

The Georgia Board of Nursing met May 13-15, 2015 in Building B of the Professional Licensing Boards Division of the Secretary of State located at 237 Coliseum Drive, Macon, Georgia 31217.

WEDNESDAY, MAY 13, 2015

MEMBERS PRESENT

Brenda Rowe, RN, MN, JD, President
Kellie Lockwood, RN, MSN, Vice President
Nancy Barton, RN, MSN
Ashley Barnett, Consumer
Amy Hooper, LPN
Dellarie Shilling, RN, DNP, FNP-BC
Fredetena (Tina) Fletcher, LPN
Andrea Phipps, LPN
Tammy Burdeaux, RN, BSN, CRNI

MEMBERS ABSENT

Rhonda Scott, PhD, RN, CS
Katherine Mann, RN, CRNA
Lisa Hedenstrom, RN, MSN, MBA, NEA-BC

STAFF PRESENT

Jim Cleghorn, Executive Director
Amelia Baker, JD, Assistant Attorney General
Patricia McAfee, RN, MSN, Nursing Consultant - Legal/Discipline
Janet Freeman, RN, BSN, Nursing Consultant - Legal/Discipline

Rowe called the meeting to order at 10:00 a.m. on Wednesday, May 13, 2015. A quorum to conduct disciplinary matters was present.

EXECUTIVE SESSION

Shilling moved, Barnett seconded and the Board voted to enter into **Executive Session** in accordance with O.C.G.A. §§ 43-1-2(k); 43-1-19(h), 43-26-5(c) and 43-26-11, to deliberate on applications and enforcement matters and to receive information on applications, investigative reports and pending cases. The motion passed unanimously.

At the conclusion of the Executive Session on Wednesday, May 13, 2015 Rowe declared the meeting to be “open” pursuant to the Open and Public Meeting Act, O.C.G.A. §§ 50-14-1 et seq. No votes were taken during executive session.

APRN CONSENSUS MODEL DISCUSSION

Phipps moved that, effective December 31, 2015, the Board will no longer accept certification exams for initial authorization as an APRN that are not aligned with the APRN Consensus Model. This would not apply to individuals currently authorized as an APRN in Georgia. Barton seconded the motion and it carried unanimously.

There being no further business, the meeting adjourned on Wednesday, May 13, 2015 at 6:45 p.m.

THURSDAY, MAY 14, 2015

MEMBERS PRESENT

Brenda Rowe, RN, MN, JD, President
Kellie Lockwood, RN, MSN, Vice President
Nancy Barton, RN, MSN
Ashley Barnett, Consumer
Amy Hooper, LPN
Dellarie Shilling, RN, DNP, FNP-BC
Fredetena (Tina) Fletcher, LPN
Andrea Phipps, LPN
Tammy Burdeaux, RN, BSN, CRNI

MEMBERS ABSENT

Rhonda Scott, PhD, RN, CS
Katherine Mann, RN, CRNA
Lisa Hedenstrom, RN, MSN, MBA, NEA-BC

STAFF PRESENT

Jim Cleghorn, Executive Director
Amelia Baker, JD, Assistant Attorney General

Rowe called the meeting to order at 8:30 a.m. on Thursday, May 14, 2015. A quorum to conduct disciplinary matters was present.

EXECUTIVE SESSION

Hooper moved, Shilling seconded and the Board voted to enter into **Executive Session** in accordance with O.C.G.A. §§ 43-1-2(k); 43-1-19(h), 43-26-5(c) and 43-26-11, to deliberate on applications and enforcement matters and to receive information on applications, investigative reports and pending cases. The motion passed unanimously.

At the conclusion of the Executive Session on Thursday, May 14, 2015 Rowe declared the meeting to be "open" pursuant to the Open and Public Meeting Act, O.C.G.A. §§ 50-14-1 et seq. No votes were taken during executive session.

FACILITY TOUR

The Board visited staff offices and toured the Professional Licensing Boards Division Mailroom and Call Center. The Intake Director and Call Center Manager were available for questions during the tour. Board members voiced appreciation for the opportunity to gain a new perspective regarding the intake and call center processes. At the conclusion of the tour, Board members requested that the Call Center Manager attend the July 2015 board meeting to provide updated information regarding the percentage of PLB calls that are for nursing and the ability for the phone system to provide callers with an estimated wait time.

STRATEGIC PLAN REVIEW

The Board reviewed Objective Three from the 2014-2016 Strategic Plan regarding the identification of new committees and the development of committee charges. Specifically, the Board reviewed the committee charges for the Nursing Education Committee. Board members requested that committee members be provided with information regarding the role of the Board and the role of committee members. Board members reiterated that committee members do not speak for the Board and that the committees make recommendations to the Board.

The Board reviewed Objective Four from the 2014-2016 Strategic Plan regarding the review and revision of the disciplinary processes of the Board. Board members discussed the proposed legal/disciplinary grid. Barton provided an update regarding the committee's work on the grid.

BOARD RULE UPDATES

The Board reviewed the proposed language for Rule 410-10-.01 regarding standards of practice for registered nurses. The Attorney General's Office expressed concerns that the language was too broad and would be unenforceable. Baker recommended that the Board use the language contained in the current rule defining standards of practice for registered nurses.

The Board reviewed the proposed language for Rule 410-10-.03 regarding unprofessional conduct.

The Board reviewed the proposed language for Rule 410-1.

JOHNSON AND JOHNSON – SEDASYS PRESENTATION

Marsha McKenna presented information to the Board regarding SEDASYS. McKenna clarified that she was not seeking an endorsement of the product by the Board. She noted that the system was designed for minimal to moderate sedation using propofol. McKenna provided information regarding the safeguards included in the system and explained that Sedasys was approved by the Food and Drug Administration. She explained that four boards of nursing (Texas, Washington, New Hampshire and North Carolina) had modified their position statements to allow for computer assisted propofol sedation technology. Baker inquired whether or not a physician was present with the machine. McKenna explained that an anesthesia professional must be immediately available for consultation. Baker noted that it would be important to obtain the perspective of the Georgia Composite Medical Board. McKenna requested that the Board consider amending its position statement to provide for the use of computer assisted propofol sedation technology.

Rowe thanked McKenna for the presentation and explained that the Board would discuss the information and engage stakeholders before rendering a decision.

LISA DURDEN – DIRECTOR, PROFESSIONAL LICENSING BOARDS DIVISION

Rowe thanked Durden for attending the meeting and invited her to provide the Board with any updates since the last meeting. Durden discussed the new call center platform and provided information regarding the new call back feature that will be available July 1, 2015. Callers will have the opportunity to remain on hold until an agent is available or the caller can request to be called back by an agent. Durden explained that she believed this would be a positive change for callers. Durden explained that, effective July 1, 2015, five call center agents would be dedicated to the Board of Nursing. Board members expressed appreciation for the dedicated agents and requested that the Call Center Manager (Aponte) attend the July 2015 meeting.

Rowe noted that the Board was still interested in obtaining information regarding the percentage of PLB calls that are for nursing. She explained that the Board was thrilled to have a dedicated call center staffed by agents with expertise for the Board of Nursing. She expressed that she was hopeful that tickets forwarded to Board staff would be reduced significantly. Rowe reiterated the Board's interest in obtaining information regarding the number of calls received for nursing on a daily basis. It was noted that the Board had seen improvements regarding caller wait times and that the Board wanted to have the opportunity to provide exceptional customer service to callers. Board members inquired whether or not callers were randomly surveyed to ensure satisfaction. Durden explained that she was uncertain if the current software allowed for random surveys.

Barton inquired about the functionality of the exam results and transcript importers. Cleghorn provided information regarding both importers and noted that the transcript importer was working correctly. The software vendor is still working with SOS IT to provide updates to the exam results importer to update the accuracy of the importer when a record is missing the social security number.

Shilling requested information regarding the implementation of the Optimal Board Regulatory Software ("ORBS") provided by the National Council of State Boards of Nursing ("NCSBN"). Cleghorn explained that ORBS was currently being deployed in West Virginia and Idaho and that NCSBN IT staff had updated the NCSBN board of directors at the May meeting regarding the program's success thus far. NCSBN IT staff members anticipate providing updated information to the NCSBN board of directors at its July 2015 meeting.

Rowe discussed the workforce survey data obtained during the last three renewal cycles. She noted that the data was still incomplete and requested any help available from SOS to complete the project and ensure that all data was available and reported.

Barton inquired about Legal Services and sought any available updates. Durden explained that SOS was working with its Chief Counsel (Germany) to determine what help can be provided by Legal Services to the Board. Shilling asked whether Baker had been included in the conversations. She noted that the Board was very conscious of the time required to refer a case to the attorneys and the time needed to draft the orders. She explained that the Board wanted to avoid backlogs in the future. Barton noted that the Board was very concerned with impairment cases and violations of Board orders and agreements. Information was provided regarding the rise of cases coming to the Board with the implementation of mandatory reporting.

EDUCATION REPORT

NCLEX Report

The Board reviewed the following programs whose NCLEX pass rate for calendar year 2015 was below eighty (80) percent for first time test takers:

Programs With 2015 NCLEX Pass Rate Below 80%			
Program Type	School	Pass Rate	Number of Exam Writers
RN	Atlanta Technical College	77.78%	9
LPN	Augusta Technical College	50.00%	2
LPN	Bainbridge College	62.07%	29
RN	Brenau University	0.00%	1
RN	Chamberlain College	76.19%	40
RN	Clayton State University	78.72%	47
RN	Dalton State College	50.00%	2
RN	Emory University	33.33%	3
RN	Georgia Baptist College of Nursing	33.33%	3
RN	Georgia Southwestern State University	72.73%	11
RN	Gwinnett Technical College	0.00%	1
RN	Herzing University	27.78%	18
LPN	North Georgia Technical College	0.00%	1
RN	Shorter University	0.00%	1
LPN	Southern Crescent Technical College	79.17%	24
RN	South Georgia College	33.33%	3
LPN	Southwest Georgia Technical College	75.00%	8
RN	University of North Georgia	68.18%	22
LPN	West Georgia Technical College	50.00%	4

NCLEX Corrective Plans of Action

The Board reviewed and accepted corrective plans of action from the following programs whose 2014 NCLEX pass rate was below 80%:

- Emory University
- Augusta Technical College
- Darton State College
- Bauder College
- Georgia Northwestern Technical College
- Southwest Georgia Technical College
- University of West Georgia
- Atlanta Technical College
- Central Georgia Technical College
- Shorter University

Georgia College and State University

Board approval for Georgia College and State University expired December 31, 2014. The Board received a request from the institution for the approval to be extended. The program was last visited in January 2010 and is accredited by ACEN through 2021.

The program's 2014 NCLEX pass rate was 92.47% and the four year average is 95.73%. Based on that information, the Board continued approval through December 31, 2021.

Georgia State University

Board approval for Georgia State University expired December 31, 2013. The Board received a request from the institution for the approval to be extended. The program received an extension in 2013 to allow for the CCNE accreditation visit. CCNE accredited the undergraduate program through 2023 but will be returning this fall to consider the DNP program. The program's 2014 NCLEX pass rate was 94.17% and the four year average is 92.31%. Based on that information, the Board continued approval through December 31, 2023.

Central Georgia Technical College

Based on review of the submitted reports and compliance with Board Rule 410-4-.01, the Board granted developmental approval to Central Georgia Technical College for the development of an associate degree program.

Southern Crescent Technical College

Based on review of the submitted reports and compliance with Board Rule 410-4-.01, the Board denied developmental approval to Southern Crescent Technical College for the development of an associate degree program. Representatives can update the necessary reports and resubmit for Board review and consideration.

Middle Georgia State College

Middle Georgia State College is redesigning its BSN completion program. Additionally, the institution anticipates obtaining university status on July 1, 2015 and offering a master's degree in nursing program in fall 2015. Based on submission of reports and compliance with all applicable laws and rules, the Board approved the curriculum changes.

Wiregrass Georgia Technical College

Based on submission of reports and compliance with all applicable laws and rules, the Board approved the substantive changes.

Shilling moved to accept the recommendations as submitted. Phipps seconded the motion and it carried unanimously.

CONTINUING COMPETENCY

The Board reviewed a proposal submitted by the Georgia Department of Public Health. The proposal would allow registered nurses employed by the Georgia Department of Public Health to use Option Four to satisfy the continuing competency requirements. The proposal provided information regarding the ongoing training and education received by nurses employed by the Georgia Department of Public Health.

Phipps moved, Barton seconded and the Board voted to allow registered nurses employed by the Georgia Department of Public Health to utilize Option Four to satisfy the continuing competency requirements.

The Board reviewed the current documentation available on the Board's website regarding the continuing competency requirements. Board members reviewed the frequently asked questions developed by board staff. The Board directed Cleghorn to clarify information regarding continuing education units and contact hours. 0.1 CEU is equal to sixty (60) minutes of instruction. 1.0 CEUs is equal to ten (10) hours of instruction.

PRESIDENT'S BUDGET REPORT

Rowe provided information to Board members regarding the FY2016 budget passed by the General Assembly. She discussed the allocation for mandatory reporting in the FY2015 budget and reviewed the July 2014 correspondence from Secretary Kemp that explained how the allocation from FY2015 was spent. Rowe explained that the Board did not seek additional resources in the FY2016 budget because data was not yet available to document a need. She noted that \$670,468 was appropriated to the Professional Licensing Boards in FY2016 for mandatory reporting. If, based on Secretary Kemp's July 2014 correspondence, approximately \$550,000 was spent to implement the mandatory reporting program then, based on the \$670,468 appropriation in the FY2016 budget, there should be approximately \$120,000 available for other nursing needs. Board members discussed that the Board should provide input to Secretary Kemp regarding how the money should be spent.

Rowe discussed the \$530,000 appropriation for additional call center agents and a new licensing section at the Professional Licensing Boards Division. She explained that in conversations with the Governor's Office of Planning and Budget ("OPB"), she was told that the new licensing section would be for healthcare and that it would reduce the workload on the Board of Nursing staff. Rowe explained that OPB described the new section as consisting of an executive director, two (2) complaint/compliance staff members, a board support specialist and an investigator. Board members discussed that the Board should obtain information regarding how the new licensing section will positively impact the Board of Nursing as provided by OPB. The Board directed Rowe to draft a letter to Secretary Kemp inquiring about the new section and providing guidance regarding the \$670,000 appropriation to include an adjustment in the executive director's salary.

Rowe discussed recent inquiries from the Senate Budget Office ("SBO") regarding functions and the Board's proposal for improvement. SBO staff explained that they had heard during the legislative session that the Board of Nursing was unsatisfied with its current state of affairs. Rowe noted that both OPB and SBO specified that the new licensing section was intended to positively impact the Board of Nursing. She noted that SBO staff had been invited to the July 2015 meeting and explained to SBO staff that the Board had been working collaboratively with the Secretary of State's Office. Rowe expressed frustration to SBO staff regarding the Board's lack of input to budget processes. Rowe agreed to confirm the SBO's invitation to the July 2015 meeting.

SCOPE OF PRACTICE

The Board reviewed correspondence from Grady Memorial Hospital in Atlanta inquiring whether or not the Board had a position statement regarding healthcare facilities charging APRN students (not employed by the facility) for clinical preceptorships. Additionally, the correspondence inquired about the use of the title "Doctor" by individuals who are not physicians. The Board directed Cleghorn to send a response explaining that the Board had no position on facilities charging for clinical preceptorships for APRN students. The Board directed Cleghorn to refer the facility to O.C.G.A. §§ 43-34-22 and 43-1-33 regarding the use of the title "Doctor" by individuals who are not physicians.

EXECUTIVE DIRECTOR'S REPORT

- Statistical Information for March and April 2015
- PLB System Issues
 - Automated response emails
 - Transcript importer for applications
 - Exam result importer for applications
- Optimal Regulatory Board Software ("ORBS") Update
- Staff Update
- Board Vacancies
- Renewal Survey / Workforce Data Information
- e-Notify Update
- NCSBN Midyear Meeting – March 16-18, 2015
- CE Broker
- NCSBN Data Integrity Project
- APRN Information
- NCSBN Delegate Assembly – August 19-21, 2015
- Board Committee Updates
- April 24, 2015 Georgia Hospital Association CNO Call
- GBON Website

The Board directed Cleghorn to make arrangements for Rowe, Scott and Fletcher to attend the 2015 NCSBN Delegate Assembly in Chicago, August 19-21.

The Board directed Cleghorn to present issues to the Secretary of State's Office regarding the GBON website issues including:

- Stakeholders are unable to search and find the Board's website using major search engines
- Stakeholders are referred to the website of the National Council of State Boards of Nursing
 - NCSBN IT staff reported that the fifth most search item on its website was the Georgia Board of Nursing. No other board of nursing was included in that list. NCSBN IT staff also reported that 4% of all searches on its website for the first two quarters were for the Georgia Board of Nursing.

LEGISLATIVE DISCUSSION

House Bill 416 – Baker provided information regarding the implications of House Bill 416. Board members expressed concern regarding other regulatory bodies sanctioning nurses. The Board will work to educate licensees about the new requirements.

House Bill 504 – The Board reviewed House Bill 504.

There being no further business, the meeting adjourned on Thursday, May 14, 2015 at 5:50 p.m.

FRIDAY, MAY 15, 2015

MEMBERS PRESENT

Brenda Rowe, RN, MN, JD, President
Kellie Lockwood, RN, MSN, Vice President
Dellarie Shilling, RN, DNP, FNP-BC
Nancy Barton, RN, MSN
Tammy Burdeaux, RN, BSN, CRNI
Amy Hooper, LPN
Fredetena (Tina) Fletcher, LPN
Andrea Phipps, LPN

MEMBERS ABSENT

Rhonda Scott, PhD, RN, CS
Katherine Mann, RN, CRNA
Lisa Hedenstrom, RN, MSN, MBA, NEA-BC
Ashley Barnett, Consumer

STAFF PRESENT

Jim Cleghorn, Executive Director
Amelia Baker, JD, Assistant Attorney General

Rowe called the meeting to order at 8:30 a.m. on Friday, May 15, 2015. A quorum to conduct disciplinary matters was present.

JOHNSON AND JOHNSON – SEDASYS PRESENTATION

Board members discussed the Johnson and Johnson – Sedasys presentation from the previous day. The Board directed Cleghorn to present the information to the APRN Committee for comment and to forward the information to Mann for review. The Board will consider the topic again at the July 2015 meeting.

BOARD RULE UPDATES

- The Board reviewed the proposed language for Rule 410-3.
- The Board reviewed the proposed language for Rule 410-4.
- The Board reviewed the proposed language for Rule 410-5.
- The Board reviewed the proposed language for Rule 410-6.
- The Board reviewed the proposed language for Rule 410-7.
- The Board reviewed the proposed language for Rule 410-8.
- The Board reviewed the proposed language for Rule 410-9.
- The Board reviewed the proposed language for Rule 410-10.
- The Board reviewed the proposed language for Rule 410-11.

The Board reviewed the proposed language for Rule 410-12.

EXECUTIVE SESSION

Barton moved, Hooper seconded and the Board voted to enter into **Executive Session** in accordance with O.C.G.A. §§ 43-1-2(k); 43-1-19(h), 43-26-5(c) and 43-26-11, to deliberate on applications and enforcement matters and to receive information on applications, investigative reports and pending cases. The motion passed unanimously.

At the conclusion of the Executive Session on Friday, May 15, 2015 Rowe declared the meeting to be “open” pursuant to the Open and Public Meeting Act, O.C.G.A. §§ 50-14-1 et seq. No votes were taken during executive session.

APPROVAL OF BOARD MINUTES

Hooper moved to accept the March 25-27, 2015 Board meeting minutes as presented. Fletcher seconded the motion and it carried unanimously.

Phipps moved to accept the March 25-27 meeting minutes as presented. Hooper seconded the motion and it carried unanimously.

Hooper moved to accept the April 23, 2015 Executive Session Teleconference meeting minutes as presented. Shilling seconded the motion and it carried unanimously.

Hooper moved to accept the April 2, 2015 Investigative Committee A meeting minutes as presented. Barton seconded the motion and it carried unanimously.

Phipps moved to accept the May 7, 2015 Investigative Committee A meeting minutes as presented. Shilling seconded the motion and it carried unanimously.

Hooper moved to accept the April 30, 2015 Investigative Committee B meeting minutes as presented. Barton seconded the motion and it carried unanimously.

Hooper moved to accept the April 23, 2015 Teleconference meeting minutes as presented. Shilling seconded the motion and it carried unanimously.

CASE REVIEW

(RNI=Registered Nurse Investigative Case Number, LPNI=Licensed Practical Nurse Investigative Case Number)

LPNI130015SM - Burdeaux moved to send a mitigating letter requesting courses in Narcotics Administration, Documentation, Professional Accountability, End of Life Care, Ethics and Residents Rights. Phipps seconded the motion and it carried unanimously.

LPNI130015 GW - Hooper moved to refer to the Attorney General's office for a private consent order to include two (2) years monitoring, quarterly reports (employer, personal, psychotherapy) and random drug screens. Fletcher seconded the motion and it carried unanimously.

RNI120194 – Shilling moved to approve the request to lift the suspension and to refer to the Attorney General's office for a public consent order to include five (5) years probation, two (2) years narcotics restriction and quarterly reports (personal, employer, after care and medication management). Hooper seconded the motion and it carried unanimously.

LPNI140122 – Hooper moved to send a mitigating letter requesting courses in Ethics, Difficult Patients and Elder Abuse. Phipps seconded the motion and it carried unanimously.

LPNI150259 – Shilling moved to refer to the Attorney General's office for a public consent order to include five (5) years probation, two (2) years narcotics restrictions, quarterly reports (employer, personal, aftercare and psychotherapy) and a \$500 fine for diversion. Barton seconded the motion and it carried unanimously.

RNI151062 – Hooper moved to refer to the Attorney General's office for an outpatient mental physical examination from a Board approved evaluator. Results are to be reviewed by the Board and the Legal/Discipline Nurse Consultant. Burdeaux seconded the motion and it carried unanimously.

RNI151063 – Shilling moved to deny the application until the case is resolved in Florida. Barton seconded the motion and it carried unanimously.

RNI120109 – Hooper moved to deny the license. Applicant may apply after completion of a mental physical examination from Board approved evaluator. Phipps seconded the motion and it carried unanimously.

RNI11088 – Shilling moved to approve an early termination. Hooper seconded the motion and it carried unanimously.

RNI150476 – Hooper moved to require the applicant to complete a Board approved reentry program as a condition of licensure. Phipps seconded the motion and it carried unanimously.

RNI150891 – Shilling moved to refer to the Attorney General's office for an indefinite suspension. Licensee may petition to lift after completion of treatment and documentation of advocacy. Fletcher seconded the motion and it carried unanimously.

RNI150954 – Mann moved to refer to the Attorney General's office for a private consent order to include five (5) years monitoring, quarterly reports (employer, aftercare, personal, psychotherapy) and substance abuse stipulations. Barnett seconded the motion and it carried unanimously.

RNI150982 – Shilling moved refer to the Attorney General's office for an outpatient mental physical examination from a Board approved evaluator. Results are to be reviewed by the Investigative Committee and the Legal/Discipline Nurse Consultant. Hooper seconded the motion and it carried unanimously.

LPNI150267– Fletcher moved to refer to the Attorney General's office for an outpatient mental physical examination from a Board approved evaluator. Results are to be reviewed by the Investigative Committee and the Legal/Discipline Nurse Consultant. Barton seconded the motion and it carried unanimously.

LPNI150053 – Shilling moved to refer to the Attorney General's office for an expedited outpatient mental physical examination from a Board approved evaluator. Results are to be reviewed by the Investigative Committee and the Legal/Discipline Nurse Consultant. Burdeaux seconded the motion and it carried unanimously.

LPN120027 – Fletcher moved to close the case. Hooper seconded the motion and it carried unanimously.

RNI140208 – Shilling moved to rescind the previous motion and close the case. Phipps seconded the motion and it carried unanimously.

LPNI150431– Shilling moved to refer to the Attorney General's office for a private consent order to include five (5) months monitoring, quarterly reports (employer, aftercare, personal, psychotherapy). Lockwood seconded the motion and it carried with Hooper abstaining.

LPNI150415 – Shilling moved to refer to the Attorney General's office for an expedited outpatient mental physical examination from a Board approved evaluator. Order is to be hand served to licensee. Results are to be reviewed by the Investigative Committee and the Legal/Discipline Nurse Consultant.. Lockwood seconded the motion and it carried unanimously.

LPNI120055 – Fletcher moved to reject the mental physical examination and to refer to the Attorney General's office for an expedited outpatient mental physical examination from a Board approved evaluator. Results must include recommendations to wean off suboxone. Hooper seconded the motion and it carried unanimously.

LPNI130106 – Barton moved to refer to the Attorney General's office for a private consent order to include three (3) years monitoring, two (2) years narcotics restriction, quarterly reports (employer, aftercare, psychotherapy) and a fine of \$500 for failing to disclose. Licensee must document five years of continuous sobriety to petition to lift. Phipps seconded the motion and it carried unanimously.

RNI150193 – Hooper moved to refer to the Attorney General's office for a public consent order to include five (5) years probation, two (2) years narcotics restrictions, quarterly reports (employer, personal, aftercare and psychotherapy) and a \$500 fine for diversion. Shilling seconded the motion and it carried unanimously.

RNI150236 – Barton moved to refer to the Attorney General's office for a public consent order to include five (5) years probation, two (2) years narcotics restrictions, quarterly reports (employer, personal, aftercare) and a \$500 fine for unprofessional conduct. Phipps seconded the motion and it carried with Fletcher abstaining.

LPNI150294 – Hooper moved to refer to the Attorney General's office for an outpatient mental physical examination from a Board approved evaluator. Results are to be reviewed by the Board and the Legal/Discipline Nurse Consultant. Fletcher seconded the motion and it carried unanimously.

LPNI130061 – Barton moved to refer to the Attorney General's office for an indefinite suspension or voluntary surrender. Shilling seconded the motion and it carried unanimously.

LPNI150446 – Hooper moved to license. Phipps seconded the motion and it carried unanimously.

RNI151059 – Barton moved to send a mitigating letter requesting courses in Documentation, Ethics, Professionalism, and Legal Issues. Hooper seconded the motion and it carried unanimously.

LPNI150373 – Hooper moved to send a mitigating letter requesting courses in Handling Narcotics, Medication Administration, Ethics, Documentation and Legal Issues. Phipps seconded the motion and it carried unanimously.

LPNI150234 – Barton moved to close the case. Lockwood seconded the motion and it carried unanimously.

RNI150066 – Phipps moved to refer to the Attorney General's office for an indefinite suspension or voluntary surrender. Burdeaux seconded the motion and it carried unanimously.

RNI110743 – Barnett moved to lift the suspension and refer to the Attorney General's office for a public consent order to include two (2) years probation and quarterly reports (personal, employer). While on probation, licensee must be supervised by a registered nurse with a minimum of two (2) years in the same or similar practice. Licensee may not practice in any unsupervised setting. Licensee must provide documentation of compliance with courses required by Texas Board of Nursing within ninety (90) days of docketing. Phipps seconded the motion and it carried unanimously.

RNI151059 – Hooper moved to license. Shilling seconded the motion and it carried with Phipps abstaining.

ATTORNEY GENERAL'S OFFICE

(RNI=Registered Nurse Investigative Case Number, LPNI=Licensed Practical Nurse Investigative Case Number)

RNI150354 – Barton moved to refer to the Attorney General's office for an outpatient mental physical examination from a Board approved evaluator. Results are to be reviewed by the Investigative Committee and the Legal/Discipline Nurse Consultant. Licensee must provide evaluation results within thirty (30) days. Hooper seconded the motion and it carried unanimously.

RNI1150614 – Hooper moved to allow licensee to continue home visits with patients not using controlled substances. Licensee can have no access to dangerous drugs or controlled substances and can only work for current agency. Phipps seconded the motion and it carried unanimously.

RNI150409 – Barton moved to rescind and vacate summary suspension based on additional information received during investigation since service of summary suspension order. Lockwood seconded the motion and it carried unanimously.

RNI140206 – Phipps moved to uphold the previous motion from the January 08, 2015 board meeting. Hooper seconded the motion and it carried unanimously.

RNI100112 – Lockwood moved to close the case. Phipps seconded the motion and it carried unanimously.

PRIVATE CONSENT AGREEMENTS FOR UNLICENSED AND UNAUTHORIZED PRACTICE

(LPNI = Licensed Practical Nurse Investigative Case Number) (RNI=Registered Nurse Investigative Case Number)

Lockwood moved to ratify the Private Consent Agreements for unlicensed/unauthorized practice that were issued according to the Board's policies.

RNI151093	RNI151123	RNI151138
RNI151094	RNI151128	LPN150510
RNI151095	RNI151131	
RNI151097	RNI150508	

Barton seconded the motion and it carried unanimously.

INVESTIGATIVE COMMITTEE A

(LPNI = Licensed Practical Nurse Investigative Case Number) (RNI=Registered Nurse Investigative Case Number)

Lockwood moved to ratify the following cases from the May 7, 2015 Investigative Committee meeting:

LPNI140155	LPNI150155	RNI150883	LPNI140064	RNI150584	LPNI150110	LPNI150434
RNI140559	LPNI150138	RNI150766	LPNI140158	RNI140553	RNI151059	LPNI140057
LPNI150181	RNI140107	LPNI150169	RNI140131	RNI140359	RNI151002	
LPNI150047	RNI140155	RNI140175	RNI140293	RNI140563	RNI151011	
LPNI150178	RNI140128	RNI150200	RNI151051	RNI140571	RNI140229	

Phipps seconded the motion and it carried unanimously.

INVESTIGATIVE COMMITTEE B

(LPNI = Licensed Practical Nurse Investigative Case Number) (RNI=Registered Nurse Investigative Case Number)

Lockwood moved to ratify the following cases from the April 30, 2015 Investigative Committee meeting:

RNI150457	LPNI110476	LPNI150453	RNI150414	LPNI150473
LPNI150451	RNI150879	RNI150667	RNI150708	LPNI150394
RNI150924	LPNI150015	RNI151028	RNI150327	RNI150509
RNI140633	LPNI130065	RNI150633	RNI150824	LPNI150269
LPNI150924	LPNI140044	RNI150417	RNI151057	LPNI150215
RNI110623	RNI150931	RNI150564	LPNI150471	LPNI150266
LPNI130158	RNI150929	RNI150814	RNI150260	RNI150270

Hooper seconded the motion and it carried unanimously.

PRIVATE CONSENT AGREEMENTS FOR FAILURE TO DISCLOSE

Lockwood moved to ratify the Private Consent Agreements for licensure with a fine of \$500 for failure to disclose arrest(s)/disciplinary action on applications that were issued according to the Board's policies.

RNI151095	RNI151124
RNI151019	RNI151127

Barton seconded the motion and it carried unanimously.

REQUEST TO LIFT NARCOTIC RESTRICTIONS

(RNI=Registered Nurse Investigative Case Number)

Lockwood moved to accept the following recommendations for the cases listed below:

	RECOMMENDED ACTION
RNI111070	Lift narcotic restrictions.
RNI130242	Lift narcotic restrictions.
RNI130097	Lift narcotic restrictions.
RNI120429	Lift narcotic restrictions.
RNI120232	Lift narcotic restrictions.
RNI130052	Lift narcotic restrictions.
RNI120727	Lift narcotic restrictions.
RNI100674	Lift narcotic restrictions.
RNI140114	Lift narcotic restrictions.

Phipps seconded the motion and it carried unanimously.

PROBATION TERMINATIONS BETWEEN MEETINGS

(RNI=Registered Nurse Investigative Case Number) (LPNI = Licensed Practical Nurse Investigative Case Number)

Lockwood moved to accept the following terminations of probation between meetings.

RNI152733 RNI076231 RNI175779 RNI206730

Barton seconded the motion and it carried unanimously.

INVESTIGATIVE INTERVIEWS

(RNI=Registered Nurse Investigative Case Number, LPNI=Licensed Practical Nurse Investigative Case Number)

LPNI130187 – Phipps moved to amend the consent order from five (5) years to four (4) years and to obtain the documentation from the treating physician regarding current medications. Hooper seconded the motion and it carried unanimously.

RNI150424 – Hooper moved that licensee can have no travel assignments except to corporate headquarters; cannot change positions without approval of the Board; must be supervised by general manager who is a registered nurse; cannot make home visits or provide clinical care; cannot be on call for nursing care; can have no access to medications or narcotics; cannot be in supervisory position, cannot work for home health and can only make patient contact via phone. Phipps seconded the motion and it carried unanimously.

RNI150240 – Lockwood moved to refer to the Attorney General's office for a public consent order to include three (3) years probation, quarterly reports (employer, personal, after care) and a fine of \$400 for unlicensed practice.

LPNI150044 – Shilling moved to close the case with a Letter of Concern. Hooper seconded the motion and it carried unanimously.

LEGAL SERVICES

(RNI=Registered Nurse Investigative Case Number, LPNI=Licensed Practical Nurse Investigative Case Number)

RNI111069 – Burdeaux moved to close the case with a strong Letter of Concern (Drugs). Phipps seconded the motion and it carried unanimously.

RNI120551 – Phipps moved to refer to the Attorney General's office. Will resend consent order and proceed to hearing if necessary. Hooper seconded the motion and it carried unanimously.

RNI120605 – Burdeaux moved to refer to the Attorney General’s office to resend the consent order and deny 2016 renewal. Barton seconded the motion and it carried unanimously.

RNI130183 – Phipps moved to send a mitigating letter requesting courses in Professional Accountability, Ethics, and the Georgia Nurse Practice Act. Lockwood seconded the motion and it carried unanimously.

RNI130519 – Burdeaux moved to amend to a private consent order requiring courses in Ethics and Professional Accountability and a fine for \$500 for unprofessional Conduct. Phipps seconded the motion and it carried unanimously.

RNI130599 – Phipps moved to refer to the Attorney General’s office for an outpatient mental physical examination from a Board approved evaluator. Results are to be reviewed by the Investigative Committee and the Legal/Discipline Nurse Consultant. Hooper seconded the motion and it carried unanimously.

RNI120261 – Burdeaux moved to refer to the Attorney General’s office for an outpatient mental physical examination from a Board approved evaluator. Results are to be reviewed by the Investigative Committee and the Legal/Discipline Nurse Consultant. Phipps seconded the motion and it carried unanimously.

RATIFICATION OF LICENSES ISSUED

Shilling moved, Hooper seconded and the Board voted to approve applications for licensure and advanced practice authorization issued between March 1, 2015 and April 30, 2015 that were determined, pursuant to Board approved guidelines, to have met licensure/authorization requirements.

