapter 632

Board members (NRS 632.020 and 632.030)—The Board consists of seven members, appointed by the Governor, as follows:

- Three registered nurses, educated, licensed, and employed, pursuant to statute;
- One practical nurse, educated, licensed, and employed, pursuant to statute;
- One nursing assistant, certified pursuant to NRS 632;
- One member representing the interests of persons or agencies that provide health care to patients who are indigent, uninsured, or unable to afford health care; and
- One representative of the public who is not a licensed or registered nurse or related to a licensed or registered nurse, pursuant to statute.

Powers and duties of the Board—The Board:

- Shall issue licenses and certificates, as applicable;
- Shall determine qualifications, including examinations;
- May discipline licensees and may delegate to a hearing officer or panel its authority to take disciplinary actions;
- Shall make and keep records of all proceedings; and
- Shall adopt regulations establishing the standards for professional conduct.

Operations of the Board—The Board may:

- Employ an Executive Director, attorneys, investigators, and other professional consultants and support staff as necessary to discharge its duties;
- Maintain offices in as many locations as it deems necessary; and
- Appoint advisory committees as it deems necessary.

Background

Legislation:

- 1923—Assembly Bill 82 (Chapter 155, *Statutes of Nevada*)—Created the State Board of Nurse Examiners, consisting of three nurses who have graduated from an accredited school of nursing; established the requirement that a person must graduate from an accredited school of training for nurses to be eligible for examination; and an accredited school must be operated in connection with a hospital providing a course of study of at least 28 months;
- 1933—A.B. 98 (Chapter 169, *Statutes of Nevada*)—Required an applicant to be at least 21 years of age; and the course of instruction must be at least 36 months;
- 1947—Senate Bill 59 (Chapter 256, *Statutes of Nevada*)—Increased the Board to five members; required the executive secretary of the Board to be a registered nurse; and established the State Board of Nurse Examiners Fund in the State Treasury;
- 1963—S.B. 18 (Chapter 325, *Statutes of Nevada*)—Revised the name to State Board of Nursing; defined and licensed the licensed practical nurse; increased the Board to five registered nurses and two practical nurses; and provided for a two-year course of nursing education;
- 1973—A.B. 116 (Chapter 387, *Statutes of Nevada*)—Established a range of fees; increased the Board by adding a consumer member; and defined certified registered nurse anesthetist;
- 1987—S.B. 458 (Chapter 652, *Statutes of Nevada*)—Authorized the certification of advanced practice registered nurse;
- 1989—S.B. 85 (Chapter 840, *Statutes of Nevada*)—Required the certification of nursing assistants;
- 1995—A.B. 545 (Chapter 501, *Statutes of Nevada*)—Revised Board membership by reducing the number of practical nurses from two to one and adding one nursing assistant; and authorized the Board to issue citations for unauthorized practice of nursing;
- 2003—S.B. 310 (Chapter 213, *Statutes of Nevada*)—Revised Board membership by reducing the number of registered nurses from four to three and adding a person to represent the interests of persons or agencies that provide health care to indigent, uninsured, or low-income patients; and
- 2011—S.B. 411 (Chapter 255, *Statutes of Nevada*)—Provided for the certification of medication aides.

Legislative history—The following legislative histories have been compiled and are available on the website of the Research Library:

- 1987—[S.B. 458](#)—Sponsored by the Senate Committee on Commerce and Labor;
- 1989—S.B. 85 [Part 1](#), [Part 2](#)—Sponsored by the Senate Committee on Human Resources and Facilities; and
- 1995—[A.B. 545](#)—Sponsored by the Assembly Committee on Commerce, requested by Nevada Rural Hospital Project.

Reports to the Legislature—No reports to the Legislature are required pursuant to NRS 632.

- NRS 622.100 requires a report to the Director of the Legislative Counsel Bureau (LCB) including information relating to licensing and disciplinary actions. The State Board of Nursing has nine license types. (Senate Bill 69 [Chapter 518, *Statutes of Nevada 2017*] revised the reporting provisions.)

Records held by the LCB:

- *Nevada State Board of Nursing News* (periodical)—2005 through current (missing 2013);
- Nevada State Board of Nursing *Annual Report* (series)—1997–1998 and 2009–2010; and
- *Information on the Board of Nursing for Nursing Students, Nurses, and the Public*, State Board of Nursing, 2000.

Current contact—Cathy Dinauer, Executive Director

Website—<http://nevadanursingboard.org/>

W180935

STATE BOARD OF NURSING

NRS 632.020 Creation; number of members. The State Board of Nursing, consisting of seven members appointed by the Governor, is hereby created.

[Part 3:256:1947; 1943 NCL § 4756.03]—(NRS A [1963, 609](#); [1973, 523](#); [1977, 1251](#))

NRS 632.030 Members: Qualifications; appointment; terms; vacancies.

1. The Governor shall appoint:

(a) Three registered nurses who are graduates of an accredited school of nursing, are licensed as professional nurses in the State of Nevada and have been actively engaged in nursing for at least 5 years preceding the appointment.

(b) One practical nurse who is a graduate of an accredited school of practical nursing, is licensed as a practical nurse in this State and has been actively engaged in nursing for at least 5 years preceding the appointment.

(c) One nursing assistant who is certified pursuant to the provisions of this chapter.

(d) One member who represents the interests of persons or agencies that regularly provide health care to patients who are indigent, uninsured or unable to afford health care. This member may be licensed under the provisions of this chapter.

(e) One member who is a representative of the general public. This member must not be:

(1) A licensed practical nurse, a registered nurse, a nursing assistant or an advanced practice registered nurse; or

(2) The spouse or the parent or child, by blood, marriage or adoption, of a licensed practical nurse, a registered nurse, a nursing assistant or an advanced practice registered nurse.

2. Each member of the Board must be:

(a) A citizen of the United States; and

(b) A resident of the State of Nevada who has resided in this State for not less than 2 years.

3. A representative of the general public may not:

(a) Have a fiduciary obligation to a hospital or other health agency;

(b) Have a material financial interest in the rendering of health services; or

(c) Be employed in the administration of health activities or the performance of health services.

4. The members appointed to the Board pursuant to paragraphs (a) and (b) of subsection 1 must be selected to provide the broadest representation of the various activities, responsibilities and types of service within the practice of nursing and related areas, which may include, without limitation, experience:

(a) In administration.

(b) In education.

(c) As an advanced practice registered nurse.

(d) In an agency or clinic whose primary purpose is to provide medical assistance to persons of low and moderate incomes.

(e) In a licensed medical facility.

5. Each member of the Board shall serve a term of 4 years. If a vacancy occurs during a member's term, the Governor shall appoint a person qualified under this chapter to replace that member for the remainder of the unexpired term.

6. No member of the Board may serve more than two consecutive terms. For the purposes of this subsection, service of 2 or more years in filling an unexpired term constitutes a term.

[Part 3:256:1947; 1943 NCL § 4756.03]—(NRS A [1963, 609](#); [1973, 523](#); [1977, 1251](#); [1983, 256](#); [1995, 1649](#); [2003, 1191](#); [2007, 1828](#); [2013, 2071](#))

NRS CROSS REFERENCES.

Residency requirements, qualifications of representative of general public, [NRS 232A.020](#), [622.205](#)

NRS 632.040 Time for filling vacancies. All appointments to the Board must be made by the Governor within 60 days from the time a vacancy occurs.

[Part 3:256:1947; 1943 NCL § 4756.03]—(NRS A [1963, 610](#); [1977, 1252](#); [1981, 525](#))

NRS CROSS REFERENCES.

Vacancies, [NRS 232A.020](#)

NRS 632.050 Removal of member. The prevailing laws of the State of Nevada controlling the removal from office of public officials shall be applicable to the removal of any member of the Board during his or her term of office.

[4:256:1947; 1943 NCL § 4756.04]

NRS 632.060 Officers; Executive Director.

1. Each year at a meeting of the Board, to be held in accordance with [NRS 632.070](#), the Board shall elect from its members a President, a Vice President and a Secretary.

2. The Board may appoint an Executive Director who need not be a member of the Board. The Executive Director appointed by the Board must be a professional nurse licensed to practice nursing in the State of Nevada. The Executive Director shall perform such duties as the Board may direct and is entitled to receive compensation as set by the Board. The Executive Director is entitled to receive a per diem allowance and travel expenses at a rate fixed by the Board, while engaged in the business of the Board. The rate must not exceed the rate provided for state officers and employees generally.

[Part 5:256:1947; A 1955, 608]—(NRS A [1963, 150, 610](#); [1971, 224](#); [1983, 256](#); [1989, 1697](#); [1991, 318](#))

NRS 632.065 Offices and employees of Board. The Board may:

1. Maintain offices in as many localities in the State as it finds necessary to carry out the provisions of this chapter.

2. Employ attorneys, investigators and other professional consultants and clerical personnel necessary to the discharge of its duties.

(Added to NRS by [1963, 150](#))

NRS CROSS REFERENCES.

Contracts for services to be in writing and approved, [NRS 284.013](#)

Employment of immediate relatives, conditions and limitations, [NRS 622.210-622.230](#)

NRS 632.068 Limitations on liability of members, employees and agents of Board. A member of the Board or an employee or agent of the Board is not liable in a civil action for any act performed in good faith and within the scope of the duties of the Board pursuant to the provisions of this chapter.

(Added to NRS by [1999, 1324](#))

NRS 632.070 Meetings; examinations; quorum.

1. The Board shall meet at least three times a year at approximately 4-month intervals for the purpose of transacting such business as may properly come before the Board.

2. The Board shall hold not less than one examination each year at such times and places as the Board may determine.

3. Special meetings of the Board may be held on the call of the President or upon the call of any three members. A written notice of the time, place and object of any special meeting must be mailed by the Executive Director to all members of the Board who are not parties to the call at least 15 days prior to the day of such meeting.

4. A majority of the Board constitutes a quorum at any meeting.

[Part 5:256:1947; A 1955, 608]—(NRS A [1963, 611](#); [1973, 524](#); [1983, 257](#))

NRS CROSS REFERENCES.

Meetings of public agencies, [NRS ch. 241](#), 622.320

NRS 632.072 Advisory Committee on Nursing Assistants and Medication Aides: Creation; appointment; duties.

1. The Advisory Committee on Nursing Assistants and Medication Aides, consisting of 11 members appointed by the Board, is hereby created.