LPN090705	Ansley, Marie Annette	LPN090737	morris, stacy marie
LPN090706	Brazzell, Hannah Alexis	LPN090738	Albertson, Sarah Elizabeth
LPN090707	Fletcher, Stephanie Llewellyn	LPN090739	Moniz-Bridges, Taressa Marie
LPN090708	Hall, Shelby Purvis	LPN090740	Wright, Latasha D
LPN090709	Cooper, Laura A.	LPN090741	Myers, Brittany Lynn
LPN090710	Curry, Ashley Elizabeth	LPN090742	Sullivan, Anna Elizabeth
LPN090711	Davis, Dana Kay	LPN090743	Cannon, Haley Brooke
LPN090712	Lewis, Brittany Kyle	LPN090744	Cheney, Tabatha Edwards
LPN090713	Wilson, Tashae Casimira	LPN090745	Posey, Minnie Alain
LPN090714	Cole, Olufunke Titilayo	LPN090746	Smith, JoDanya Lashea
LPN090715	Evans, Hillary Corrin	LPN090747	Winters, Michelle Hollie
LPN090716	Tidman, Erica Marie	LPN090748	Young, Sydelle Reynolds
LPN090717	Colquitt, Jason Christopher	LPN090749	Neva, Susan
LPN090718	Evans Winfrey, Amanda Renee	LPN090750	Hayes, Linda Sue
LPN090719	Fussell, Jana Nicole	LPN090751	Hall, Kalada Larchet
LPN090720	Monroe, Andrea La-Don Mullgrav	LPN090752	Brown, Latasha Lafaye
LPN090721	OLOMU, PATIENCE	LPN090753	Thomas, Joseph Cody
LPN090722	Weems, Vesta Gail Hall	LPN090754	Lollis, Cynthia Yvette
LPN090723	Stubblefield, Lartees Renee	LPN090755	Taylor, Andrea Veronica
LPN090724	Shivers, Lesia Annette	LPN090756	Lester, Christie Amanda
LPN090725	Puma, April Henderson	LPN090757	Kiah, Shonise D
LPN090726	Hill, April D.	LPN090758	Clarke, Raoul Baruch
LPN090727	Long, Laura Marie	LPN090759	Hawkins, LaToya Latrice
LPN090728	Richburg, Lois Jean	LPN090760	Smith, Haley Madison
LPN090729	Roberts, Martha Angelica	LPN090761	Howard, Dejah Kressette
LPN090730	Brown, Christy Ann Jimenez	LPN090762	Jones, Letecha Shnell
LPN090731	Bowen, Shanicka Marie	LPN090763	Horhn, Walter, III
LPN090732	McNaughton, Amber Cherie	LPN090764	Rawlston, Sara Alyson
LPN090733	Frazier, Monika Tennille	LPN090765	Blackshear, Ciara Elice
LPN090734	Warren, Bri’Anna Marquez	LPN090766	Schleifer, Leman
LPN090735	Akhtar, Dipali	LPN090767	Little, Sandy Marie
LPN090736	Smith, Misti Leigh	LPN090768	Williams, Meredith

LPN090769	Dawsey-Orta, Makeana DeShawn	LPN090825	Martin, Jacob Bryant
LPN090770	Onamuti, Aisha Michelle	LPN090826	Moulton, Monica Kay
LPN090771	Frazier, Kayla Michelle	LPN090827	Rauls, Dominique Virginia
LPN090772	Watts, Tabatha Marie	LPN090828	Pounds, Larissa Ariana
LPN090773	Williams, Candace Renee	LPN090829	Patel, Dhruviben Jignesh
LPN090774	Escalera, Nicole Danielle	LPN090830	Manuel, Raphael R
LPN090775	Garrett, Kaitlyn Elizabeth	LPN090831	Chery, Natacha Natalie
LPN090776	Iroajanma, Idu Caroline	LPN090832	Ademi, Farije
LPN090777	Lockyear, Darrissa Jean Snyder	LPN090833	Hazel, Veronica
LPN090778	Terrell, Satchuell Tristian	LPN090834	Maccauley, Ethel Joana
LPN090779	Stimer, Teresa Ann	LPN090835	Gallman, April Dezirea
LPN090780	Hodge-Smith, Roslyn M	LPN090836	Frye, Jacqueline Moira
LPN090781	McClellan, Lola May Green	LPN090837	Baker, Deanna Marie
LPN090782	Martin, Hanna Elizabeth	LPN090838	Davidson, Kristen Ashley
LPN090783	Pacas, Catherine Joanne	LPN090839	Pringle, Shakirah Keyona
LPN090784	Douglas, Nashieka Neshema	LPN090840	Conley, Christian Briana
LPN090785	Williamson, Erika Ryan	LPN090841	Corbett, Khristian A
LPN090786	DeLong, Bryan Calvin	LPN090842	Glass, Kaley Jean
LPN090787	Brice, Mellie	LPN090843	Richardson, Chana Brown
LPN090788	Bivins, Anslee Kendall	LPN090844	Tucker, Deyonia
LPN090789	Bongkiyung, Emile Wiykeke	LPN090845	Wall, Joy Renee
LPN090790	Jones, Eddeta Jersay	LPN090846	Mullis, Tammy Mechell
LPN090791	Rich, Ashley Elaine	LPN090847	Adams, Dana Marie
LPN090792	Simpson, Tiffany Michelle	LPN090848	Allison, Dawn
LPN090793	Tyson, Danielle Helen	LPN090849	Colson, Jacqueline Neyvette
LPN090794	Wowk, Rachel Jane	LPN090850	Whitaker, Angel Lorene
LPN090795	Summerour, Justin Heath	LPN090851	Sheehy, Bonita Louise
LPN090796	Matthews, Melissa May	LPN090852	Payne, Michelle Tracy
LPN090797	Hazzard, Tanea Renee	LPN090853	Barbine, Tia Benae
LPN090798	Jackson, Deresia Monaquel	LPN090854	Holley, Lydia Jean
LPN090799	Baffield, Akilah Kai	LPN090855	Davis, Courtney Louise
LPN090800	Hightower, Stephanie Victoria	LPN090856	Ely, Michele Mabry
LPN090801	Jackson, Crystal Gail	LPN090857	Heslop, Kadian Celia
LPN090802	Johnson, Lanecia Antone'	LPN090858	MAINA, SERAH WAIRIMU
LPN090803	Matthews, Cemone Vanessa	LPN090859	Price, Franklin Z.
LPN090804	Larrieux, Rachelle	LPN090860	Jackson, Cyiara Marie
LPN090805	McClendon, Trivia Lashuna	LPN090861	McCormick, Delaney Brenna
LPN090806	Rogers, Christina Brooke	LPN090862	Theresias, Bonnie
LPN090807	Peryer, Shelby Linn	LPN090863	Pierce, Elizabeth Ann
LPN090808	Cole, Lauren Elizabeth	LPN090864	Thomas, Keely Michelle
LPN090809	Giordano, Jessica Ashley	LPN090865	Sosnowski, Tressa Marie
LPN090810	Kowalczyk, Nicole Ann	LPN090866	Doley, Teneka Irene
LPN090811	Caines-Coombs, Patricia Margaret	LPN090867	Fisher, Angela Marie
LPN090812	Rivera, Colette Davis	LPN090868	DeGaetani, Dorothy J
LPN090813	Bassette, Nerline	LPN090869	Adeniyi, Roseline O.
LPN090814	Dobson, Laura Lea	LPN090870	Beadles, Jemekya Leshay
LPN090815	Jefferson, Lawry Jan	LPN090871	Jordan, Jaleesa Shanee
LPN090816	Efemenga, Marie Esther	LPN090872	Chambers, Denise Darcell
LPN090817	Hale, Anthony Michael	LPN090873	Lashley, Sherry Lynn
LPN090818	Zachary, Carolena E	LPN090874	Blanchette, Ruth Elaine Chastagner
LPN090819	Hester, Shelly Ruth	LPN090875	O'Berry, Deanna Marie
LPN090820	Ramirez, Christopher Jonathan	LPN090876	Allen, Donna Faye
LPN090821	Ani, Kenekukwu Xavier	LPN090877	Pickett, Kay Lynn
LPN090822	Rogers, John Harry	LPN090878	Seneres, Souay Saysongkham
LPN090823	Morgan, Yanique R	LPN090879	Todman, Millicent A
LPN090824	ODOM, BRITTANY MARIE	LPN090880	Wilson, Helen Peabody

LPN090881	Hill, Angelia Celeste	RN170295	Stewart, Cassandra Renee Wilson
LPN090882	Antoine, Sheily Melissa	RN170673	Santee, Tara Michelle
LPN090883	Brooks, April Elizabeth	RN172048	Davila, Teresa Maria
LPN090884	Camara, Mariam	RN172573	Oates, Christi Karen
LPN090885	Allen, Elsie Nwosy	RN173616	Sarchett, Alyssa Dyann Bentley
LPN090886	Yeager, Jennifer Moore	RN174272	Owens, Greta Suzann Hart
LPN090887	Brown, Shernicka Senne'	RN175238	Khan, Hope A.
LPN090888	Martin, Anieka Tanae	RN175547	Smith, Fawn Barnard
LPN090889	Moseley, Yakini S.	RN175935	Cooper, N'Kema Jernee
LPN090890	Myers, Brenda Joyce	RN176410	Stone, Sarah Elizabeth
LPN090891	Davidson, Tara Latrice	RN176449	Williams, Daron
LPN090892	Lighten, Geardean Higgs	RN177101	Bowling, Lyndi Nicole
LPN090893	Gangi, James Patrick	RN177320	Narh, Larriette Abaida
LPN090894	Elie, Simbalitre Cherryanne	RN177598	Thomas, Tanya Anita
LPN090895	Sneed, Yvette Michelle	RN177603	Dorsey, Rachel Gatian
LPN090896	Wernke, Mindi Lee	RN178925	Dimaculangan, Althea Charity
LPN090897	Spence, Sarah S.	RN181160	Griffin, Sashana Tiambi
LPN090898	Watkins, Claudia Marie	RN181187	Lamar, Exie Latrice
LPN090899	Whitfield, Stacey Franklin	RN182422	Brown, Michelle Nicola
LPN090900	Wroten, Meggin J.	RN182996	Rucker, Sylvia Tawanda
RN066536	Mack, Vicky McDowell	RN183145	Murff, Char Monique
RN068624	Pines, Eula	RN183530	Martin, Kimberly Webb
RN084262	Marshall, Patricia Jo Brennan	RN184263	Estes, Matthew Lee
RN098015	Pruner, Lisa Denise Murphy	RN186333	Pflugrad, Aimee Bryanne
RN101454	Butler, Deborah Lynn Duclos	RN187229	Williams, Amanda Jill
RN105788	Knowles, Susan Leanne Nolan	RN188872	Nwaise, Ngozi Doreen Monyei
RN110056	Brown, Dannee Louise	RN189849	Francois, Lise-Stephana
RN118647	Heydt, Bonita Louise	RN189936	Stephens, Bryan C
RN118797	Chitwood, Connie Tomette Jordan	RN190070	Passmore, Jay Anthony
RN123276	Garrett, Kerry Gene	RN190775	Gantt, Paige D
RN125187	Lamb, Sheryl Leshannah	RN190974	Walker, Carrie Elizabeth
RN128300	Smith, Ida Lupino	RN191332	Henderson, Corie Ann
RN129513	Barrett, Dena Christine Blevins	RN191509	Gay, Anna Burnett
RN129909	Stout, Stacey Amaral	RN191716	Coggin, Amy Leigh
RN130524	Griffey, Cynthia Diane	RN191756	O'Neil, Erica A
RN134304	Watkins, Berdell Elizabeth	RN191763	Hunt, Kristian Calhoun
RN145625	Tompkins, Julie Michelle	RN194197	Standridge, Stephanie C
RN145867	Hood, Marian May-Mi Jackson	RN194250	Chung, Boram Esther
RN147350	Cox, Dawn Elizabeth	RN195019	Powers, Erin Ruth
RN149740	Seymour, Yetrevias Marilisa	RN195468	Navalah, Chantal
RN153846	Gilliland, Mary Lisa	RN196115	Provau, Daphne Michelle
RN154337	Porter, Brandi Jackson	RN197149	Wheelus, Jennifer Lynn
RN159903	Roufs, Amanda P	RN197961	Rebuck, Lorraine M
RN161105	Johnson, Denetra Lynetta	RN198383	Kuchta, Kelly Marie
RN161714	Ogbonna, Francisca E.	RN198999	Khamvongsa, Khanchana
RN162164	Dingler, Kacie Rose	RN200676	Taty, Leondria Achaicus
RN162458	Dyal, Laura Marie Lowman	RN201624	Taylor, Dwayne Keith
RN163685	Delva, Rose Michelle	RN201735	Kerko, Rebecca Greene
RN164749	Sangiorge, Michael S	RN202073	Haire, Terriest Vonceile
RN164923	Greene, Ashley Lynn Crosby	RN202254	Baker, Benjamin Jermaine
RN165582	Whitlow, Melissa Marie	RN203869	Blackstock, Terrilyn Lamb
RN165930	Hamilton, Tiffany Miller	RN204030	Baily, Julianne Michelle Stoll
RN166360	Lipscomb, Cheri Leblanc	RN204065	Fowler, Amanda Brittany
RN166850	Marshall, Emily L	RN204093	Zimmer, Ross Zachary
RN167551	Etienne, Josette	RN204378	Williams, Ashley Elizabeth
RN168147	Craddock, Alicia Marie Roberts	RN204485	Smith, Tiffany Bentley

RN204643	Lascuna, Paul Jon	RN244960	Theodor, Eunice
RN204864	Orabueze, Ngozi Nkechi Ezeobika	RN245611	Pisano, April Constance
RN205005	Berry, Crystal Lorraine	RN245931	Eld, Linda Kay
RN205396	Powers, Kathryn Leigh	RN245938	Bolle, Lauren Elizabeth
RN205683	Hoffman, Jocelyn J	RN246357	Thomas, Kimonetia Latisha Granberry
RN206834	Harris, Daniel Tyler	RN246371	Mullis, Rachael Erin
RN207513	Hula, Holly Ann	RN246413	Atwell, Mandy
RN209232	Lynch, Alexis Latrice	RN246414	Kang, Sangwook NMI
RN209651	Selby, Melissa Irby	RN246415	Ditlevson, Chad Edward
RN209655	Stines, Jenifer Lamp'l	RN246416	Harris, Kendra Natelie
RN209699	Rylee, Kayla D.	RN246417	Biggs, Victoria Catherine
RN210247	Ray, Alexandra Krysten	RN246418	Watkins, Mindy Louise
RN210470	Liang, Katherine Fennell	RN246419	Bachman, Ashley Brooke
RN210698	Pasmore, Tewana Isola	RN246420	Bennett, Nadege A
RN210805	Smith, Natacha	RN246421	Elijah, Tywann Philander
RN210966	Uko, Chigozie Grace	RN246422	Finch, Sara Teuchert
RN211179	Haynie, Logan Mathew	RN246423	Hottel, Britten Ellen
RN213386	Patel, Dipa Ketan	RN246424	Harrell, Kristy Brooks
RN215446	Gilley, Ashley Heather	RN246425	Jah, Sohna
RN216424	Addis, Hannah Joy	RN246426	Lewis, Catina Lavone
RN216529	Virani, Anita	RN246427	Lightsey, Diana Michelle Ryan
RN216537	Waggoner, Kristina Nicole	RN246428	Johnson, Kimberly Diane
RN217693	Reynolds, Elysia Beatrice	RN246429	McAllister, Brittany Nicole
RN218169	Patel, Roshni Shardul	RN246430	Medina, Elizabeth
RN218479	Berkenkamp, Lisa Meeder	RN246431	Morgan, Savannah Jane
RN218849	Asemota, Latifat Bolajoko	RN246432	Rogers, Wesley Thomas
RN218942	Horton, Julie Dee	RN246433	Smith, LaShay
RN219058	Bohn, Amanda Jane	RN246434	Upshaw Jenkins, Jessie Yvonne
RN220801	Rivas, Marie Scarlett Mupada	RN246435	Weatherford, Kimberley Dawn Beasley
RN221793	Bandoquillo, Kirby Jagdon	RN246436	Alford, Melinda Jean
RN222256	Raines, Shayla Alecia	RN246437	Goines, Nieva Fontae
RN222596	Cox, Jennifer Annette	RN246438	Hall, Valerie W
RN222731	Tollett, Panda Mechelle	RN246439	Lewis, Ruel Brison
RN223055	Bern, Julia Anne	RN246440	Lin, Yueh-Han Eric
RN224238	North, Lisa Kazume	RN246441	Holt, Kellie Sherree'
RN231991	Beaumont, Nicholas Joseph, Jr	RN246442	Nielsen, Audrey Barton
RN232161	Benton, Charlotte Jean	RN246443	Hallman, Priscilla
RN232298	Ardalan, Nastasia Shahrzad	RN246444	Nix, Amy Lohse
RN232904	Black, Gidget D	RN246445	Marcello, Jodi L
RN234034	Smith, Holly Christine	RN246446	Zigui, Marie-Therese Afi
RN234158	Price, Mary Macon Spotswood	RN246447	Stevens, Lori Ann
RN234199	Mancini, Mackenzie Tyler	RN246448	Carter, Pamela Stanley
RN234224	Singer, Toni Antoinette	RN246449	George, Darlene Marie
RN234314	Heath, Ashleigh Elise	RN246450	Hardman, David Buddy
RN234315	Hitron, Emilie Elise	RN246451	FANT, JAMES ALLEN
RN234321	Rowland, Anne Marie	RN246452	Wimmer, Paige Hedrick
RN234610	Donovan, Michelle Riley	RN246453	Vokey, Elizabeth Mary
RN235312	Thornbury, Sarah Katharine Winter	RN246454	Turina Johnson, Tracy
RN238038	Gilkey, Corinna Marie	RN246455	Pearson, Marcel Antonette
RN240409	Meyer, Carolyn T	RN246456	McCracken, Jamie Rae
RN241323	Kozel, Julie Shaun	RN246457	Coleman, Evelyn Witherspoon
RN242663	Sims, Tiearea T	RN246458	Straughan, Joan Sutton
RN243802	Newby, Joshua Scott	RN246459	Chamberlain, Natalie Paige
RN244263	Montilla, Carol A	RN246460	Brewer, Amanda Elise
RN244318	Kallon, Seibattu	RN246461	Hairston, Jeanette Cherie
RN244330	Blackwell, Christian Constance	RN246462	Jenkins, Erika Ra'Neice

RN246463 Kaspar, Margaret Anna
RN246464 King, Joan Lakisha
RN246465 Prince, Melissa Carol
RN246466 Cox, Dorothy Jeanne
RN246467 Afriyie, Antoinette
RN246468 Bell, Bonnie Lou Ann
RN246469 Blackmon, Chinyere Natak
RN246470 Bowen, Michael Aubrey
RN246471 Chandler, Kimberly Diane
RN246472 Dax, Lauren N
RN246473 Ernst, Katie Lynn
RN246474 Boerger, Samantha Lee
RN246475 Bourhim, Mohamed Salem
RN246476 Le, Tran Vu
RN246477 Schneider, Cynthia Chong
RN246478 Lippincott, Melisha Lynn
RN246479 Graves, Barbara Ann
RN246480 McRae, Keshia Lavonne
RN246481 Moore, Brittany Nicole
RN246482 Oyewole, Moji B.
RN246483 Ruth, James Martin
RN246484 Strickland, Ethan Lawrence
RN246485 Taylor, Amy Elizabeth
RN246486 Moloka, Sarah Naombe
RN246487 Dunn, Holly
RN246488 Wilkie, Pamela Lauren
RN246489 Zumbrunn, Lisa Louise
RN246490 Lepley, Sara Ann
RN246491 Kaprich, Suzanne Marie Kuehl
RN246492 Auguste, Marie-Dany Chantal
RN246493 Davis, Sheila Ann Parham
RN246493 Davis, Sheila Ann Parham
RN246494 Kinuthia, Beth Wanjiru
RN246495 McIntyre, Kisha Rochelle
RN246496 Lux, Lauren Elizabeth
RN246497 Deshields, Sheena Rene
RN246498 Donaldson, Stephanie Annice
RN246499 Kinloch, Briana Sherice
RN246500 Erickson, Craig L
RN246501 Gilbert, Kayli Kapple
RN246502 Burton, Tamara Dawn
RN246503 Golphin, Lonnika Towan
RN246504 Elmore, Melinda Mercedes
RN246505 Price, Tasha Denise
RN246506 Nash, Donna Sue
RN246507 Flowers, Heather Walker
RN246508 Payton, Blanche Helena
RN246509 Campbell, Tammy Angela Smith
RN246510 Davis, Stephanie Dawn
RN246511 Jones, Latoya Letitia
RN246512 Manno, Wendy
RN246513 Light, Mary Ann
RN246513 Light, Mary Ann
RN246514 James, Tiffany Lashea
RN246515 Swift, Kimberly Michelle
RN246516 Mitchell, Maxine

RN246517 Rea, Deborah Joy
RN246518 Desrosiers, Sabrina Marie
RN246519 Rutland, Ashleigh Marie
RN246520 Orr, Dianna Marie
RN246521 Nearhoof, Kimberly Frederick
RN246522 Riley, Tomeka Cynara
RN246523 Bennett, Kristina Nicole
RN246524 Abeje, Addisalem Taye
RN246525 Richter, Sharon Jo
RN246526 Wendel, Daniel John
RN246527 Anderson, Shemika Renee
RN246528 Cruz-Garcia, Cesar Aaron
RN246529 McLaurin, Schan Breaua Gibson
RN246530 Crosby, Joy Roesler
RN246531 Davies, Jessica Elaine
RN246532 Edwards, Marcia Adelle
RN246533 Ngassam, Marie Louise
RN246534 Vorce, Courtney
RN246535 Hester, Haniyyah S
RN246536 Sater, Rebecca Anne Griffith
RN246537 Elliott, Justin Dwayne
RN246538 Worsley, Jessica Megan
RN246539 Gray, Angela Kay
RN246540 Dixon, Cynthia Ann
RN246541 Jackson, Amanda Michelle
RN246542 Denham, Patricia Lynn
RN246543 Harrell, John Wesley
RN246544 Petka, Penny Gail
RN246545 Sheffield, Alyssa Autumn
RN246546 Pinkard, Ciara Chantel
RN246547 Dunn-Roberts, Diana Lee
RN246548 Flewellen, Caitlin R
RN246549 Gryzenia, Lucinda Marie
RN246550 Gray, Rebecca Michelle
RN246551 Chimafor, Loveline Lum Ndikum
RN246552 Biddle, Shawn Ryan
RN246553 Brown, Shelly Marie Kraiza
RN246554 Cobb, Tiffany Ann
RN246555 Walker, Stephanie Gayle
RN246556 Leacock-Ballish, C. Patricia
RN246557 Barry, Sheilagh
RN246558 Bynes, Shante Fayeann
RN246559 Bridwell, Amber Warren
RN246560 Agard-Heber, Lynnette Elizabeth
RN246561 Dozier, Melanie Grace
RN246562 Sevier, Meghan Margaret
RN246563 Causey, Jessica Kooymans
RN246564 David, Manoucheka Vierge
RN246565 Foreman, Kathleen Ann
RN246566 Foster, Rachel Ashley
RN246567 Paulk, Neishla Turkessa
RN246568 Kern, Eric Joseph
RN246569 Keel, Rebecca Ann
RN246570 Nazario Melendez, Janette
RN246571 Hampton, Anisha Tari
RN246572 Sampathkumar, Krithika Sri

RN246573 Saney, Abshir Hassan
RN246574 Weber, Amanda Lynn
RN246575 Stewart, Juli Ann
RN246576 Craft, Natalie Rayna
RN246577 Medina, Jessica Nicole
RN246578 Simmons, Bailie Ann
RN246579 Wall, Katherine McCrary
RN246580 Smith, Angela Denise
RN246581 Tharp, Whitney Gower
RN246582 White, Rebecca Lynne
RN246583 Ooka, Keith Alan P
RN246584 Pfeil, Sandra Marie
RN246585 Steinmetz, Scott Alan
RN246586 McLarin, Monique Nicole
RN246587 Dwyer, Tamra Jo
RN246588 Hagedorn, Meghan A.
RN246589 Coffey, Robin Elizabeth
RN246590 Brinkmann, Kendell Leann
RN246591 Bogdon, Carolyn Isabelle
RN246592 Peebles, Amy Cutchen
RN246593 Score, Gisela Johanna
RN246594 Austin, Patricia Glenn
RN246595 Beck, Kelli K
RN246596 Taylor, Rebecca Marguerite
RN246597 Todd, Kalli Marie
RN246598 Khadka, Chandrakala
RN246599 Cole, Olushola Nadine
RN246600 Causey, Ashley Suzanne
RN246601 Walton, Robin Danielle
RN246602 Minich, Joy Brunty
RN246603 Poe, Garry Neughton
RN246604 Collins, Mark
RN246605 Martin, Lisa Ann
RN246606 Markert, Preston Aubrey
RN246607 Manuel, Billy
RN246608 Judd, Melody Ann
RN246609 Atkins, Mary E
RN246610 Bouzigard, Lorris James
RN246611 Biondi, Paul Edmund
RN246612 Fulgham, Arnold Cecil
RN246613 Johnson, Nancy Ellen
RN246614 Johnsey, Susan Regina
RN246615 Kissel, Patricia Kathleen
RN246616 Langevin, Zachary Joseph
RN246617 Herboldsheimer, Amy Jean
RN246618 Sharp, Allyson Katheryn
RN246619 Minniear, Carrie Ann
RN246620 Volans, Cayla Theresa
RN246621 Montgomery, Nicole Aleksandra
RN246622 Young, Nakia Alexis
RN246623 Zezula, Tiffany Brooke
RN246624 Morrison, Tondra Mae
RN246625 Dunnivant, Michael Edward
RN246626 Fitzpatrick, Lauren Michelle Marchman
RN246627 Carter, Brooke Nicole
RN246628 Hardville, Keosha Monique

RN246629 Harrison, Angela Chavel
RN246630 Hawkins, Stephaine Rene
RN246631 Wagner, Brandi Marie
RN246632 Jones, Orlando Lamar
RN246633 Bakken, Alan Gary
RN246634 Angevine, Margaret Katharine
RN246634 Angevine, Margaret Katharine
RN246635 Basile, Christine Babin
RN246636 Corey, Nikeeta Raviette
RN246637 Cetoute, Emmanuela
RN246638 Lanier, Sabrina Monique
RN246639 Erickson, Asmeeta Limaye
RN246640 Bagley, Ervin Lee
RN246641 Davis, Darryl Jerome
RN246642 Kennedy, Alisha Hilton
RN246643 Sanders, Camellia Taisha
RN246644 Subida, Ana Maria Aquino
RN246645 McKerr, Megan Burroughs
RN246646 Kiefer, Katherine Leigh
RN246647 Walker, Brandi Michelle
RN246648 Lawrence, Amira Yasmine
RN246649 Woodham, Chanetta LaShan
RN246650 Donathan, Eric Thomas
RN246651 Acker, Jane Anne
RN246652 Gormley, Devin K.
RN246653 Wojciechowski, Amy Rose
RN246654 Tucker, Cynthia
RN246655 Brown, Donna Rae
RN246656 Kelly, Rochelle Nuqui
RN246657 Kanja, Peninah
RN246658 Jacobson, Jo Ellen
RN246659 Jones, Amy Kathleen
RN246660 Dwyer, Yvonne
RN246661 Leidinger, Joy Pamela
RN246662 Murray, Christina Dawn
RN246663 Locke, Cassandra Yese±ia
RN246664 Murphy, Barbara Ellen
RN246665 Perez, Sarah
RN246666 Holley, Jillona Faye
RN246667 Bell, Tracie R
RN246668 Aurich, Jessica Lee
RN246669 Cutting, Nancy Jeanne
RN246670 Anderson, Sue Ann
RN246671 Borzansky, Olivia Marie
RN246672 Colbert, Coral L.
RN246673 Peeples, Bernetta Denise
RN246674 OConnor, Kelly Ann
RN246675 Statz, Jean Marie
RN246676 Mance, Anne Marie
RN246677 Figler, Corrina Marie
RN246678 Bugg, Kala Jo
RN246679 Andres, Jessica Lauren
RN246680 Beall, Barney Mitchell, Jr.
RN246681 Boyd, Rochelle Shaquavia
RN246682 Buchanan, Dana Michelle
RN246683 DeFabio, Molly Gail Smith

RN246684 Faircloth, Mallory Alexis
RN246685 Nguyen, Trang Khanh
RN246686 Rodrigues, Chasity Maria Nohealani
RN246687 Addo, Matilda Adaku
RN246688 Carden, Hannah Cowart
RN246689 Cole, Buffie
RN246690 Hartsfield, Calla Ann
RN246691 Simaze, Loveline Kuko
RN246692 Maystrenko, Yulia NMN
RN246693 Torres, Veronica Patricia
RN246694 Bazemore, Shakii Shavon
RN246695 Davis, Victoria Marie, Wilson
RN246696 Edwards, Alicia Camille
RN246697 Felton, DeLaSha Monique
RN246698 Moore, Tracy Rogers
RN246699 Speece, Jenna Katelyn
RN246700 Walker, Amanda Blaire
RN246701 Kinsey, Stefanie Lennon
RN246702 Scarborough, Kristina Leigh Clarke
RN246703 Bella, Gerald P.
RN246704 Brown, Peggy Claudene
RN246705 Conyea, Alison Marie
RN246706 Matol, Lauren Allaire
RN246707 Lidard, Kathryn Ann
RN246708 Sullivan, John Daniel
RN246709 Schaefer, Falin Joanne
RN246710 Dixon, Alisha Nakia
RN246711 Thomas, Denise Marie
RN246712 Wilson, Jessica Marie
RN246713 Woody, Denise Michelle
RN246714 Zhu, Lina
RN246715 Ogbogu, Chiamaka Amelia
RN246716 Gates, Amanda Leighanne
RN246717 Copley, Donna K
RN246718 Hicks, Sabria Michelle
RN246719 McKinley, Brian Wayne
RN246720 Huffman, Penni Rene
RN246721 Saunders, William David, III
RN246722 Bowman, Sara Jane
RN246723 Martin, Jennifer Ann
RN246724 Matlock, Danielle D.
RN246725 Smith, LaQuanta Chanik
RN246726 Grossmueller, Amber Jean
RN246727 Wilson, Erin Elizabeth
RN246728 Hoglen, Brenda Lee
RN246729 Hill, Celia Ann
RN246730 Yount, Ashley Dianna
RN246731 Diallo, Aissatou
RN246732 Hines, Sonya
RN246733 Kennedy, Shiloh Starr
RN246734 Greene, Patrick Kyle
RN246735 Castro, Carmella
RN246736 Bethi, Thanmayie
RN246737 Tromblay, Kathryn Ann Flucus
RN246738 Robinson, Anecia Melita
RN246739 Regan, Rotrease

RN246740 Stutz, Susan Elizabeth
RN246741 Fournier, Erika Bre
RN246742 Pagan, Elizabeth Owusu
RN246743 Peareara-Eaves, Joann
RN246744 Vallo, Megan Ashley
RN246745 Phillips, Erin Freine
RN246746 Rowan, Staci Marie
RN246747 Nichols, Autumn Marie
RN246748 Tetteh, Vida
RN246749 Mersereau, Anna Catherine
RN246750 Baccay, Genevieve Suyu
RN246751 Dyer, Maryssa Louise
RN246752 Ramey, Jennifer Lynnette
RN246753 Wells, Weslee Elizabeth
RN246754 Priori, Rachel
RN246755 Copeland, Christina Eitmann
RN246756 Burgess, Roberta S
RN246757 Noles, Chistopher Codi
RN246758 Beggs, Maurey Arline
RN246759 Boyd, Sherryl Lynne
RN246760 Cooper, Deborah Cox
RN246761 Dixon, Marcia
RN246762 Fawole, Daniel Oluware Milekun
RN246763 McCoy, Sabrina Latrice
RN246764 Rahmings, Alexia Denise
RN246765 Shanker, Muthumeenakshi NMN
RN246766 Vardman, Kristen Nicole
RN246767 Whipple, Kenyotter Takesha
RN246768 Mease, Honor Adair
RN246769 Tyson, Jennifer Marie
RN246771 Noles, John Keith
RN246772 Francois, Anne Marie
RN246773 Hlavin, Cheri L
RN246774 Graefnitz, Joanne Ellen
RN246775 Richardson, Lloyd Cutler
RN246776 Dolan, Kimberlee Michelle
RN246777 Huggins, Velma Lorine
RN246778 Eidson, Daniel Mark
RN246779 Moore, Kathryn Pointer
RN246780 Ajayi, Eytayo Michael
RN246781 Kanu, Kadiatu
RN246782 Popatiya, Amisha A
RN246783 Managbanag, Norma Lee
RN246784 RUFFIN, JANE IFEOMA
RN246785 Addison, Chinna Marie
RN246786 Johnson, Brandi Anne
RN246787 Mize, Carolyn Lane
RN246788 Cesar, Christine Marie
RN246789 Oliphant, Chirl Evon
RN246790 Story, Devin Lynn
RN246791 Parent-Nicolas, Marise Manelle
RN246792 Thompson, Brianna Dawn
RN246793 Pickeral, Marsella Sharlone
RN246794 Nguyen, Loi Huu
RN246795 Koster, Hilary Ann
RN246796 Lane, Corinne Allison Edens

RN246797	McGowan, Valerie Jean	RN246853	Babb, Crystal Mandy
RN246798	Mock, Linda DeAnn	RN246854	Jennings, Mona Rae
RN246799	Milton, Kathleen Bindas	RN246855	Lima, Mariana Martinez
RN246800	Nickleson, Brenna Antoinette	RN246856	Sawyer, Susette Marie
RN246801	Ambele, Charlotte Lum	RN246857	Montequin, Brian Robert
RN246802	Collins, Shanta Mitchell	RN246858	Stevens, Jonelle LeAnne
RN246803	Ashton, Jessica Lynn	RN246859	Still, Melinda Gayle
RN246804	Hiott, Barbara Joyce	RN246860	Porter, Taneka Lavette
RN246805	Anagho, Nicholine Ngum	RN246861	Tate, Jerrica Elaine
RN246806	Phillips, Jonathan Dwayne	RN246862	Chambless, Jessica Lynn
RN246807	Northup, Lisa C.	RN246863	Wieleba, Daniel Edward
RN246808	Hardy, Dawn Marie	RN246864	Willard, Catherine Ann
RN246809	Hutchinson, Krystal Nicole	RN246865	Burns, Zachery Lee
RN246810	Crews, Janice Marie	RN246866	Burgess, Bryant Lamar
RN246811	Chang, Lystra Carrone	RN246867	Northrop, Juliet
RN246812	Boyd, Laketa Shirele	RN246868	Huskins, Jennifer Ann
RN246813	Abel, Gloria Mae	RN246869	O'Fallon, Patricia Taggart
RN246814	Nkemka, Zinna Dee Dee	RN246870	Walker, Elizabeth Teresa
RN246815	Babson, Amanda Leigh	RN246871	Walker, Whitney Grace
RN246816	Muhammad, Camille	RN246872	Ragin, Lastoshia Monique
RN246817	Duncan, Dana Renee	RN246873	Sillence, Catherine Marie
RN246818	Clark, Gary Wayne, Jr.	RN246874	Grenald, Valerie Renee
RN246819	Courtois, Carlina G	RN246875	Daley, Tanisha C
RN246820	Phillips, Lauren Ansley	RN246876	Alexander, Marcia Dean
RN246821	Smith, Tonya Marguerite	RN246877	Hawkins, John Kenneth
RN246822	Smith, Tina Louise	RN246878	Salak, Vicky Lee
RN246823	Ridgel, Sandra Vanessa	RN246879	Stevenson, Shantell DÃ©shaunn
RN246824	Nepal, Suman	RN246880	McCoy, Kasey Celeste
RN246825	Palmer, Tara Nicole	RN246881	Walker, Letitia M
RN246826	Pardue, Alla Alexandria	RN246882	Hotchkiss, Hayley Rousseau
RN246827	Moody, Whitney Jo	RN246883	Hand, Karen Lee
RN246828	Hailmann, Joan Wenglarz	RN246884	Jackson, Tracie Renee
RN246829	Nieves, Elsa Iris	RN246885	Catalogna, Patricia Anne
RN246830	Metz, Dawn Therese	RN246886	Abebe, Rekek Mulugeta
RN246831	Corona, Lauren Maley	RN246887	Dikeman, Kristen
RN246832	O'Neal, Chari Elizabeth	RN246888	Adams, Jo Ellen Riffey
RN246833	Adoni, Bethany Lynn	RN246889	Meadows, Katherine Frazier
RN246834	Baldwin, Krystle Simone	RN246890	Bryant, Avis Regina
RN246835	Rider-Prestridge, Rebacca Elizabeth	RN246891	McKenzie, Valerie K
RN246836	Harrell, Nicholas J.	RN246892	Nagy, Jennifer Lynn
RN246837	Earley, Amy Ganci	RN246893	Hodges, Jessica Loraine
RN246838	Poliquin, Cheryl Linda	RN246894	Stout, Kristina Marie
RN246839	Rasmussen, Laura Diane	RN246895	Atkinson, Ashley Elise
RN246840	Lewis, Kaylan Marie	RN246896	Griffiths, Rita Beula
RN246841	Fields, Devon Kay	RN246897	Bailey, Diana Lynn
RN246842	Robinson, Amanda leigh	RN246898	Coleman-Tekle, Cynthia
RN246843	Asibey, Eunice Kyerematen	RN246899	Tate, Lisa Ann
RN246844	Holland, Rebecca Lynn	RN246900	Brown, Ryan Steven
RN246845	Bauer, Lori Ann	RN246901	Cunningham, Kristina Renee
RN246846	Liner, Brittney Leigh	RN246902	Eikel, Michael Manley
RN246847	Fitt, Nycole Lynn	RN246903	Mayfield, Deanna Ashley
RN246848	Franklin, Warren Palmer	RN246904	Almand, Michael Keith
RN246849	Gaines, Melissa Michelle	RN246905	Emenike, Ebele Cordelia
RN246850	Hubbard, Samuel William, Jr	RN246906	Giangrande, Jessica Brooke
RN246851	Scott, Megan Elizabeth	RN246907	Gunnells, Jessica Lynn
RN246852	Dixon, Habibah A	RN246908	Hall, Rebecca Anne

RN246909	Herring, Katie Amelia	RN246966	Klein, Lisa May
RN246911	Kuglin, Scott Isaac	RN246967	Kennedy, Robin Ellen
RN246912	MOCANU, IRINA NMN	RN246968	Barth, Bethanie L.
RN246913	Muleta, Nebiyu Demissie	RN246969	Hayes, Rebecca Rene
RN246914	Morris, Margaret Angela	RN246970	Thomas, Andrew
RN246915	Meinecke, Becky Lynn	RN246971	Holden, Emily Seanne
RN246916	Soto, Tanja Christa	RN246972	Reyes, Karen Lee
RN246917	Watkins, Cathleen Coleman	RN246973	Nash, Elizabeth Nichole
RN246918	Moss, Janet Renee Hayes	RN246974	Warren, Bushra Sarah
RN246919	Smith, Pamela Marietta	RN246975	Becher, Daina Jodi
RN246920	Carr, Sarah Ann	RN246976	Green, Richard Allen
RN246921	Tucker, Angela Moore	RN246977	Lett, Destiny Rose
RN246922	Larsen, Jennifer Lynne Tull	RN246978	Robinson, Sydney Allen
RN246923	Wilson, Lisa Michelle	RN246979	Ledesma, Maria Antonia Ailya Sian
RN246924	Casey, Genevieve Ellice	RN246980	Steely, Kelly Alexis
RN246925	Schmitz, Rosanne K	RN246981	Shrader, Shanda
RN246926	Beal, Jenna Laine	RN246982	Thompson, Nancy Carol
RN246927	Jackson, Lisa Elaine	RN246983	Christian, Anita S.
RN246928	Smith, Horace Devon	RN246984	Holmes, Sarah K
RN246929	Davis, Mandy Merleen	RN246985	Sow, Selam Anta
RN246930	Ehrlich, Lindsay Faye	RN246986	White, Caroline Patricia
RN246931	Davis, Gail Nanetta	RN246987	Reid, Julie Anne
RN246932	Garmong, Cortny Elizabeth	RN246988	Henry, Cheryl L
RN246933	Gentry, Connie Renee Crowder	RN246989	Owen, Regina N Wolfe
RN246934	Taylor, Kevin Scott	RN246990	York, Candy Marie McNutt
RN246935	Edmonds, Vickie Lynn	RN246991	Shastel, Michael
RN246936	Pegus, Crystal	RN246992	Thornton, Mavis
RN246937	Peyton, Mary Ellen	RN246993	Prouty, Terrie Louise
RN246938	Silverthorn, Laura	RN246994	Richard, Bridget Ann
RN246939	Hall, Michael Allen	RN246995	Stallcop, Erica Ann
RN246940	Clarkson, Melanie Ann	RN246996	Smith, Deborah Benita
RN246941	Williams, Cheryl O Ransom	RN246997	Bradford, Leslie A
RN246942	Jones, Rebecca Kay Snipes	RN246998	Manning, Yashate Kinkia
RN246943	Jones, Stephanie Margaret	RN246999	Griffeth, Oliver, Jr
RN246944	Ditty, Clay Derek	RN247000	Kalinowski, Jessica Lynn
RN246945	Davis, Sheri L	RN247001	Tariq, Shazia Saeed
RN246946	Easter, Kierra Ann	RN247002	Mathews, Bryonna Shaunta
RN246947	Foster, Cheryl Fletcher	RN247003	Went, Chelsea Kristine
RN246948	Francis-Freckleton, Nicole Kentisha	RN247004	Lenoir, Robin Lynn
RN246949	Giovannone, Andreina Esposito	RN247005	Hunt, Lauren A
RN246950	Haseeb, Afrah Munir	RN247006	Letourneau, Krista Marie
RN246951	Hedger, Anne Elizabeth	RN247007	Barrow, Sharon Melissa Evans
RN246952	Scicere, Stephanie Ann	RN247008	Gayle, Edricka Natasha
RN246953	Dawson, Robin L.	RN247009	Booth, Pamela
RN246954	Vanderberry, Matthew Ryan	RN247010	Slade, Shavon
RN246955	White, Michelle Martie	RN247011	Iselin, Marcia May
RN246956	Diaz, Caitlan A	RN247012	Kunjappy, Allison Michelle
RN246957	Wilkins, Jennie L	RN247013	Gao, Rufen
RN246958	Thibodeaux, Helenisa Coutinho	RN247014	Morrison, Asia Marquitta
RN246959	Jenkins, LaShaundra Pertrice	RN247015	Leary, Brenda Lynn
RN246960	Jones, Tamicka Shonta	RN247016	Jones, Allison Margaret
RN246961	Kinsey, Joseph William	RN247017	Fitzgerald, Shannon Adele
RN246962	Lowery, Ronald Derrick	RN247018	Friera, Morella Belle
RN246963	Wong, Brittany Lauren	RN247019	Green, Lori Lynn
RN246964	Mikheyev, Moisey	RN247020	Motherwell, Deidra Culbreth
RN246965	Miller, Kristen Marie	RN247021	Harder, Deanna Loretta

RN247022 Hendrix, Rebecca Alice
 RN247023 Brown, Leanne Lien
 RN247024 Bozeman, JosÃ© Denine
 RN247025 Bowen, Amy Leann
 RN247026 Adenugba, Oluyemisi Olubukola
 RN247027 Bransford, Brittany Janeil
 RN247028 Leuch, Hayley Anne
 RN247029 Debruce, Shanel Lynnice
 RN247030 Diamond, Jennifer Anne
 RN247031 Harris, Stephanie Marie
 RN247032 NKWENTI, EDWIN-ELVIS AGHANEFOR
 RN247033 Bassong, Martin Luther
 RN247034 Ledford, Megan Ashley
 RN247035 Dalis, Mary Elizabeth
 RN247036 Dedeia, Amy F.
 RN247037 Faldet, Jody Lynn
 RN247038 Foster, Calvin Lewis
 RN247039 Fountas, Kathryn Grace
 RN247040 Gross, Angela Jane
 RN247041 Hamann, Brianne Rachell
 RN247042 Harris, TaVares LaRon
 RN247043 Hiemenz, Hillary Nicole
 RN247044 Masden, Dana Kaye
 RN247045 McGee, Meredith Kathleen
 RN247046 Moore, Shatori Natanya
 RN247047 Tomlinson, Thomas Artemas
 RN247048 Butler, Marquita Lashawn
 RN247049 Claridge, Tamara Medford
 RN247050 Anderson, Jennifer Yelena
 RN247051 Burton, Mary Louise
 RN247052 Hubbard, Sarah Irene
 RN247053 Lopez, Luz D
 RN247054 Hayes, Teri Shannan
 RN247055 Callender Laihing, Jacqueline Arlene
 RN247056 Knox, Germaine Yvette
 RN247057 Dunlap, Valerie Susan Smith
 RN247058 McCaffrey, Ruth G
 RN247059 Meche, April Lynn
 RN247060 Hogue, Daniel
 RN247061 Chappell, Theotis
 RN247062 Bryant, Jamaría Annette
 RN247063 Myers, Katherine Elizabeth
 RN247064 Fontanez Jones, Patricia Ann
 RN247065 Robinson, Davaion Levette
 RN247066 Green, Meagan Elsie
 RN247067 Hotaling, Rachel Lynn
 RN247068 Owen, Jean Margaret
 RN247069 Hurley, Leslie Inez
 RN247070 Marcrom, Lisa Ann
 RN247071 Manuel, Marissa A.
 RN247072 Buadaeng, Nipaporn Tina
 RN247073 Green, Nanci Monique
 RN247074 Davenport, Adam Jason
 RN247075 Winkelman, Laura Marie
 RN247076 Schneider, Margaret Eileen
 RN247077 Seyler, Karen Faison

RN247078 Qualls, Teresa Jane
 RN247079 Agbowu, Ruth U
 RN247080 Borgula, Dawn Colleen
 RN247081 Cunningham, Angela Aurora
 RN247082 Robards, Donita Ann
 RN247083 Nadji, Alyssa Taraneh
 RN247084 Duffy, Denise Lynn
 RN247085 Elliott, Amy Jo
 RN247086 Patel, Niraliben Mehulbhai
 RN247087 Daniel, Kimberly Kendrick
 RN247088 Cushing, Alyce Elizabeth
 RN247089 Curzon, Miryam Elizabeth
 RN247090 Davis, Jessica Nicole
 RN247091 Allen, Pamela Lashun
 RN247092 Nudo, Jobie Lynn
 RN247093 Anuonye, Lizette Chinenye
 RN247094 Bowen, James Augustus
 RN247095 Ruiz, Natasha Michon
 RN247096 Anderson, Katelin Marie
 RN247097 Schlabach, Annette Renee
 RN247098 Scott, Shalonda Shawnte
 RN247099 Duncan, Christopher Joseph
 RN247100 Rutledge, Jaami Lynn McClellan
 RN247101 Strife, Curtis William
 RN247102 McElfresh, Darla Christina
 RN247103 Thompson, Julia Elizabeth
 RN247104 Torres, Stephanie
 RN247105 Banks, Regenia-Jo Sherman
 RN247106 Trotman, Tommy Dewayne
 RN247107 Choe, Sungnye
 RN247108 Armstrong, Steven Todd
 RN247109 Twitchell, Robin Joy
 RN247110 Underwood, Steffanie Loveless
 RN247111 Vrchota, Jan Marie
 RN247112 Whitehouse, Teri Jean
 RN247113 Williams, Junea Anetta
 RN247114 Pearson, William John
 RN247115 Wilson, Laura Renae
 RN247116 Wimpee, Tracie Marlene Cansler
 RN247117 Woelfersheim, Lynn Ann
 RN247118 Zgoda, Marta Anna
 RN247119 Saari, Daryl Dvane
 RN247120 Scanzillo, Linda Elizabeth
 RN247121 Burden, Lauren Amanda
 RN247122 Adofo, Errythah
 RN247123 Crowe, Kristi Carr
 RN247124 Rector, Rachel Nicole
 RN247125 Pepper, Meagan Lea
 RN247126 Fairclough, Kimberly Tashana
 RN247127 Lewis, Joyce Lyn
 RN247128 Edwards, Nomai C
 RN247129 Wessels, Jill K.
 RN247130 Goss, Daniel Wayne
 RN247131 Norris, Lindsay Erin
 RN247132 Oberaigner, LeeAnn Denise
 RN247133 Marquez, Josephine

RN247134	Miller, Sarah Jean	RN247190	Roeder, Virginia Carol
RN247135	Moran, Madilyn Lauren	RN247191	Briody, Anna Louise
RN247136	Hughes, Shannon Rena	RN247192	Rivers, LaToria Rae
RN247137	Phillips, Lisa Diane	RN247193	Briggs, Betsy Grace
RN247138	Morris, Kimberly Kaye	RN247194	Jones, Michelle
RN247139	Chambers, Pamela L.	RN247195	Morgan, Thomas Edward, III
RN247140	Curry, Kimberly Ann	RN247196	McGowan, Katrina Monique
RN247141	Sullivan, Wendi D.	RN247197	Williams, Sharonda Nicole
RN247142	Asika, Esther	RN247198	Turner, Lillie Ruth
RN247143	Battle, Tanisha Renee	RN247199	Ebel, Trisha Ann
RN247144	Lamb, Mark Joseph	RN247200	Dabney, Yolanda Deanne
RN247145	Lewis, Andrea Suzanne	RN247201	Edgar, Micala Dawn Woltje
RN247146	Dodson, Glenna Claire	RN247202	Gillespie, Jessica Keely
RN247147	King, Tobias Marcell	RN247203	Hull, Amy Lynn
RN247148	Dyer, Allyson Teresa	RN247204	Casabar, Aura Lauigan
RN247149	Upton, Marlin Keith	RN247205	Robinson, Stephanie smith
RN247150	Ellington, Sylvia Rose	RN247206	Johnson, Priscilla Louise
RN247151	Keasley, Kachettral Chavonntae	RN247207	Lacombe, Brandy Mikkalina
RN247152	Lasnoski, Stephanie Agatha	RN247208	Dorn, Steven George
RN247153	McClure-Boone, Taffey Ann	RN247209	Korn, Amanda Fay Love
RN247154	Moses, Brandy Carissa	RN247210	Bueno, Beverly Lynne
RN247155	Gaudette, Erin Therese	RN247211	Rouser, Linda Lou
RN247156	Gilbert, Santa Rosalba	RN247212	Abernathy, Heather Colleen
RN247157	Rogers, Majestic Lee	RN247213	Debolt, Davina Hope
RN247158	Cochran, William Benjamin	RN247214	Davis, Sharon Elaine
RN247159	Pyatt, Amanda Marie	RN247215	Harris, Tumeka Lashawn
RN247160	King, Joyce Lynn Peterson	RN247216	Hester, Jekia Alexis
RN247161	Maduro, Se'Dara Ayhinde	RN247217	Norman, Deborah Paige Griswold
RN247162	Peyko, Wendy Ellen Skelton	RN247218	Nwankwo, Christabel Ngozi
RN247163	Miller, Nina S	RN247219	Hau, Imelda Meili
RN247164	Harry, Ryan Nathaniel	RN247220	Hammond, Margery Ann
RN247165	Robertson, Veronica Josic	RN247221	Connor, Stephanie
RN247166	Calhoun, Clarice Alicia	RN247222	Deering, Flecia Davette
RN247167	Campbell, John Walter	RN247223	Lucas, Heather Danielle
RN247168	Chukwu, Ijeoma E	RN247224	Davis, Sandra Faye
RN247169	Clink, Margaret Blanche	RN247225	Davis, Sharonda S.
RN247170	Sferro, Monica Katherine	RN247226	Evans, Marya Michele
RN247171	Smith, Chakara Sharmingle	RN247227	Stewart, Letitia Rachel
RN247172	Van Alstyne, Krista Louise	RN247228	Gavardinas, Tara Elizabeth
RN247173	Wheeler, Alison Kristen	RN247229	Gruenstein, Lauri Sue
RN247174	Wilson, Jemma	RN247230	Tatum, Jamelah Michelle
RN247175	Ratteray, Reglindis Rose	RN247231	Harrington, Maureen Alane
RN247176	Yeboah-Manson, Bertrand	RN247232	Higdon, Kimberly Dawn
RN247177	Clausing, Han Soon Meaghan	RN247233	Friend, Rebecca Lee
RN247178	Cofield, Sharon L.	RN247234	Good, Kaise Joanne
RN247179	Jackson, Naa Okailey Agnolia	RN247235	Morgan, Katherine Grace
RN247180	Pagan, Sandra Lixeida	RN247236	Elling, Suzanne Marie
RN247181	Patrick, Nika Dimitra	RN247237	Taylor, Melissa Rene
RN247182	Pollock, Angela Marie	RN247238	Browning, Tannisha Larica
RN247183	Quarles, Megan Marie	RN247239	Henion, Pamela Kay
RN247184	Rudolph, Jessica Marie	RN247240	Kelley, Beth Ellen
RN247185	Rodriguez, Corina Debbie	RN247241	Jonah, Janet Eileen
RN247186	Ross, Terri Lynn	RN247242	McFarland, Courtney Erin
RN247187	Nelson, Shannon Renee	RN247243	Moody, Sheila Latrell
RN247188	Cooper, Rebecca Hope	RN247244	Moore, Kerry Elizabeth
RN247189	Petrucci, Marilou Ann	RN247245	Twaits, Carol

RN247246	Peters, Chrystie Leigh	RN247302	Coleman, Nakoti Damarus
RN247247	Rosenbush, Trever William	RN247303	Scarola, Debbie Ann
RN247248	Nolan, Mary Anne Reed	RN247304	Sapp, Pamela Marie
RN247249	Pullen, Sara Joann	RN247305	Seeley, Yaniz Danielle
RN247250	Prell, Lisa Lynn	RN247306	Kintzing, Patricia Ann
RN247251	Brekke, Amy LeighAnn	RN247307	Blair, Elisabeth Mae
RN247252	Richins-Peters, Ayana Damali	RN247308	Warden, Nancy Kelly
RN247253	Ross, Nicole Renee	RN247309	Holland, Paris Janae
RN247254	Orr, Christina Nicole	RN247310	Eidson, Mark Ryan
RN247255	Pack, Sara Noelle	RN247311	Ferguson, George Michael
RN247256	Long, Melodee Jo	RN247312	Salcido, Enid
RN247257	Suon, Peyton Neath	RN247313	Maxfield, Jeri Sue
RN247258	Curry, Kayla Denise	RN247314	Wood, Dacia Leah
RN247259	Burton, Tonecesa Cornella	RN247315	Bickham, Melanie Jeanne
RN247260	Branom, Heather Shay	RN247316	Cornford, Megan Marie
RN247261	Sellars, Garon Ladon	RN247317	Akpan, Chinyere Gloria
RN247262	Morris, Cecile Veronica Cooke	RN247318	Shuman, Donald Trey
RN247263	Keeton, Dawn Marie Davis	RN247319	Singleton, Tara Lorraine
RN247264	Carr, Josie Tenere	RN247320	Mitchell, Danielle LeShay
RN247265	Schiller, Ashlee Diane	RN247321	Dudding, Michelle Lynn Thimmes
RN247266	Bowman, Rianne Marie	RN247322	Hairston, Jonlishia Dazire
RN247267	Proffitt, Kenda Marie	RN247323	Ivie, Kayla Renee
RN247268	Smith, Ashell Kenley	RN247324	Mosley, Lisa Torada
RN247269	Jallow, Kaddyjatou	RN247325	Novoa Cianelli, Eduardo
RN247270	Link, Christina Nicole	RN247326	Shelby, Patti Lynn
RN247271	Fecher, Courtney Ann	RN247327	Grady, Willie Gene, Jr
RN247272	Giovinazzi, Rachel Leigh	RN247328	Asante, Cynthia
RN247273	Tauscher, Tina Marie	RN247329	Gigliotti, William J.
RN247274	Hassan, Sefronia Fatima, II	RN247330	White, Jason Timothy
RN247275	MoQuin Hawkins, Lori J.	RN247331	Peters, Marday Laura
RN247276	Hensley, Jeri M	RN247332	Cromwell, Brooke Eden
RN247277	Donley, Amber Noel	RN247333	Carpenter, Lauren Marie
RN247278	Oxentine, Camilla Mishue	RN247334	Bailey, Candie May
RN247279	Mathew, Sumi	RN247335	Pitts, Teresa A.
RN247280	Newman, Leticia Edna	RN247336	Perry, Christine Lynn
RN247281	Natanauan, Joycelyn Bejasa	RN247337	Nichols, Christina Lauren
RN247282	Nieves, Rose Marie	RN247338	Bradley, Leanora Annette
RN247283	Provax, Kimberly Mewsette	RN247339	Ravindran, Prem Kumar
RN247284	Pesce, Bonnie Jean	RN247340	Bowles, Courtney Maurine
RN247285	Ables, Amanda Suzanne	RN247341	Nyarka Kra, Rachel Naomi
RN247286	Riley, Karen Louise	RN247342	Sylvestre, Linda Hilaire
RN247287	Roth, Kathleen Miele	RN247343	Gower, Elizabeth Gayle
RN247288	Bethel, Omolola Diana Olaronke	RN247344	Davis, Laura McClary
RN247289	Armstrong, Hailey Danielle	RN247345	Banks, Saprina Lewis
RN247290	Townley, Morgan Elizabeth	RN247346	Lledo, Louella Marisse
RN247291	Ogena, Efraema Denina	RN247347	Major, LaQuntus Kamari
RN247292	Harvey, Margaret Renee	RN247348	Clements, Miriam Victoria
RN247293	Fraser, Alfreda Maddox	RN247349	Patrick, Adjua DeBoise
RN247294	Rao, Antonia P	RN247350	Burkhart, Chelsea Scott
RN247295	Peterson, Meredith Sue	RN247351	Haun, Nicole Lynette
RN247296	Macapagal, Jzel Gutierrez	RN247352	Buenaseda, Ruth
RN247297	Kargbo, Isatu Aliya	RN247353	Abshere, Kathy Diane
RN247298	Macapagal, Rachel Gutierrez	RN247354	Blakeslee, Erin Somer
RN247299	Livous, Gala Rochell	RN247355	Bell, Kathy Cherie
RN247300	Brown, Paula Etunum	RN247356	Bell, Chanda Laurel
RN247301	Stufflebeam, Lucille Anne	RN247357	Christie, Caitlin Elizabeth

RN247358	Lynch, Brian Gregory	RN247413	Walsh, Kevin Joseph
RN247359	Coleman, Keyeona Camille	RN247414	Walton, Alicia LaShann
RN247360	Heise, Katherine Jo	RN247415	White, Justin Richard
RN247361	Hopkins, Ashley Nichole	RN247416	Williams, Christopher Devon
RN247362	Hollenberg, Jennifer Nicole	RN247417	Williams, Shirlene Stephanie
RN247363	Burns, Katrina Elizabeth	RN247418	Wint, Halford F.
RN247364	Laroche, Litha	RN247419	Nguyen, Mia Phi
RN247365	Johnson, Andrea Beth	RN247420	Schlesinger, MaryBeth Persichette
RN247365	Johnson, Andrea Beth	RN247421	Rafter-Lodics, Julie Lynn
RN247366	Legendre, Joann M Murray	RN247422	Haymond, Tara Tamiko
RN247367	Ryan, Klaudia Bilcakova	RN247423	Radcliff, Erica Jo'Nelle
RN247368	Cowan, Thomasina Jones	RN247424	Recksiek, Joseph Bradford
RN247369	Reid, Amanda J.	RN247425	Bergerud, Linda Marie
RN247370	Spicer, Daniesea Marshay-Beatrice	RN247426	Rodriguez, Luz Delia
RN247371	Rack, Mary White	RN247427	Chichester, Tina Marie
RN247372	Smith, Shirley Denise	RN247428	Tankersley, Susan Michelle
RN247373	Rohde, Traci Linnette	RN247429	Barbee, Danielle Charity
RN247374	Roberts, Hannah Marie Ehlen	RN247430	Bennett, Demita Jo
RN247375	Scales, Renita Louise	RN247431	Waskow, Marianna Frances
RN247376	Buckner, Rebecca Lynn	RN247432	Conrad, Virginia E.
RN247377	Freeman, Cordelia La'Triece	RN247433	Huggins, Heather Fitzgerald
RN247378	Miller, Crystal Rae	RN247434	Pierce, Teresa Ann
RN247379	Brun, Michelle Lyvia	RN247435	Dickard, Larry Hill
RN247380	Smoak Ellis, Haley Danielle	RN247436	Douglas, Denise Klein
RN247381	Stephens, Sara Danklef	RN247437	Dees, Cheryl Leigh
RN247382	Sugrue, Megan Ashley	RN247438	Erdelyi, Jennifer Lynn
RN247383	Udeani, Linda Chinyelugo	RN247439	Nugent, Darlene
RN247384	Woomer, Nancy	RN247440	Collins, Deborah Denise
RN247385	Hopkins, Meghan Astra	RN247441	Faby, Kristen Marie
RN247386	Swaim, Kelly Ann	RN247442	Keller, Meghan Molloy
RN247387	Palmer, Danielle Yvette	RN247443	Lester, Brandy Lashawn
RN247388	Cross, Unasuk Grace	RN247444	Lupinski, Martha A
RN247389	White, Jordan Ross	RN247445	Matthews, Clara Allida
RN247390	West, Sheila Marie	RN247446	Little, Morgan Kelsea
RN247391	Peterson, Julie Ann	RN247447	Ingram, Deanna Nell
RN247392	Buabeng-Ankoannah, Dorcas	RN247448	Smith, Karen Renita
RN247393	Chambers, Wykitta Jduan	RN247449	Kriner, Debra Jane
RN247394	Fields, Andrea Brooke	RN247450	McCreight, Linda Sue
RN247395	Valentini, Philip Carl	RN247451	Maxwell, Keriann Shannon
RN247396	Gross, Jennifer Keich	RN247452	Garsh, Nicole Anthi
RN247397	Jarrett, Bethany Danielle	RN247453	Leonard, Kelly Jo
RN247398	Carter, Sandra Marie	RN247454	McClinnahan, Ebonique Katress
RN247399	Nicholson, Joel Christopher	RN247455	Duvall, James Weston
RN247400	Dawson, Jenna Renee	RN247456	Eikerman, Louise I.
RN247401	Kelley, Jennina Ting	RN247457	Elmore, Thomas Darryl
RN247402	Sack, Myounghee	RN247458	Weller, Elayna Joy
RN247403	Frost, Karen June	RN247459	Ward, Brenda Kay Carter
RN247404	Gee, Nicole Spino	RN247460	Campbell, Sarah Duke
RN247405	Taylor, LaCysha Michelle	RN247461	Groneck, Kimberly Ellen
RN247406	Hicks, Jeanna Marie	RN247462	Kruckeberg, Melissa Mae
RN247407	Logan, LaTrice MonjÃ©	RN247463	Curole, Anthony John
RN247408	Anico, Nhu-Thao Thi	RN247464	Duru, Lilian Kelechi
RN247409	Sundberg, Stephanie Ann	RN247465	Bucknam, Judith Ann
RN247410	Hekker, Hayley Yvonne	RN247466	Broome, Amy Punecky
RN247411	Vann, Valencia Maria	RN247467	Westbrook-Scott, Pamela L.
RN247412	Wallace, Regina Renee	RN247468	Miralem, Istok

RN247469	Breakey, Barbara C	RN247514	Misico, Julie Dawn
RN247470	Ayoola, Folasade Omolara	RN247515	Mbadiwe, Nneka Maira
RN247471	Thal, Alice Esther	RN247516	Dunn-Evans, Sylvia Lottwell
RN247472	Stewart, Margaret Susan	RN247517	Barnes, Valerie Kay
RN247473	Armster, Jocelyn Patrice	RN247518	Smith, Joye Louise
RN247474	Byrd, Graham Ellen	RN247519	O'Brien, Jade Kristen
RN247475	Westmoreland, Meagan Leigh	RN247520	Edwards, Taquisha Dawn
RN247476	Ani, Francisca Ukamaka	RN247521	Gibert, Lisa Rodgers
RN247477	Solis, Deanna	RN247522	Salisbury, Tracy Jean
RN247478	Brooks, Brittany Nicole	RN247523	Siskowic, Julie Marie
RN247479	Reed, Janie Kay	RN247524	Springsteen, Deborah Linn
RN247480	Callahan, Peggy Lynn	RN247525	Whitehead, Amber Katrise
RN247481	Brown, Annette Victoria	RN247526	Picklesimer, Emily Brooke
RN247482	Puma, Patricia Ann	RN247527	Harrison, Doreen Lynn
RN247483	Reinke, Caroline Ellen	RN247528	Hall, Paula Grainger
RN247484	Watson-Bisbey, Katharina Rita	RN247529	Harriott, Terry Ann Kenisha
RN247485	Ramirez, Marsha Melissa	RN247530	Beacham, Regina Alia
RN247486	Withycombe, Janice Lynn	RN247531	Kiene, Elizabeth Marie
RN247487	Schiel, Debra Jean	RN247532	Martins, Christiana Oyindamola
RN247488	Arias, Steve	RN247533	Chamlee, Cassie Williams
RN247489	Bythrow, Vivian Lynn	RN247534	Herrington, Daveona Elexzinia
RN247490	Epps, Tiffany Lauren	RN247535	Peavy, Regina Faye
RN247491	Ford, Rita Uche	RN247536	Walden, Tangi E
RN247492	Hubert, Janet Althea	RN247537	Bonvillian, Gendia Marie
RN247493	Lawrence-Hall, Kim Lavette	RN247538	Thorpe, BreAnn Addley
RN247494	Mura, Catherine Elizabeth	RN247539	Beaton, Renee L.
RN247495	Pearce, Domonique Nicole	RN247540	Aston, Anthony James
RN247496	Perkins, Tracee Alice	RN247541	Stearns, Jessica Noel
RN247497	Peterson, Heath Webster	RN247542	Wade, Theresa Marie
RN247498	Wambui, Whitney A	RN247543	Ward, Jasmine Shaotea
RN247499	Kinnicutt, Barbara Helen	RN247544	Wentzel, Jennifer Anne
RN247500	Jennings, Amber Michelle	RN247545	Woodrough, Kathryn Ann
RN247501	Lindgren, Patricia Ann	RN247546	Godfrey, Zakisha A.
RN247502	ODette, Victoria Ann	RN247547	Dunlap, Carlee Dyan
RN247503	Novak, Lisa A	RN247548	Carpenter, Jocelyn Rose
RN247504	Lutz, Cassandra Islas	RN247549	Jones, Ashley Nicole
RN247505	Mitchell, Caryn Michele	RN247550	Cone, Stephanie Horton
RN247506	McKay, Linda E	RN247551	Hall, Karen Jean Sipe
RN247507	McQuiniff, Doris E.	RN247552	Thomas, Tracey Lynne
RN247508	Skipper, Stephanie Chante	RN247553	Ohlweiler, Lisa Massa
RN247509	Engelman, Seth Henry	RN247554	Peluso, Shannon Marie
RN247510	Sulik, Brook Erin	RN247555	Prousalis, Tina R
RN247511	Norton, Brianna Marie	RN247556	Riley, Marykate
RN247512	Garcia, Racquel Yabao	RN247557	Nottingham, Tansha M.
RN247513	Duckworth, William Anthony		

PERSONAL APPEARANCES

(RNI=Registered Nurse Investigative Case Number)

RNI150974 – Hooper moved to uphold the previous board motion from April 23, 2015. Phipps seconded the motion and it carried unanimously.

BOARD RULES

Hooper moved to post rules chapters 410-1 through 410-12. Phipps seconded the motion and it carried unanimously.

410-1 – Administration and General Requirements

410-1-.01 Organization and Administration of the Board Office.

- (1) The Nurse Practice Act provides that, in order to protect, promote and preserve the public health, safety and welfare, any person practicing or offering to practice professional nursing for compensation in Georgia, shall be licensed according to the provisions established by the Georgia Board of Nursing.
- (2) The Nurse Practice Act further creates a Board of Nursing with regulatory authority and dictates the Board's composition and qualifications of members, methods of appointment, and terms of office. The Act specifies Board functions and duties thus providing for the implementation of the Nurse Practice Act through the adoption of rules and regulations.
- (3) All provisions of O.C.G.A. 43-1-19 (General Provisions Act) are expressly incorporated as regulating registered professional nurses.
- (4) All Rules and Regulations pertaining to the Administration of the Georgia Board of Nursing shall be administered by the Executive Director through the Division Director, Professional Licensing Boards Division of the Secretary of State.

410-1-.01 Organization and Administration of the Board

- (1) The Nurse Practice Act provides that, in order to protect, promote and preserve the public health, safety and welfare, any person practicing or offering to practice as a registered or licensed practical nurse for compensation in Georgia, shall be licensed according to the provisions established by the Georgia Board of Nursing.
- (2) The Nurse Practice Act further creates a Board of Nursing with regulatory authority and dictates the Board's composition and qualifications of members, methods of appointment, and terms of office. The Act specifies Board functions and duties thus providing for the implementation of the Nurse Practice Act through the adoption of rules and regulations.
- (3) All provisions of O.C.G.A. § 43-1-19 (General Provisions Act) are expressly incorporated as regulating registered nurses and licensed practical nurses.
- (4) All rules and regulations pertaining to the administration of the Georgia Board of Nursing shall be administered by the Executive Director through the Division Director, Professional Licensing Boards Division of the Secretary of State.