2. The Board shall appoint to the Advisory Committee:

(a) One representative of facilities for long-term care;

(b) One representative of medical facilities which provide acute care;

(c) One representative of agencies to provide nursing in the home;

(d) One representative of the Division of Public and Behavioral Health of the Department of Health and Human Services;

(e) One representative of the Division of Health Care Financing and Policy of the Department of Health and Human Services;

(f) One representative of the Aging and Disability Services Division of the Department of Health and Human Services;

(g) One representative of the American Association of Retired Persons or a similar organization;

(h) A nursing assistant;

(i) A registered nurse;

(j) A licensed practical nurse; and

(k) A medication aide - certified.

3. The Advisory Committee shall advise the Board with regard to matters relating to nursing assistants and medication aides - certified.

(Added to NRS by [1989, 2008](#); A [1999, 2239](#); [2011, 1326](#))

NRS 632.073 Authority to appoint advisory committees; reimbursement of members for actual expenses.

1. In addition to the Advisory Committee on Nursing Assistants and Medication Aides created by [NRS 632.072](#), the Board may appoint such other advisory committees as it deems appropriate.

2. The members of any advisory committee appointed pursuant to subsection 1 are not entitled to be paid a salary or to receive per diem allowances for conducting the business of the advisory committee, but the Board may authorize reimbursement for the actual expenses incurred by a member for traveling to and from a meeting of the advisory committee.

(Added to NRS by [1995, 1649](#); A [2011, 1326](#))

ADMINISTRATIVE REGULATIONS.

Advisory committee, [NAC 632.210](#), [632.211](#)

NRS 632.080 Compensation of members; per diem allowances and travel expenses of members and employees; payment from money of Board.

1. The compensation of the members of the Board must be fixed by the Board, but may not exceed \$150 for

each day spent by each member in the discharge of his or her official duties.

2. While engaged in the discharge of his or her official duties, each member and employee of the Board is entitled to receive a per diem allowance and travel expenses at a rate fixed by the Board. The rate must not exceed the rate provided for state officers and employees generally.

3. All compensation, per diem allowances and travel expenses of the members and employees of the Board must be paid out of the money of the Board.

[Part 5:256:1947; A 1955, 608]—(NRS A [1963, 151](#), [611](#); [1971, 224](#); [1975, 303](#); [1979, 719](#); [1981, 1992](#); [1985, 444](#); [1989, 1698](#); [1999, 1325](#); [2007, 2946](#))

ATTORNEY GENERAL'S OPINIONS.

Reimbursement of members of board for expenses. Language of sec. 5, ch. 256, Stats. 1947 (cf. [NRS 632.080](#)), expresses the intention to compensate fully the members of the state board of nurse examiners (now state board of nursing) for their services and fixes compensation in a definite amount. Loss of salary of nursing position is not a necessary expense as contemplated by the section. [AGO 478 \(6-21-1947\)](#)

NRS 632.085 Fiscal year. The Board shall operate on the basis of a fiscal year commencing on July 1 and terminating on June 30.

(Added to NRS by [1963, 150](#))

NRS 632.090 Deposit and use of money; delegation of authority concerning disciplinary action; deposit of fines; claim for attorney's fees or costs of investigation.

1. Except as otherwise provided in subsection 3, all money received by the Board under the provisions of this chapter must be paid to the Executive Director of the Board, who shall deposit the money in banks, credit unions or savings and loan associations in the State of Nevada. The money may be drawn on by the Board for payment of all expenses incurred in the administration of the provisions of this chapter.

2. The Board may delegate to a hearing officer or panel its authority to take any disciplinary action pursuant to this chapter, impose and collect fines and penalties therefor and deposit the money therefrom in banks, credit unions or savings and loan associations in this State.

3. If a hearing officer or panel is not authorized to take disciplinary action pursuant to subsection 2 and the Board deposits the money collected from the imposition of fines with the State Treasurer for credit to the State General Fund, it may present a claim to the State Board of Examiners for recommendation to the Interim Finance Committee if money is needed to pay attorney's fees or the costs of an investigation, or both.

[14:256:1947; 1943 NCL § 4756.14]—(NRS A [1963, 151](#), [611](#); [1969, 66](#); [1983, 257](#); [1993, 885](#); [1999, 1532](#))

ATTORNEY GENERAL'S OPINIONS.

Reimbursement provision applies prospectively to deposits made on or after effective date. [NRS 632.090\(3\)](#) became effective on October 1, 1993. Money collected from the imposition of fines and deposited by the state board of nursing with the state treasurer for credit to the state general fund pursuant to [NRS 632.090\(3\)](#) is available for reimbursement pursuant to that subsection if deposited on or after October 1, 1993. [AGO 2000-20 \(6-8-2000\)](#)

Reimbursement of claims: Claim to be based on costs associated with single case; maximum amount payable; reversion of fine money to state general fund. With respect to claims for reimbursement filed pursuant to [NRS 632.090\(3\)](#): (1) a separate claim must be filed for each case in which a fine is imposed; (2) the amount reimbursed is limited, for each case, to the lesser of: (a) the amount spent by the state board of nursing to pay attorney's fees or the costs of the investigation; or (b) the amount of the fines imposed in the case; and (3) fine money that is not necessary to pay the appropriate costs associated with the case in which the fines were imposed reverts to the state general fund and is not available for the payment of other claims. [AGO 2000-20 \(6-8-2000\)](#)

NRS 632.100 Records and publications of Board.

1. The Board shall make and keep a complete record of all its proceedings, including, without limitation:

(a) A file of all applications for licenses and certificates under this chapter, together with the action of the Board

upon each application;

- (b) A register of all nurses licensed and all nursing assistants certified in this State; and
- (c) Documentation of any disciplinary action taken by the Board against a licensee or holder of a certificate.

2. The Board shall maintain in its main office a public docket or other record in which it shall record, from time to time as made, the rulings or decisions upon all complaints filed with it, and all investigations instituted by it in the first instance, upon or in connection with which any hearing has been had, or in which the licensee or holder of a certificate charged has made no defense.

3. At least semiannually, the Board shall publish a list of the names of all applicants whose applications were denied within the immediately preceding year and all licensees and holders of certificates who were the subject of disciplinary action within the immediately preceding year, together with such other information relative to the enforcement of the provisions of this chapter as it may deem of interest to the public.

[Part 5:256:1947; A 1955, 608] + [Part 7:154:1949; A 1955, 547] + [Part 16:256:1947; A 1955, 608]—(NRS A [1963, 612](#); [1973, 524](#); [1979, 958](#); [1989, 2014](#); [1999, 1325](#))

ATTORNEY GENERAL'S OPINIONS.

Portions of file of licensee of state board of nursing are confidential; other portions are public. Portions of the file of a licensee maintained by the state board of nursing (see [NRS 632.100](#)) are public and open to inspection pursuant to [NRS 239.010](#), while other portions are confidential. In making this determination, the board must balance public and private interests. [AGO 90-15 \(10-15-1990\)](#), cited, [OMLO 2001-49 \(10-23-2001\)](#), [OMLO 2002-29 \(6-24-2002\)](#), [AGO 2002-32 \(8-27-2002\)](#), [AGO 2003-01 \(4-17-2003\)](#)

NRS 632.120 Duties; regulations; additional fees.

1. The Board shall:

(a) Adopt regulations establishing reasonable standards:

(1) For the denial, renewal, suspension and revocation of, and the placement of conditions, limitations and restrictions upon, a license to practice professional or practical nursing or a certificate to practice as a nursing assistant or medication aide - certified.

(2) Of professional conduct for the practice of nursing.

(3) For prescribing and dispensing controlled substances and dangerous drugs in accordance with applicable statutes.

(4) For the psychiatric training and experience necessary for an advanced practice registered nurse to be authorized to make the certifications described in [NRS 433A.170](#), [433A.195](#) and [433A.200](#).

(b) Prepare and administer examinations for the issuance of a license or certificate under this chapter.

(c) Investigate and determine the eligibility of an applicant for a license or certificate under this chapter.

(d) Carry out and enforce the provisions of this chapter and the regulations adopted pursuant thereto.

2. The Board may adopt regulations establishing reasonable:

(a) Qualifications for the issuance of a license or certificate under this chapter.

(b) Standards for the continuing professional competence of licensees or holders of a certificate. The Board may evaluate licensees or holders of a certificate periodically for compliance with those standards.

3. The Board may adopt regulations establishing a schedule of reasonable fees and charges, in addition to those set forth in [NRS 632.345](#), for:

(a) Investigating licensees or holders of a certificate and applicants for a license or certificate under this chapter;

(b) Evaluating the professional competence of licensees or holders of a certificate;

(c) Conducting hearings pursuant to this chapter;

(d) Duplicating and verifying records of the Board; and

(e) Surveying, evaluating and approving schools of practical nursing, and schools and courses of professional nursing,

➤ and collect the fees established pursuant to this subsection.

4. For the purposes of this chapter, the Board shall, by regulation, define the term “in the process of obtaining accreditation.”

5. The Board may adopt such other regulations, not inconsistent with state or federal law, as may be necessary to carry out the provisions of this chapter relating to nursing assistant trainees, nursing assistants and medication aides - certified.

6. The Board may adopt such other regulations, not inconsistent with state or federal law, as are necessary to enable it to administer the provisions of this chapter.

[Part 5:256:1947; A 1955, 608]—(NRS A [1985, 311](#); [1989, 2008, 2050](#); [1993, 1218](#); [1999, 1326](#); [2003, 336](#); [2011, 1327](#); [2015, 2994](#))

ADMINISTRATIVE REGULATIONS.

“In the process of obtaining accreditation” interpreted, [NAC 632.105](#)

NRS 632.121 Board required to notify Division of Public and Behavioral Health of Department of Health and Human Services upon identification of certain sentinel events; confidentiality of information.

1. The Board shall immediately notify the Division of Public and Behavioral Health of the Department of Health and Human Services if the Board identifies a sentinel event which is required to be reported by a medical facility pursuant to [NRS 439.835](#).

2. Except as otherwise provided in [NRS 239.0115](#), any information provided to the Division of Public and Behavioral Health pursuant to this section relating to the identification of a sentinel event is confidential, not subject to subpoena or discovery and not subject to inspection by the general public.