Authority: O.C.G.A. §§ 43-26-2, 43-26-4, and 43-26-5(a) and (c)

410-1-.02 General Requirements

- (1) A registered nurse or graduate nurse must present a valid, current license or temporary permit to the employer prior to beginning employment (including orientation) in any nursing position in Georgia for which licensure is required.
- (2) Registered nurse employers must not permit anyone to practice as a registered professional nurse or a graduate nurse without evidence of a valid, current license or temporary permit.
- (3) The registered nurse employer (or designee) must inspect the Board-issued license or temporary permit and verify the identity of the bearer prior to authorizing the beginning of employment (including orientation).
- (4) An applicant for licensure by examination, endorsement, or reinstatement who has been employed as a registered nurse or a graduate nurse without a license or temporary permit shall be subject to referral to the Attorney General's office for a legal Consent Order which may include:
 - (a) a public reprimand; and
 - (b) a fine of \$50.00 per month (up to \$250.00) for practice between two (2) and six (6) months (or any portion thereof);
 - (c) a fine of \$75.00 per month for each additional month (or portion thereof) between seven (7) and 12 months;
 - (d) a fine at the Board's discretion for unlicensed practice extending over one (1) year.
- (5) Within thirty (30) days of an address change, a licensee or applicant must provide written notification to the Board.
- (6) Name changes require submission of a copy of the marriage certificate (not marriage license), court order, or substantiating documentation within 30 days after receipt of the document by the licensee/applicant. (a) a licensee must submit an application for a duplicate license accompanied by the copied document and the required fee.
 - (b) during the application process or renewal period, name changes may be processed without an additional fee if the copied document accompanies the renewal application.
 - (c) an applicant for licensure must submit the copied document whenever a name change occurs in the application process.

410-1-.02 Meetings, Officers, and Duties

- (1) The Board shall hold at least four scheduled meetings each year.
- (2) All scheduled meetings of the Board shall be open and public except as provided by statute.
- (3) A majority of thirteen Board members shall constitute a quorum.
- (4) Annually, the Board shall elect from its members a President and a Vice-President.
- (5) The President shall preside at meetings, perform all duties of that office, and appoint Board members to serve on committees as may be created. The Vice-President shall preside in the absence of the President and shall assume the duties of the President when necessary.
- (6) A permanent record shall be kept of all meetings. The minutes shall be in writing and approved or amended by the Board at the next scheduled meeting.
- (7) Meetings of the Board may be conducted according to Robert's Rules of Order, Newly Revised, unless otherwise specified.

Authority: O.C.G.A. §§ 43-26-4, and 43-26-5(a) and (c)

410-1-.03 Name and Contact Information Changes

- (1) A licensee shall notify the Board in writing within thirty days of any name change. Changes may be made upon receipt of a written request accompanied by a copy of the marriage certificate, court order or other legal document, verifying legal status.
- (2) A licensee shall notify the Board in writing within thirty (30) days of any mailing, physical or email address changes. Address changes should be made by the licensee through the Board's website.

Authority: O.C.G.A. Section 43-26-5(a) and (c)

410-1-.04 Fees

- (1) All fees for applications for licensure, authorization, renewal and all other fees which may be authorized by law shall be established by the Board periodically. Application fees are non-refundable and an application is not complete unless the required fee has been received by the Board. Fees must be paid in U.S. funds.
- (2) Applications for initial licensure, initial authorization, or reinstatement that are approved or authorized within ninety (90) days before a biennial licensure expiration date shall be issued a license or authorization for the next successive licensure period.
- (3) Checks returned for insufficient funds will be dealt with according to O.C.G.A. § 16-9-20.

Authority: O.C.G.A. Section 43-26-5(a)

410-2 – Licensure By Examination

410-2-.01 Meetings, Officers, and Duties.

- (1) The Board shall hold at least four scheduled meetings each year.
- (2) All scheduled meetings of the Board shall be open and public except as provided by statute.
- (3) A majority of the Board members shall constitute a quorum.
- (4) Annually, the Board shall elect from its members a President and a Vice-President.
- (5) The President shall preside at meetings, perform all duties of that office, and appoint Board members to serve on committees as may be created. The Vice-President shall preside in the absence of the President and shall assume the duties of the President when necessary.
- (6) An agenda shall be comprised of items submitted for Board review at least ten (10) working days before the meeting, and of any other relevant items.
- (7) A permanent record shall be kept of all meetings. The minutes shall be transcribed and approved or amended by the Board at the next scheduled meeting.
- (8) Meetings of the Board shall be conducted according to Robert's Rules of Order, Newly Revised, unless otherwise specified.

410-2-.01 Licensure by Examination – Graduates of Approved Nursing Education Programs (RN)

- (1) The Board-recognized licensing examination is the National Council Licensure Examination for Registered Nurses (NCLEX-RN), for which a passing result must be achieved.
- (2) An applicant must pass the licensing examination within a three year period from the date of graduation.
- (3) An applicant whose period of eligibility has expired must reestablish eligibility as a duly qualified applicant by enrolling in and graduating from an approved nursing education program as defined in O.C.G.A. § 43-26-3(1.2).

(4) Applicants for licensure by examination who have graduated from a Board approved program as defined in O.C.G.A. § 43-26-3(1.2) must submit the following:

(a) A complete application containing data required by the board attesting that all information contained in, or referenced by, the application is complete and accurate and is not false or misleading;

(b) The required application processing fee which is not refundable;

(c) Completed registration as required by the Board to cause the submission of a criminal background check as required by O.C.G.A. § 43-26-7(b)(4);

(d) Official transcripts documenting graduation from an approved nursing education program;

(e) Secure and verifiable documentation of United States citizenship or lawful presence in the United States as required by Georgia law; and

(f) Any additional information requested by the board needed to establish eligibility.

(5) An application is active until the exam is taken or for one year, whichever comes first, after which a new application and fee are required.

(6) An applicant who passes the licensing examination and is under investigation for possible violation of the Nurse Practice Act may not be issued a license until the matter is resolved to the satisfaction of the Board. The license may be denied or sanctioned despite the applicant meeting all other criteria for licensure.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2, 43-26-3, 43-26-5, and 43-26-7

410-2-.02 Licensure by Examination – Graduates of Nontraditional Nursing Education Programs (RN)

(1) The Board-recognized licensing examination is the National Council Licensure Examination for Registered Nurses (NCLEX-RN), for which a passing result must be achieved.

(2) An applicant must pass the licensing examination within a three year period from the date of graduation.

(3) An applicant whose period of eligibility has expired must reestablish eligibility as a duly qualified applicant by enrolling in and graduating from an approved nursing education program as defined in O.C.G.A. § 43-26-3(1.2).

(4) Applicants for licensure by examination who have graduated from a nontraditional nursing education program as defined in O.C.G.A. § 43-26-7(e) must submit the following:

(a) A complete application containing data required by the board attesting that all information contained in, or referenced by, the application is complete and accurate and is not false or misleading;

(b) The required application processing fee which is not refundable;

(c) Completed registration as required by the Board to cause the submission of a criminal background check as required by O.C.G.A. § 43-26-7(b)(4);

(d) Official transcripts documenting graduation from a nontraditional nursing education program;

(e) Secure and verifiable documentation of United States citizenship or lawful presence in the United States as required by Georgia law; and

(f) Any additional information requested by the board needed to establish eligibility.

(5) Applicants who do not meet the requirements of O.C.G.A. § 43-26-7(b)(2)(B)(ii)(I) must complete a Board approved, post graduate preceptorship as provided in O.C.G.A. §43-26-7(b)(2)(B)(ii)(II) through (V).

(6) At the discretion of the Board, a temporary permit may be issued to an applicant for the purpose of practicing nursing as a part of a Board approved preceptorship as provided in O.C.G.A. § 43-26-7. The temporary permit shall be effective for a period of six months from the date of issuance and may be renewed only one time for an additional six month period.

(7) An application is active until the exam is taken or for one year, whichever comes first, after which a new application and fee are required.

(8) An applicant who passes the licensing examination and is under investigation for possible violation of the Nurse Practice Act may not be issued a license until the matter is resolved to the satisfaction of the Board. The license may be denied or sanctioned despite the applicant meeting all other criteria for licensure.

(9) For the purposes of this rule, the terms below are defined as follows:

(a) "Board" means the Georgia Board of Nursing.

(b) "Clinical experience" or "clinical practice" means the "hands on" clinical practice of nursing.

(c) "Health care facility" means an acute care inpatient facility, a long term acute care facility, an ambulatory surgical center or obstetrical facility as defined in Code Section 31-6-2, and a skilled nursing facility so long as such skilled nursing care facility has 100 beds or more and provides health care to patients with similar health care needs as those patients in a long term care acute care facility.

(d) "Preceptorship" means a program of clinical experience or clinical practice approved by the Board and arranged by the applicant in which the applicant gains a stated number of hours of clinical experience or clinical practice in a health care facility as required by

Georgia law. Preceptorships shall be under the close supervision of a registered professional nurse where such applicant is transitioned into the role of a registered professional nurse and the applicant performs duties typically performed by registered professional nurses. Except as otherwise provided in O.C.G.A. § 43-26-7(b)(2)(B)(ii)(II), a preceptorship shall be in an acute care inpatient facility or a long-term acute care facility; provided, however, that the board may authorize a preceptorship in other facilities to obtain specialized experience in certain areas. The preceptorship shall have prior approval of the board, and successful completion of the preceptorship shall be documented in writing by the preceptor stating that, in his or her opinion, the applicant has exhibited the critical thinking abilities, clinical skills, and leadership abilities necessary to practice as a beginning registered professional nurse.

(e) "Preceptor" means a registered nurse licensed by the Georgia Board of Nursing who:

1. Has a minimum of eighteen months experience in an acute care practice setting; and
2. Has no history of disciplinary action with any licensing board.

(f) "Nontraditional Nursing Education Program" means a nursing education program that has been approved by the Board and meets all the requirements of O.C.G.A. § 43-26-7(e).

(g) "Year" means a minimum of 1800 hours. For example, one year of clinical experience or clinical practice means a minimum of 1800 hours of clinical experience or clinical practice.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2, 43-26-3 43-26-5, 43-26-7, and 43-26-8

410-2-.03 Licensure by Examination – Graduates of International Nursing Education Programs (RN)

(1) The Board-recognized licensing examination is the National Council Licensure Examination for Registered Nurses (NCLEX-RN), for which a passing result must be achieved.

(2) An applicant must pass the licensing examination within a three year period from the date of eligibility for graduates of nursing education programs located outside of the United States.

(3) An applicant whose period of eligibility has expired must reestablish eligibility as a duly qualified applicant by enrolling in and graduating from an approved nursing education program as defined in O.C.G.A. § 43-26-3(1.2).

(4) Applicants for licensure by examination who have graduated from nursing education programs located outside of the United States must submit the following:

(a) A complete application containing data required by the board attesting that all information contained in, or referenced by, the application is complete and accurate and is not false or misleading;

(b) The required application processing fee which is not refundable;

(c) Completed registration as required by the Board to cause the submission of a criminal background check as required by O.C.G.A. § 43-26-7(b)(4);

(d) Verification from the licensing agency of current licensure as a registered nurse in another territory, province, state, district, or country;

(e) Transcripts documenting graduation from a registered nursing education program. Transcripts must be in English or accompanied by a certified English language translation directly from the school, another licensing board, or the Commission on Graduates of Foreign Nursing Schools (CGFNS);

(f) Credential Evaluation Service Professional Report from the Commission on Graduates of Foreign Nursing Schools (CGFNS) or the equivalent which verifies that the applicant:

1. Has the educational credentials equivalent to graduation from a governmentally accredited/approved, post-secondary general nursing program of at least two academic years in length;

2. Received both theory and clinical education in each of the following: nursing care of the adult which includes both medical and surgical nursing, maternal/infant nursing, nursing care of children, and psychiatric/mental health nursing;

3. Received initial registration/licensure as a registered nurse in the country where the applicant completed general nursing education; and

4. Is currently licensed as a registered nurse.

(g) Has achieved a minimum score of 550 (paper based), 213 (computer based) or 79 (internet based) on the TOEFL exam, unless a substantial portion of the applicant's nursing program of study, as determined by the Board, was conducted in English.

(h) Applicants must provide documentation of completion of one of the following options within the four years immediately preceding the date of application:

1. Verification of five hundred (500) hours of licensed practice as a registered nurse in another jurisdiction during the four years immediately preceding the date of application;

2. Verification of completion of a Board approved reentry program as provided in Rule 410-4.03.

(i) Secure and verifiable documentation of United States citizenship or lawful presence in the United States as required by Georgia law; and

(j) Any additional information requested by the board needed to establish eligibility.

(5) If curricular deficiencies are identified by the Board, an official transcript which documents passing grades in the courses must be submitted by an approved education program.

(6) An application is active until the exam is taken or for one year, whichever comes first, after which a new application and fee are required.

(7) An applicant who passes the licensing examination and is under investigation for possible violation of the Nurse Practice Act may not be issued a license until the matter is resolved to the satisfaction of the Board. The license may be denied or sanctioned despite the applicant meeting all other criteria for licensure.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2, 43-26-3 43-26-5, and 43-26-7

410-2-.04 Licensure by Reexamination (RN)

(1) An applicant for licensure by examination who fails the examination must submit the following:

(a) A complete application containing data required by the board attesting that all information contained in, or referenced by, the application is complete and accurate and is not false or misleading;

(b) The required application processing fee which is not refundable;

(c) Completed registration as required by the Board to cause the submission of a criminal background check as required by O.C.G.A. § 43-26-7(b)(4); and

(d) Any additional information requested by the board needed to establish eligibility.

(2) An application is active until the exam is taken or for one year, whichever comes first, after which a new application and fee are required.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2, 43-26-3, 43-26-5, and 43-26-7

410-2-.05 Licensure by Examination (LPN)

(1) The Board-recognized licensing examination is the National Council Licensure Examination for Practical Nurses (NCLEX-PN), for which a passing result must be achieved.

(2) An applicant must pass the licensing examination within a three year period from the date of graduation.

(3) An applicant whose period of eligibility has expired must reestablish eligibility as a duly qualified applicant by enrolling in and graduating from an approved nursing education program as defined in O.C.G.A. § 43-26-32(1.1).

(4) Applicants for licensure by examination who have graduated from a Board approved program in Georgia as defined in O.C.G.A. § 43-26-32(1.1) must submit the following:

(a) A complete application containing data required by the board attesting that all information contained in, or referenced by, the application is complete and accurate and is not false or misleading;

(b) The required application processing fee which is not refundable;

(c) Completed registration as required by the Board to cause the submission of a criminal background check as required by O.C.G.A. § 43-26-36.1;

(d) Official transcripts documenting graduation from an approved nursing education program;

(e) Secure and verifiable documentation of United States citizenship or lawful presence in the United States as required by Georgia law; and

(f) Any additional information requested by the board needed to establish eligibility.

(5) Applicants for licensure by examination who have graduated from a Board approved program as defined in O.C.G.A. § 43-26-32(1.1) located outside of Georgia must submit the following:

(a) A complete application containing data required by the board attesting that all information contained in, or referenced by, the application is complete and accurate and is not false or misleading, and the required application processing fee which is not refundable;

(b) Completed registration as required by the Board to cause the submission of a criminal background check as required by O.C.G.A. § 43-26-36.1;

(c) Official transcripts documenting graduation from an approved nursing education program determined by the Board to be comprised of substantially the same course of study as provided in Rule 410-9-.06;

(d) Secure and verifiable documentation of United States citizenship or lawful presence in the United States as required by Georgia law; and

(e) Any additional information requested by the board needed to establish eligibility.

(6) An application is active until the exam is taken or for one year, whichever comes first, after which a new application and fee are required.

(7) An applicant who passes the licensing examination and is under investigation for possible violation of the Nurse Practice Act may not be issued a license until the matter is resolved to the satisfaction of the Board. The license may be denied or sanctioned despite the applicant meeting all other criteria for licensure.

Authority: O.C.G.A. §§ 43-1-25, 43-26-31, 43-26-32, 43-26-35, 43-26-36, 43-26-36.1 and 43-26-37

410-2-.06 Licensure by Examination – Graduates of International Practical Nursing Education Programs (LPN)

(1) The Board-recognized licensing examination is the National Council Licensure Examination for Practical Nurses (NCLEX-PN), for which a passing result must be achieved.

(2) An applicant must pass the licensing examination within a three year period from the date of eligibility for graduates of nursing education programs located outside of the United States.

(3) An applicant whose period of eligibility has expired must reestablish eligibility as a duly qualified applicant by enrolling in and graduating from an approved nursing education program.

(4) Applicants for licensure by examination who have graduated from nursing education programs located outside of the United States must submit the following:

(a) A complete application containing data required by the board attesting that all information contained in, or referenced by, the application is complete and accurate and is not false or misleading;

(b) The required application processing fee which is not refundable;

(c) Completed registration as required by the Board to cause the submission of a criminal background check as required by O.C.G.A. § 43-26-36.1;

(d) Verification from the licensing agency of current licensure as a licensed practical nurse in another territory, province, state, district, or country;

(e) Transcripts documenting graduation from a practical nursing education program. Transcripts must be in English or accompanied by a certified English language translation directly from the school, another licensing board, or the Commission on Graduates of Foreign Nursing Schools (CGFNS);

(f) Credential Evaluation Service Professional Report from the Commission on Graduates of Foreign Nursing Schools (CGFNS) or the equivalent which verifies that the applicant:

1. Has the educational credentials equivalent to graduation from a governmentally accredited/approved, post-secondary general nursing program of at least one academic year in length;

2. Received both theory and clinical education in each of the following: nursing care of the adult which includes both medical and surgical nursing, maternal/infant nursing, nursing care of children, and psychiatric/mental health nursing;

3. Received initial registration/license as a practical nurse in the country where the applicant completed practical nursing education; and

4. Is currently registered/licensed as a practical nurse.

(g) Has achieved a minimum score of 550 (paper based), 213 (computer based) or 79 (internet based) on the TOEFL exam, unless a substantial portion of the applicant's nursing program of study, as determined by the Board, was conducted in English.

(h) Applicants must provide documentation of completion of one of the following options within the five years immediately preceding the date of application:

1. Verification of five hundred (500) hours of licensed practice as a practical nurse in another jurisdiction during the four years immediately preceding the date of application;

2. Verification of completion of a Board approved reentry program as provided in Rule 410-4.02.

(i) Secure and verifiable documentation of United States citizenship or lawful presence in the United States as required by Georgia law; and

(j) Any additional information requested by the board needed to establish eligibility.

(5) If curricular deficiencies are identified by the Board, an official transcript which documents passing grades in the courses must be submitted by an approved education program.

(6) An application is active until the exam is taken or for one year, whichever comes first, after which a new application and fee are required.

(7) An applicant who passes the licensing examination and is under investigation for possible violation of the Nurse Practice Act may not be issued a license until the matter is resolved to the satisfaction of the Board. The license may be denied or sanctioned despite the applicant meeting all other criteria for licensure.

Authority: O.C.G.A. §§ 43-1-25, 43-26-31, 43-26-32, 43-26-35, 43-26-36, 43-26-36.1 and 43-26-37

410-2-.07 Licensure by Reexamination (LPN)

(1) An applicant for licensure by examination who fails the examination must submit the following:

(a) A complete application containing data required by the board attesting that all information contained in, or referenced by, the application is complete and accurate and is not false or misleading;

(b) The required application processing fee which is not refundable;

(c) Completed registration as required by the Board to cause the submission of a criminal background check as required by O.C.G.A. § 43-26-36.1;

(d) Secure and verifiable documentation of United States citizenship or lawful presence in the United States as required by Georgia law; and

(e) Any additional information requested by the board needed to establish eligibility.

(2) An application is active until the exam is taken or for one year, after which a new application and fee are required.

Authority: O.C.G.A. §§ 43-1-25, 43-26-31, 43-26-32, 43-26-35, 43-26-36, 43-26-36.1 and 43-26-37

410-3 – Licensure by Endorsement

410-3-.01 General Requirements.

~~(1) Rules for nursing education programs shall provide reasonable and uniform standards within which flexibility and creativity, based upon prevailing educational principles, are possible.~~

~~(2) A parent institution is defined as an educational institution that is part of the University System of Georgia, the Department of Technical and Adult Education or a nonprofit postsecondary institution. The board reserves the right to approve any parent institution outside of these categories.~~

~~(3) The course of study for initial licensure may be offered through an approved combination of on site, distance learning, or online teaching/learning strategies. Neither class nor clinical learning activities may be offered exclusively through electronic modalities. The majority of learning activities in practice settings must be taught by nursing faculty members according to Rules 410-3-.05 and 410-3-.06.~~

~~(4) A parent institution shall grant degrees and maintain the locus of control and fiscal responsibility for the planning, implementation, teaching, and evaluation of the nursing education program.~~

~~(5) Faculty and students in a nursing education program shall enable a curriculum that educates graduates to become eligible for licensure by examination as registered nurses or to provide educational mobility for registered nurses.~~

~~(6) Nursing education programs that provide educational mobility solely for registered nurses pursuing baccalaureate degrees in nursing have the option of seeking and maintaining Full Approval. If the parent institution subsequently develops and implements a prelicensure baccalaureate program, in which a registered nurse track is an option, the existing RN-BSN program will cease to exist as a single entity. Board approval will apply to one baccalaureate program according to Rule 410-3-.02.~~

~~(7) If approval for an RN-BSN Program, as a single entity, is not granted at the inception of the program and is sought at a later date, the program shall be required to comply with the rules for the development and implementation of a new program in order to be considered for Board approval.~~

~~(8) Board representatives shall conduct scheduled site visits to nursing education programs on a regular basis every four (4) years. At its discretion, the Board may schedule site visits more frequently. A nursing education program may request a site visit.~~

~~(9) Representatives of the parent institution and/or the nursing education program shall be notified of any Board meeting at which action is to be taken relative to the program and shall be sent documentation of the action(s) in writing.~~

~~(10) Representatives of the parent institution and/or the nursing education program may appeal any board action within 90 days of written notification.~~

~~(11) To be approved as first-time writers of the licensing examination, applicants must have graduated from a nursing education program with Initial, Full or Conditional Approval at the time of graduation.~~

410-3-.01 Licensure by Endorsement (RN)

(1) An applicant for licensure by endorsement who is licensed as a registered nurse in another U.S. state, territory or district must submit the following:

(a) A complete application containing data required by the board attesting that all information contained in, or referenced by, the application is complete and accurate and is not false or misleading;

(b) The required application processing fee which is not refundable;

(c) Completed registration as required by the Board to cause the submission of a criminal background check as required by O.C.G.A. § 43-26-7(c)(5);

- (d) Official transcripts documenting graduation from an approved nursing education program as defined in O.C.G.A. § 43-26-3(1.2) prior to passing the licensing examination recognized by the Board;
- (e) Verification of licensure from the original licensing jurisdiction which documents one of the following:
 - 1. Prior to July 1982—a score of 350 on each of the five parts of the SBTPE;
 - 2. Prior to February 1989—a minimum score of 1600 on the NCLEX-RN
 - 3. February 1989 and after, must have achieved a passing report on the NCLEX-RN;
- (f) Verification of current, active licensure in another US state, territory or district;
- (g) Documentation of one of the following within four years immediately preceding the date of application:
 - 1. Five hundred (500) hours of licensed practice as a registered nurse as documented on the verification of employment form provided by the Board;
 - 2. Graduation from a nursing education program as defined in O.C.G.A. §§ 43-26-3(1.2) or 43-26-7(e); or
 - 3. Completion of a Board approved reentry program as defined in Rule 410-4-.03.
- (h) Secure and verifiable documentation of United States citizenship or lawful presence in the United States as required by Georgia law; and
- (i) Any additional information requested by the board needed to establish eligibility.
- (2) An application is active for one year after which a new application and fee are required.
- (3) An applicant who is under investigation for possible violation of the Nurse Practice Act may not be issued a license until the matter is resolved to the satisfaction of the Board. The license may be denied or sanctioned despite the applicant meeting all other criteria for licensure.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2, 43-26-5 and 43-26-7(c)

410-3-.02 Nursing Education Program Approval.

(1) Developing Programs.

(a) The Board may grant Developmental Approval to a proposed nursing education program when compliance with Rules 410-4-.01 paragraphs (1) through (3) has been documented.

(b) The Board may grant Initial Approval to a nursing education program with Developmental Approval when compliance with Rule 410-4-.01(4) has been documented. Initial Approval is required prior to the enrollment of at least twenty (20) students in the first nursing courses.

(c) The Board may continue Initial Approval prior to the graduation of the first class when review of materials specified in Rule 410-4-.01(3)(c), the most recent annual report, and most recent site visit report, and program responses to it document compliance with the rules.

(d) The Board may grant Full Approval to a nursing education program with Initial Approval when review of the most recent annual report, the most recent site visit report, and program responses to it document compliance with the rules. At least eighty (80) percent of all graduates must pass the licensing examination as first-time writers within one (1) calendar year of the graduation date. For single entity RN-BSN programs seeking Full Approval, transcripts of the first graduates must be submitted to the Board in addition to any other requested documents.

(e) The Board may continue the Initial Approval of a program ineligible for Full Approval after graduation of the first class when noncompliance with the criteria in Rule 410-3-.02(1)(d) is documented.

(f) If the program is not eligible for Full Approval after graduation of the second class, Conditional Approval may be imposed according to Rule 410-3-.02(3).

(2) Established Programs.

(a) The Board may continue the Full Approval of a nursing education program for any period up to four (4) years. Approval is based upon documentation of compliance with rules relating to annual reports, the most recent site visit report and program responses to it, and a passing percentage of at least eighty (80) percent of all first-time writers on the licensing examination over the four (4) most recent calendar years.

(b) A nursing education program, with Full Approval, must submit a written assessment and plan of action for review by the Board if the passing percentage of all first-time writers on the licensing examination is less than eighty (80) percent in a calendar year.

(c) A nursing education program, with Full Approval, must submit a written evaluation of the plan of action for review by the Board if the passing percentage of all first-time writers on the licensing examination is less than eighty (80) percent for a second consecutive calendar year. A site visit by Board representatives will be scheduled.

(3) Conditional Approval.

At any point during the initial approval period or within the four-year approval cycle, the Board may impose Conditional Approval on a nursing education program for reasons, including but not limited to, the following conditions: review of any annual report reveals noncompliance with the rules; review(s) of the most recent site visit report(s) and program response(s) to it reveal continued,

documented noncompliance with the rules; and/or the passing percentage of first-time writers on the licensing examination was less than eighty (80) percent for three (3) consecutive calendar years and/or the four-year average was less than eighty (80) percent.

(4) Granting of Full Approval for a Nursing Education Program on Conditional Approval.

(a) The granting of Full Approval will require documentation of outcome measures, including but not limited to NCLEX-RN results, on an annual basis until compliance with conditions identified in Rule 410-3-.02(3) is documented.

(b) The granting of Full Approval may be for any period of time up to four (4) years as determined by the board. If Conditional Approval has been imposed for noncompliance with the identified four-year passing percentage on the licensing examination, the Board at its discretion may grant Full Approval for one (1) year. The one (1) year approval is based upon the program having documented evidence of at least two (2) consecutive years of a passing percentage of at least eighty (80) percent of its first-time writers in each calendar year even though the four-year average is not eighty (80) percent.

(5) Withdrawal of Approval.

The Board may withdraw the approval of a nursing education program on Conditional Approval when continued, documented noncompliance with the rules fails to be corrected within a time period specified by the Board. In order for students, who are currently enrolled in at least one nursing course when approval is withdrawn, to be eligible for licensure upon graduation, the nursing education program must submit a written plan for their completion of the program or for their transfer to another approved nursing education program. Prior to the actual date of withdrawal of approval, the nursing program will continue to have time-limited Conditional Approval so that students will be identified as having graduated from an approved program and be eligible for licensure by examination.

(6) Reinstatement of Withdrawn Approval.

(a) Representatives of the parent institution and/or the nursing education program may appeal in writing to the Board for reconsideration of withdrawn approval within 90 days of written notification.

(b) Upon written request, representatives of the parent institution and/or the nursing education program may appear before the Board to review its findings regarding program deficiencies and/or the adequacy of the program's plan of action.

(c) After documentation of compliance with rules, as determined by the Board, a nursing education program may petition the Board in writing for reinstatement of approval status and permission to enroll students.

(d) If approval is not reinstated, the parent institution must comply with all rules for the development and implementation of a new nursing education program.

(7) Reconstitution of a Nursing Education Program.

(a) If a program, which has had its approval withdrawn, decides to develop and implement a reconstituted (new) nursing education program, it must document compliance with Rule 410-4-.01. At its discretion, the Board may not require the fee for new programs and the feasibility study if Conditional Approval has previously been imposed on the program.

(b) In order for Full Approval to be considered, a reconstituted nursing education program, with Initial Approval, must document compliance with the most recent site visit report and program responses to it and with the most recent annual report. In addition, at least eighty (80) percent of all first-time NCLEX-RN writers from the first class must pass within one (1) year of the date of graduation.

(c) Initial Approval will be continued for a second year if Full Approval is not granted in the first year. In order for Full Approval to be considered, compliance with the most recent site visit report and program responses to it and with the most recent annual report must be documented. In addition, at least eighty (80) percent of all first-time NCLEX-RN writers must pass within one (1) year of the graduation date. The average passing percentage of the first two (2) classes must be at least eighty (80) percent. If compliance with this rule is not documented, approval will be withdrawn with no option for the development and implementation of another nursing program.

410-3-.02 Licensure by Endorsement (LPN)

(1) An applicant for licensure by endorsement who is licensed as a licensed practical nurse in another U.S. state, territory or district must submit the following:

(a) A complete application containing data required by the board attesting that all information contained in, or referenced by, the application is complete and accurate and is not false or misleading;

(b) The required application processing fee which is not refundable;

(c) Completed registration as required by the Board to cause the submission of a criminal background check as required by O.C.G.A. § 43-26-36.1;

(d) Official transcripts documenting graduation from an approved nursing education program as defined in O.C.G.A. § 43-26-32(1.1) prior to passing the licensing examination recognized by the Board;

(e) Verification of licensure from the original licensing jurisdiction which documents one of the following:

1. Prior to July 1982—a score of 350 on the SBTPE;

2. Beginning October 1982 to September 1988—a minimum score of 350 on the NCLEX-PN

3. October 1988 and after, must have achieved a passing report on the NCLEX-PN;

(f) Verification of current, active licensure in another NCLEX jurisdiction;

(g) Documentation of one of the following within four years immediately preceding the date of application:

1. Five hundred (500) hours of licensed practice as a licensed practical nurse as documented on the verification of employment form provided by the Board;

2. Completion of a Board approved reentry program as defined in Rule 410-4-.04.

(h) Secure and verifiable documentation of United States citizenship or lawful presence in the United States as required by Georgia law; and

(i) Any additional information requested by the board needed to establish eligibility.

(2) An application is active for one year after which a new application and fee are required.

(3) An applicant who is under investigation for possible violation of the Nurse Practice Act may not be issued a license until the matter is resolved to the satisfaction of the Board. The license may be denied or sanctioned despite the applicant meeting all other criteria for licensure.

Authority: O.C.G.A. §§ 43-1-25, 43-26-31, 43-26-32, 43-26-35, 43-26-36, 43-26-36.1, and 43-26-38

410-3-.03 Organization and Administration.

(1) The nursing education program must be an integral part of a parent institution accredited by the Commission on Colleges of the Southern Association of Colleges and Schools.

(2) The relationship of the nursing unit as a program, department, division, school, or college to the parent institution must be delineated on a current organizational chart in accordance with the structural or functional plan of the parent institution.

(3) The nurse administrator shall assume authority and responsibility for the administration, planning, implementation, and evaluation of the nursing education program. This will include oversight of and budgeting for the program, selection and evaluation of qualified faculty, and evaluation of program outcomes. A percentage of time for, and description of, administrative responsibilities and must be identified. The Board must be notified within 30 days of a change in the nurse administrator.

(4) The minimum length of a nursing education program shall be six (6) academic quarters or four (4) academic semesters, each of which shall include nursing courses with learning activities in classes, simulated settings, and practice settings.

(5) If a nursing education program has an accelerated option for students who have earned a baccalaureate or higher degree in another discipline, the minimum length of study as identified in Rule 410-3-.03(4) may be shortened. The course of study must be comparable to that required for prelicensure students graduating from the same nursing education program.

(6) Adequate financial resources shall be provided for the effective operation of the nursing education program and the professional development of faculty.

(7) A faculty/student ratio of at least one (1) full-time nursing faculty member for each twenty (20) students enrolled in the nursing education program (including audited courses) shall be maintained.

(8) The nursing education program shall have a plan for continuous quality assessment and improvement which includes, but is not limited to: organization and administration; curriculum; faculty; students; performance of students and graduates; and educational facilities and resources.

(9) Implementation of the plan for continuous quality assessment and improvement, findings, and relevant actions and/or decisions shall be documented.

(10) All information, course materials, and documentation pertaining to the nursing education program shall be accurate and current.

410-3-.04 Curriculum.

(1) The nursing education program shall be consistent with the mission/purpose, outcomes, and policies of the parent institution and the established and emerging standards of nursing education and practice.

(2) Faculty shall develop the curriculum so that the philosophy/assumptions, outcomes, written plan for its organization and development, teaching/learning strategies, assessment of outcomes and policies are internally consistent.

(3) The curriculum shall be inclusive of courses in humanities, natural sciences, social sciences and nursing which are offered in a logical and supportive sequence appropriate for collegiate study. Courses in the natural sciences must have class and laboratory components.

(4) The curriculum must be balanced in terms of semesters/quarters, contact hours, and student workload.

(5) The curriculum must be inclusive of learning activities in class, simulated settings, and practice settings, in reality-based situations, incorporating caring and the promotion, maintenance, and restoration of health or end-of-life care with people of all age groups who have commonly occurring acute and long-term physical and mental health problems, illnesses, and experiences.

(6) Practice-based learning activities shall occur in diverse settings representative of the continuum of health care and with opportunities for students to engage in learning activities that enable the goals of the curriculum.

(7) The curriculum shall be inclusive of current and emerging issues in nursing, health care, and society.

(8) Teaching/learning strategies, activities, and interactions must include opportunities for praxis, reflection, critical thinking, problem-solving, and decision-making.

(9) Teaching/learning strategies, activities, and interactions must facilitate the transition to professional practice by incorporating concepts, including but not limited to: accountability; the provision and coordination of care; advocacy; and collaboration.

(10) In a baccalaureate program, learning activities in research, community health nursing, and management/leadership shall be included.

(11) Various strategies shall be used in the assessment and evaluation of student outcomes.

(12) Students enrolled in a nursing education program leading to initial licensure may participate in cooperative internship experiences or programs. Academic credit may be awarded provided that the relationship between the academic and employment aspects of the course is clearly delineated consistent with Rules 410-3-.04; 410-3-.05(10); 410-3-.05(11); 410-3-.06(2), 410-3-.07(5) and 410-3-.08.

410-3-.05 Faculty.