(Added to NRS by [2009, 3071](#))

NRS 632.122 Acceptance of gifts, grants and payments; contracts. The Board may:

1. Accept gifts or grants of money to pay for the costs of administering the provisions of this chapter.
2. Enter into contracts with other public agencies and accept payment from those agencies to pay the expenses incurred by the Board in carrying out the provisions of this chapter relating to nursing assistant trainees, nursing assistants and medication aides - certified.

(Added to NRS by [1989, 2008](#); A [2011, 1327](#))

NRS 632.125 Hospitals and agencies employing nurses, nursing assistants or medication aides - certified to submit list of such personnel to Board; confidentiality of list; medical facilities to confirm qualifications with Board before employment of nursing assistant, nursing assistant trainee or medication aide - certified.

1. Each hospital or agency in the State employing professional or practical nurses, nursing assistants or medication aides - certified shall submit a list of such nursing personnel to the Board at least three times annually as directed by the Board. Except as otherwise provided in [NRS 239.0115](#), each list submitted to the Board pursuant to this subsection is confidential.

2. A medical facility shall, before hiring a nursing assistant, nursing assistant trainee or medication aide - certified, obtain validation from the Board that the prospective employee has a current certificate, is enrolled in a training program required for certification or is awaiting the results of a certification examination.

(Added to NRS by [1963, 610](#); A [1989, 2013, 2014](#); [2001, 623](#); [2007, 2135](#); [2011, 1328](#))

NRS 632.126 Inspection of premises by Board. Any member or agent of the Board may enter any premises in this State where a person who holds a license or certificate issued pursuant to the provisions of this chapter practices nursing or as a nursing assistant or medication aide - certified and inspect it to determine whether a violation of any provision of this chapter has occurred, including, without limitation, an inspection to determine whether any person at the premises is practicing nursing or as a nursing assistant or medication aide - certified

without the appropriate license or certificate issued pursuant to the provisions of this chapter.

(Added to NRS by [2013, 2221](#))

NRS 632.127 List of approved training programs; Board to share information with state agency concerning disciplinary action against nursing assistants or medication aides - certified employed in agency's facilities.

1. The Board shall supply the Division of Public and Behavioral Health of the Department of Health and Human Services upon request with a list of each training program approved by the Board.

2. The Board shall share with each state agency which regulates medical facilities and facilities for the dependent any information the Board receives concerning disciplinary action taken against nursing assistants or medication aides - certified who work in the facilities.

(Added to NRS by [1989, 2013](#); A [2011, 1328](#))—(Substituted in revision for NRS 632.286)

Follow these instructions when filling out the form:

1. Download the form to your personal computer.
2. Complete the downloaded form using Adobe Reader.
3. Save the completed form to your personal computer.
4. Then send the saved form and any additional documents in PDF format to cstonefield@lcb.state.nv.us

Submit by Email

**Information Concerning Board or Commission
Subject to Review by the
Sunset Subcommittee of the Legislative Commission**

as required by *Nevada Revised Statutes 232B.230*



Board or commission name:

Nevada State Board of Nursing

**Members' names with
expiration date of term, and
indicate the number of
vacancies:**

Deena McKenzie - October 2020, Susan VanBuege - October 2020, Jacob Watts - October 2019
Mary-Ann Brown - October 2020, Ovidia McGuinness - October 2021, Rhigel "Jay" Tan - October 2019
Richelle O'Driscoll - November 2021
The Board has no vacancies.

Physical address:

5011 Meadowood Mall Way, Ste 300, Reno, 4220 S. Maryland Pkwy, Bldg. B, Ste. 3

Mailing address:

All the Board mail is delivered to the Reno office at:
5011 Meadowood Mall Way, Ste 300, Reno, NV 89502

Web site address (if any):

<http://nevadanursingboard.org/>

Web site developer (if not EITS,
please indicate if EITS approved
the web site):

Rhoda Hernandez, in-house IT, via Wordpress

**Executive director's name and
contact information:**

Cathy Dinauer, MSN, RN
5011 Meadowood Mall Way, Suite 300, Reno, NV 89502
775-687-7734
cdinauer@nsbn.state.nv.us

**Staff members' names including
titles and status as full-time or
part-time** (attach additional pages
as necessary):

Cathy Dinauer, MSN, RN - Executive Director - FT
Fred Olmstead, Esq. - General Counsel - FT
Kimberly Arguello, Esq. - General Counsel - FT

Days and hours of operation:

M-F 8am-5pm both offices

Created by what authority:

Nevada State Legislature, 1923
NRS and NAC Chapter 632

**Authority to adopt regulations
(NRS) and citation to
regulations (NAC), if applicable:**

NRS 632.120

**Information Concerning Board or Commission
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Sunset Subcommittee of the Legislative Commission**

List by LCB File No. and date of adoption the five regulations most recently adopted by the board or commission, with any applicable deadline for the adoption of any such regulation:

LCB File No.125-17 date adopted: February 27, 2018
LCB File No.126-17 date adopted: February 27, 2018
LCB File No.090-15 date adopted: April 5, 2016
LCB File No.091-15 date adopted: April 5, 2016
LCB File No.105-15 date adopted: April 5, 2016

List any required regulations that have not been adopted, with any applicable deadline for the adoption of any such regulation. Please identify each such regulation by LCB File No., if available, or by reference to the provision of NRS or Statutes of Nevada requiring adoption of the regulation:

N/A

Governing structure of the board or commission pursuant to statute:

Seven-member board appointed by the Governor consisting of four Licensed Professional Nurses who are graduates of an accredited school of nursing, are licensed as professional nurses in the State of Nevada and have been actively engaged in nursing for at least five years preceding the appointment; one Licensed Practical Nurse who is a graduate of an

Duties of the board or commission:

NRS 632.005 provides the practice of nursing is a learned profession affecting the safety, health and welfare of the public and is subject to regulation to protect the public from the practice of nursing by unqualified and unlicensed persons and from unprofessional conduct by persons licensed to practice nursing. The Legislature further declares that the purpose of the State Board of Nursing is to regulate the practice of nursing and to enforce the provisions of this chapter.

Statement of the objectives and programs of the board or commission:

The Board's mission is to protect the public's health, safety and welfare through effective nursing regulation.

See Attachment 6 "Goals and Objectives FY16.17"

**Information Concerning Board or Commission
Subject to Review by the
Sunset Subcommittee of the Legislative Commission**

**Itemized list of services offered
by the board or commission:**

The Nevada State Board of Nursing:
Issues licenses to qualified individuals;
Approves qualified schools for the education of nurses and nursing assistants;
Insures the competency of the licensees by requiring continuing education;
Insures the moral character of the licensees by requiring fingerprints;
Investigates nurses and schools to ensure compliance with laws and regulations.

For a comprehensive list of duties please see attachment A "NSBN Duties"

**Dates of the immediately
preceding six meetings and
the online location where the
minutes can be found:**

The Board meets every other month. The Board meets in Las Vegas in January, May and September. The Board meets in Reno in March and November. The Board meets in the Rural counties in July. The Board minutes may be found on the website:

**Statutory tax exemptions,
abatements, or money set aside
for the board or commission:**

NRS 372.325 - Sales tax Exempt

**Description of the manner in
which the board or commission
is funded, including all funding
sources:**

The Nevada State Board of Nursing is funded through the licensure fees of nurses and nursing assistants.

**Please identify any forms
required by the board or
commission to be used by
members of the public which
are not available for
downloading from the web site
of the board or commission:**

All forms are available on the website:
<http://nevadanursingboard.org/forms2/>

**Information Concerning Board or Commission
Subject to Review by the
Sunset Subcommittee of the Legislative Commission**

Does the board or commission have any recommendations for consolidation with another board or commission? If so, which one(s) could be revised to include the charge to the board or commission that is the subject of this review?

The Board has no recommendations for consolidation with another board or commission.

Does the board or commission believe that its objectives and programs have been effective in accomplishing the purposes for which the board or commission was created? Please explain the response with any information the board or commission believes is relevant:

Each year the Board has a strategic planning meeting in which goals and objectives are discussed. This includes accomplishments of the existing year and goals for the upcoming year. This provides an opportunity for the Board to evaluate its effectiveness and to provide recommendations for change.

See Attachment 6 "Goals and Objectives FY16.17"

Any recommendations for statutory changes which are necessary for the board or commission to carry out its objectives and programs:

The Board has directed staff to present legislation in 2019 regarding the enhanced nurse licensure compact (eNLC). The eNLC is a nurse compact that allows nurses with a multistate license to practice physically, telephonically, or electronically in their home state and other compact states. The objective is to reduce barriers to cross-border nursing practice for registered nurses and licensed practical nurses.

See Attachment B "Enhanced Nurse Licensure Compact"

If additional space is necessary, please attach additional pages and refer to the attachments on the form.

Please include with this form:

1. The operating budget of the board or commission.
2. A statement setting forth the income and expenses of the board or commission for at least 3 years immediately preceding the date on which the board or commission submits this form, including the balances of any fund or account maintained by or on behalf of the board or commission.
3. The most recent legislative audit or other audit of the board or commission, and any efficiency studies or constituent or staff surveys conducted in the past 3 years.
4. Any reports required to be filed with the Legislative or Executive Branch over the past 3 years. Please indicate if any reports were filed late or have not been filed.
5. A copy of the organizational chart showing the governing structure of the board or commission and its staff.
6. A copy of the most recent strategic plan of the board or commission.

For occupational and professional licensing boards and commissions, please provide the following additional information:

1. Statement of the fee charged for each license, certificate, registration, permit, or other similar authorization issued by the board or commission.
2. Statement of how frequently each license, certificate, registration, permit, or other similar authorization issued by the board or commission must be renewed and the fee charged for such renewal.
3. For each license, certificate, registration, permit, or other similar authorization issued by the board or commission, list the fee charged for an equivalent license, certificate, registration, permit, or other similar authorization in each of the following states: Arizona, California, Idaho, Oregon, and Utah.
4. For each license, certificate, registration, permit, or other similar authorization issued by the board or commission, provide a statement of how frequently an equivalent license, certificate, registration, permit, or other similar authorization must be renewed and the fee charged for such renewal in the following states: Arizona, California, Idaho, Oregon, and Utah.