(1) A nursing faculty member includes any registered nurse, appointed by the parent institution, regardless of the institutional designation, who is engaged in teaching/evaluation in classes, simulated settings, and practice settings.

(2) The nurse administrator and nurse faculty members of any nursing education program must be currently licensed as registered nurses in Georgia and authorized as advanced practice nurses (if applicable) from the initial date of appointment.

(3) Faculty who are assigned to practice settings in another state or country shall comply with the relevant nurse practice act in that jurisdiction.

(4) The nurse administrator, who is appointed with the authority and responsibility for the development, administration, and evaluation of the nursing program(s) within the nursing unit, must have at least one (1) earned graduate degree in nursing and at least three (3) years of teaching experience in a nursing education program leading to initial registered nurse licensure or completion of a higher degree in nursing.

(5) Any registered nurse, appointed by the parent institution, who is engaged in teaching/evaluation in classes, simulated settings and practice settings, must hold at least a baccalaureate or higher degree in nursing.

(6) For any given academic term, the nursing education program must be able to provide evidence that at least three-fourths of individual full-time and part-time faculty members hold one (1) or more earned graduate degrees in nursing.

(7) A full-time faculty member with only a baccalaureate degree in nursing must be able to provide documentation of progress toward an earned graduate degree in nursing, have experience in the area of responsibility, and be directed by a faculty member with at least one (1) earned graduate degree in nursing.

(8) Faculty members shall have the graduate nursing education, expertise, and professional development necessary to enable the goals/outcomes of the curriculum.

(9) For any course with a nursing title and number, a qualified registered nurse faculty member must be the coordinator.

(10) Faculty members must be available to direct, coach, mentor, and critique students engaged in learning activities in classes, simulated settings, and practice settings.

(11) A faculty/student ratio of at least one (1) registered nurse faculty member for no more than ten (10) students engaged in actual, interactive learning activities in practice settings must be maintained to provide for the safety of patients/clients, students, and faculty members.

(12) Faculty members shall participate in and document the development, implementation, and evaluation of the nursing education program.

(13) Policies in effect for nursing faculty, including workload, shall be consistent with those in effect for all faculty appointed by the parent institution.

(14) The process of selection, approval, and role development, and delineation of responsibilities of full-time and part-time faculty members shall be documented.

(15) Out of state nursing education programs that have faculty and students engaged in learning activities in Georgia practice settings must comply with the Georgia Registered Professional Nurse Practice Act.

(16) An international nursing educator, who is not licensed as a registered professional nurse in Georgia and who is participating as an exchange visitor in a nursing education program, may direct, coach, mentor, and critique students engaged in learning activities in classes and simulated settings under the following conditions:

(a) responsibility for any course, in which the international nursing educator participates, must be assumed by a faculty member appointed by the parent institution;

(b) monetary compensation to the international nursing educator must not be provided by the parent institution;

(c) until licensure by examination has been granted, the international nursing educator must not be involved in actual, interactive learning activities with students and patients/clients in practice settings; and

(d) in advance of the exchange period, the Board of Nursing must be notified of the academic and regulatory credentials of the international nursing educator for a one-time period not to exceed all or part of a quarter or semester.

410-3-.06 Learning Activities with Preceptors.

(1) Learning activities with preceptors may be included in a curriculum on a limited

basis.

(2) The student shall be enrolled in the course in which the learning activities with preceptors occur and shall not be compensated by the practice setting during this time.

(3) The process of selection, approval, and role development of preceptors shall be documented.

(4) The preceptor shall be currently licensed as a registered nurse and authorized as an advanced practice nurse (if applicable) according to the Georgia Registered Professional Nurse Practice Act or the statute in the state/country in which the practice setting is located.

(5) The preceptor for a registered nurse student may be a non-nurse provided that the designated faculty member serves as the co-preceptor.

(6) The preceptor shall be educated at preferably the same or higher level as the student and have at least one year of work experience in the practice setting in which the learning activity occurs.

(7) The preceptor shall have the education and/or expertise to enable the learning goals of the student.

(8) The preceptor shall be selected collaboratively by the designated faculty member and the registered nurse responsible for nursing care in the practice setting.

(9) The preceptor shall interact with no more than two (2) students at any given time.

(10) Each student and preceptor shall have a readily available, designated faculty member who is responsible for the learning activities in compliance with Rules 410-3-.04 and 410-3-.05(10), (11).

(11) The designated faculty member shall meet with students and preceptors prior to and throughout the learning activities to clarify roles, learning goals, and the assessments of outcomes.

410-3-.07 Students.

(1) Policies for nursing students shall be comparable to those for all students enrolled in the parent institution except in such instances where the nature of the nursing major may require variance. Students must be high school graduates or have documented equivalent education.

(2) Current, accurate, consistent, written information, including but not limited to, the course of study, admissions, options for advanced placement, acceleration, part-time study, articulation, progression, graduation, health requirements, the potential for criminal background checks and expanded medical profiles, and appeals shall be published.

(3) Students shall have opportunities to evaluate learning activities, full-time and part-time faculty members, preceptors, educational resources, and practice settings.

(4) Any registered nurse, who is a student in a baccalaureate or higher degree nursing program, must be currently licensed according to the Georgia Registered Professional Nurse Practice Act in order to engage in any actual, interactive learning activities with patients/clients.

(5) An applicant who has graduated from an international nursing education program and is required by the board to satisfy a curricular deficiency in an approved nursing education program in order to establish eligibility for licensure by examination must be considered as an unlicensed student.

(6) Any registered nurse, who is a student with learning activities in practice settings in another state or country, shall comply with the relevant nurse practice act.

(7) The process for verifying the current license or certificate of any student who holds a health-related license or certificate must be documented.

410-3-.08 Employment of Unlicensed Students and/or Graduates Prior to Licensure.

(1) Unlicensed students, in conjunction with faculty members and/or preceptors, are exempt from licensure during the practice of nursing that is an integral part of a curriculum in a nursing education program.

(2) Students, who are not otherwise licensed or certified, shall be employed only as unlicensed nursing personnel. They shall not represent themselves as nursing students nor assume responsibilities within the scope of practice of a registered nurse.

(3) Graduates, who are not otherwise licensed or certified, shall be employed only as unlicensed personnel prior to licensure. They shall not assume responsibilities within the scope of practice of a registered nurse.

(4) The registered nurse supervising employed unlicensed students and/or graduates prior to licensure is referred to Rules 410-3-.08(2) and 410-3-.08(3) re job responsibilities.

410-3-.09 Performance of Graduates.

(1) Acceptable performance on the licensing examination for each nursing education program shall be a passing rate of at least eighty (80) percent of its first-time writers in any given calendar year.

(2) A passing percentage of at least eighty (80) percent of all first-time writers on the licensing examination over the four (4) most recent years must be maintained.

410-3-10 Educational Facilities, Resources, and Practice Settings.

- (1) The parent institution shall provide for and maintain facilities, resources, and services for the effective development and implementation of the nursing education program.
- (2) Classes, simulated settings, equipment, and supplies should facilitate the learning goals of the curriculum.
- (3) Adequate storage space, with security as appropriate, must be provided for supplies, equipment, and materials.
- (4) Comprehensive, current, and pertinent print and non-print learning resources must be available for faculty and student needs.
- (5) Office and meeting space, with appropriate furnishings and equipment, must be provided for the nurse administrator, faculty members, and staff.
- (6) Secretarial personnel and support services must be available to meet the needs of faculty members and students.
- (7) The parent institution shall maintain a written agreement with any agency that provides educational facilities and resources for the nursing education program which delineates the responsibilities of all involved parties.
- (8) Any practice setting affiliating with a nursing education program must have documented approval by appropriate regulatory bodies (if applicable).
- (9) Any practice setting affiliating with a nursing education program must have available and appropriate personnel, facilities, and resources to enable collaborative planning, implementation, and evaluation of learning activities.
- (10) The parent institution shall maintain a written agreement with each practice setting in which actual, interactive learning activities occur that delineates the responsibilities of involved parties.

410-3-11 Reports.

- (1) Annually by July 1, each nursing program with enrolled students must provide the board with requested information pertaining to the time period between July 1 of the previous year and June 30 of the current year.
- (2) The board must receive written reports by a specified date for review at a designated board meeting. Reports include, but are not limited to: advance site visit information; program responses to site visit reports; offering of a nursing course(s) at an off-campus site prior to implementation; new tracks within an approved prelicensure program; and development of major curricular or program changes prior to implementation.
- (3) A written explanation must be provided to the board if a program which should have students eligible for graduation in a given year does not have them.

410-4 – Licensure by Reinstatement

410-4-01 Development and Implementation of New Nursing Education Programs. Amended

- (1) To obtain approval by the Board for the development of a new nursing education program, the chief administrative officer of a parent institution proposing the development and implementation of a new nursing education program must submit a letter of intent to the Board. The following information must be included:
 - (a) a completed application signed by the chief administrative officer of the parent institution;
 - (b) a board-approved feasibility study, completed within one year of the date of the letter, which includes, but is not limited to: rationales for the establishment of the proposed nursing education program documenting an educational need which cannot be met by existing nursing education programs; financial resources; educational facilities and resources; faculty members; and practice settings;
 - (c) evidence of accreditation of the parent institution by the Commission on Colleges of the Southern Association of Colleges and Schools;
 - (d) a written plan for the recruitment and appointment of a qualified nurse administrator and faculty members to teach courses across the curriculum; and
 - (e) the nonrefundable, required fee which does not guarantee any approval status;
 - (f) documentation of the appointment of a registered nurse, currently licensed in Georgia, with the graduate nursing education and expertise necessary to develop and implement the proposed nursing education program and assess its outcomes;
 - (g) an affidavit of approval of the proposed nursing education program by the highest governing body of the parent institution within one year of the date of submission of the application;
 - (h) documentation of projected revenue sources (federal, state, private, grants, gifts) and expenditures for five (5) fiscal years to support the development and implementation of the proposed nursing education program. The information must include, but is not limited to: appointment of sufficient qualified nursing faculty members (consistent with Rule 410-3-.05); appointment of secretarial personnel and support services; and provision of print and non-print learning resources, academic support courses, and educational resources in compliance with Board rules;
 - (i) a written description for each practice setting proposed for learning activities with a letter of commitment from practice setting personnel to include the possible impact on existing, affiliating nursing programs; and

- (j) a five-year timeline for the development and implementation of the nursing education program which includes cohorts of students and faculty members; and
 - (k) a proposed timeline for initiating and expanding the program.
- (2) The nurse administrator and at least two (2) (full-time or part-time) faculty members with the graduate nursing education and expertise necessary to develop and implement the nursing education program and assess its outcomes, must be appointed by the parent institution to submit the following materials for Board review at least twelve (12) months prior to the enrollment of students in the first nursing course(s):
- (a) faculty qualification records for the nurse administrator and faculty members;
 - (b) program purpose or mission statement;
 - (c) program philosophy/assumptions;
 - (d) goals/outcomes of the curriculum;
 - (e) written plan for the organization and development of the curriculum;
 - (f) curriculum plan, consistent with Rule 410-3-.04, showing the placement, sequence, and credit distribution of all nursing and non-nursing courses;
 - (g) syllabus for each nursing course to include the title, credit distribution, prerequisites and corequisite courses, goals/outcomes, and course outline;
 - (h) plan for continuous quality assessment and improvement consistent with Rule 410-3-.03(8);
 - (i) information specific to the nursing education program, including but not limited to, admissions, options for advanced placement, acceleration, part-time study, articulation, progression, graduation, health requirements, the potential for criminal background checks and expanded medical profiles, and appeals;
 - (j) a current financial report including expenditures to date consistent with Rule 410-4-.01(3)(c);
 - (k) a plan for the recruitment of students; and
 - (l) current catalog and student handbook for the parent institution.
 - (m) any substantive changes since the review of previous reports;
 - (n) detailed information for each nursing course in the curriculum consistent with Rule 410-3-.04;
 - (o) faculty qualification records for any new faculty members;
 - (p) a description of any additional practice setting(s) with a written commitment from practice setting representatives to include the possible impact on existing affiliating nursing programs;
 - (q) a current financial report including expenditures to date consistent with Rule 410-4-.01(3)(c); and
 - (r) an update on projected enrollment;
- (3) Board representatives will conduct site visits to a developing nursing education program as necessary.
- (4) Nursing education programs with Initial Approval are required to comply with all Board rules.

410-4-.01 Licensure by Reinstatement (RN)

- (1) An applicant for licensure by reinstatement who was previously licensed as a registered nurse in the state of Georgia must submit the following:
- (a) A complete application containing data required by the Board attesting that all information contained in, or referenced by, the application is complete and accurate and is not false or misleading;
 - (b) The required application processing fee which is not refundable;
 - (c) Completed registration as required by the Board to cause the submission of a criminal background check as required by O.C.G.A. § 43-26-7(d)(3);
 - (d) Documentation of one of the following within four years immediately preceding the date of application:
 1. Five hundred (500) hours of licensed practice as a registered nurse as documented on the verification of employment form provided by the Board and, effective February 1, 2016, documentation of completion of one of the five competency requirements as set forth in O.C.G.A. § 43-26-9 within two years preceding the date of application for reinstatement;
 2. Graduation from a nursing education program as defined in O.C.G.A. § 43-26-3(1.2); or
 3. Completion of a Board approved reentry program as defined in Rule 410-4-03.
 - (e) Secure and verifiable documentation of United States citizenship or lawful presence in the United States as required by Georgia law; and
 - (f) Any additional information requested by the Board needed to establish eligibility.
- (2) Reinstatement of the license is within the discretion of the Board.
- (3) The Board may require the passage of an examination or other competency assessments. The Board, in its discretion, may impose any remedial requirements deemed necessary.
- (4) The Board may deny reinstatement for failure to demonstrate current knowledge, skill and proficiency in the practice of nursing or being mentally or physically unable to practice nursing with reasonable skill and safety or for any ground set forth in O.C.G.A. § 43-26-11.

(5) The denial of reinstatement is not a contested case within the meaning of Chapter 13 of Title 50, but the applicant shall be entitled to an appearance before the Board.

(6) An application is active for one year after which a new application and fee are required.

(7) An applicant who is under investigation for possible violation of the Nurse Practice Act may not be issued a license until the matter is resolved to the satisfaction of the Board. The license may be denied or sanctioned despite the applicant meeting all other criteria for licensure.

O.C.G.A. §§ 43-1-25, 43-26-2, 43-26-5, 43-26-7(d), 46-26-8, 43-26-9, and 43-26-9.1

410-4-.02 Licensure by Reinstatement (LPN)

(1) An applicant for licensure by reinstatement who was previously licensed as a practical nurse in the state of Georgia must submit the following:

(a) A complete application containing data required by the Board attesting that all information contained in, or referenced by, the application is complete and accurate and is not false or misleading;

(b) The required application processing fee which is not refundable;

(c) Completed registration as required by the Board to cause the submission of a criminal background check as required by O.C.G.A. § 43-26-36.1;

(d) Documentation of one of the following within four years immediately preceding the date of application:

1. Five hundred (500) hours of licensed practice as a practical nurse as documented on the verification of employment form provided by the Board;

2. Graduation from a nursing education program as defined in O.C.G.A. § 43-26-32(1.1); or

3. Completion of a Board approved reentry program as defined in Rule 410-4-.04.

(e) Secure and verifiable documentation of United States citizenship or lawful presence in the United States as required by Georgia law; and

(f) Any additional information requested by the board needed to establish eligibility.

(2) Reinstatement of the license is within the discretion of the Board.

(3) The Board may require the passage of an examination or other competency assessments. The Board, in its discretion, may impose any remedial requirements deemed necessary.

(4) The Board may deny reinstatement for failure to demonstrate current knowledge, skill and proficiency in the practice of nursing or being mentally or physically unable to practice nursing with reasonable skill and safety or for any ground set forth in O.C.G.A. § 43-26-40.

(5) The denial of reinstatement is not a contested case within the meaning of Chapter 13 of Title 50, but the applicant shall be entitled to an appearance before the Board.

(6) An application is active for one year after which a new application and fee are required.

(7) An applicant who is under investigation for possible violation of the Nurse Practice Act may not be issued a license until the matter is resolved to the satisfaction of the Board. The license may be denied or sanctioned despite the applicant meeting all other criteria for licensure.

Authority: O.C.G.A. §§ 43-1-25, 43-26-31, 43-26-32, 43-26-35, 43-26-36, 43-26-36.1, and 43-26-39

410-4-.03 Reentry (RN)

(1) An applicant for licensure by endorsement or reinstatement that has not provided documentation of at least five hundred (500) hours of licensed practice as a registered nurse or graduation from an approved nursing education program as defined in O.C.G.A. § 43-26-3(1.2)

must complete a Board approved reentry program prior to licensure.

(2) A Board approved reentry program is comprised of forty (40) contact hours of didactic study and one hundred and sixty (160) hours of clinical study.

(a) Didactic study courses must be selected from Board approved continuing competency providers and must include the following areas of study:

1. Physician Orders

2. Medication Administration

3. Intravenous (IV) Therapy

4. Respiratory Care

5. Physical Assessment

6. Documentation

(b) Clinical study must include the following areas of practice:

1. Functions of the registered nurse as defined in O.C.G.A. §43-26-3(6) and (8);
2. Instruction in and opportunities to demonstrate ability to safely practice nursing and knowledge in caring for clients;

(c) Review of the Georgia Nurse Practice Act and Board rules;

(d) Evidence of current health care provider cardio pulmonary resuscitation (CPR) certification;

(3) A reentry plan must contain the following information:

(a) Outline for the completion of the didactic and clinical components of the plan which contains the following:

1. Course objectives, content outline and time allocation;
2. Didactic and clinical learning experiences including teaching methodologies;
3. Plan for evaluation of competencies and ability to practice nursing with reasonable skill and safety.
4. List of all instructors or preceptors and their functions and teaching roles;
5. Projected schedule for the clinical component; and

6. Evidence of clinical resources which documents support and availability for required experiences.

(4) Reentry programs may be conducted at a post-secondary educational institution, a health care facility or other agency.

(5) A reentry program must be coordinated by a registered nurse licensed in good standing with the Georgia Board of Nursing who has had at least two (2) years experience in direct patient nursing practice as a registered nurse or other licensed practitioner as approved by the Board.

(6) A reentry program must be approved by the Board and a temporary permit issued to the applicant prior to the start of the clinical component.

(7) A reentry program must be completed within six months after approval by the Board.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2, 43-26-5, 43-26-7(c) and (d), 43-26-8 and 43-26-9

410-4-.04 Reentry (APRN)

(1) An applicant for initial authorization or reinstatement that has not provided documentation of at least five hundred (500) hours of licensed practice as an advanced practice registered nurse in the area of practice for which an application was submitted or graduation from an approved nursing education program as defined in O.C.G.A. § 43-26-3(1.2) must complete a Board approved reentry program before obtaining authorization.

(2) A Board approved reentry program is comprised of forty (40) hours of didactic study and one hundred and sixty (160) hours of clinical study. Course objectives must be stated which show the relationship between theory and practice and indicate behaviors consistent with the ability to practice as an advanced practice registered nurse with reasonable skill and safety. The Board may waive the forty (40) hours of didactic study if the applicant has passed a Board approved certification exam within the four years preceding the date of application.

(3) Reentry programs may be conducted at a post-secondary educational institution, a health care facility or other agency.

(4) A reentry program must be coordinated by an advanced practice registered nurse licensed and authorized in good standing with the Georgia Board of Nursing, practicing in the population of the reentry candidate's certification, and who has had at least two (2) years experience in direct patient nursing practice as an advanced practice registered nurse or other licensed practitioner as approved by the Board.

(5) A reentry program must be approved and a temporary permit must be issued prior to the applicant prior to the start of the clinical component.

(6) A reentry program must be completed within six months of after approval by the Board.

(7) A reentry program shall incorporate the following:

(a) Common medical-surgical conditions and management of common nursing problems associated with these conditions, including mental health principles associated with management of nursing problems;

(b) Functions of the advanced practice registered nurse as defined in Chapter 410-11;

(c) Instruction in and opportunities to demonstrate ability to safely practice nursing and knowledge in caring for clients with common medical-surgical problems;

(d) Review of the Georgia Nurse Practice Act and Board Rules;

(e) Outline for the completion of the didactic and clinical components of the plan which contains the following:

1. Course objectives, content outline and time allocation;
2. Didactic and clinical learning experiences including teaching methodologies; and
3. Plan for evaluation of student competencies and ability to practice nursing with reasonable skill and safety.
4. List of all instructors or preceptors and their functions and teaching roles; and
5. Projected schedule for the clinical component.

- (f) Evidence of current health care provider cardio pulmonary resuscitation (CPR) certification; and
- (g) Evidence of clinical resources which documents support and availability for required experiences.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2, and 43-26-5

410-4-.05 Reentry (LPN)

- (1) An applicant for licensure by endorsement or reinstatement that has not provided documentation of at least five hundred (500) hours of licensed practice as a licensed practical nurse or graduation from an approved nursing education program as defined in O.C.G.A. § 43-26-32(1.1) must complete a Board approved reentry program prior to licensure.
- (2) A Board approved reentry program is comprised of forty (40) hours of didactic study and one hundred and sixty (160) hours of clinical study. Course objectives must be stated which show the relationship between theory and practice and indicate behaviors consistent with the ability to practice nursing with reasonable skill and safety.
- (3) Reentry programs may be conducted at a post-secondary educational institution, a health care facility or other agency.
- (4) A reentry program must be coordinated by a registered nurse licensed in good standing with the Georgia Board of Nursing who has had at least two (2) years experience in direct patient nursing practice as a registered nurse.
- (5) A reentry program must be approved and a temporary permit must be issued prior to the applicant prior to the start of the clinical component.
- (6) A reentry program must be completed within six months of after approval by the Board.
- (7) A reentry program shall incorporate the following:
 - (a) Common medical-surgical conditions and management of common nursing problems associated with these conditions, including mental health principles associated with management of nursing problems;
 - (b) Functions of the licensed practical nurse as defined in O.C.G.A. § 43-26-32(1) and (7);
 - (c) Instruction in and opportunities to demonstrate ability to safely practice nursing and knowledge in caring for clients with common medical-surgical problems;
 - (d) Review of the Georgia Nurse Practice Act and Board rules;
 - (e) Outline for the completion of the didactic and clinical components of the plan which contains the following:
 - 1. Course objectives, content outline and time allocation;
 - 2. Didactic and clinical learning experiences including teaching methodologies; and
 - 3. Plan for evaluation of student competencies and ability to practice nursing with reasonable skill and safety.
 - 4. List of all instructors or preceptors and their functions and teaching roles; and
 - 5. Projected schedule for the clinical component.
 - (f) Evidence of current health care provider cardio pulmonary resuscitation (CPR) certification; and
 - (g) Evidence of clinical resources which documents support and availability for required experiences.

Authority: O.C.G.A. §§ 43-1-25, 43-26-38, and 43-26-39

Rule 410-5 – Licensure Renewal

410-5-.01 Discontinuance of a Nursing Education Program. Amended.

- (1) The dean/director shall notify the Board in writing of the intent to discontinue a nursing education program at least one year prior to the discontinuance.
- (2) The dean/director shall submit a written plan for discontinuance of the program to include the:
 - (a) timetable;
 - (b) plan for students to complete the course of study or transfer to an approved nursing education program; and
 - (c) provision for permanent retention of student and graduate records.
- (3) When a class is not admitted in a given year, the nursing education program must close unless approval has been granted by the Board based on the justification for continuation submitted to the Board.
- (4) If a program is discontinued, the parent institution must provide for the completion of the course of study by all currently enrolled students either by continuing courses until those students have graduated, in accordance with 410-3-.02(5), or by transferring them to an approved nursing education program. Prior to the transfer of students, the parent institution must negotiate a written agreement, which delineates all responsibilities assumed by the participating parties. It must be signed by the respective administrative officers and submitted to the Board of Nursing for its review upon request.
- (5) The parent institution is responsible for providing for the permanent retention and security of student and graduate records.

~~(6) If the parent institution also closes, advice should be sought from the Board concerning the permanent safekeeping and availability of records of the nursing education program.~~

410-5-.01 Licensure Renewal (RN)

(1) Licenses shall expire on January 31 of even or odd years according to Joint Secretary, Professional Licensing Boards Rules 295-2-.05 and 295-2-.12.

(2) Licensees must submit a complete renewal application and the required fee on or before the posted deadline.

(3) Licensees may submit a late renewal application during the one month period immediately following the license expiration date. The late renewal period ends on the last day of February. A registered nurse may not practice nursing after the expiration date of his or her license.

(4) Licensees are not permitted to practice as a registered professional nurse without evidence of current, active licensure. The Georgia Board of Nursing's website shall be considered the primary source of verification for licensed individuals. Practicing as a registered nurse without a license is considered a misdemeanor and is prohibited by Georgia law.

(5) Licenses not renewed by the posted deadline shall be lapsed and may be reinstated at the discretion of the Board.

Authority: O.C.G.A. §§ 43-1-4, 43-1-7, 43-26-2, 43-26-5, 43-26-9 and 43-26-10

410-5-.02 Licensure Renewal (LPN)

(1) Licenses shall expire on March 31 of odd years according to Joint Secretary, Professional Licensing Boards Rule 295-2-.13.

(2) Licensees must submit a complete renewal application and the required fee on or before the posted deadline.

(3) Licensees may submit a late renewal application during the one month period immediately following the license expiration date. The late renewal period ends on April 30. A licensed practical nurse may not practice nursing after the expiration date of his or her license.

(4) Licensees are not permitted to practice as a licensed practical nurse without evidence of current, active licensure. The Georgia Board of Nursing's website shall be considered the primary source of verification for licensed individuals. Practicing as a licensed practical nurse without a license is considered a misdemeanor and is prohibited by Georgia law.

(5) Licenses not renewed by the posted deadline shall be lapsed and may be reinstated at the discretion of the Board.

Authority: O.C.G.A. §§ 43-1-4, 43-1-7, 43-26-32, 43-26-35, 43-26-39, and 43-26-42

Rule 410-6 – Inactive Status

410-6-.01 Licensure by Examination. Amended.

~~(1) The Board recognized licensing examination is the National Council Licensure Examination for Registered Nurses (NCLEX-RN), for which a passing result must be achieved.~~

~~(2) An applicant must pass the licensing examination within a three year period from the date of graduation for graduates of United States nursing education programs or the date of eligibility for graduates of out-of-country nursing education programs.~~

~~(3) An applicant whose period of eligibility has expired must reestablish eligibility as a duly qualified applicant by enrolling in and graduating from an approved nursing education program.~~

410-6-.01 Inactive Licensure Status (RN)

(1) A currently licensed registered professional nurse who wishes to maintain his or her license but who does not wish to practice nursing in this State may apply for inactive licensure status by submitting an application for inactive status and paying the required fee. A licensee granted inactive status is exempt from filing a biennial license renewal application and paying a license renewal fee. A licensee who holds an inactive license shall not practice as a registered professional nurse.

(2) An inactive license may be changed to active status by filing an application for reinstatement with the Board, complying with reinstatement requirements as defined in Board Rule 410-4-.01, and paying a reinstatement fee, as determined by the Board. The Board may require the applicant to demonstrate to the satisfaction of the Board that he or she has maintained current knowledge, skill and proficiency in the practice of nursing and that he or she is mentally and physically able to practice nursing with reasonable skill and safety.

Authority: O.C.G.A. §§ 43-1-22, 43-1-25, 43-26-5, and 43-26-9.1

410-6-.02 Applicants for Licensure by Examination.

(1) **Graduates of traditional nursing education programs:** Applicants for licensure by examination who have graduated from a board approved program as defined in O.C.G.A. § 43-26-3(1.2), and which program meets criteria similar to and not less stringent than those established by the Board, shall establish eligibility for the licensing examination by filing the following:

(a) a completed application, on the appropriate board form, accompanied by the required fee. An application is active for one year, after which a new application and fee are required;

(b) completed information and forms needed to submit the results of a fingerprint record check as required by O.C.G.A. § 43-26-7(4); and

(c) any additional information requested by the board needed to establish eligibility.

(2) **Graduates of nontraditional nursing education programs:**

(a) Applicants for licensure for examination who have graduated from a nontraditional nursing education program approved by the board, and which program meets the requirements of O.C.G.A. § 43-26-7(e), shall establish eligibility for the licensing examination by filing the following:

1. a completed application, on the appropriate board form, accompanied by the required fee. An application is active for one year, after which a new application and fee are required.

2. completed information and forms needed to submit the results of a fingerprint record check as required by O.C.G.A. § 43-26-7(b)(4); and

3. any additional information requested by the board needed to establish eligibility.

(b) The application shall contain the following information:

1. If the applicant entered the non traditional nursing education program as a licensed practical nurse ("LPN"):

(i) the date of entry and the date of graduation from the non traditional nursing education program;

(ii) the years of clinical experience in a health care facility as a LPN as of the date of entry into the non traditional nursing education program;

(iii) a transcript of applicant's LPN nursing education showing clinical training in pediatrics, obstetrics/gynecology, medical surgical, and mental illness, if any;

(iv) a transcript of applicant's non traditional nursing education; and

(v) information about a postgraduate preceptorship to be arranged by the applicant for 350 hours if the LPN has at least three (3) years of clinical experience in a health care facility as a LPN upon entry into the nontraditional nursing education program; and

(vi) information about a postgraduate preceptorship to be arranged by the applicant for 700 hours if the LPN has less than three (3) years of clinical experience in a health care facility as a LPN upon entry into the nontraditional nursing education program.

2. If the applicant entered the non traditional nursing education program as a military medical corpsman or a paramedic:

(i) the date of entry and the date of graduation from the non traditional nursing education program;

(ii) a transcript of applicant's non traditional nursing education; and

(iii) information about a 700 hour postgraduate preceptorship to be arranged by the applicant that complies with the statutory requirements and board policies and rules.

3. Applicants who entered a nontraditional nursing education program that meets the requirements of O.C.G.A. § 43-36-7(e) before July 1, 2008, and complete the program no later than June 30, 2011, shall be deemed to have met the criteria for licensure by examination stated in O.C.G.A. § 43-26-7(b)(2)(B). However, the board, in its discretion, may require additional clinical hours of experience prior to licensure for such applicants who:

(i) did not enter the non traditional nursing education program as a LPN; or

(ii) entered the non traditional program as a LPN but who do not have at least one year of clinical experience in a health care facility as a LPN.

(3) **Graduates of nursing education programs located outside of the United States.**

(a) In order to establish eligibility for examination, an applicant who has graduated from an out of country nursing education program must request or provide the following information in addition to criteria contained in paragraph (1) of this rule:

1. verification of current registered nurse licensure in another territory, province, state, district, or country directly from the licensing board;

2. academic transcript from the applicant's nursing education program in English or accompanied by a certified English language translation directly from the school, another licensing Board, or the Commission on Graduates of Foreign Nursing Schools (CGFNS);

3. if a curricular deficiency(ies) must be remediated, an official transcript documenting passing of the course(s) must be submitted directly by an approved educational institution;

4. documentation directly from the Educational Testing Service of a score of 500 (paper) or 173 (computer) on the Test of English as a Foreign Language (TOEFL) and 50 on the Test of Spoken English (TSE) for an applicant whose native language is not English. As of September 1, 2001, in lieu of the previously required English language tests, an applicant has one of two options: (1) either request the Commission on Graduates of Foreign Nursing Schools (CGFNS) to provide documentation of CGFNS certification directly to the Board office; or (2) request the Commission on Graduates of Foreign Nursing Schools' (CGFNS) Credentials Evaluation Service to provide a Nursing and Science Course-by-Course Report directly to the Board office. In addition, the Educational Testing Service must be requested to provide documentation of a score of 540 (paper) or 207 (computer) on the Test of English as a Foreign Language (TOEFL) directly to the Board office. Certain applicants may be exempt from the TOEFL requirement if they meet all of the following criteria: native language is English; country of initial nursing education was Australia, Bermuda, Canada, Ireland, Jamaica, New Zealand, South Africa, Trinidad, or the United Kingdom; language of instruction was English; and language of textbooks was English. International applicants who are currently licensed by endorsement in a United States jurisdiction shall be exempt from options (1) and (2).

(b) Prior to licensure by the board, the applicant must document three (3) months or 500 hours of licensed practice as a registered nurse in another territory, province, state, district or country during the four (4) years immediately preceding the date of current application;

(c) Prior to licensure by the board, an applicant who is unable to meet the requirement of paragraph (3)(c) of this rule must satisfactorily complete 160 hours, or an amount specified by the Board, of relevant nursing practice. Relevant nursing practice is any practice in which the job description requires a current, valid registered nurse license in the state of practice. The applicant who is engaging in relevant nursing practice must meet the following criteria:

1. be supervised/mentored by a registered nurse who holds a current valid license in the state/country in which the practice occurs;
2. submit a calendar/outline for the period of nursing practice for Board approval;
3. hold a temporary permit prior to beginning the period of nursing practice including orientation to the job, if applicable;
4. present the temporary permit to the supervising registered nurse prior to beginning the relevant nursing practice;
5. complete the relevant nursing practice within the six (6) month period in which the temporary permit is issued;
6. request the supervising RN to verify in writing, on a form provided by the Board, that the applicant has satisfactorily completed the relevant nursing practice;
7. return the temporary permit immediately if the relevant nursing practice is not begun or completed.

(4) **Licensing Examination.** After submitting a completed application and obtaining approval for examination from the board, each applicant must apply directly to the examination testing service each time the NCLEX-RN examination is taken.

(5) **Passage of licensing examination.** After approval by the board to take the licensing examination, applicants for examination must pass a board recognized licensing examination prior to licensure. Such examination may not be taken prior to graduation from an approved nursing education program. The passage of such examination by a graduate of a non traditional nursing education program who does not meet the other requirements of licensure under the provisions of O.C.G.A. § 43-26-7 shall not authorize such individual to practice nursing or to require the board to license such individual other than to issue, in its sole discretion, a temporary permit pursuant to O.C.G.A. § 43-26-8.

(6) **Temporary permits.** The board may issue a temporary permit, in the sole discretion of the board, to an applicant for the purpose of practicing nursing as a part of a board approved preceptorship as provided in O.C.G.A. § 43-26-8. The temporary permit shall be effective for a period of six months from the date of issuance and may be renewed only one time for an additional six month period.

(7) Applicants under investigation.

(a) An applicant who is under investigation for possible violation of the Georgia Registered Professional Nurse Practice Act shall be permitted to take the examination.

(b) An applicant who passes the licensing examination and is under investigation for possible violation of the Act may not be issued a license until the matter is resolved to the satisfaction of the Board. The license may be denied or sanctioned despite the applicant meeting all other criteria for licensure.

(8) Application for Licensure by Examination by Repeat Writers:

(a) An applicant who fails the licensing examination is not eligible for a license or to practice as a registered professional nurse in Georgia.

(b) An applicant who fails the licensing examination must complete a new application for licensure, accompanied by the required fee, and all information required to complete the new application.

(9) **Defined Terms.** For the purposes of this Rule, the terms below are defined as follows:

(a) "Approved nursing education program" or "board approved program" means a nursing education program located in Georgia or outside of Georgia that has been approved as meeting criteria established by the board and has met the provisions of O.C.G.A. § 43-26-3(1.2).

(b) "Board" means the Georgia Board of Nursing.

(c) "Clinical experience" or "clinical practice" means the "hands on" clinical practice of nursing.

(d) "Health care facility" means an acute care inpatient facility, a long term acute care facility (LTAC), and outpatient facilities that include multisystem surgical centers and public health departments, or a combination of the above.

(e) "Preceptorship" means a program of clinical experience or clinical practice approved by the board in which an applicant gains a stated number of hours of clinical experience or clinical practice in a health care facility located in Georgia. During the preceptorship, the applicant must be under the supervision of a preceptor that is a Georgia licensed RN who is:

1. located in Georgia;

2. has a minimum of 18 months experience in an acute care practice setting; and

3. has no history of disciplinary action with a licensing board. Prior to board approval, a written letter of agreement between the applicant and RN preceptor shall be filed with the board that is written on letterhead stationery of the designed Georgia health care facility, that clearly states the location of the preceptorship, and is signed by the applicant, Preceptor, and a representative of the health care facility where the preceptorship is to occur. Successful completion of the preceptorship shall be verified in writing by the preceptor prior to licensing.

(f) "Non traditional nursing education program" means a nursing education program that has been approved by the board and meets all the requirements of O.C.G.A. § 43-26-7(3).

(g) "Year" means a minimum of 1800 hours. For example, one year of clinical experience or clinical practice means a minimum of 1800 hours of clinical experience or clinical practice.

410-6-.02 Inactive Licensure Status (LPN)

(1) A currently licensed practical nurse who wishes to maintain his or her license but who does not wish to practice nursing in this State may apply for inactive licensure status by submitting an application for inactive status and paying the required fee. A licensee granted inactive status is exempt from filing a biennial license renewal application and paying a license renewal fee. A licensee who holds an inactive license shall not practice as a licensed practical nurse.

(2) An inactive license may be changed to active status by filing an application for reinstatement with the Board, complying with reinstatement requirements as defined in Board Rule 410-4-.02, and paying a reinstatement fee, as determined by the Board. The Board may require the applicant to demonstrate to the satisfaction of the Board that he or she has maintained current knowledge, skill and proficiency in the practice of nursing and that he or she is mentally and physically able to practice nursing with reasonable skill and safety.

Authority: O.C.G.A. §§ 43-1-22, 43-1-25 and 43-26-35

Rule 410-7 – Unlicensed Practice

410-7-.01 Licensure by Endorsement for Registered Nurses Licensed in Another NCLEX-RN (SBTPE) Jurisdiction. Amended.

(1) An applicant who is licensed as a registered nurse in another jurisdiction must:

(a) have graduated from a nursing education program prior to passing a licensing examination recognized by the Board as valid for licensure as a registered nurse in Georgia:

1. the current National Council Licensure Examination for Registered Nurses (NCLEXRN) for which a passing result must be achieved.

2. earlier series of the NCLEX-RN and State Board Test Pool Examination (SBTPE) if all required parts of the test were taken and graded, and if the scores qualified the nurse for a license in another licensing jurisdiction or country using either the NCLEX-RN or SBTPE at the time of licensure;

3. licensing examinations administered by the Board of Nursing of another state or territory of the United States prior to 1951, if the scores qualified the nurse for licensure;

(b) be currently licensed under the laws of another NCLEX-RN jurisdiction until licensure in Georgia is approved;

(c) request the Board(s) of original and current licensure to submit verification of (a) and

(b) above on a form provided by the Georgia Board of Nursing.

(2) The applicant shall submit a completed application, on a form provided by the Board, the required fee, and requested supporting documents.

(3) The applicant must be able to document one of the following within the four (4) years immediately preceding the date of current application:

(a) three (3) months or 500 hours of licensed practice as a registered nurse;

(b) graduation from a nursing education program within the four (4) years immediately preceding the date of current application; or

(c) completion of a Board-approved reentry/refreshers program within the four (4) years immediately preceding the date of current application.

(4) An applicant who is unable to meet the requirements of 410-7-.01 (3) (a) (b) or (c) must satisfactorily complete both of the following:

- (a) 40 hours of study relevant to nursing practice within one (1) year of the date of application. Relevant study must include at least four (4) different content areas to include cardio-pulmonary resuscitation and Georgia Board of Nursing Law (Nurse Practice Act) and Rules. The Board may waive this requirement if the applicant has passed NCLEX-RN within the four (4) years immediately preceding the date of current application.
- (b) 160 hours, (or amount specified by the Board) of relevant nursing practice in accordance with the criteria specified in 410-6-.02 (2)(f) 1. through 7.
- (5) An applicant who has submitted a completed application accompanied by evidence of current licensure in another NCLEX-RN jurisdiction may be issued a temporary permit to practice as a registered nurse for six (6) months.
- (6) The Georgia Board of Nursing's website shall be considered primary source of verification for licensed individuals. If applicable, a temporary permit or permanent license must be presented to the employer prior to employee's beginning any nursing position (including orientation) for which current Georgia licensure as a registered professional nurse is required.
- (7) An applicant who holds an endorsement temporary permit may use the title registered nurse (R.N.).
- (8) An application is considered valid for one year from the date of submission. After one year, an applicant must submit a new application, photograph, required fee, and those supporting documents which are subject to change.
- (9) An applicant who is under investigation for possible violation of any Nurse Practice Act may not be issued a license until the matter is resolved to the satisfaction of the Board. If the charges are substantiated, the license may be denied or sanctioned despite the applicant's meeting all other criteria for licensure.
- (10) An applicant for licensure by endorsement who has begun employment as a registered nurse in Georgia prior to issuance of a temporary permit or license shall be subject to a referral to the Legal Services Office for a Consent Order which may include:
 - (a) a public reprimand; and
 - (b) a fine of \$50.00 per month (up to \$250.00) for practice between two (2) and six (6) months (or any portion thereof);
 - (c) a fine of \$75.00 per month for each additional month (or portion thereof) between seven (7) and twelve (12) months;
 - (d) a fine at the Board's discretion for unlicensed practice extending over one (1) year.

410-7-.01 Unlicensed Practice

An applicant for licensure who has practiced as a licensed practical nurse or registered professional nurse in the State of Georgia while not holding an active license issued by the Board shall be subject to disciplinary action by the Board which may include:

- (a) A private or public reprimand;
- (b) A fine of \$50.00 per month for up to six months of unlicensed practice;
- (c) A fine of \$75.00 per month for each additional month up to one year;
- (d) A fine amount determined at the Board's discretion for unlicensed practice greater than one year.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2, 43-26-5, 43-26-6, 43-26-10, 43-26-33 and 43-26-42

Rule 410-8 – Registered Nursing Education Programs

410-8-.01 Reinstatement of License. Amended.

- (1) The applicant shall submit a completed application, on a form provided by the Board, a photograph and the required fee.
- (2) The applicant must be able to document **one** of the following:
 - (a) three (3) months or 500 hours of licensed practice as a registered nurse during the four (4) years immediately preceding the date of application;
 - (b) graduation from a nursing education program within the four (4) years immediately preceding the date of current application; or
 - (c) completion of a Board approved reentry or refresher program within the four (4) years immediately preceding the date of current application.
- (3) An applicant unable to meet the requirements of 410-8-.01(2) must complete 40 hours of relevant study as described in 410-7-.01(4)(a) and 160 hours of relevant nursing practice as described in 410-6-.02(f)1. through 7.
- (4) The Georgia Board of Nursing's website shall be considered the primary source of verification for licensed individuals. If applicable, a temporary permit or permanent license must be presented to the employer prior to the employee beginning any nursing position (including orientation) for which current Georgia licensure as a registered professional nurse is required.
- (5) An applicant who has been or is under investigation for possible violation of the Nurse Practice Act may not be issued a temporary permit or license until the matter is resolved to the satisfaction of the Board. If charges are substantiated, the license may be denied or sanctioned despite the applicant meeting all other criteria for reinstatement.

410-8-.01 General Requirements

(1) Rules for nursing education programs shall provide reasonable and uniform standards within which flexibility and creativity, based upon prevailing educational principles, are possible.

(2) A parent institution is defined as an educational institution that is part of the University System of Georgia, the Technical College System of Georgia or a nonprofit postsecondary institution. The board reserves the right to approve any parent institution outside of these categories.

(3) The course of study for initial licensure may be offered through an approved combination of on site, distance learning, or online teaching/learning strategies. Neither class nor clinical learning activities may be offered exclusively through electronic modalities. The majority of learning activities in practice settings must be taught by nursing faculty members according to Rules 410-8-.05 and 410-8-.06.

(4) A parent institution shall grant degrees and maintain the locus of control and fiscal responsibility for the planning, implementation, teaching, and evaluation of the nursing education program.

(5) Faculty and students in a nursing education program shall enable a curriculum that educates graduates to become eligible for licensure by examination as registered nurses or to provide educational mobility for registered nurses.

(6) Nursing education programs that provide educational mobility solely for registered nurses pursuing baccalaureate degrees in nursing have the option of seeking and maintaining Full Approval. If the parent institution subsequently develops and implements a prelicensure baccalaureate program, in which a registered nurse track is an option, the existing RN-BSN program will cease to exist as a single entity. Board approval will apply to one baccalaureate program according to Rule 410-8-.02.

(7) If approval for an RN-BSN Program, as a single entity, is not granted at the inception of the program and is sought at a later date, the program shall be required to comply with the rules for the development and implementation of a new program in order to be considered for Board approval.

(8) Board representatives shall conduct scheduled site visits to nursing education programs on a regular basis every four (4) years. At its discretion, the Board may schedule site visits more frequently. A nursing education program may request a site visit.

(9) Representatives of the parent institution and/or the nursing education program shall be notified of any Board meeting at which action is to be taken relative to the program and shall be sent documentation of the action(s) in writing.

(10) Representatives of the parent institution and/or the nursing education program may appeal any board action within 90 days of written notification.

(11) To be approved as first-time writers of the licensing examination, applicants must have graduated from a nursing education program with Initial, Full or Conditional Approval at the time of graduation.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2, 43-26-5(a)(4)-(6) and 43-26-7

410-8-.02 Unlicensed Practice. Amended.

An applicant for reinstatement whose license is revoked by administrative law for failure to renew but who has continued employment as a registered nurse without a license shall be subject to a referral to the Legal Services Office for a Consent Order which may include:

(a) a public reprimand; and

(b) a fine of \$50.00 per month (up to \$250.00) for practice between two (2) and six (6) months (or any portion thereof);

(c) a fine of \$75.00 per month for each additional month (or portion thereof) between seven (7) and twelve (12) months;

(d) a fine at the Board's discretion for unlicensed practice extending over one (1) year.

410-8-.02 Nursing Education Program Approval

(1) Developing Programs.

(a) The Board may grant Developmental Approval to a proposed nursing education program when compliance with Rules 410-8-.12 paragraphs (1) through (3) has been documented.

(b) The Board may grant Initial Approval to a nursing education program with Developmental Approval when compliance with Rule 410-8-.12(4) has been documented. Initial Approval is required prior to the enrollment of at least twenty (20) students in the first nursing courses.

(c) The Board may continue Initial Approval prior to the graduation of the first class when review of materials specified in Rule 410-8-.12(3)(c), the most recent annual report, and most recent site visit report, and program responses to it document compliance with the rules.

(d) The Board may grant Full Approval to a nursing education program with Initial Approval when review of the most recent annual report, the most recent site visit report, and program responses to it document compliance with the rules. At least eighty (80) percent of all graduates must pass the licensing examination as first-time writers within one (1) calendar year of the graduation date. For single entity RN-BSN programs seeking Full Approval, transcripts of the first graduates must be submitted to the Board in addition to any other requested documents.

(e) If the program is not eligible for Full Approval after graduation of the first class, Conditional Approval may be imposed according to Rule 410-8-.02(3).

(2) Established Programs.

(a) The Board may continue the Full Approval of a nursing education program for any period up to four (4) years. Approval is based upon documentation of compliance with rules relating to annual reports, the most recent site visit report and program responses to it, and a passing percentage of at least eighty (80) percent of all first-time writers on the licensing examination over the four (4) most recent calendar years.

(b) A nursing education program, with Full Approval, must submit a written assessment and plan of action for review by the Board if the passing percentage of all first-time writers on the licensing examination is less than eighty (80) percent in a calendar year.

(c) A nursing education program, with Full Approval, must submit a written evaluation of the plan of action for review by the Board if the passing percentage of all first-time writers on the licensing examination is less than eighty (80) percent for a second consecutive calendar year. A site visit by Board representatives will be scheduled.

(3) Conditional Approval.

At any point during the initial approval period for developing programs or within the four-year approval cycle for established programs, the Board may impose Conditional Approval on a nursing education program for reasons, including but not limited to, the following conditions: review of any annual report reveals noncompliance with the rules; review(s) of the most recent site visit report(s) and program response(s) to it reveal continued, documented noncompliance with the rules; and/or the passing percentage of first-time writers on the licensing examination was less than eighty (80) percent for two (2) consecutive calendar years and/or the four-year average was less than eighty (80) percent.

(4) Granting of Full Approval for a Nursing Education Program on Conditional Approval.

(a) The granting of Full Approval will require documentation of outcome measures, including but not limited to NCLEX-RN results, on an annual basis until compliance with conditions identified in Rule 410-8-.02(3) is documented.

(b) The granting of Full Approval may be for any period of time up to four (4) years as determined by the board. If Conditional Approval has been imposed for noncompliance with the identified four-year passing percentage on the licensing examination, the Board at its discretion may grant Full Approval for one (1) year. The one (1) year approval is based upon the program having documented evidence of at least two (2) consecutive years of a passing percentage of at least eighty (80) percent of its first-time writers in each calendar year even though the four-year average is not eighty (80) percent.

(5) Withdrawal of Approval.

The Board may withdraw the approval of a nursing education program on Conditional Approval when continued, documented noncompliance with the rules fails to be corrected within a time period specified by the Board. In order for students, who are currently enrolled in at least one nursing course when approval is withdrawn, to be eligible for licensure upon graduation, the nursing education program must submit a written plan for their completion of the program or for their transfer to another approved nursing education program. Prior to the actual date of withdrawal of approval, the nursing program will continue to have time-limited Conditional Approval so that students will be identified as having graduated from an approved program and be eligible for licensure by examination.

(6) Reinstatement of Withdrawn Approval.

(a) Representatives of the parent institution and/or the nursing education program may appeal in writing to the Board for reconsideration of withdrawn approval within ninety (90) days of written notification.

(b) Upon written request, representatives of the parent institution and/or the nursing education program may appear before the Board to review its findings regarding program deficiencies and/or the adequacy of the program's plan of action.

(c) After documentation of compliance with rules, as determined by the Board, a nursing education program may petition the Board in writing for reinstatement of approval status and permission to enroll students.

(d) If approval is not reinstated, the parent institution must comply with all rules for the development and implementation of a new nursing education program.

(7) Reconstitution of a Nursing Education Program.

(a) If a program, which has had its approval withdrawn, decides to develop and implement a reconstituted (new) nursing education program, it must document compliance with Rule 410-8-.12. At its discretion, the Board may not require the fee for new programs and the feasibility study if Conditional Approval has previously been imposed on the program.

(b) The average passing percentage of the first class must be at least eighty (80) percent. If compliance with this rule is not documented, approval will be withdrawn.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2 and 43-26-5(a)(4)-(6)

410-8-.03 Organization and Administration

(1) The nursing education program must be an integral part of a parent institution accredited by the Commission on Colleges of the Southern Association of Colleges and Schools.

- (2) The relationship of the nursing unit as a program, department, division, school, or college to the parent institution must be delineated on a current organizational chart in accordance with the structural or functional plan of the parent institution.
- (3) The nurse administrator shall assume authority and responsibility for the administration, planning, implementation, and evaluation of the nursing education program. This will include oversight of and budgeting for the program, selection and evaluation of qualified faculty, and evaluation of program outcomes. A percentage of time for, and description of, administrative responsibilities and must be identified. The Board must be notified within 30 days of a change in the nurse administrator.
- (4) The minimum length of a nursing education program shall be six (6) academic quarters or four (4) academic semesters, each of which shall include nursing courses with learning activities in classes, simulated settings, and practice settings.
- (5) If a nursing education program has an accelerated option for students who have earned a baccalaureate or higher degree in another discipline, the minimum length of study as identified in Rule 410-8-.03(4) may be shortened. The course of study must be comparable to that required for prelicensure students graduating from the same nursing education program.
- (6) Adequate financial resources shall be provided for the effective operation of the nursing education program and the professional development of faculty.
- (7) A faculty/student ratio of at least one (1) full-time nursing faculty member for each twenty (20) students enrolled in the nursing education program (including audited courses) shall be maintained.
- (8) The nursing education program shall have a plan for continuous quality assessment and improvement which includes, but is not limited to: organization and administration; curriculum; faculty; students; performance of students and graduates; and educational facilities and resources.
- (9) Implementation of the plan for continuous quality assessment and improvement, findings, and relevant actions and/or decisions shall be documented.
- (10) All information, course materials, and documentation pertaining to the nursing education program shall be accurate and current.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2 and 43-2-5(a)(4)-(6)

410-8-.04 Curriculum

- (1) The nursing education program shall be consistent with the mission/purpose, outcomes, and policies of the parent institution and the established and emerging standards of nursing education and practice.
- (2) Faculty shall develop the curriculum so that the philosophy/assumptions, outcomes, written plan for its organization and development, teaching/learning strategies, assessment of outcomes and policies are internally consistent.
- (3) The curriculum shall be inclusive of courses in humanities, natural sciences, social sciences and nursing which are offered in a logical and supportive sequence appropriate for collegiate study. Courses in the natural sciences must have class and laboratory components.
- (4) The curriculum must be balanced in terms of semesters/quarters, contact hours, and student workload.
- (5) The curriculum must be inclusive of learning activities in class, simulated settings, and practice settings, in reality-based situations, incorporating caring and the promotion, maintenance, and restoration of health or end-of-life care with people of all age groups who have commonly occurring acute and long-term physical and mental health problems, illnesses, and experiences.
- (6) Practice-based learning activities shall occur in diverse settings representative of the continuum of health care and with opportunities for students to engage in learning activities that enable the goals of the curriculum.
- (7) The curriculum shall be inclusive of current and emerging issues in nursing, health care, and society.
- (8) Teaching/learning strategies, activities, and interactions must include opportunities for praxis, reflection, critical thinking, problem-solving, and decision-making.
- (9) Teaching/learning strategies, activities, and interactions must facilitate the transition to professional practice by incorporating concepts, including but not limited to: accountability; the provision and coordination of care; advocacy; and collaboration.
- (10) In a baccalaureate program, learning activities in research, community health nursing, and management/leadership shall be included.
- (11) Various strategies shall be used in the assessment and evaluation of student outcomes.
- (12) Students enrolled in a nursing education program leading to initial licensure may participate in cooperative internship experiences or programs. Academic credit may be awarded provided that the relationship between the academic and employment aspects of the course is clearly delineated consistent with Rules 410-8-.04; 410-8-.05(10); 410-8-.05(11); 410-8-.06(2), 410-8-.07(5) and 410-8-.08.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2, and 43-26-5(a)(4)-(6)

410-8-.05 Faculty

- (1) A nursing faculty member includes any registered nurse, appointed by the parent institution, regardless of the institutional designation, who is engaged in teaching/evaluation in classes, simulated settings, and practice settings.
- (2) The nurse administrator and nurse faculty members of any nursing education program must be currently licensed as registered nurses in Georgia and authorized as advanced practice nurses (if applicable) from the initial date of appointment.
- (3) Faculty who are assigned to practice settings in another state or country shall comply with the relevant nurse practice act in that jurisdiction.
- (4) The nurse administrator, who is appointed with the authority and responsibility for the development, administration, and evaluation of the nursing program(s) within the nursing unit, must have at least one (1) earned graduate degree in nursing and at least three (3) years of teaching experience in a nursing education program leading to initial registered nurse licensure or completion of a higher degree in nursing.
- (5) Any registered nurse, appointed by the parent institution, who is engaged in teaching/evaluation in classes, simulated settings and practice settings, must hold at least a baccalaureate or higher degree in nursing.
- (6) For any given academic term, the nursing education program must be able to provide evidence that at least the majority of faculty members are full time and that at least three-fourths of individual full-time and part-time faculty members hold one (1) or more earned graduate degrees in nursing.
- (7) A full-time faculty member with only a baccalaureate degree in nursing must be able to provide documentation of progress toward an earned graduate degree in nursing, have experience in the area of responsibility, and be directed by a faculty member with at least one (1) earned graduate degree in nursing.
- (8) Faculty members shall have the graduate nursing education, expertise, and professional development necessary to enable the goals/outcomes of the curriculum.
- (9) For any course with a nursing title and number, a qualified registered nurse faculty member must be the coordinator.
- (10) Faculty members must be available to direct, coach, mentor, and critique students engaged in learning activities in classes, simulated settings, and practice settings.
- (11) A faculty/student ratio of at least one (1) registered nurse faculty member for no more than ten (10) students engaged in actual, interactive learning activities in practice settings must be maintained to provide for the safety of patients/clients, students, and faculty members.
- (12) Faculty members shall participate in and document the development, implementation, and evaluation of the nursing education program.
- (13) Policies in effect for nursing faculty, including workload, shall be consistent with those in effect for all faculty appointed by the parent institution.
- (14) The process of selection, approval, and role development, and delineation of responsibilities of full-time and part-time faculty members shall be documented.
- (15) Out of state nursing education programs that have faculty and students engaged in learning activities in Georgia practice settings must comply with the Georgia Registered Professional Nurse Practice Act.
- (16) An international nursing educator, who is not licensed as a registered professional nurse in Georgia and who is participating as an exchange visitor in a nursing education program, may direct, coach, mentor, and critique students engaged in learning activities in classes and simulated settings under the following conditions:
 - (a) Responsibility for any course, in which the international nursing educator participates, must be assumed by a faculty member appointed by the parent institution;
 - (b) Monetary compensation to the international nursing educator must not be provided by the parent institution;
 - (c) Until licensure by examination has been granted, the international nursing educator must not be involved in actual, interactive learning activities with students and patients/clients in practice settings; and
 - (d) In advance of the exchange period, the Board of Nursing must be notified of the academic and regulatory credentials of the international nursing educator for a one-time period not to exceed all or part of a quarter or semester.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2 and 43-26-5(a)(4)-(6)

410-8-.06 Learning Activities with Preceptors

- (1) Learning activities with preceptors may be included in a curriculum on a limited basis.
- (2) The student shall be enrolled in the course in which the learning activities with preceptors occur and shall not be compensated by the practice setting during this time.
- (3) The process of selection, approval, and role development of preceptors shall be documented.

(4) The preceptor shall be currently licensed as a registered nurse and authorized as an advanced practice nurse (if applicable) according to the Georgia Registered Professional Nurse Practice Act or the statute in the state/country in which the practice setting is located.

(5) The preceptor for a registered nurse student may be a non-nurse provided that the designated faculty member serves as the co-preceptor.

(6) The preceptor shall be educated at preferably the same or higher level as the student and have at least one year of work experience in the practice setting in which the learning activity occurs.

(7) The preceptor shall have the education and/or expertise to enable the learning goals of the student.

(8) The preceptor shall be selected collaboratively by the designated faculty member and the registered nurse responsible for nursing care in the practice setting.

(9) The preceptor shall interact with no more than two (2) students at any given time.

(10) Each student and preceptor shall have a readily available, designated faculty member who is responsible for the learning activities in compliance with Rules 410-8-.04 and 410-8-.05(10), (11).

(11) The designated faculty member shall meet with students and preceptors prior to and throughout the learning activities to clarify roles, learning goals, and the assessments of outcomes.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2, 43-26-5(a)(4)-(6) and 43-26-7

410-8-.07 Students

(1) Policies for nursing students shall be comparable to those for all students enrolled in the parent institution except in such instances where the nature of the nursing major may require variance. Students must be high school graduates or have documented equivalent education.

(2) Current, accurate, consistent, written information, including but not limited to, the course of study, admissions, options for advanced placement, acceleration, part-time study, articulation, progression, graduation, health requirements, the potential for criminal background checks and expanded medical profiles, and appeals shall be published.

(3) Students shall have opportunities to evaluate learning activities, full-time and part-time faculty members, preceptors, educational resources, and practice settings.

(4) Any registered nurse, who is a student in a baccalaureate or higher degree nursing program, must be currently licensed according to the Georgia Registered Professional Nurse Practice Act in order to engage in any actual, interactive learning activities with patients/clients.

(5) An applicant who has graduated from an international nursing education program and is required by the board to satisfy a curricular deficiency in an approved nursing education program in order to establish eligibility for licensure by examination must be considered as an unlicensed student.

(6) Any registered nurse, who is a student with learning activities in practice settings in another state or country, shall comply with the relevant nurse practice act.

(7) The process for verifying the current license or certificate of any student who holds a health-related license or certificate must be documented.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2, 43-26-5(a)(4)-(6) and 43-26-7

410-8-.08 Employment of Unlicensed Students and/or Graduates Prior to Licensure

(1) Unlicensed students, in conjunction with faculty members and/or preceptors, are exempt from licensure during the practice of nursing that is an integral part of a curriculum in a nursing education program.

(2) Students, who are not otherwise licensed or certified, shall be employed only as unlicensed nursing personnel. They shall not represent themselves as nursing students nor assume responsibilities within the scope of practice of a registered nurse.

(3) Graduates, who are not otherwise licensed or certified, shall be employed only as unlicensed personnel prior to licensure. They shall not assume responsibilities within the scope of practice of a registered nurse.

(4) The registered nurse supervising employed unlicensed students and/or graduates prior to licensure is referred to Rules 410-8-.08(2) and 410-8-.08(3) regarding job responsibilities.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2, 43-26-5(a)(4)-(6), 43-26-7, 43-26-10 and 43-26-12

410-8-.09 Performance of Graduates

(1) Acceptable performance on the licensing examination for each nursing education program shall be a passing rate of at least eighty (80) percent of its first-time writers in any given calendar year.

(2) A passing percentage of at least eighty (80) percent of all first-time writers on the licensing examination over the four (4) most recent years must be maintained.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2, 43-26-5(a)(4)-(6) and 43-26-7

410-8-10 Educational Facilities, Resources, and Practice Settings

(1) The parent institution shall provide for and maintain facilities, resources, and services for the effective development and implementation of the nursing education program.

(2) Classes, simulated settings, equipment, and supplies should facilitate the learning goals of the curriculum.

(3) Adequate storage space, with security as appropriate, must be provided for supplies, equipment, and materials.

(4) Comprehensive, current, and pertinent print and non-print learning resources must be available for faculty and student needs.

(5) Office and meeting space, with appropriate furnishings and equipment, must be provided for the nurse administrator, faculty members, and staff.

(6) Secretarial personnel and support services must be available to meet the needs of faculty members and students.

(7) The parent institution shall maintain a written agreement with any agency that provides educational facilities and resources for the nursing education program which delineates the responsibilities of all involved parties.

(8) Any practice setting affiliating with a nursing education program must have documented approval by appropriate regulatory bodies (if applicable).

(9) Any practice setting affiliating with a nursing education program must have available and appropriate personnel, facilities, and resources to enable collaborative planning, implementation, and evaluation of learning activities.

(10) The parent institution shall maintain a written agreement with each practice setting in which actual, interactive learning activities occur that delineates the responsibilities of involved parties.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2 and 43-26-5(a)(4)-(6)

410-8-11 Reports

(1) Annually by July 1, each nursing program with enrolled students must provide the board with requested information pertaining to the time period between July 1 of the previous year and June 30 of the current year.

(2) The board must receive written reports by a specified date for review at a designated board meeting. Reports include, but are not limited to: advance site visit information; program responses to site visit reports; offering of a nursing course(s) at an off-campus site prior to implementation; new tracks within an approved prelicensure program; and development of major curricular or program changes prior to implementation.

(3) A written explanation must be provided to the board if a program which should have students eligible for graduation in a given year does not have them.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2 and 43-26-5(a)(4)-(6)

410-8-12 Development and Implementation of New Nursing Education Programs

(1) To obtain approval by the Board for the development of a new nursing education program, the chief administrative officer of a parent institution proposing the development and implementation of a new nursing education program must submit a letter of intent to the Board. The following information must be included:

(a) A completed application signed by the chief administrative officer of the parent institution;

(b) A board-approved feasibility study, completed within one year of the date of the letter, which includes, but is not limited to: rationales for the establishment of the proposed nursing education program documenting an educational need which cannot be met by existing nursing education programs; financial resources; educational facilities and resources; faculty members; and practice settings;

(c) Evidence of accreditation of the parent institution by the Commission on Colleges of the Southern Association of Colleges and Schools;

(d) A written plan for the recruitment and appointment of a qualified nurse administrator and faculty members to teach courses across the curriculum; and

(e) The nonrefundable, required fee which does not guarantee any approval status;

- (f) Documentation of the appointment of a registered nurse, currently licensed in Georgia, with the graduate nursing education and expertise necessary to develop and implement the proposed nursing education program and assess its outcomes;
- (g) An affidavit of approval of the proposed nursing education program by the highest governing body of the parent institution within one year of the date of submission of the application;
- (h) Documentation of projected revenue sources (federal, state, private, grants, gifts) and expenditures for five (5) fiscal years to support the development and implementation of the proposed nursing education program. The information must include, but is not limited to: appointment of sufficient qualified nursing faculty members (consistent with Rule 410-8-.05); appointment of secretarial personnel and support services; and provision of print and non-print learning resources, academic support courses, and educational resources in compliance with Board rules;
- (i) A written description for each practice setting proposed for learning activities with a letter of commitment from practice setting personnel to include the possible impact on existing, affiliating nursing programs; and
- (j) A five-year timeline for the development and implementation of the nursing education program which includes cohorts of students and faculty members; and
- (k) A proposed timeline for initiating and expanding the program.
- (2) The nurse administrator and at least two (2) (full-time or part-time) faculty members with the graduate nursing education and expertise necessary to develop and implement the nursing education program and assess its outcomes, must be appointed by the parent institution to submit the following materials for Board review at least twelve (12) months prior to the enrollment of students in the first nursing course(s):
 - (a) Faculty qualification records for the nurse administrator and faculty members;
 - (b) Program purpose or mission statement;
 - (c) Program philosophy/assumptions;
 - (d) Goals/outcomes of the curriculum;
 - (e) Written plan for the organization and development of the curriculum;
 - (f) Curriculum plan, consistent with Rule 410-8-.04, showing the placement, sequence, and credit distribution of all nursing and non-nursing courses;
 - (g) Syllabus for each nursing course to include the title, credit distribution, prerequisites and corequisite courses, goals/outcomes, and course outline;
 - (h) Plan for continuous quality assessment and improvement consistent with Rule 410-8-.03(8);
 - (i) Information specific to the nursing education program, including but not limited to, admissions, options for advanced placement, acceleration, part-time study, articulation, progression, graduation, health requirements, the potential for criminal background checks and expanded medical profiles, and appeals;
 - (j) A current financial report including expenditures to date consistent with Rule 410-8-.12(3)(c);
 - (k) A plan for the recruitment of students; and
 - (l) Current catalog and student handbook for the parent institution.
 - (m) Any substantive changes since the review of previous reports;
 - (n) Detailed information for each nursing course in the curriculum consistent with Rule 410-8-.04;
 - (o) Faculty qualification records for any new faculty members;
 - (p) A description of any additional practice setting(s) with a written commitment from practice setting representatives to include the possible impact on existing affiliating nursing programs;
 - (q) A current financial report including expenditures to date consistent with Rule 410-8-.12(3)(c); and
 - (r) An update on projected enrollment;
- (3) Board representatives will conduct site visits to a developing nursing education program as necessary.
- (4) Nursing education programs with Initial Approval are required to comply with all Board rules.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2 and 43-26-5(a)(4)-(6)

410-8-.13 Discontinuance of a Nursing Education Program

- (1) The dean/director shall notify the Board in writing of the intent to discontinue a nursing education program at least one year prior to the discontinuance.
- (2) The dean/director shall submit a written plan for discontinuance of the program to include the:
 - (a) Timetable;
 - (b) Plan for students to complete the course of study or transfer to an approved nursing education program; and
 - (c) Provision for permanent retention of student and graduate records.

(3) When a class is not admitted in a given year, the nursing education program must close unless approval has been granted by the Board based on the justification for continuation submitted to the Board.

(4) If a program is discontinued, the parent institution must provide for the completion of the course of study by all currently enrolled students either by continuing courses until those students have graduated, in accordance with 410-8-.02(5), or by transferring them to an approved nursing education program. Prior to the transfer of students, the parent institution must negotiate a written agreement, which delineates all responsibilities assumed by the participating parties. It must be signed by the respective administrative officers and submitted to the Board of Nursing for its review upon request.

(5) The parent institution is responsible for providing for the permanent retention and security of student and graduate records.

(6) If the parent institution also closes, advice should be sought from the Board concerning the permanent safekeeping and availability of records of the nursing education program.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2 and 43-26-5(a)(4)-(6)

Rule 410-9 – Licensed Practical Nursing Education Programs

410-9-.01 Renewal of License.

~~(1) Licenses shall expire according to the rules of the Joint Secretary, State Examining Boards, Rule 295-2-.05, Licenses Expiring January 31 – Even Years and Rule 295-2-.12, Licenses Expiring January 31 – Odd Years.~~

~~(2) Completed license renewal applications, accompanied by the required fee, shall be submitted by the posted deadline.~~

~~(3) Registered nurse employers shall not permit anyone to practice as a registered professional nurse without evidence of a current license or temporary permit after February 1 after the license expires. The Georgia Board of Nursing's website shall be considered the primary source of verification for licensed individuals.~~

~~(4) License renewal applications postmarked after January 31 the year your license expires will be returned and the licensee required to reinstate the license.~~

~~(5) A name change occurring during the renewal period may be processed without additional fee provided that a copy of the marriage certificate, court order, or substantiating documentation accompanies the renewal application.~~

410-9-.01 General Information

(1) A new nursing education program means the initial establishment of a nursing education program or the re-establishment of a closed nursing program. A new nursing education program is approved for one location or address only.

(2) A new nursing education program in this state shall have applied for and received Board approval as provided in Rule 410-9-.02 prior to the initial enrollment of students.

(a) The Board Laws and Rules shall be followed in the development of a new nursing education program.

(b) Graduates of a nursing education program which does not have Board approval shall be denied admission to the licensure examination.

(c) It is a misdemeanor for any individual, corporation, or association to conduct a nursing education program in this state without Board approval pursuant to O.C.G.A. § 43-26-42(7).