State Board of Nursing (Attachment to the Review Form)

Page 1—Physical address:

5011 Meadowood Mall Way, Ste 300, Reno
4220 S. Maryland Pkwy, Bldg. B, Ste. 300, Las Vegas

Page 1—Staff members' names including titles and status as full-time or part-time:

Cathy Dinauer, MSN, RN - Executive Director - FT
Fred Olmstead, Esq. - General Counsel - FT
Kimberly Arguello, Esq. - General Counsel - FT
Sam McCord, BSN, RN - Director of Nursing Practice - FT
Catherine Prato-Lefkowitz, PhD, MSN, RN - Director of Nursing Education - FT
Gail Trujillo, CP - HR & Director of Licensure and Certification - FT
Sharon Vincello, Executive Assistant-FT
Sheryl Giordano, APRN-C - APRN Consultant - PT
C. Ryan Mann, MSN, RN - Application Coordinator - FT
Ray Martinez - Investigator - FT
Cindy Peterson, RN, CLNC, CHCQM - Nurse Investigator - FT
Sherri Twedt, RN, LNC - Compliance Coordinator - FT
Elaine Weimer, BSN, RN - Nurse Investigator - FT
Adriadna Ramos Zavala - Program Assistant - FT
Patty Towler - Licensure/Certification Coordinator - FT
Sandy Webb - Program Assistant - FT
Vickey Alvarez - Senior Accountant - FT
Courteney Baccei - Management Assistant - FT
Jeannette Calderon - Education Support Specialist - FT
Christie Daliposon - Discipline Support Specialist - FT
Rhoda Hernandez - IT Technician - FT
Stacy Hill - Management Assistant - FT
Cydnee Cernas - Customer Service Representative - FT
Ariel Gamble - Customer Service Representative - FT
Cherlyta Rhino - Customer Service Representative - FT
Marsalena Rosborough - Customer Service Representative - FT

Page 2—Governing structure of the board or commission pursuant to statute:

Seven-member board appointed by the Governor consisting of four Licensed Professional Nurses who are graduates of an accredited school of nursing, are licensed as professional nurses in the State of Nevada and have been actively engaged in nursing for at least five years preceding the appointment; one Licensed Practical Nurse who is a

graduate of an accredited school of practical nursing, is licensed as a practical nurse in this State and has been actively engaged in nursing for at least five years preceding the appointment; , one Certified Nursing Assistant who is certified in the State and one consumer member. One of the seven member board must represent the interests of persons or agencies that regularly provide health care to patients who are indigent, uninsured or unable to afford health care.

Page 3—Dates of the immediately preceding six meetings and the online location where the minutes can be found:

The Board meets every other month. The Board meets in Las Vegas in January, May and September. The Board meets in Reno in March and November. The Board meets in the rural counties in July. The Board minutes may be found on the website: <http://nevadanursingboard.org/board-information/board-meeting-minutes/>

Duties of the Board of Nursing

Nurses work in a wide range of diverse settings, including hospitals, schools, long term care facilities, community health and home health. The tasks nurses perform vary significantly based on the scope of practice. Recognizing that the tasks nurses perform may pose a significant risk to the public and patients they serve, the Nevada Legislature enacted the Nevada Nurse Practice Act in 1923 under NRS 632 to regulate the practice of nursing. The general functions of the Board of Nursing are to:

- License and certify registered nurses, licensed practical nurses, certified nurse assistants, advanced practice registered nurses, certified nurse anesthetists, medication aide-certified and EMS registered nurses
- Deny licensure/certification deemed unsafe to practice due to serious convictions or acts.
- Enforce legal prohibitions against the unlicensed practice of registered nursing/licensed practical nursing or nursing assistants and use of title
- Provide for interstate and foreign endorsements
- Investigate and resolve complaints against licensee and certificate holders and impose disciplinary sanctions
- Establish minimum practice and educational standards for licensed and certified nurses
- Approve, survey and evaluate schools of nursing for registered nurses, licensed practical nurses, medication aide-certified and nursing assistant training programs
- Adopt exams for licensing/certification
- Collaborate with interprofessional regulatory agencies to develop a common approach to ensure safe delivery of healthcare.
- Provide leadership in legislative processes related to healthcare and nursing
- Provide finger-printing for criminal background checks
- Develop and adopt regulations for the practice of nursing
- Appoint advisory committees to advise and report to the board on matters related to the protection of the public through the safe practice of nursing by any person licensed or certified by the Board of Nursing; current committees include:
 - Nurse Practice Advisory Committee
 - Advanced Practice Registered Nurse Advisory Committee
 - Education Committee
 - CNA Advisory Committee
 - Disability Advisory Committee
- Provide on-going education to licensees and certificate holders regarding the regulatory process
- Provide on-going education to licensees, certificate holders and other members of the health care community regarding substance use disorder
- Provide on-going education to the community regarding patient safety issues
- Publish the Nursing News Magazine
- Conduct disciplinary proceedings
- Administer alternative to discipline program for nurses and certified nursing assistants recovering from chemical dependency

- Order evaluations of license/certificate holders to determine his/her ability to practice safely; take disciplinary action based on the results of the evaluation
- Promulgate rules that regulate nursing
- Monitor nurses on probation whose nursing practice has resumed to ensure patient safety
- Publish and distribute the Nevada Nurse Practice Act
- Publish an annual report
- Issue Advisory Opinions regarding the function of nursing practice and education
- Provide education to increase public awareness and understanding of the Board's role and purpose
- Collaborate with the National Council of State Boards of Nursing regarding nursing regulation on a state, national and international forum
- Collaborate with state-wide nursing groups to promote regulatory initiatives regarding the practice of nursing
- Participate in evidence based research in the promotion and regulation of nursing
- Participate in research to identify work force initiatives and access to care in Nevada
- Overall enforcement of the provisions of NRS and NAC Chapter 632



Enhanced Nurse Licensure Compact (eNLC)

January 8, 2018

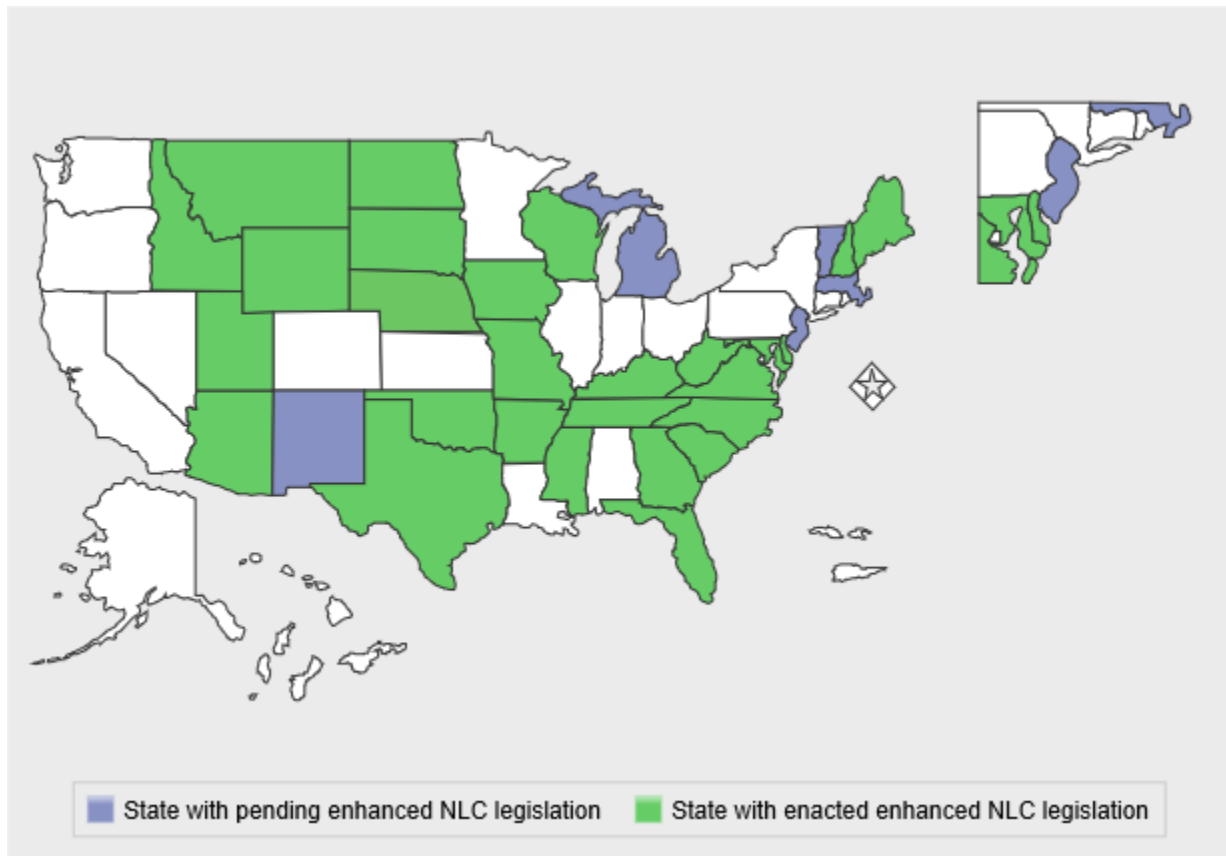
5011 Meadowood Mall Way
Suite 300
Reno, NV 89502

p. 888-590-6726
f. 775-687-7707

Nevada State Board of Nursing
nursingboard@nsbn.state.nv.us

Introduction

The eNLC went into effect July 20, 2017 when 26 states enacted the eNLC legislation. The significance of this date is that it represents when the eNLC officially went into effect and when the eNLC commission can begin to meet, draft rules, policies and set an implementation date which is set for January 19, 2018. The list below represents the states that are part of the eNLC: (*eNLC states include: Arizona, Arkansas, Delaware, Florida, Georgia, Idaho, Iowa, Kentucky, Maine, Maryland, Mississippi, Missouri, Montana, Nebraska, New Hampshire, North Carolina, North Dakota, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Virginia, West Virginia and Wyoming).



History of the Nurse Compact

The nurse compact allows nurses with a multistate license to practice physically, telephonically, or electronically in their home state and other compact states. The purpose of the compact was to reduce barriers to cross-border nursing practice for registered nurses and licensed practical nurses. The compact was intended to move from the traditional single-state license to a state-of residence license allowing the licensee to practice in other participating states. The nurse compact functions similarly to a drivers' license: Both are issued in the primary state of residence; both require adherence to state law; if the law is violated, privileges can be revoked; if your primary residence changes, you must notify your new home state and get a license in that state. Ultimately, both allow the mutual recognition model of licensure.