(3) Any program, which has had Board approval as of the effective date of this Rule shall be permitted to continue operation, unless its approval has been withdrawn.

(4) Any program whose approval status has been withdrawn pursuant to Rule 410-9-.03, must apply for approval as a new nursing education program as provided in Rule 410-9-.02.

(5) All nursing education programs and affiliated campus locations will be issued the same NCSBN program code number.

(6) Program Approval Statuses:

(a) Developmental Approval. The Board may grant Developmental Approval to a proposed nursing education program when compliance with Board Laws and Rules have been demonstrated pursuant to Rule 410-9-.02(4).

(b) Provisional Approval. The Board may grant Provisional Approval to a new nursing education program when compliance with Board Laws and Rules have been demonstrated pursuant to Rule 410-9-.02(8).

(c) Full Approval. The Board shall grant Full Approval to a nursing education program which has demonstrated compliance with all Board Laws and Rules.

1. Full Approval may be granted to a new nursing education program pursuant to Rule 410-9-.02(10).

2. The Board shall continue Full Approval of a nursing education program, or grant Full Approval to a nursing education program on Conditional Approval, when review of the most recent annual report, the most recent site visit report, the most recent annualized licensing examination passing percentage, for its graduates on their initial examination and any other pertinent data reveals compliance with all Board Laws and Rules.

3. Full Approval is continuous unless the program is notified in writing to the contrary by the board.

(d) Conditional Approval. The Board may impose Conditional Approval on a nursing education program which has demonstrated noncompliance with any of the Board Laws or Rules.

1. Conditional Approval may be imposed on a new nursing education program pursuant to Rule 410-9-.02(11).

2. Conditional Approval may be imposed on a nursing education program when review of the most recent annual report, the most recent site visit report, the most recent annualized licensing examination passing percentage for its graduates on their initial examination, or any other pertinent data reveals noncompliance with Board Laws or Rules.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2, 43-26-5(a)(4)-(6), 43-26-32, and 43-26-42

410-9-.02 New Nursing Education Program Development

(1) Definitions.

(a) "Affiliating Clinical Facility" refers to a contracted health care agency utilized by a sponsoring agency for clinical experience of the students enrolled in a Board-approved nursing education program.

(b) "Approved Nursing Education Program" located in this state means a nursing education program approved by the board as meeting criteria established by the board. An "approved nursing education program" located outside this state means a nursing education program that the board has determined to meet criteria similar to and not less stringent than criteria established by the board. In order to be approved by the board, a nursing education program must be one that is offered by:

1. A unit of the University System of Georgia accredited by the Commission on Colleges of the Southern Association of Colleges and Schools;

2. An institution of the Technical College System of Georgia;

3. A postsecondary institution of higher education that is accredited by a regional accrediting agency recognized by the United State Department of Education; or

4. A postsecondary institution of higher education that is not accredited in accordance with subparagraph (3) of this paragraph, but whose curriculum has been determined by the board to meet criteria similar to and not less stringent than criteria established by the board for other approved nursing education programs.

(c) "Campus laboratory" refers to the area in the classroom building which has been designed and organized to simulate the actual hospital patient care setting and where students shall obtain initial practice on each other and/or mannequins prior to experience at the affiliating clinical facilities.

(d) "Clinical learning focus objectives" refer to those outcomes and competencies to be gained by student assignment to a specific affiliating clinical facility and/or area within the agency.

(e) "Clinical rotation plan" refers to the schedule by which students shall be assigned to and rotated through the appropriate experiences available at each affiliating clinical facility.

(f) "Library" refers to published literature, audiovisual aids, and all other educational materials available to faculty and students in the nursing education program.

(g) "Master Curriculum Plan" refers to the written summary showing the sequence of all courses offered in the nursing education program. It includes the number of contact or actual clock hours for each theory and clinical component of each course, the total hours of theoretical and clinical per semester, and the total hours of theory and clinical for the entire program.

1. Theory includes those learning activities which occur in the classroom and campus laboratory setting.

2. Clinical includes pre- and post-conferences, actual patient care experience, and other patient-centered learning activities which occur in the clinical facility.

(h) "Sponsoring Agency" refers to a parent institution of the nursing education program. The parent institution shall provide financial and administrative support during the establishment and operational existence of a Board-approved nursing education program. Any change in the parent institution's accreditation or affiliation shall be reported to the Board within thirty (30) days of such change.

(i) "Survey of need" refers to statements from potential affiliating clinical facilities' on agency letterhead which describe the following:

1. Each agency's current staffing patterns;

2. The current number of vacancies per type of nursing personnel category;

3. The projected utilization of each level of nursing personnel within the facility.

(j) "Syllabus" refers to a written summary of a course in the nursing education program. It includes the course title and number, its credit distribution, placement in the curriculum sequence, prerequisite and co-requisite courses, a course description, learning goals or objectives, related learning activities, and clinical experience, if appropriate.

(2) At least twelve (12) months prior to the initial enrollment of students, the administrator of a sponsoring agency considering establishment of a nursing education program must submit a letter to the Board indicating intent to develop a program. The letter of intent shall include the following information:

(a) "Survey of Need", which demonstrates that current needs cannot be met by existing nursing education programs within a fifty (50) mile radius of the proposed establishment site;

(b) Evidence that adequate clinical facilities are available for student experience;

1. Each potential affiliating clinical facility should submit a letter:

(i) Expressing willingness to contract with the proposed new nursing education program for student experience; and

(ii) Describing the specifics about nursing programs already utilizing the facility; and

(iii) Describing how the new program's clinical experience needs shall be met without overloading the agency.

2. At least three (3) licensed hospital or nursing home beds must be available for every one (1) student practical nurse at any given time;

3. At least 40% of the total required clinical experience hours must be obtained in the hospital setting.

(c) The availability of classroom and campus laboratory facilities and a library for the program;

(d) Evidence of financial resources for the planning, implementation and continuation of the program; and

(e) The estimated number of qualified applicants for initial and future classes.

(3) At least ten (10) months prior to the initial enrollment of students, the administrator of the sponsoring agency shall submit to the Board the following information:

(a) The official name of the proposed nursing education program;

(b) The anticipated starting date of the program, the number of classes to be admitted per calendar year and the time(s) of admission of those classes, and the anticipated maximum number of students to be admitted per class;

(c) The mailing address and other contact information for the program;

(d) A completed Clinical Facilities Information Sheet provided by the board which includes all requested information about the affiliating agencies;

(e) The Clinical Facility Self-Study Report from each proposed clinical facility which includes a current contract agreement between the sponsoring agency and the clinical facility.

(4) After the Board has received and reviewed the letter of intent and the materials pursuant to Rule 410-9-.02(2) and (3), the Board shall conduct site visits to the proposed nursing education program and all of its affiliating clinical facilities.

(a) If compliance with Board Laws and Rules has been demonstrated, the Board will grant Developmental Approval.

(b) If Developmental Approval is not granted, a written explanation shall be provided to the proposed nursing education program.

(5) At least eight (8) months prior to the initial enrollment of students, the following materials shall be submitted as Report I:

(a) The administrative structure of the sponsoring agency which demonstrates the lines of authority for the new nursing education program;

(b) A Nursing Faculty Qualification Record and evidence of current Georgia licensure as a registered nurse which demonstrates compliance with Rule 410-9-.07, of the Practical Nursing Education Program Director or consultant who has been employed to continue the initial development of the new nursing education program;

(c) The program purpose, philosophy, and student terminal objectives pursuant to Rule 410-9-.05;

(d) A Master Curriculum Plan as described in Rule 410-9-.02(1)(g) and consistent with Rule 410-9-.07;

(e) The syllabi for all courses in the curriculum as described in Rule 410-9-.02(1)(j);

(f) Access to school/program catalog;

(g) All program and student policies as required by Rule 410-9-.09(2).

(6) At least four (4) months prior to the initial enrollment of students, the following materials pertaining to each course to be offered during the first half of the curriculum shall be submitted as Report II:

(a) The specific theoretical and clinical objectives/competencies for each unit of study within each course;

(b) The student learning and progress evaluation procedures.

(7) At least one (1) month prior to the initial enrollment of students, the completed Nursing Faculty Summary Sheet, and the Nursing Faculty Qualification Records, and evidence of Georgia Registered Nurse licensure of the Practical Nursing Department Director and all nursing faculty shall be submitted as Report III. All nursing faculty must demonstrate the qualifications as set forth in Rule 410-9-.07.

(8) Provisional Approval shall be considered after the Board, reviews Reports I, II, and III and must be granted prior to the enrollment of students.

(a) If Provisional Approval is not granted, an explanation shall be included in the report to the school.

(b) A new program granted Provisional Approval will remain on Provisional Approval for two years or until its first graduating class has taken its initial licensing examination, whichever is earlier, and the examination results are reviewed by the Board.

(9) No later than one (1) month after the initial enrollment of students, the following materials shall be submitted as Report IV:

(a) The actual start date of the program;

(b) The actual number of students enrolled;

(c) The projected completion/graduation date of the first graduates of the program.

(10) The program shall be eligible for Full Approval if it has demonstrated compliance with all Board Laws and Rules, and if 80% of its initial graduating class have passed their initial licensing examination after graduation during the period of Provisional Approval.

(11) The program shall be placed on Conditional Approval if it has demonstrated noncompliance with any of the Board Laws or Rules, or if less than 80% of its initial graduating class have passed their initial licensing examination during the period of Provisional Approval.

(a) While on conditional approval, the program must demonstrate compliance with all Board Laws and Rules and the program must achieve a 80% pass rate of its graduates who have taken their initial licensing examination.

(b) Failure to achieve Full Approval within a three (3) year period shall result in Withdrawn Approval pursuant to Rule 410-9-.03.

(12) Graduates of a nursing education program which does not have Board approval shall be denied admission to the licensure examination.

(13) No later than six (6) months after the initial enrollment of students, the following materials pertaining to each course to be offered during the remainder of the program's curriculum shall be submitted as Report V:

(a) The specific theoretical and clinical objectives/competencies for each unit of study within each course;

(b) Written plans for the utilization of affiliating clinical facilities as described in board rules;

(c) The student learning and progress evaluation procedures if different from materials submitted in Report II;

(14) It is the responsibility of the sponsoring agency to electronically submit each required report to the board at least four (4) weeks prior to the scheduled board meeting at which the report is to be considered.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2, 43-26-5(a)(4)-(6) and 43-26-32

410-9-.03 Changes in Approval Status Categories and Grounds

(1) Conditional Approval may be imposed on a new nursing education program pursuant to Rule 410-9-.02(11).

(2) Conditional Approval may be imposed on a nursing education program when review of the most recent annual report, the most recent site visit report, the most recent annualized licensing examination passing percentage for its graduates on their initial examination, or any other pertinent data reveals noncompliance with Board Laws or Rules.

(a) The Board shall notify the program in writing of the cited deficiencies and the Board's recommendations and suggestions for correcting the deficiencies.

(b) The program must respond in writing to the Board's recommendations and suggestions within six (6) weeks of receipt of the notification and must include a plan of action to correct the cited deficiencies. The plan of action should be implemented immediately by the program.

(c) If the deficiencies are not corrected within the time period specified by the Board in its response to the program's plan of action (but no longer than six (6) months), the program shall be placed on Conditional Approval.

(d) If the deficiencies are corrected within the Board-specified time period (but no longer than six (6) months), the program shall be granted Full Approval.

(3) Conditional Approval status shall be conveyed to the program in writing.

(a) The program has ninety (90) days from the date of the notification to request in writing a reevaluation by the Board. The program must provide documentation of corrected deficiencies for consideration of reinstatement of the program to Full Approval status.

(b) If a reevaluation request is not made, the approval status decision of the Board shall remain in effect.

(4) If the deficiencies have not been corrected within one (1) year from the date of Conditional Approval status notification, the program's approval status shall be Withdrawn.

(5) Programs placed on Conditional Approval status must notify currently enrolled and potential students in writing of the program's Conditional Approval status. This statement must include the possibility that the program may have its approval Withdrawn at the end of one (1) year from the date of Conditional Approval notification, and that the Board may require the transfer of remaining students to other nursing programs to complete their programs of study.

(6) Withdrawn Approval. The Board may Withdraw Approval status from a nursing education program which has demonstrated continued noncompliance with any of the Board Laws or Rules.

(a) The Board may Withdraw Approval from a new nursing education program as provided in Rule 410-9-.02(11)(b).

(b) The Board may Withdraw approval when a nursing education program fails to correct documented deficiencies within one (1) year following the date of written notification of Conditional Approval status.

(c) Withdrawn Approval is sent to the program by certified mail.

1. The program has ninety (90) days from the date of the notification to request, in writing, a reevaluation by the Board. The program must provide documentation of corrected deficiencies for consideration of reinstatement of the program to Conditional or Full Approval status.

(a) If a reevaluation request is made and there is documentation to verify that appropriate corrective actions have been implemented, the Board may grant reinstatement of Conditional Approval for up to six (6) months.

(b) If a reevaluation request is made and there is documentation to verify correction of all deficiencies, the Board may grant Full Approval.

(c) If a reevaluation request is not made, the approval status decision of the Board shall remain in effect.

2. The notification will state the effective date of the Withdrawal of Approval. Within thirty (30) days of receipt of the notification, the program will submit to the Board a written plan for graduating all students who had been admitted before approval status was withdrawn as provided in Rule 410-9-.14.

3. Any program whose approval status has been Withdrawn, must apply for approval as a new nursing education program as provided in Rule 410-9-.02.

(7) With any change in approval status the program sponsors may present any evidence for the Board to consider addressing the alleged deficiencies in writing and/or appearance before the board.

(8) The Board may grant or impose the following changes in approval status categories.

(a) From Developmental Approval to Provisional Approval for a new nursing education program pursuant to Rule 410-9-.02(8).

(b) From Provisional Approval to Full Approval for a new nursing education program pursuant to Rule 410-9-.02(10).

(c) From Provisional Approval to Conditional Approval for a new nursing education program pursuant to Rule 410-9-.02(11).

(d) From Full Approval to Conditional Approval for a nursing education program pursuant to Rule 410-9-.03.

(e) From Conditional Approval to Full Approval for a nursing education program pursuant to Rule 410-9-.03.

(f) From Conditional Approval to Withdrawn Approval for a nursing education program pursuant to Rule 410-9-.02(11)(b) and 410-9-.03.

(g) From Withdrawn Approval to Conditional Approval or Full Approval for a nursing education program pursuant to Rule 410-9-.03.

(9) The following deficiencies shall be inclusive of, but not limited to, those which the Board considers grounds for a change in approval status if the deficiencies are not corrected within the time period specified in Rules 410-9-.02.

(a) Any curriculum change(s) made without Board notification pursuant to board rules.

(b) Failure to adhere to required theoretical content pursuant to Rule 410-9-.06.

(c) Failure to adhere to required educational facilities, resources, and support services pursuant to board rules.

(d) Failure to adhere to required school rules and policies pursuant to board rules.

(e) Failure to adhere to required nursing faculty qualifications pursuant to Rules 410-9-.07 and 410-9-.08.

(f) Failure to adhere to required clinical experience guidelines pursuant to board rules.

(g) Failure to adhere to required instructor/student ratios pursuant to Rule 410-9-.07.

(h) Failure to submit required reports and/or maintain required records pursuant to board rules.

(i) Failure to maintain an annualized licensing examination passing percentage of 80% or greater for the program's graduates on their initial examination.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2, 43-26-5(a)(4)-(6) and 43-26-32

410-9-.04 Organization and Administration

(1) A written organizational plan shall indicate the lines of authority, responsibility and communication of the nursing education program to its governing body; to its clinical affiliates; to its advisory committee, and within the nursing education program itself.

(2) The authority and responsibility for the administration of the nursing education shall be placed with the program director as approved in Rule 410-9-.07(3).

(3) Any agency or institution that is utilized by a practical nursing education program shall be one that is authorized to conduct business in the state of its location.

(4) The length of the curriculum shall be consistent with the requirements as provided in Rule 410-9-.06(3).

(5) The availability of faculty for directing and critiquing students during theoretical and clinical learning activities shall be consistent with the requirements as provided in Rules 410-9-.07(1) and 410-9-.08(7).

Authority: O.C.G.A. §§ 43-1-25, 43-26-2, 43-26-5(a)(4)-(6) and 43-26-32

410-9-.05 Purpose, Philosophy, and Objectives

(1) The nursing education program's purpose, philosophy, and objectives shall be written by the nursing faculty and approved by the school's administration and the program's advisory committee. They shall form the basis for planning, implementing, and evaluating the total program curriculum.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2, 43-26-5(a)(4)-(6) and 43-26-32

410-9-.06 Curriculum

(1) Curriculum refers to a total written plan of theoretical and clinical learning activities which shall result in the attainment of the nursing education program's objectives by graduates of the program.

(a) The curriculum shall be developed and presented on a post-secondary educational level.

(b) It shall be developed and presented by the faculty utilizing sound educational concepts and methods of teaching. These shall include the appropriate sequencing, correlating of theoretical and clinical experiences, and integrating of learning throughout the entire program.

(c) It shall prepare the students to safely perform the activities and to function in the situations described in the program's objectives.

(d) A Master Curriculum Plan shall be developed pursuant to Rule 410-9-02(1)(g).

1. A copy shall be retained for each class record;

2. A copy shall be made available to all students enrolled in the program;

3. A copy shall be provided to the Board in the program's annual report and the Practical Nursing Program's Self-Study Report and at any time that there shall be a proposed revision.

(e) A Clinical Rotation Plan shall be developed pursuant to Rule 410-9-.02(l)(e).

1. A copy shall be retained for each class' record;

2. A copy shall be made available to all students enrolled in the program;

3. A copy shall be made available to all appropriate affiliating clinical facilities;

4. A copy shall be provided to the Board in the program's annual report and the Practical Nursing Program Self-Study Report and at any time that there shall be a revision of the one on file in the Board office.

(2) The curriculum emphasis should be on the utilization of the nursing process in the provision of care by practical nurses to patient/clients and their families throughout the life cycle in a variety of health care settings for:

(a) The promotion of health;

(b) The prevention of illness and injury; and

(c) The restoration and maintenance of physical and mental health.

(3) Length of the Curriculum. The program of study shall be consistent with the program's learning objectives and methods of instruction, except that:

(a) A full time program shall NOT be conducted longer than eighteen (18) months; and

(b) A part time program shall NOT be conducted longer than thirty-six (36) months.

(4) Curriculum Objectives. There shall be written statements of specific, measurable, theoretical and clinical outcomes and competencies for each course in the curriculum which shall be achieved by students enrolled in the program. The curriculum objectives shall be in accordance with the nursing education program objectives.

(5) Minimum Curriculum Content. An approved program of instruction or its equivalent shall contain no less than six hundred eighty-five (685) clock hours of theoretical nursing and general education content, and no less than four hundred eighty-five (485) clock hours of planned clinical practice for each student. Said program shall include the following subjects:

(a) Theoretical Content:

1. Required Content - The curriculum must include, but is not limited to, the following theoretical content areas and must contain a total of no less than six hundred eighty-five (685) clock hours.

(i) Anatomy and Physiology

(ii) Basic Microbiology

(iii) Medical Terminology

(iv) Basic Nutrition

(v) Basic Pharmacology

(vi) Medication Administration

(vii) Principles of IV Therapy

(viii) Legal and Ethical Healthcare Issues

(ix) Professional and Customer Relationships

(x) The Nursing Process and Critical Thinking Skills

(xi) Physical Assessment Techniques

(xii) Cardiopulmonary Resuscitation

(xiii) Principles and Skills of Nursing Practice

(xiv) Basic Emergency Care

(xv) Geriatric Nursing Care

(xvi) End of Life Nursing Care

(xvii) Medical Surgical Nursing Care

(xviii) Obstetrical Nursing Care

(xix) Pediatric Nursing Care

(xx) Mental Health and Illness Nursing Care

(xxi) Community Health Nursing Care and Health Care Delivery Systems

(xxii) Leadership and Management Skills

(xxiii) English

(xxiv) Math

(xxv) Psychology

(xxvi) Sociology

(xxvii) Chemistry

(xxviii) Computer Literacy

(xxix) National Practical Nursing Licensure Examination Preparation

(b) Required Clinical Experience: All of the following clinical experience areas must be provided in the curriculum:

1. Basic Emergency Care

2. Professional and Customer Relations

3. Physical Assessment Techniques for All Body Systems

4. Skills and Principles of Nursing Practice

5. Medication Administration

6. Intravenous Therapy Techniques

7. Health Maintenance and Prevention of Illness and Injury

8. Documentation of Nursing Care

9. Nursing Care of Aging Clients

10. Nursing Care of the Terminally Ill

11. Medical Surgical Nursing Care

12. Obstetrical Nursing Care

13. Pediatric Nursing Care

14. Mental Health and Illness Nursing Care

15. Community Health Nursing Care

16. Nursing Leadership and Management.

(6) The curriculum's effectiveness shall be evaluated at the specific intervals indicated by the Board to determine and verify in writing the attainment of the program's objectives.

(a) The course/teacher/clinical experience evaluations shall be conducted each quarter / semester pursuant to board rules.

(b) The individual student theoretical and clinical learning and progress evaluations shall be conducted for each course pursuant to board rules.

(c) The graduate evaluations shall be conducted for each graduate pursuant to board rules.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2, 43-26-5(a)(4)-(6) and 43-26-32

410-9-.07 Nursing Faculty

(1) Number of Nursing Faculty. An adequate number of nurse faculty members, as necessary for quality education, must be employed to carry out the nursing education program's purpose and objectives.

(a) Such an adequate number shall be reasonably proportionate to the:

1. Number of students enrolled;

2. Frequency of admissions;

3. Education and experience of faculty members;

4. Number and location of affiliating clinical facilities; and

5. Total responsibilities of the faculty.

(b) The availability of faculty for directing and critiquing students during clinical learning activities shall be based upon criteria which ensures the safety of patients/clients; AND

1. Shall be documented in writing at a ratio of NOT more than ten (10) students per one (1) instructor.

2. The sponsoring agency shall consider a lower ratio when clinical space, patient acuity and patient census are insufficient to accommodate the ten (10) to one (1) ratio.

(c) The majority of nursing faculty shall be full time employees of the sponsoring agency.

(2) Qualifications for Employment.

(a) The nursing education program director and all nursing faculty members:

1. Shall hold a current Georgia license in good standing from the initial date of employment as a registered professional nurse.

2. Shall have had a minimum of three (3) years of practice as a licensed registered nurse within the preceding seven (7) years.

(b) In addition to the qualifications set forth in subsection (a) above, the director of a nursing education program shall have at least a baccalaureate degree in nursing and one (1) year of teaching experience in a nursing education program, (included in the required three (3) years of nursing practice).

(c) The program director and each member of the nursing faculty shall maintain professional competence through such activities as continuing education programs, nursing practice, and/or academic study courses, and shall submit documentation of these activities in writing annually to the Board in the program's Annual Report, or Practical Nursing Program's Self-Study Report.

(d) The sponsoring agency shall submit evidence that all faculty members meet minimum requirements of the Board pursuant to Rule 410-9-.07. A Nursing Faculty Qualification Record and a copy of the current Georgia Registered Nurse license must be submitted to the Board within one (1) month of the faculty member's employment.

(3) Faculty Functions.

(a) The nursing education program director shall supervise all nursing faculty, shall be the administrative coordinator for the program, and shall be the direct communicator with the Board.

(b) The nursing faculty shall participate in the development, implementation, instruction, evaluation, and revision of the entire nursing education program. The faculty shall:

1. Seek recommendations from the practical nursing program's advisory committee for establishing policies for the recruitment, selection, admission, progression, dismissal, and counseling of students.

2. Develop and evaluate the theoretical and clinical learning activities of the program.

3. Direct and supervise student learning in the classroom and clinical areas.

4. Participate in the counseling and guidance of students related to the course of instruction.

5. Establish a system to maintain essential records that will be used to evaluate a student's progress.

6. Interpret changing practices in the utilization of the graduate practical nurse and adjust the educational program to accommodate these changes.

7. Develop short and long range plans for strengthening the program based upon the feedback obtained from the program's evaluations.

8. Be readily available for consultation with clinical preceptors and students during preceptorial learning experiences.

(4) Faculty Organization.

(a) The nursing faculty shall hold regular (at least monthly) nursing faculty conferences to discuss the nursing education program and maintain nursing faculty meeting minutes as a written record of discussions and decisions.

(b) Policies in effect for nursing faculty shall be consistent with those in effect for all faculty employed by the sponsoring agency.

(c) There shall be a written school policy for the selection, orientation, and utilization of full time and part time nursing faculty.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2, 43-26-5(a)(4)-(6), and 43-26-32

410-9-.08 Preceptor and Preceptorial Learning Activities

(1) Definitions.

(a) The "preceptor" holds a valid Georgia license as a registered professional nurse, licensed practical nurse, or medical doctor, with a minimum of one year of clinical experience.

(b) "Preceptorial learning activities" refer to those clinical learning activities which are provided under the direct leadership and supervision of a preceptor.

(2) The preceptor shall be selected through the cooperative effort between the nursing faculty and the clinical affiliate representatives.

(3) Preceptorial learning activities may be included in a curriculum when the following criteria are met:

(a) Appropriate theory shall be coordinated with the preceptorial clinical experience.

(b) There shall be a written school policy for the selection, orientation, and utilization of clinical preceptors.

(c) The nursing education program shall maintain documentation which demonstrates that all nursing clinical preceptors meet requirements provided in Rule 410-9-.08.

(4) Prior to and throughout the preceptorial learning activities, faculty shall interact with preceptors, individually or in a group, to clarify roles, learning activities, and the critique/evaluation of student learning and progress.

(5) The preceptor/student ratio shall not exceed the ratio of one (1) preceptor to two (2) student practical nurses in the hospital, doctor's office, or clinics, or one (1) preceptor to four (4) student practical nurses in the nursing home.

(6) The preceptor may evaluate students' clinical performance after the students' initial assessments by the nursing program's faculty.

(7) The preceptor and students must have a readily available designated nursing faculty member who is responsible for the preceptor learning activities.

(8) The preceptorial learning activities must be scheduled on The Clinical Rotation Plan pursuant to Rule 410-9-.02(1)(e).

(9) There shall be written Clinical Learning Focus Objectives pursuant to Rule 410-9-.02(1)(d) for all preceptorial learning activities.

410-9-.09 School Requirements: Rules and Policies

(1) School Rules:

- (a) Theoretical class size shall be determined by the institution based on the number of faculty members, adequacy of clinical resources, availability of learning resources, and documented survey of need within a fifty (50) mile radius.
- (b) The students' total scheduled instructional time for classroom and clinical experiences shall not exceed forty (40) hours per week.
- (c) The nursing education program shall comply with the Occupational Safety and Health Administration's current guidelines for occupational exposure to blood-borne and airborne Pathogens. The policy shall be reviewed annually and revised as necessary in writing.
- (d) The nursing education program shall have a policy regarding the use of social media by students and faculty in relation to patient privacy and care and federal guidelines.
- (e) The practical nursing education program shall maintain an annualized licensing examination passing percentage rate of eighty percent (80%) or higher for the program's graduates on the initial examination as provided in Rule 410-9-.03.
- (f) A student shall be considered to have successfully completed a program when the student has satisfied all performance and learning objectives of an approved program and has met the institution's established graduation requirements.
- (g) All nursing faculty and preceptors, if utilized, shall meet requirements as provided in Rules 410-9-.07 and 410-9-.08 before assuming duties in the program.
- (h) The nursing program shall maintain nursing faculty meeting minutes of all decisions pertinent to the operation and revision of the program.
- (i) Student clinical experience shall include all required health care areas provided in Rule 410-9-.06:
 1. Clinical experiences should be correlated with theoretical content;
 2. The clinical experience instructor-student ratio shall not exceed a one (1) to ten (10) ratio;
 3. At least three (3) licensed hospital or nursing home beds shall be available for every one (1) student practical nurse at any given time in a clinical affiliate;
 4. At least 40% of the total board-required clinical experience hours must be obtained in the hospital setting.
- (j) A nursing program faculty member or a Board-approved preceptor shall be:
 1. Present in the clinical facility to which students are assigned for direct patient care and be present on the unit;
 2. Responsible for the clinical instruction and supervision of the program's student practical nurses.
- (k) The program's instructors shall provide appropriate clinical focus objectives to each clinical affiliate prior to student assignment provided in Rule 410-9-.02(1)(d).
- (l) The Clinical Rotation Plan for student learning activities shall be provided to each affiliating clinical facility prior to student assignment provided in Rule 410-9-.02(1)(e).

(2) School Policies:

- (a) Policies related to the practical nursing education program shall be published in a student handbook or catalogue; and
- (b) The policies set forth below shall be included:
 1. Academic Standards. The academic standards policy shall include a clearly defined grading system for the program and a policy for course progression and graduation.
 2. Curriculum. The curriculum policy shall reflect the board's hourly and theoretical content and clinical experience area requirements provided in Rule 410-9-.06(5) as the minimum curriculum.
 3. Student Grievance. The student grievance policy shall define the authority chain which is to be followed for student grievances at the institution.
 4. Occupational Safety and Health Administration's Guidelines. The policy shall describe a plan for educating students on the Federal Occupational Safety and Health Administration's guidelines (O.S.H.A.) and the Centers for Disease Control's (C.D.C.) guidelines and any other regulations applicable to the safety of students and patients in the practice of nursing.
 5. Student Health. The student health policy shall include the health examinations and immunizations (as currently recommended by the Centers for Disease Control) required to ensure the health, safety, and welfare of students and patients prior to the beginning of student clinical experiences.

410-9-.10 Educational Facilities and Clinical Affiliates

- (1) Educational facilities, campus classrooms, nursing practice laboratory, and the library for the program shall be available to meet the objectives of the program and the needs of the students and faculty.

(a) The campus laboratory:

1. Shall be separate or screened from the classroom(s).
2. Shall contain sufficient equipment, supplies and resources (such as mannequins, models, textbooks, and audiovisual aids), to permit simulated nursing skill practice.
3. Shall provide a secure location for syringes and needles.

(b) A library located at the instructional site shall:

1. Provide texts, audiovisuals, and periodicals, to include practical nursing journals, no older than five (5) years, on the curriculum being taught.
2. Make available to faculty and students access to the Georgia Board of Nursing's Laws and Rules.

(2) Clinical Affiliates.

(a) All clinical affiliates for a program shall be approved by the board prior to utilization for student experiences. The program shall submit the required materials as provided in Rule 410-9-.12(2)(c)(1).

(b) There shall be a written signed agreement between the program and each clinical affiliate which meets the following criteria:

1. The agreement shall be annually reviewed and revised/renewed as necessary.
2. The agreement shall ensure that the nursing faculty maintains the responsibility for the selection and supervision of student learning activities.

(c) The clinical facility's nursing service department shall maintain:

1. A written organizational chart which indicates a clear chain of command for nursing personnel.
2. A copy of current policies and procedures as they relate to the Licensed Practical Nurse shall be available to the board at site visits or as requested.

(d) An orientation shall be conducted for program faculty and each new group of students at the clinical facility.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2, 43-26-5(a)(4)-(6) and 43-26-32

410-9-.11 Board Site Visits to Nursing Education Programs and Their Clinical Affiliates

(1) Site visits to the practical nursing education program and clinical affiliates shall be conducted by board representatives to verify compliance with board laws and rules. All requested documentation shall be received by the Board prior to the site visit.

(2) Site visits are conducted:

- (a) Initially and as needed for all new programs until the program achieves Full Approval status.
- (b) To the new clinical affiliate(s) during the practical nursing education program's next routine visit.
- (c) At the Board's discretion.
- (d) Upon request from a program for a site visit or a visit by the board's nursing education consultant.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2, 43-26-5(a)(4)-(6) and 43-26-32

410-9-.12 Reports and Records

(1) Reports and records shall be required of each practical nursing education program for documentation of compliance with applicable Georgia law and Board rules.

(2) Reports submitted to the Board from schools by the practical nursing education program's nurse director shall include the following reports:

(a) An Annual Report form and requested documentation shall be submitted each year which covers the previous calendar year and shall include:

1. General information on the program including, but not limited to name, addresses, telephone and fax numbers, email address and information regarding the program administrator.
2. Data on instructor-student clinical ratios to include a current "Nursing Faculty Preceptor Summary Sheet," and nursing faculty summary for all nursing faculty and all preceptors.
3. Data on clinical sites utilized and contract dates.
4. Data on program enrollments, withdrawals, and graduates.
5. Data on the program's course offerings to include a current "Master Curriculum Plan" provided to Rule 410-9-.02(1)(f).
6. A description of anticipated program changes for the coming year.

(b) Any corrections to the Annualized Licensing Examination Passing Percentage Rate Report shall be returned to the board within ten (10) working days of receipt of the initial report. Proof of the correction such as copy(ies) of previous NCLEX-PN Scores-Report(s) shall be provided to verify the erroneous information.