Benefits of eNLC:

- Ability to practice in multiple states with one license
- Reduces regulatory requirements by removing necessity for obtaining a license in each state
- Clarifies a nurse's authority to practice in multiple states via telehealth
- Ability to share complaint and investigative information throughout the investigative course
- Shared responsibility for patient safety not governed by geographical boundaries
- Cost effective to nurse since only 1 license fee is required to practice in multiple states
- Beneficial to military/veterans who move often
- Allows nurse to quickly cross state borders and provide services in event of disaster

Requirements

- Must meet licensure requirements of home state (state of residence)
- Graduates from board-approved school
- Must pass English Proficiency exam (for graduates of foreign school)
- Pass NCLEX/NCLEX-PN
- Hold an unencumbered license (no active discipline)
- Must complete criminal background check
- No state federal felonies
- No misdemeanor convictions related to practice (case-by-case)
- Cannot be in an alternative to discipline program
- Must have valid US SS #
- Must self-disclose if in an alternative program

Here's how it Works

- Nurse identifies state of residency (home state)
- Nurse meets all 11 uniform requirements
- Nurse must meet all licensure requirements of home state
- Nurse must follow nurse practice laws in all state where nurse works
- Compact states must communicate if nurse violates law
- Nurse is issued a multistate license in the declared primary state of residence known as the home state
- The home state is the only state that issues a license to the nurse

Comparisons between old compact (NLC) and new compact (eNLC)

NLC	eNLC
One license but an ability to practice in compact states	Once license but an ability to practice in compact states
Did not require background checks	Requires background checks
May be able to get license with felony	May not get a multistate license with felony
No uniform requirements	Must comply with uniform requirements

Support in Nevada

Nevada has received support for the eNLC from NONL, NNA, NAC and UNLV ORIVIS.

NEVADA STATE BOARD OF NURSING

FY17/18 GOALS AND OBJECTIVES

JULY 1, 2017 – JUNE 30, 2018

GOAL A: PROMOTE A CULTURE OF SAFETY FOR CONSUMERS OF HEALTHCARE

Objective 1. Collaborate with interprofessional regulatory agencies to develop a common approach in ensuring safe delivery of health care		
Objective 2. Report accreditation and graduation data for all Nevada nursing programs		
Measurable Objective:	Education department will report annual report for all fully approved nursing programs to the Board of Nursing once per year	
Measurable Objective:	Education Department will report six month reports to the Board of Nursing twice per year	
Objective 3. Identify and utilize Just Culture for NSBN		
Measurable Objective:	Quarterly review of the CRA tool and Statistics	
Objective 4. Provide education to the community regarding patient safety issues. (e.g. Antibiotic awareness)		
Measurable Objective:	100% of Nevada Nursing News Magazine issues will have one evidenced based article on patient safety	

GOAL B: PROVIDE LEADERSHIP IN LEGISLATIVE PROCESSES RELATED TO HEALTHCARE AND NURSING

Objective 1. Develop new relationships and strengthen existing relationships with key legislators and legislative groups		

Objective 2. Closely monitor, respond to, and participate in legislative activities that may affect the public, nursing, and the Board		
Objective 3. Remove unnecessary regulatory barriers to practice		
Measurable Objective: Identify and implement efficient strategies to manage policies and procedures		
Objective 4. Develop and utilize resources for education regarding the Enhanced Nurse Licensure Compact (ENLC)		
Measurable Objective: Presentations regarding the Enhanced Nurse Licensure Compact (ENLC) will be provided		
Objective 5. Develop Strategic Plan regarding ENLC to prepare for implementation in 2019 Legislature		

GOAL C: CONDUCT CONSUMER AND NURSE OUTREACH

Objective 1. Develop new relationships and strengthen existing relationships with community groups		
Objective 2. Maintain the Board's social media presence		
Objective 3. Provide education for nursing programs statewide & Provide nursing assistant education programs statewide		
Measurable Objectives: Education department will provide six CNA workshops statewide every year		
Objective 4. Provide education regarding the regulatory process		
Objective 5. Provide education for licensees/certificate holders on Substance Use Disorder/Alternative Program		
Objective 9. Participate in celebrations of nursing achievements (i.e. Pinning ceremonies, graduations, summits, award galas, etc.)		

GOAL D: PROMOTE AND COLLABORATE IN NURSING EDUCATION, PRACTICE AND RESEARCH FOR EVIDENCE BASED REGULATION

Objective 1. Partner with nursing organizations to address IOM recommendations		
Objective 2. Participate in NCSBN Taxonomy of Error, Root Cause Analysis, and Practice (TERCAP)		
Measurable Objective:	Each investigator will report two or more cases per month to the TERCAP project	
Measurable Objective:	Identify and implement at least one recommendation from TERCAP annually pertaining to findings for Nevada.	
Objective 3. Analyze and utilize NCSBN's Commitment to Ongoing Regulatory Excellence Project Outcomes to enhance NSBN operations		
Measurable Objective:	The NSBN will fully participate in the CORE project and will utilize outcomes to enhance regulatory processes	
Objective 5. Gather, Analyze, and Trend outcomes of Board decisions		
Objective 6. Evaluate APRN data related to education, certification, discipline related to controlled substances, role and population		
Measurable Objective:	100% of APRN complaint statistics will be researched to identify trends and patterns	
Measurable Objective:	100% of APRNs with C-II Privileges will be registered with the PMP	

GOAL E: EMPHASIZE TRANSPARENCY OF COMMUNICATION AND INFORMATION

Objective 1. Utilize agency Quality Measurement Plan to improve department operations		
Measurable Objective:	Each NSBN department will have a minimum of one quality measure identified and reported monthly to the Executive Team. A report of quality measure outcomes will be presented at the annual business meeting	
Measurable Objective:	NSBN staff will utilize annual statistics to identify quality measures and outcomes to improve operations	

GOAL F: SUPPORT EFFECTIVE UTILIZATION OF INFORMATION TECHNOLOGY

Objective 1. Explore new technology for utilization by the NSBN		
Measurable Objective: Board staff will be actively involved in creating and implementation of ORBS		
Measurable Objective: Board staff will develop IT plan to ensure stability of all IT functions		
Objective 2. Analyze and report the results of the online renewal application Minimum Data Set survey		
Objective 3. Ensure data security through audit and policy development		

GOAL G: PARTICIPATE IN AND PROMOTE STATE, NATIONAL AND GLOBAL NURSING REGULATORY INITIATIVES

Objective 1. Bring issues to and act upon recommendations of Board Advisory Committees		
Nursing Practice Advisory Committee: Chair—Sam McCord; Board Liaison—Mary-Ann Brown and Deena McKenzie		
Date	Issue/Activity	Person(s)
Education Advisory Committee: Chair—Catherine Prato-Lefkowitz; Board Liaison—Rick Carrauthers		
Date	Issue/Activity:	Person(s)
CNA Advisory Committee: Chair—Catherine Prato-Lefkowitz; Board Liaison—Jacob Watts, CNA		
Date	Issue/Activity	Person(s)
Disability Advisory Committee: Chair—Sherri Twedt; Board Liaison—Sandy Halley		
Date	Issue/Activity	Person(s)
APRN Advisory Committee: Chair—Cathy Dinauer; Board Liaison—Jay Tan and Susan VanBeuge		
Date	Issue/Activity	Person(s)
Objective 2. Utilize staff development resources for improved productivity and innovation		

Measurable Objective:	Staff will be encouraged to participate in one or more educational opportunities during fiscal year 17/18	
Objective 3. Participate in NCSBN activities and utilize resources		
Objective 4. Participate in the Citizens Advocacy Center activities		
Objective 5. Participate in the Council on Licensure, Enforcement, and Regulation activities		
Objective 6. Participate in the Nevada Organization of Nurse Leaders activities		
Objective 8. Participate in the Nevada Nurses Association and all other Nevada Professional Nursing Associations activities		
Objective 9. Participate in Federation of Associations of Regulatory Boards activities		
Objective 10. Participate in the Future of Nursing activities		

CFD: C. DINAUER
SM: S. MCCORD
JT: J. TAN
MAB: M.A. BROWN
JW: J. WATTS
ST: S. TWEDT
ARZ: A. RAMOS-ZAVALA
RM: R. MANN
RH: R. HERNANDEZ

FO: F. OLMSTEAD
CAPL: C. PRATO LEFKOWITZ
RSC: R. CARRAUTERS
DM: D. MCKENZIE
MH: M. HILLERBY
PT: P. TOWLER
SMW: S. WEBB
CP: C. PETERSON

KAA: K. ARGUELLO
GT: G. TRUJILLO
SH: S. HALLEY
SVB: S. VANBEUGE
JC: J. CALDERON
EW: E. WEIMER
RXM: R. MARTINEZ
CD: C. DALIPOSAN

Fees

<u>Initial Applications Fees</u>	<u>Fees</u>
RN by endorsement (includes \$5 fee for national database check)	\$105
RN by examination	\$100
LPN by endorsement (includes \$5 fee for national database check)	\$95
LPN by examination	\$90
CNA by endorsement	\$50
CNA by examination	\$50
APRN	\$200
APRN + RN	\$305
CRNA	\$200
CRNA + RN	\$305
EMS	\$0
<u>Renewal Applications</u>	<u>Fees</u>
RN	\$100
LPN	\$100
CNA	\$50
CRNA	\$200
APRN + RN	\$300
CRNA +RN	\$300
Late fee -- RN/LPN (Nevada has no grace period)	\$100
Refresher Application	\$50

By law, Nevada licenses/certificates expire every second birthday. Your first renewal period may be two years or less, depending on when your birthday falls in relation to the issue date of your license/certificate.

Validation

(you have a Nevada license/certificate and need validation of your license/certificate to show your employer)

\$25

CNA Verification

(you have applied for licensure/certification with another state and need verification of your Nevada CNA certificate sent to that state)

\$25

RN/LPN Verification is done via NURsys www.nursys.com

Fingerprint Processing Fee (Fingerprints submitted to the Board on hard cards)

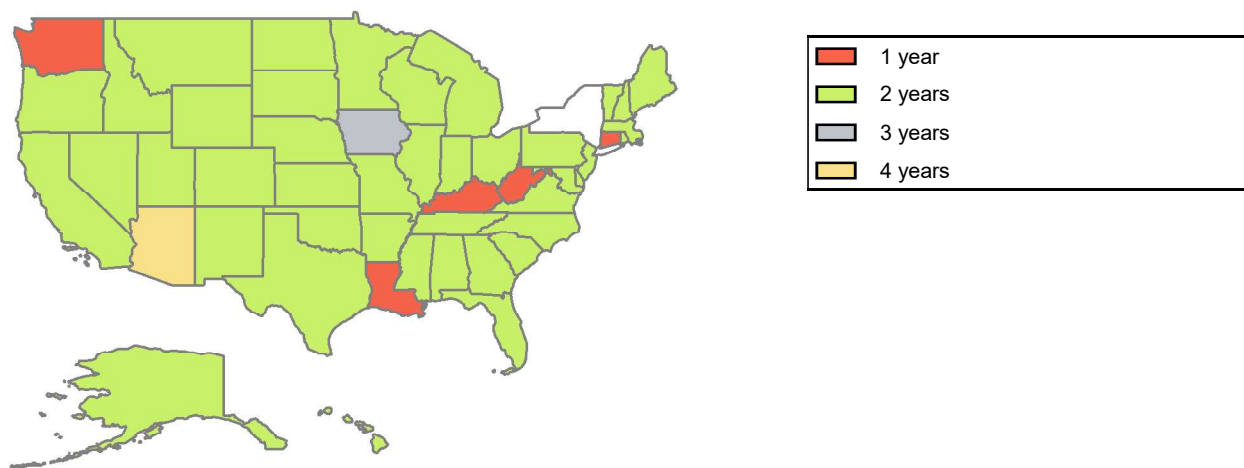
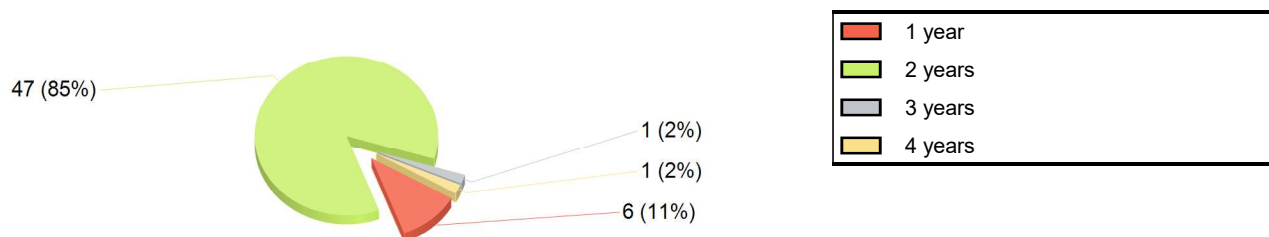
\$40

Fingerprint Processing Fee (Done via electronic submission in a Board office)

\$40

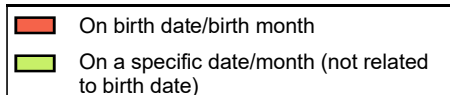
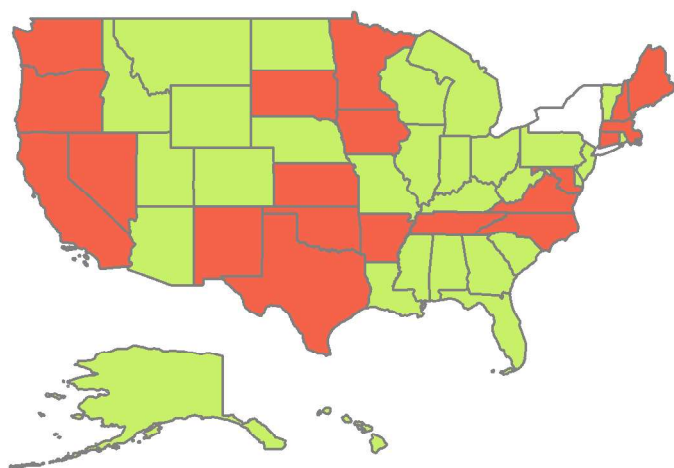
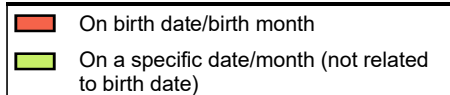
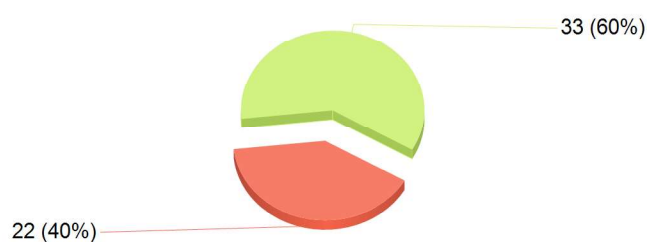
Fingerprint Processing Fee (done via electronic submission by a private vendor within the state of Nevada)

Q59. How long is a nursing license valid?



*PN BONs and US Territories are not displayed on the map. For detailed information, please see the text responses below.

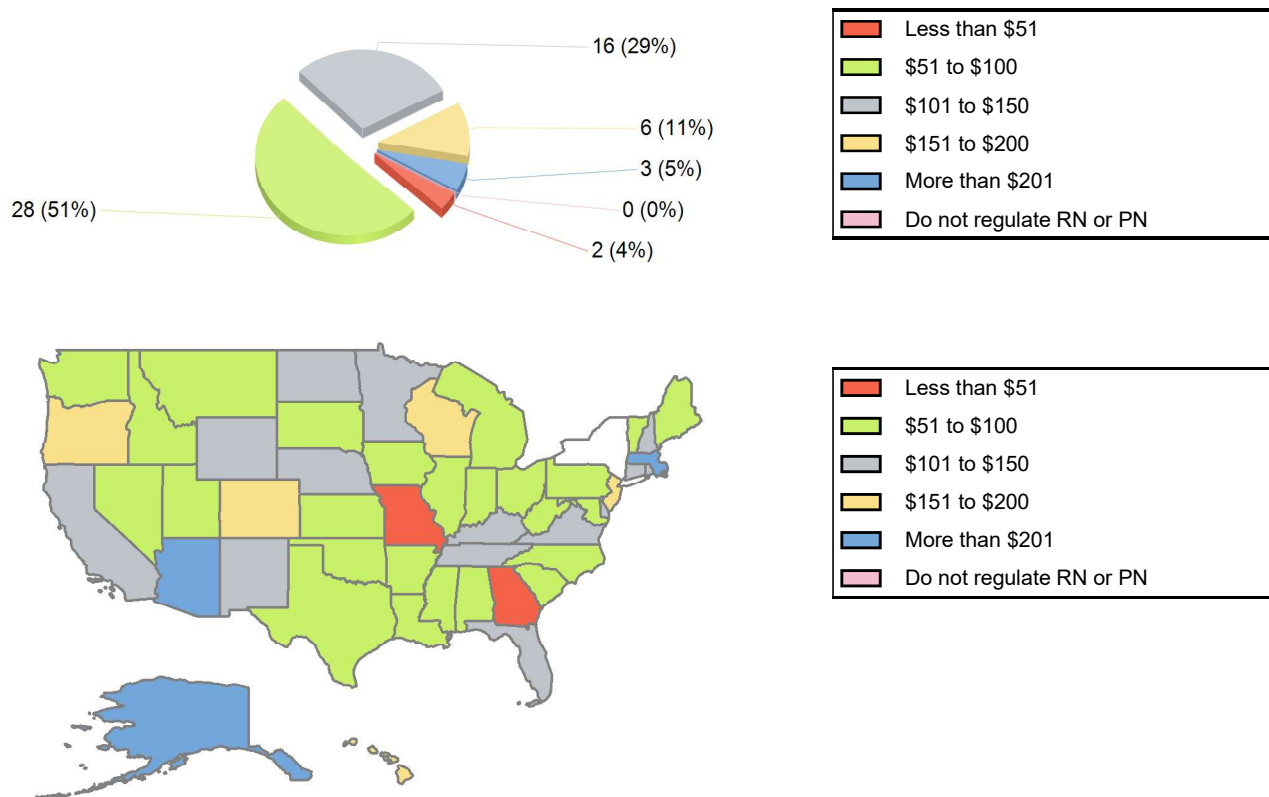
Responses	Jurisdictions	Number of Boards	Percentage of Boards Responding
1 year	CT, KY, LA-RN, WA, WV-PN, WV-RN	6	11%
2 years	AK, AL, AR, CA-RN, CA-VN, CNMI, CO, DC, DE, FL, GA, GU, HI, ID, IL, IN, KS, MA, MD, ME, MI, MN, MO, MS, MT, NC, ND, NE, NH, NJ, NM, NV, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VA, VI, VT, WI, WY	47	85%
3 years	IA	1	2%
4 years	AZ	1	2%

60. When are renewals processed?

*PN BONs and US Territories are not displayed on the map. For detailed information, please see the text responses below.

Responses	Jurisdictions	Number of Boards	Percentage of Boards Responding
On birth date/birth month	AR, CA-RN, CA-VN, CNMI, CT, IA, KS, MA, MD, ME, MN, NC, NH, NM, NV, OK, OR, SD, TN, TX, VA, WA	22	40%
On a specific date/month (not related to birth date)	AK, AL, AZ, CO, DC, DE, FL, GA, GU, HI, ID, IL, IN, KY, LA-RN, MI, MO, MS, MT, ND, NE, NJ, OH, PA, RI, SC, UT, VI, VT, WI, WV-PN, WV-RN, WY	33	60%

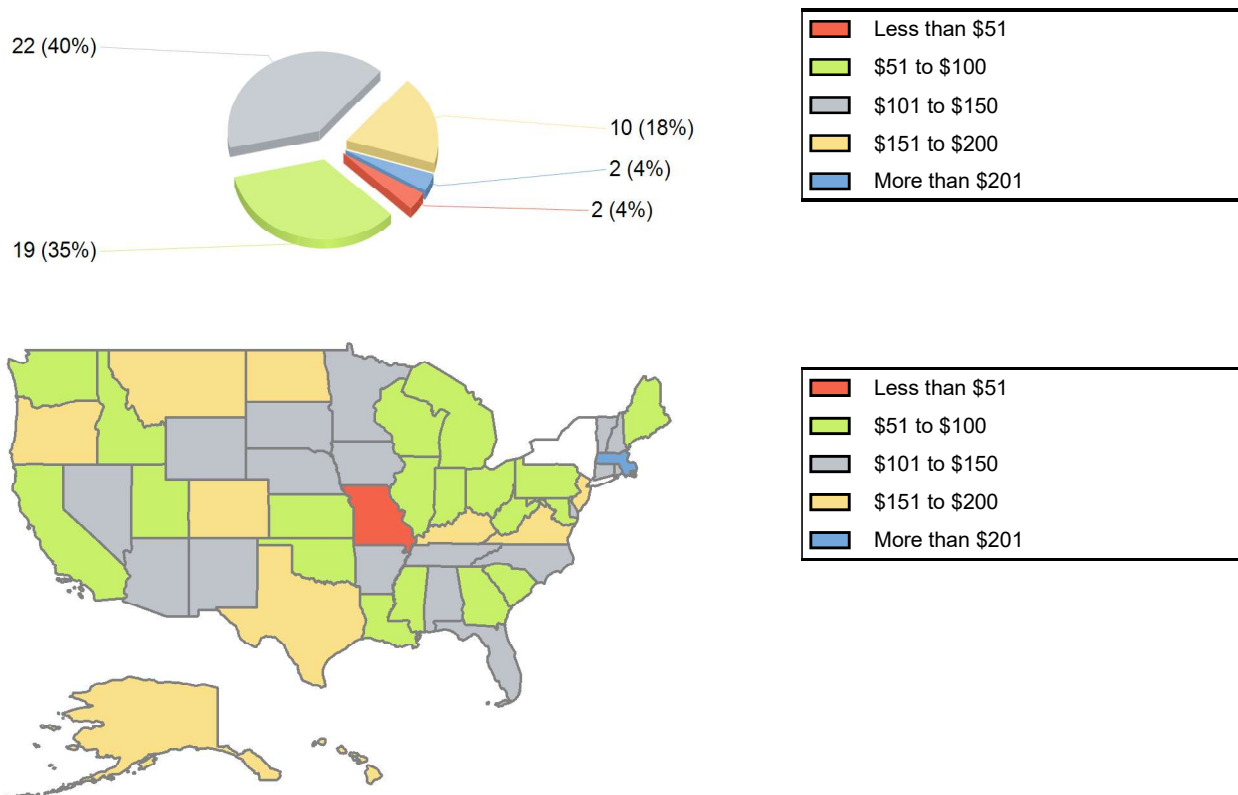
61. Which of the following amounts is closest to the RN/PN initial licensure by examination fee? (including application fee if applicable, but not to include NCLEX or CBC fee)



*PN BONs and US Territories are not displayed on the map. For detailed information, please see the text responses below.

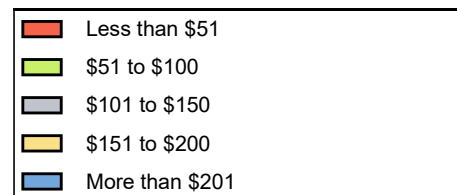
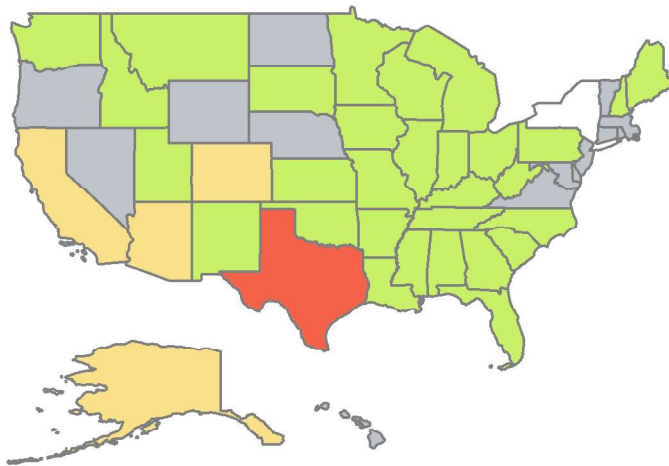
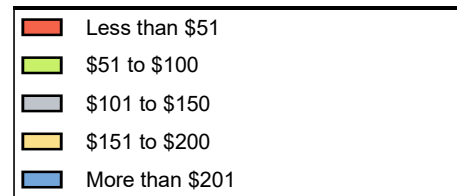
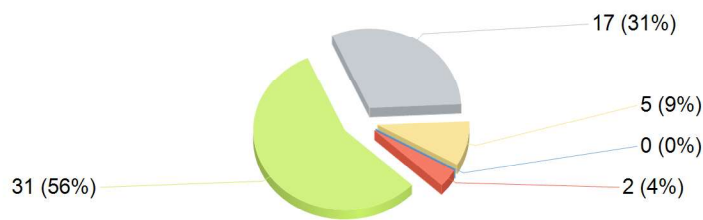
Responses	Jurisdictions	Number of Boards	Percentage of Boards Responding
Less than \$51	GA, MO	2	4%
\$51 to \$100	AL, AR, CNMI, GU, IA, ID, IL, IN, KS, LA-RN, MD, ME, MI, MS, MT, NC, NV, OH, OK, PA, SC, SD, TX, UT, VT, WA, WV-PN, WV-RN	28	51%
\$101 to \$150	CA-RN, CA-VN, CT, DE, FL, KY, MN, ND, NE, NH, NM, RI, TN, VA, VI, WY	16	29%
\$151 to \$200	CO, DC, HI, NJ, OR, WI	6	11%
More than \$201	AK, AZ, MA	3	5%
Do not regulate RN or PN		0	0%

62. Which of the following amounts is closest to the RN/PN initial licensure by endorsement fee? (including application fee if applicable, but not to include CBC fee)



*PN BONs and US Territories are not displayed on the map. For detailed information, please see the text responses below.

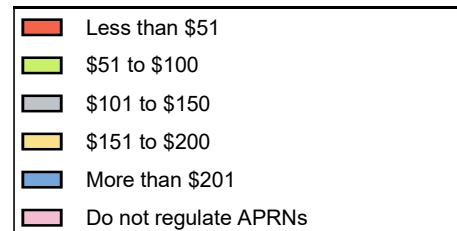
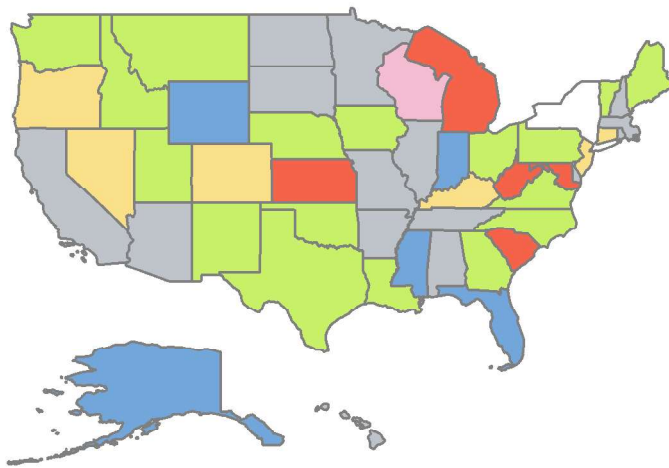
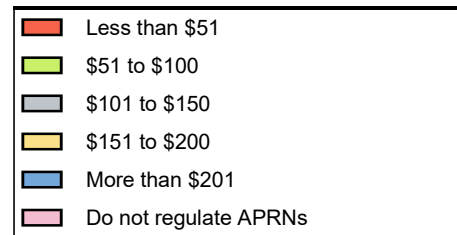
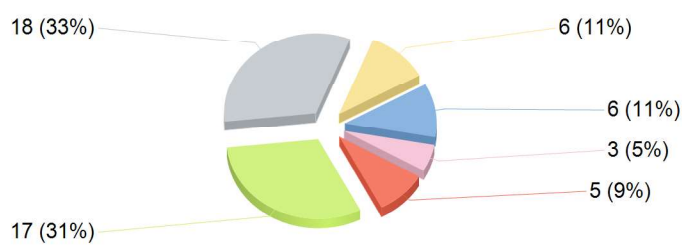
Responses	Jurisdictions	Number of Boards	Percentage of Boards Responding
Less than \$51	MO, WV-PN	2	4%
\$51 to \$100	CA-RN, GA, ID, IL, IN, KS, LA-RN, MD, ME, MI, MS, OH, OK, PA, SC, UT, WA, WI, WV-RN	19	35%
\$101 to \$150	AL, AR, AZ, CA-VN, CNMI, CT, DE, FL, GU, IA, MN, NC, NE, NH, NM, NV, RI, SD, TN, VI, VT, WY	22	40%
\$151 to \$200	AK, CO, HI, KY, MT, ND, NJ, OR, TX, VA	10	18%
More than \$201	DC, MA	2	4%

63. Which of the following amounts is closest to the RN/PN renewal fee? (not to include CBC fee)


*PN BONs and US Territories are not displayed on the map. For detailed information, please see the text responses below.

Responses	Jurisdictions	Number of Boards	Percentage of Boards Responding
Less than \$51	TX, WV-PN	2	4%
\$51 to \$100	AL, AR, FL, GA, GU, IA, ID, IL, IN, KS, KY, LA-RN, ME, MI, MN, MO, MS, MT, NC, NH, NM, OH, OK, PA, SC, SD, TN, UT, WA, WI, WV-RN	31	56%
\$101 to \$150	CNMI, CT, DC, DE, HI, MA, MD, ND, NE, NJ, NV, OR, RI, VA, VI, VT, WY	17	31%
\$151 to \$200	AK, AZ, CA-RN, CA-VN, CO	5	9%
More than \$201		0	0%

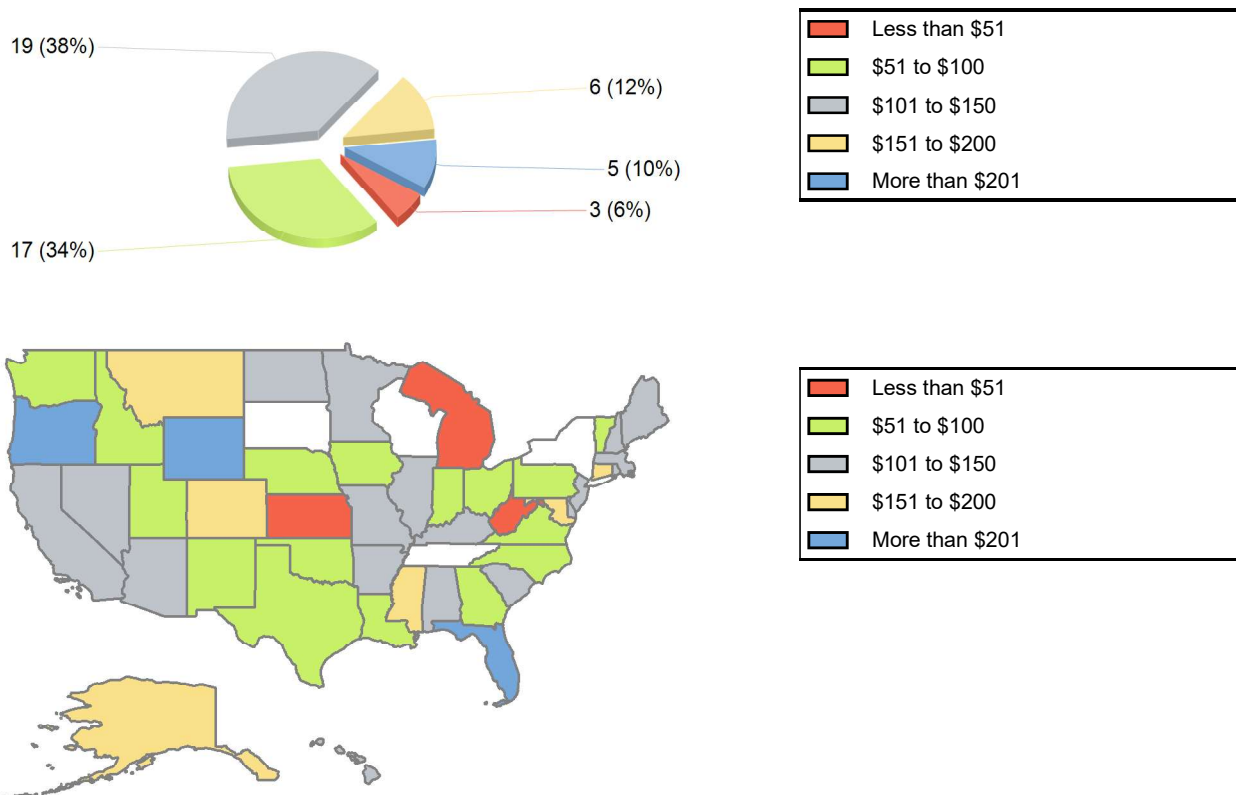
64. Which of the following amounts is closest to the APRN initial licensure fee? (including application fee if applicable, but not to include CBC fee)



*PN BONs and US Territories are not displayed on the map. For detailed information, please see the text responses below.

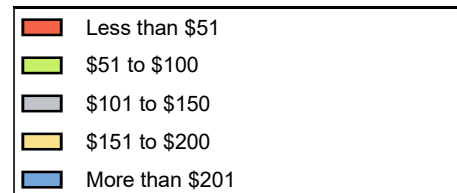
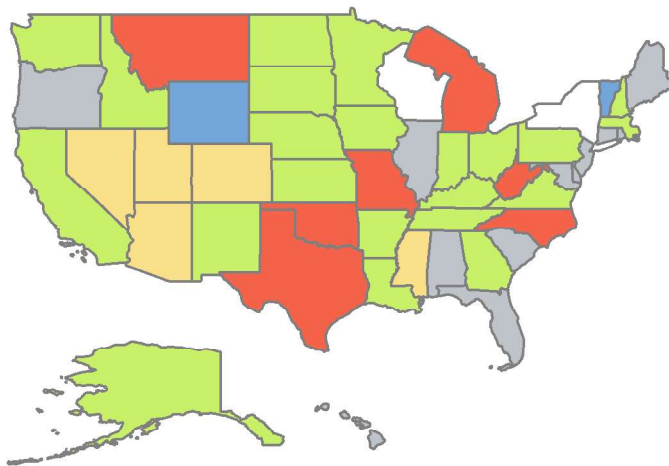
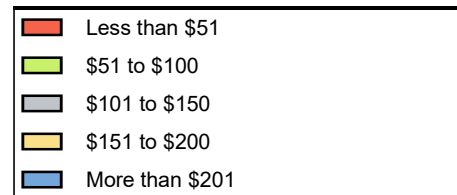
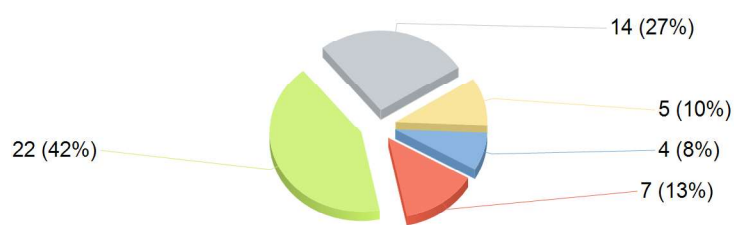
Responses	Jurisdictions	Number of Boards	Percentage of Boards Responding
Less than \$51	KS, MD, MI, SC, WV-RN	5	9%
\$51 to \$100	GA, IA, ID, LA-RN, ME, MT, NC, NE, NM, OH, OK, PA, TX, UT, VA, VT, WA	17	31%
\$101 to \$150	AL, AR, AZ, CA-RN, CNMI, DE, GU, HI, IL, MA, MN, MO, ND, NH, RI, SD, TN, VI	18	33%
\$151 to \$200	CO, CT, KY, NJ, NV, OR	6	11%
More than \$201	AK, DC, FL, IN, MS, WY	6	11%
Do not regulate APRNs	CA-VN, WI, WV-PN	3	5%

65. Which of the following amounts is closest to the APRN initial licensure by endorsement fee? (including application fee if applicable, but not to include CBC fee)



*PN BONs and US Territories are not displayed on the map. For detailed information, please see the text responses below.

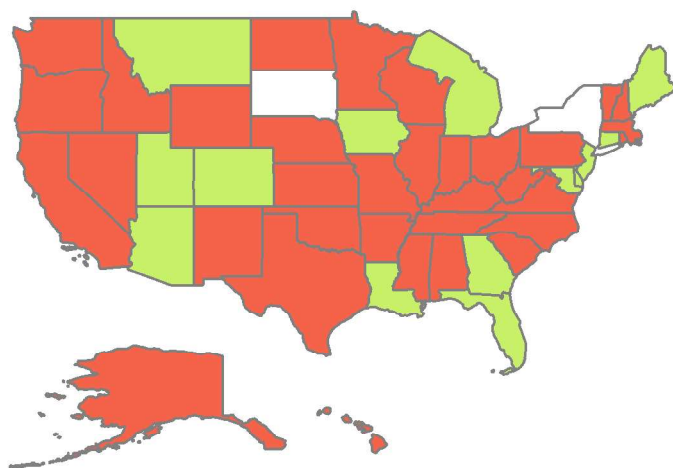
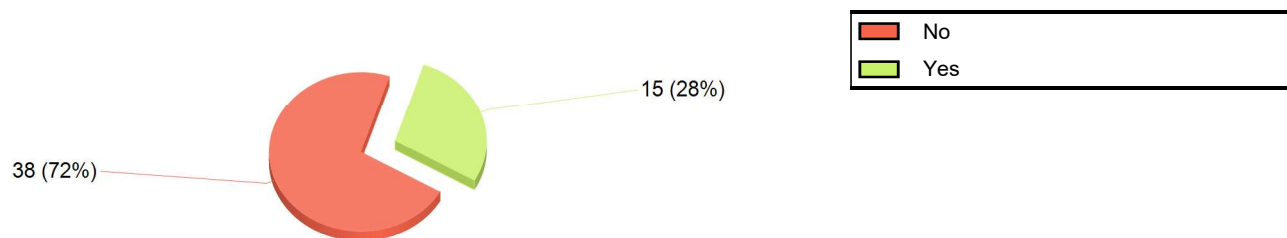
Responses	Jurisdictions	Number of Boards	Percentage of Boards Responding
Less than \$51	KS, MI, WV-RN	3	6%
\$51 to \$100	CNMI, GA, IA, ID, IN, LA-RN, NC, NE, NM, OH, OK, PA, TX, UT, VA, VT, WA	17	34%
\$101 to \$150	AL, AR, AZ, CA-RN, DE, HI, IL, KY, MA, ME, MN, MO, ND, NH, NJ, NV, RI, SC, VI	19	38%
\$151 to \$200	AK, CO, CT, MD, MS, MT	6	12%
More than \$201	DC, FL, GU, OR, WY	5	10%

66. Which of the following amounts is closest to the APRN renewal fee?

*PN BONs and US Territories are not displayed on the map. For detailed information, please see the text responses below.

Responses	Jurisdictions	Number of Boards	Percentage of Boards Responding
Less than \$51	MI, MO, MT, NC, OK, TX, WV-RN	7	13%
\$51 to \$100	AK, AR, CA-RN, GA, IA, ID, IN, KS, KY, LA-RN, MA, MN, ND, NE, NH, NM, OH, PA, SD, TN, VA, WA	22	42%
\$101 to \$150	AL, CNMI, CT, DE, FL, HI, IL, MD, ME, NJ, OR, RI, SC, VI	14	27%
\$151 to \$200	AZ, CO, MS, NV, UT	5	10%
More than \$201	DC, GU, VT, WY	4	8%

67. If not renewed on time, is there a grace period for renewal of license?



*PN BONs and US Territories are not displayed on the map. For detailed information, please see the text responses below.

Responses	Jurisdictions	Number of Boards	Percentage of Boards Responding
No	AK, AL, AR, CA-RN, CNMI, GU, HI, ID, IL, IN, KS, KY, MA, MN, MO, MS, NC, ND, NE, NH, NM, NV, OH, OK, OR, PA, RI, SC, TN, TX, VA, VI, VT, WA, WI, WV-PN, WV-RN, WY	38	72%
Yes	AZ, CO, CT, DC, DE, FL, GA, IA, LA-RN, MD, ME, MI, MT, NJ, UT	15	28%