(c) Site Visit Report Materials shall include the following forms:

1. The Clinical Facility Information Sheet shall provide a complete listing of all clinical affiliates and basic information on each facility. The sheet is also submitted whenever there is a change in clinical facilities.
2. The Clinical Facility Self-Study Report shall be completed by the Director of Nursing Services or appropriate management at the clinical affiliate and shall be submitted to the board.
- (d) The Nursing Faculty Summary Sheet shall be submitted to the board by the program director as a listing of all full time and part time nursing employees of the program and all preceptors.
- (e) The Nursing Faculty Qualification Record shall be completed by each nursing faculty member. Each preceptor shall complete a Preceptor Qualification Record.
 1. The Nursing Faculty Qualification Record shall include secondary education, nursing licenses in other states, date of original licensure, and evidence of current Georgia licensure as a registered nurse.
 2. A complete listing of all nursing employment for the seven (7) years preceding the date of submission of Nursing Faculty Qualification Record.
- (f) The Practical Nursing Program Site Visit Response shall address the board's recommendations and shall be submitted to the Board within six (6) weeks after the program's receipt of the Site Visit Report. The Practical Nursing Program Site Visit Response shall include the program's plan to correct the deficiencies cited in the Site Visit Report.
- (g) The Practical Nursing Program Self-Evaluation Report shall be submitted to the Board each time the program's Annualized Licensing Examination Passing Percentage Report falls below the eighty percent (80%) level for its graduates on the initial examination.
 1. The Practical Nursing Program Self-Evaluation Report shall be received by the board within six (6) weeks of the program's receipt of the Final Annualized Licensing Examination Passing Percentage Report.
 2. The Practical Nursing Program Self Evaluation Report shall address the areas of: admission and grading requirements; curriculum sequencing; course materials development dates and reference materials publication dates; testing practices; practical nursing review course and/or test-taking strategies offerings to students; correlation of clinical experiences with appropriate theory.
- (h) Proposed Program Change Notifications are to be submitted to the board within thirty (30) days as provided in Rule 410-9-.13.
- (3) Reports to Schools from the Board. The program's Annualized Licensing Examination Passing Percentage Report is prepared by the board's nursing education consultant and covers the calendar year from January 1st through December 31st of the preceding year.
- (4) Program Records.
 - (a) The practical nursing education program shall make available upon request, all program policies as provided in Rule 410-9-.09.
 - (b) Current agreements with all clinical affiliates shall be maintained.
 - (c) Nursing Faculty Meeting Minutes shall be made available upon request.
 - (d) The practical nursing education program's Advisory Committee Meeting Minutes shall be made available upon request.
 - (e) Program evaluations shall include:
 1. Evaluations of the course, faculty, and clinical facilities completed by the students each semester.
 2. Annual evaluations of the program by the program's graduates.
 - (f) Annual statistics on the program's enrollments, withdrawals, and graduates.
 - (g) The program's curriculum materials shall include:
 1. The Program's Master Curriculum Plan for each class currently enrolled.
 2. All course materials for each curriculum offering. This shall include, but not be limited to, lesson plans, handouts, student clinical evaluation tools, texts/references list, and a clinical experience facilities listing.
 3. The program's Master Clinical Rotation Plan and each course's Clinical Rotation Plan for each class currently enrolled.
- (5) Student records. Students currently enrolled shall have a file which includes, but not limited to, admission materials, documentation of theoretical and clinical progression in the program's curriculum plan, and health records.
- (6) Final program transcript. Transcripts shall identify each course in the curriculum plan, include the earned grades and explain the grading system, and state the theoretical and clinical hours the student was present for each course.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2, 43-26-5(a)(4)-(6) and 43-26-32

410-9-.13 Program Changes Requiring Board Approval and Board Notification and Procedures for Approval

- (1) The following proposed changes in the practical nursing education program require board approval prior to their implementation. The program shall electronically submit the information to the board at least four (4) weeks prior to the board meeting at which the changes will be considered.
 - (a) The addition of new clinical facility(ies) for actual student patient care experience. The following materials must be submitted:
 1. A revised Clinical Facilities Information Sheet as provided in Rule 410-9-.12.
 2. A Clinical Facility Self Study Report as provided in Rule 410-9-.12.
 3. A copy of the current signed contract between the proposed clinical affiliate(s) and the program's sponsoring agency.

4. The Clinical Learning Focus Objectives for the experience for the proposed facility(ies) as provided in Rule 410-9-.02(1)(d).
5. The Clinical Rotation Plan which demonstrates student assignment at the proposed facility(ies) as provided in Rule 410-9-.02(1)(e).
6. A description of student supervision at the facility. If new nursing faculty or preceptors are to be utilized, submit an updated Nursing Faculty Summary Sheet and Nursing Faculty Qualification Record(s), Preceptor Summary Sheet and Preceptor Qualification Record as provided in Rule 410-9-.12.

(2) The following changes in the practical nursing education program may be implemented by the program, but require board notification within thirty (30) days of the implementation. Practical Nursing Education Program name change requires the former name, new name, and effective date.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2, 43-26-5(a)(4)-(6), and 43-26-32

410-9-.14 Guidelines for Discontinuance of a Nursing Education Program

(1) After the notification to the board of intent to discontinue the practical nursing education program, the school may not admit new students.

(2) The program shall continue to meet the standards for approval until all of the enrolled students have graduated.

(3) An institution closing a practical nursing education program shall provide for permanent storage of the transcripts of its graduates and the name, title, department, and address of who is responsible for keeping the records shall be conveyed to the board in writing.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2, 43-26-5(a)(4)-(6) and 43-26-32

Rule 410-10 – Standards of Practice and Unprofessional Conduct

410-10-.01 Fees.

(1) All fees for applications for registered nurse licensure by examination (first-time or repeat writers), licensure by endorsement, initial advanced practice registered nurse (APRN) authorizations, registered nurse reinstatements, advanced practice registered nurse (APRN) reinstatements, biennial renewal of the RN licenses and APRN authorizations, and all other fees which may be authorized by law shall be established by the Board periodically as set forth on a fee schedule and may be obtained from the Board office. Application fees are non-refundable and an application or request is not complete unless the required fee has been received by the Board. Fees must be paid in U.S. funds.

(2) Fees for the NCLEX-RN examination shall be determined by and paid directly to the National Council of State Boards of Nursing (NCSBN).

(3) Fees for any national examination for certification as a nurse practitioner, certified nurse midwife, certified registered nurse anesthetist, or clinical nurse specialist/psychiatric mental health shall be determined by and paid directly to that respective certifying organization. The examination must be administered by a national certification organization approved by the Board.

(4) The Board will determine fees for biennial license renewal.

(5) Reinstatement of a licensure as a registered professional nurse and/or authorization as a nurse practitioner, certified nurse midwife, certified registered nurse anesthetist, or clinical nurse specialist/psychiatric mental health is at the discretion of the Board after all requirements, as determined by the Board, have been met. The required fee is not refundable.

(6) Fees and applications for initial licensure, initial authorization, or reinstatement that are received, approved, or authorized within ninety (90) days before a biennial licensure expiration date shall be issued a license or authorization for the next successive licensure period.

410-10-.01 Standards of Practice for Registered Professional Nurses

(1) The Georgia Board of Nursing defines the minimal standards of acceptable and prevailing nursing practice as including, but not limited to the following enumerated standards of competent practice.

(2) The Board recognizes that assessment, nursing diagnosis, planning, intervention, evaluation, teaching, and supervision are the major responsibilities of the registered nurse in the practice of nursing. The Standards of Practice for Registered Professional Nurses delineate the quality of nursing care which a patient/client should receive regardless of whether it is provided solely by a registered nurse or by a registered nurse in collaboration with other licensed or unlicensed personnel. The Standards are based on the premise that the registered nurse is responsible for and accountable to the patient/client for the quality of nursing care rendered. The Standards of Practice for Registered Professional Nurses shall establish a baseline for quality nursing care; be derived from the Georgia Nurse Practice Act; apply to the registered nurse practicing in any setting; and, govern the practice of the licensee at all levels of competency.

(a) Standards related to the registered nurse's responsibility to apply the nursing process (adapted from American Nurses' Association *Code for Nurses and Standards of Practice*). The registered nurse shall:

1. Assess the patient/client in a systematic, organized manner;
2. Formulate a nursing diagnosis based on accessible, communicable and recorded data (which is collected in a systematic and continuous manner);
3. Plan care which includes goals and prioritized nursing approaches or measures derived from the nursing diagnoses;
4. Implement strategies to provide for patient/client participation in health promotion, maintenance and restoration;
5. Initiate nursing actions to assist the patient/client to maximize her/his health capabilities;
6. Evaluate with the patient/client the status of goal achievement as a basis for reassessment, reordering of priorities, new goal-setting and revision of the plan of nursing care;
7. Seek educational resources and create learning experiences to enhance and maintain current knowledge and skills appropriate to her/his area of practice.

(b) Standards related to the registered nurse's responsibilities as a member of the nursing profession. The registered nurse shall:

1. Function within the legal boundaries of nursing practice based upon knowledge of statutes and regulations governing nursing;
2. Accept responsibility for individual nursing actions and continued competence;
3. Communicate, collaborate and function with other members of the health team to provide optimum care;
4. Seek education and supervision as necessary when implementing nursing practice techniques;
5. Respect the dignity and rights of the patient/client regardless of socioeconomic status, personal attributes or nature of health problems;
6. Maintain each patient/client's right to privacy by protecting confidential information unless obligated, by law, to disclose the information;
7. Provide nursing care without discrimination on the basis of diagnosis, age, sex, race, creed or color;
8. Assign and supervise only those nursing measures which the nurse knows, or should know, that another person is prepared, qualified, or licensed to perform;
9. Retain professional accountability for nursing care when delegating nursing intervention;
10. Respect and safeguard the property of clients, family, significant others and the employer;
11. Notify the appropriate party of any unprofessional conduct which may jeopardize patient/client safety;
12. Participate in the periodic review and evaluation of the quality and appropriateness of nursing care.

(c) Standards related to the registered nurse's responsibilities in assignment of patient activities to unlicensed assistive personnel (UAP). The registered nurse shall:

1. Determine that the care and/or activity to be performed would be based upon orders or directions of a licensed physician, licensed dentist, licensed podiatrist or person licensed to practice nursing as a registered professional nurse.
2. Assign only care and activities that do not require the skills and knowledge of a person practicing nursing as a registered professional nurse or licensure of another health care professional. The care and activities to be assigned must meet all of the following criteria:
 - a. The care and/or activities do not require complex observations or critical decisions.
 - b. The care and/or activities can be safely performed according to exact, unchanging directions.
 - c. The outcome and/or results of the activities are reasonably predictable.
3. Verify that the UAP has the necessary knowledge and skills to accept the assignment.
4. Periodically evaluate and review the quality and appropriateness of the care provided by the UAP.
5. Not assign activities which require licensure to an unlicensed assistive personnel.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2, 43-26-3, 43-26-5, 43-26-10, and 43-26-12

410-10-.02 Standards of Practice for Licensed Practical Nurses

(1) The practice of licensed practical nursing means the provision of care for compensation, under the supervision of a physician practicing medicine, a dentist practicing dentistry, a podiatrist practicing podiatry, or a registered nurse practicing nursing in accordance with applicable provisions of law. Such care shall relate to the promotion of health, the prevention of illness and injury, and the restoration and maintenance of physical and mental health through acts authorized by the board, which shall include, but not be limited to the following:

- (a) Participating in patient assessment activities and the planning, implementation, and evaluation of the delivery of health care services and other specialized tasks when appropriately educated and consistent with board rules and regulations;
- (b) Providing direct personal patient observation, care, and assistance in hospitals, clinics, nursing homes, or emergency treatment facilities, or other health care facilities in areas of practice including, but not limited to: coronary care, intensive care, emergency treatment, surgical care and recovery, obstetrics, pediatrics, outpatient services, dialysis, specialty labs, home health care, or other such areas of practice;
- (c) Performing comfort and safety measures;

(d) Administering treatments and medications by various routes;

(e) Participating in the management and supervision of unlicensed personnel in the delivery of patient care; and

(f) Performing other specialized tasks as appropriately educated.

(2) Responsibility: Each individual is responsible for personal acts of negligence under the law. Licensed practical nurses are liable if they perform functions for which they are not prepared by education and experience and for which supervision is not provided.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2, 43-26-3, 43-26-5, 43-26-32, and 43-26-42

410-10-.03 Definition of Unprofessional Conduct

(1) Nursing conduct failing to meet the minimal standards of acceptable and prevailing nursing practice, which could jeopardize the health, safety, and welfare of the public, shall constitute unprofessional conduct. This conduct shall include, but not be limited to, the following:

(2) Practice

(a) Using inappropriate or unsafe judgment, technical skill or interpersonal behaviors in providing nursing care;

(b) Performing any nursing technique or procedure for which the nurse is unprepared by education or experience;

(c) Disregarding a patient/client's dignity, right to privacy or right to confidentiality;

(d) Failing to provide nursing care because of diagnosis, age, gender, race, creed, color or sexual orientation;

(e) Abandoning or knowingly neglecting patients/clients requiring nursing care;

(f) Continuing to practice after the expiration date of the license.

(g) Failing to take appropriate action to safeguard a patient's welfare;

(h) Failing to take action in a health care setting to protect a patient whose safety or welfare is at risk from incompetent health care practice, or to report the incompetent health care practice to employment or licensing authorities;

(i) Failing to report to the Board a licensed nurse whose work history includes conduct, or a pattern of conduct, that leads to or may lead to an adverse patient outcome;

(j) Assuming patient care responsibilities that the nurse lacks the education to perform, for which the nurse has failed to maintain nursing competence, or that are outside the scope of practice of the nurse;

(k) Accepting the assignment of nursing functions or a prescribed health function when the acceptance of the assignment could be reasonably expected to result in unsafe or ineffective client care;

(l) Failure of a clinical nursing instructor to adequately supervise or to assure adequate supervision of student experiences.

(m) Failure to practice within a modified scope of practice or with the required accommodations, as specified by the Board in granting a limited license or any agreement with the Board.

(n) Causing or permitting physical, emotional, sexual or verbal abuse or injury or neglect to the client, or failing to report same to the employer, appropriate legal authority and/or the Board;

(o) Providing information which was false, deceptive, or misleading in connection with the practice of nursing;

(p) Knowingly aiding, assisting, advising, or allowing an unlicensed person to engage in the unlawful practice of practical, registered or advanced practice nursing;

(q) Violating an order of the Board, or carelessly or repetitively violating a state or federal law relating to the practice of practical, registered or advanced practice nursing, or violating a state or federal narcotics or controlled substance law;

(r) Knowingly aiding, assisting, advising, or allowing a nurse under Board Order to violate the conditions set forth in the Order; or

(s) Failing to report violations of the Nursing Practice Act and/or the Board's rules and regulations.

(3) Documentation

(a) Failing to maintain a patient record that accurately reflects the nursing assessment, care, treatment, and other nursing services provided to the patient;

(b) Falsifying, omitting or making a materially incorrect, inconsistent, or unintelligible entry in any record:

1. Regarding a patient at a health care facility, school, institution, or other work place location; or

2. Pertaining to obtaining, possessing, administering, wasting or returning any controlled substance as defined in the federal Uniform Controlled Substances Act, 21 U.S.C. 801 et seq., or Georgia's Controlled Substances Act;

(c) Falsifying reports, client documentation, agency records or other documents; or

(d) Falsifying, omitting or destroying documentation of nursing actions on the official patient/client record.

(4) Investigations

(a) Failing to timely respond to an investigative subpoena issued by the Board;

(b) Failing to cooperate with a lawful investigation conducted by the Board; or

(c) Making a written false or inaccurate statement to the Board or the Board's designee in the course of an investigation

(5) Delegation

(a) Failing to supervise a person to whom nursing functions are delegated;

- (b) Delegating services that require nursing judgment to an unauthorized person;
- (c) Delegating or assigning nursing functions or a prescribed health function when the delegation or assignment could reasonably be expected to result in unsafe or ineffective client care; or
- (d) Delegating nursing care, functions, tasks or responsibility to others when the nurse knows or should know that such delegation is to the detriment of patient safety;

(6) Drugs

- (a) Removing, without authorization, a narcotic, drug, controlled substance, supply, equipment, or medical record from any health care facility, school, institution, or other work place location;
- (b) Obtaining, possessing, administering, or using any narcotic, controlled substance, or illegal drug in violation of any federal or state criminal law, or in violation of the policy of any health care facility, school, institution, or other work location at which the nurse practices;
- (c) Providing or administering any controlled substance or prescription-only drug for other than accepted therapeutic or research purposes;
- (d) Failing to follow the policy and procedure in place for the wastage of medications at the facility where the nurse was employed or working at the time of the incident(s);
- (e) A positive drug screen for which there is no lawful prescription;
- (f) Obtaining or attempting to obtain or deliver medication(s) through means of misrepresentation, fraud, forgery, deception and/or subterfuge;
- (g) Failing to practice nursing in accordance with prevailing nursing standards due to physical, psychological or chemical impairment; or
- (h) Failing to report to the Board within 30 days of becoming unable to practice nursing with reasonable skill and safety by result of mental or physical condition or use of alcohol, drugs, narcotics, chemicals, or any other type of material.

(7) Boundaries

- (a) Failing to maintain professional boundaries or engaging in a dual relationship with a patient, resident, or any family member of a patient or resident;
- (b) Removing, without authorization, any money, property, or personal possessions, or requesting payment for services not performed from a patient, employer, co-worker, or member of the public;
- (c) Violating professional boundaries of the nurse/client relationship including but not limited to physical, sexual, emotional or financial exploitation of the client or the client's significant other(s);
- (d) Engaging in sexual conduct with a client, touching a client in a sexual manner, requesting or offering sexual favors, or language or behavior suggestive of the same;
- (e) Threatening or violent behavior in the workplace; or
- (f) Misappropriating, in connection with the practice of nursing, anything of value or benefit, including but not limited to, any property, real or personal of the client, employer, or any other person or entity, or failing to take precautions to prevent such misappropriation.

(8) Fraud

- (a) Engaging in fraud, misrepresentation, or deceit in taking a licensing examination or on an initial or renewal application for a license or certificate;
- (b) Impersonating a nurse licensed under this O.C.G.A. §43-26;
- (c) Advertising the practice of nursing with untruthful or misleading statements;
- (d) Practicing nursing without a current license or while the license is suspended;
- (e) Providing one's license/temporary permit to another individual for any reason; or
- (f) Providing false or misleading documents related to applications, renewals or continuing competency requirements.

(9) Employment

- (a) Making a false or misleading statement on a nursing or health care related employment or credential application concerning previous employment, employment experience, education, or credentials;
- (b) Failing to answer specific questions or providing false or misleading answers that would have affected the decision to license, employ, certify or otherwise utilize a nurse; or
- (c) Providing a false, deceptive or misleading statement(s) as a nursing expert.

(10) Arrests and Convictions

- (a) Failing to notify the Board, in writing, of a conviction for a felony or an undesignated offense within 10 days of the conviction. The nurse or applicant shall include the following in the notification:
 1. Name, address, telephone number, email address, social security number, and license number, if applicable;
 2. Date of the conviction; and
 3. Nature of the offense.

410-10-.04 Use of Nurse Protocols Authorized by O.C.G.A. § 43-34-26.1 (Influenza Vaccine Protocol Agreements) by Registered Nurses in Specific Settings

- (1) The general purpose of this rule is to protect and safeguard the public by regulating the practice of registered nurses ("RNs") who use protocols in specific settings as authorized by O.C.G.A. § 43-34-26.1.
- (2) A registered nurse who uses a nurse protocol in specific settings as authorized by O.C.G.A. § 43-34-26.1 shall:
- (a) Hold a current license to practice as a registered nurse in Georgia;
 - (b) Adhere to a nurse protocol which is a written document mutually agreed upon and signed by the nurse and licensed physician which delegates to the nurse the authority to perform specified medical acts and provides for immediate consultation with the delegating physician or a physician designated in the absence of the delegating physician;
 - (c) Document preparation and performance specific to each medical act authorized under O.C.G.A. § 43-34-26.1, including ordering dangerous drugs, medical treatments, or diagnostic studies and the dispensing of dangerous drugs in accordance with dispensing procedure and under the authority of a physician's order.
- (3) The nurse protocol used by a RN pursuant to the provisions of O.C.G.A. § 43-34-26.1 shall comply with the following criteria:
- (a) Shall bear a current review date, be available upon request; and specify parameters under which delegated medical acts may be performed;
 - (b) Shall include a schedule for periodic review of patient records by the delegating physician;
 - (c) Shall be reviewed, revised or updated annually;
 - (d) Shall include a provision for immediate consultation with the delegating physician designated in the absence of the delegating physician;
 - (e) Shall comply with provisions for ordering or dispensing drugs under subsection (b) of Code Section 26-4-130 and the rules and regulations established pursuant thereto by the State Board of Pharmacy and adhere to a written dispensing procedure when dispensing dangerous drugs as required by O.C.G.A. § 43-34-26.1(a) (5).
- (4) A registered nurse may practice under protocol pursuant to the provisions of O.C.G.A. § 43-34-26.1 as an agent or employee of the following:
- (a) The Georgia Department of Public Health;
 - (b) Any county board of health;
 - (c) Any organization:
 - 1. Which is exempt from federal taxes pursuant to Section 501(c) (3) of the Internal Revenue Code as defined in Code Section 48-1-2, other than an organization which is a hospital, preferred provider organization, health maintenance organization, or similar organization; or
 - 2. Established under the authority of or receiving funds pursuant to 42 U.S.C. Section 254b or 254c of the United States Public Health Service Act.
 - 3. Which organization provides that those medical services and dangerous drugs which are ordered or dispensed by its nurses will be provided at no cost to patient or at a cost based solely upon the patient's ability to pay.
 - (d) An outpatient clinic:
 - 1. Which is owned or operated by a licensed hospital;
 - 2. Which provides such drugs, treatments, or studies free or at a charge to the patient based solely upon the patient's ability to pay; provided, however, such charge shall not exceed the actual cost to the outpatient clinic; and
 - 3. Whose services are primarily provided to the medically disadvantaged.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2, and 43-26-5

Rule 410-11 – Regulation of Advanced Practice Registered Nurses

410-11-.01 Standards of Registered Professional Nursing Practice. Amended.

- (1) For purposes of O.C.G.A. Secs. 43-26-4 (a)(6)(B)(v) and 43-1-29(6), the Georgia Board of Nursing defines the minimal standards of acceptable and prevailing nursing practice as including, but not limited to the following enumerated standards of competent practice.
- (2) The Georgia Board of Nursing recognizes that assessment, nursing diagnosis, planning, intervention, evaluation, teaching, and supervision are the major responsibilities of the registered nurse in the practice of nursing. The Standards of Registered Professional Nursing Practice delineate the quality of nursing care which a patient/client should receive regardless of whether it is provided solely by a registered nurse or by a registered nurse in collaboration with other licensed or unlicensed personnel. The Standards are based on the premise that the registered nurse is responsible for and accountable to the patient/client for the quality of nursing care rendered.

The Standards of Registered Professional Nursing Practice shall establish a baseline for quality nursing care; be derived from the law governing nursing; apply to the registered nurse practicing in any setting; govern the practice of the licensee at all levels of competency.

(a) Standards related to the registered nurse's responsibility to apply the nursing process (adapted from American Nurses' Association *Code for Nurses and Standards of Practice*). The registered nurse shall:

1. assess the patient/client in a systematic, organized manner;
2. formulate a nursing diagnosis based on accessible, communicable and recorded data (which is collected in a systematic and continuous manner);
3. plan care which includes goals and prioritized nursing approaches or measures derived from the nursing diagnoses;
4. implement strategies to provide for patient/client participation in health promotion, maintenance and restoration;
5. initiate nursing actions to assist the patient/client to maximize her/his health capabilities;
6. evaluate with the patient/client the status of goal achievement as a basis for reassessment, reordering of priorities, new goal setting and revision of the plan of nursing care;
7. seek educational resources and create learning experiences to enhance and maintain current knowledge and skills appropriate to her/his area of practice.

(b) Standards related to the registered nurse's responsibilities as a member of the nursing profession. The registered nurse shall:

1. function within the legal boundaries of nursing practice based upon knowledge of statutes and regulations governing nursing;
2. accept responsibility for individual nursing actions and continued competence;
3. communicate, collaborate and function with other members of the health team to provide optimum care;
4. seek education and supervision as necessary when implementing nursing practice techniques;
5. respect the dignity and rights of the patient/client regardless of socioeconomic status, personal attributes or nature of health problems;
6. maintain each patient/client's right to privacy by protecting confidential information unless obligated, by law, to disclose the information;
7. provide nursing care without discrimination on the basis of diagnosis, age, sex, race, creed or color;
8. delegate and supervise only those nursing measures which the nurse knows, or should know, that another person is prepared, qualified, or licensed to perform;
9. retain professional accountability for nursing care when delegating nursing intervention;
10. respect and safeguard the property of clients, family, significant others and the employer;
11. notify the appropriate party of any unprofessional conduct which may jeopardize patient/client safety;
12. Participate in the periodic review and evaluation of the quality and appropriateness of nursing care.

(c) Standards related to the registered nurse's responsibilities in assignment of patient activities to unlicensed assistive personnel (UAP). The registered nurse shall:

1. Determine that the care and/or activity to be performed would be based upon orders or directions of a licensed physician, licensed dentist, licensed podiatrist or person licensed to practice nursing as a registered professional nurse.
2. Assign only care and activities that do not require the skills and knowledge of a person practicing nursing as a registered professional nurse or licensure of another health care professional. The care and activities to be assigned must meet all of the following criteria:
 - a. The care and/or activities do not require complex observations or critical decisions.
 - b. The care and/or activities can be safely performed according to exact, unchanging directions.
 - c. The outcome and/or results of the activities are reasonably predictable.
3. Verify that the UAP has the necessary knowledge and skills to accept the assignment.
4. Periodically evaluate and review the quality and appropriateness of the care provided by the UAP.
5. Not assign activities which require licensure to an unlicensed assistive personnel.

410-11-01 Purpose, Definitions, Title, and Authority for Advanced Nursing Practice

(1) Purpose.

(a) To promote, preserve, and protect public health, safety, and welfare by regulating advanced nursing practice.

(2) Definitions:

(a) The advanced practice registered nurse is a certified nurse-midwife (CNM), nurse practitioner (NP), certified registered nurse anesthetist (CRNA), clinical nurse specialist (CNS) or clinical nurse specialist in psychiatric/mental health (CNS/PMH), and is authorized to practice by the Georgia Board of Nursing ("the Board").

(b) "Advanced nursing practice" means practice by a registered professional nurse who meets those educational, practice, certification requirements, or any combination of such requirements, as specified by the Board and includes certified nurse-midwives, nurse

practitioners, certified registered nurse anesthetists, clinical nurse specialists in psychiatric/mental health, and others required by the Board.

(3) Title.

(a) Advanced practice registered nurses are authorized to practice in the categories of certified nurse-midwife, nurse practitioner, certified registered nurse anesthetist, clinical nurse specialist and clinical nurse specialist in psychiatric/mental health. Each advanced practice registered nurse shall use the category designation for purposes of identification and documentation.

(4) Authority to Practice:

(a) Only a registered professional nurse authorized to practice according to these rules shall use the specified title, and practice or offer to practice, as a certified nurse-midwife, nurse practitioner, certified registered nurse anesthetist clinical nurse specialist or clinical nurse specialist, psychiatric/mental health unless otherwise authorized to do so by the Board.

(b) The advanced practice registered nurse is authorized to perform advanced nursing functions and certain medical acts which include, but are not limited to, ordering drugs, treatments, and diagnostic studies as provided in O.C.G.A. § 43-34-26.1 and Chapter 410-11.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2, 43-26-3 and 43-26-5

410-11-.02 Definition of Unprofessional Conduct. Amended.

Nursing behaviors (acts, knowledge, and practices) failing to meet the minimal standards of acceptable and prevailing nursing practice, which could jeopardize the health, safety, and welfare of the public, shall constitute unprofessional conduct. These behaviors shall include, but not be limited to, the following:

- (a) using inappropriate or unsafe judgment, technical skill or interpersonal behaviors in providing nursing care;
- (b) performing any nursing technique or procedure for which the nurse is unprepared by education or experience;
- (c) disregarding a patient/client's dignity, right to privacy or right to confidentiality;
- (d) failing to provide nursing care because of diagnosis, age, sex, race, creed or color;
- (e) abusing a patient/client verbally, physically, emotionally, or sexually;
- (f) falsifying, omitting or destroying documentation of nursing actions on the official patient/client record;
- (g) abandoning or knowingly neglecting patients/clients requiring nursing care;
- (h) delegating nursing care, functions, tasks or responsibility to others when the nurse knows or should know that such delegation is to the detriment of patient safety;
- (i) providing one's license/temporary permit to another individual for any reason;
- (j) failing to practice nursing in accordance with prevailing nursing standards due to physical or psychological impairment;
- (k) diverting prescription drugs for own or another person's use;
- (l) misappropriating money or property from a patient/client or employee;
- (m) failing to notify the appropriate party of any unprofessional conduct which may jeopardize patient/client safety.

410-11-.02 Rules for Certified Nurse-Midwives

(1) Definition.

(a) A certified nurse-midwife is a registered professional Nurse who has completed/graduated from a post-basic educational program for nurse midwives which included theoretical and practical components and evidence of advanced pharmacology within the curriculum or as a separate course. The certified nurse-midwife is certified by the ACNM Certification Council and is authorized to practice by the Board.

(2) Scope and Standards of Practice for the Certified Nurse-Midwife.

(a) The certified nurse-midwife (CNM) provides independent management of women's health care, focusing particularly on pregnancy, childbirth, the postpartum period, care of the newborn, and the family planning and gynecological needs of women. The certified nurse-midwife practices within a health care system that provides for consultation, collaborative management, or referral as indicated by the health status of the client. The certified nurse-midwife must practice in accordance with the Board-approved American College of Nurse-Midwives' current Standards for the Practice of Nurse-Midwifery.

(3) Requirements to Practice as a Certified Nurse-Midwife:

- (a) Prior to January 1, 1999, and applicant who submits the following items may be authorized to practice as a certified nurse-midwife:
 1. Evidence of current licensure as a registered professional nurse in Georgia;
 2. A completed Board application with required fee;
 3. Official transcript which verifies graduation from a post-basic educational program for nurse-midwives which includes theoretical and practical components and evidence of advanced pharmacology within the curriculum or as a separate course, and;

4. Verification of current national certification from the ACNM Certification Council. If certified prior to January 1, 1996, evidence of enrollment in the Continuing Competency Assessment Program of the American College of Nurse-Midwives, which bears current cycle dates, must be provided.

(b) Beginning January 1, 1999, for initial authority to practice as a certified nurse midwife, and applicant must submit an official transcript which verifies completion/graduation with a master's or higher degree in nursing or a graduate degree with a concentration in nurse-midwifery, evidence of advanced pharmacology within the curriculum or as a separate course, in addition to the requirements stated in 410-11-02(3)(a) 1., 2. and 4.

(4) Biennial Renewal of Board Authorization to Practice as a Certified Nurse-midwife:

(a) The date for renewal of Board authorization as a certified nurse-midwife will coincide with the renewal of the registered professional nurse license.

(b) Authorization to practice as a certified nurse-midwife shall expire on January 31st of odd-numbered years and shall be administratively revoked if not renewed.

(c) For continued authority to practice, the certified nurse-midwife must submit:

1. A completed renewal application for advanced nursing practice;

2. A copy of current national certification with expiration date from the ACNM Certification Council. If certified prior to January 1, 1996, evidence of enrollment in the Continuing Competency Assessment Program of the American College of Nurse-Midwives, which bears current cycle dates must be provided.

3. Payment of the renewal fee.

(d) A renewal application, received with a postmark date after January 31 of odd numbered years, will be returned to the applicant. Thereafter, the applicant must apply to reinstate the authorization.

Authority: O.C.G.A. §§ 43-1-4, 43-1-25, 43-26-2, 43-26-3 and 43-26-5

410-11-.03 Use of Nurse Protocols Authorized by O.C.G.A. § 43-34-26.1 by Registered Nurses in Specific Settings.

(1) The general purpose of this rule is to protect and safeguard the public by regulating the practice of registered nurses ("RNs") who use protocols in specific settings as authorized by O.C.G.A. § 43-34-26.1.

(2) A RN who uses a nurse protocol in specific settings as authorized by O.C.G.A. § 43-34-26.1 shall:

(a) hold a current license to practice as a registered nurse in Georgia;

(b) adhere to a nurse protocol which is a written document mutually agreed upon and signed by the nurse and licensed physician which delegates to the nurse the authority to perform specified medical acts and provides for immediate consultation with the delegating physician or a physician designated in the absence of the delegating physician;

(c) document preparation and performance specific to each medical act authorized under O.C.G.A. § 43-34-26.1, including ordering dangerous drugs, medical treatments, or diagnostic studies and the dispensing of dangerous drugs in accordance with dispensing procedure and under the authority of a physician's order.

(3) The nurse protocol used by a RN pursuant to the provisions of O.C.G.A. § 43-34-26.1 shall comply with the following criteria:

(a) shall bear a current review date, be available upon request; and specify parameters under which delegated medical acts may be performed;

(b) shall include a schedule for periodic review of patient records by the delegating physician;

(c) shall be reviewed, revised or updated annually;

(d) shall include a provision for immediate consultation with the delegating physician designated in the absence of the delegating physician;

(e) shall comply with provisions for ordering or dispensing drugs under subsection (b) of Code Section 26-4-130 and the rules and regulations established pursuant thereto by the State Board of Pharmacy and adhere to a written dispensing procedure when dispensing dangerous drugs as required by O.C.G.A. § 43-34-26.1(a) (3.1) and (4).

(4) An RN may practice under protocol pursuant to the provisions of O.C.G.A. § 43-34-26.1 as an agent or employee of the following:

(a) The Division of Public Health of the Department of Human Resources;

(b) Any county board of health;

(c) Any organization:

1. Which is exempt from federal taxes pursuant to Section 501(c) (3) of the Internal Revenue Code as defined in Code Section 48-1-2, other than an organization which is a hospital, preferred provider organization, health maintenance organization, or similar organization; or

2. Established under the authority of or receiving funds pursuant to 42 U.S.C. Section 254b or 254c of the United States Public Health Service Act.

3. Which organization provides that those medical services and dangerous drugs which are ordered or dispensed by its nurses will be provided at no cost to patient or at a cost based solely upon the patient's ability to pay.

(d) An outpatient clinic:

1. Which is owned or operated by a licensed hospital;
2. Which provides such drugs, treatments, or studies free or at a charge to the patient based solely upon the patient's ability to pay; provided, however, such charge shall not exceed the actual cost to the outpatient clinic; and
3. Whose services are primarily provided to the medically disadvantaged.

410-11.03 Rules for Nurse Practitioners.

(1) Definition.

(a) A nurse practitioner is a registered professional nurse who is recognized by the Board to engage in advanced practice registered nursing.

(b) The nurse practitioner practices in a manner consistent with Chapter 410-13 of the Georgia Board of Nursing Rules and Regulations.

(2) Scope and Standards of Practice for the Nurse Practitioner:

(a) The nurse practitioner provides advanced practice nursing care and medical services specific to the nurse practitioner respective specialty to individuals, families and groups, emphasizing health promotion and disease prevention as well as the diagnosis and management of acute and chronic diseases. The nurse practitioner collaborates as necessary with a variety of individuals to diagnose and manage clients' health care problems.

(b) The nurse practitioner practices in a manner consistent with the nationally recognized nursing practice standards for the respective nurse practitioner specialty that is consistent with the Board-recognized national certification organization identified in Rule 410-11-.12.

(3) Requirements for initial authority to Practice as a Nurse Practitioner:

(a) Evidence of current licensure as a registered professional nurse in Georgia;

(b) A completed Board application with required fee;

(c) Official transcript which verifies graduation with a master's or higher degree in nursing for the respective nurse practitioner specialty or a graduate level post-master's certificate in an advanced practice registered nurse practitioner specialty and evidence of advanced pharmacology within the curriculum or as a separate course, advanced physical assessment, and pathophysiology.

(d) Verification of current national certification from the respective Board-recognized certifying organization.

(4) The applicant must document one of the following within in four (4) years immediately preceding the date of current application:

(a) 500 hours of practice as an advanced practice registered nurse;

(b) Graduation from a nursing education program or a graduate level post-master's certificate in an advanced practice registered nurse practitioner specialty; or

(c) Completion of a Georgia Board-approved advanced practice registered nurse reentry/refresher program.

(5) An applicant who is unable to meet the requirements of (4)(a), (b), or (c) must satisfactorily complete the following:

(a) 40 hours of study relevant to advanced registered nursing practice within one (1) year of the date of application. Relevant advanced practice registered nurse study must include at least four (4) Different content areas. The Board may waive the 40 hours of study if the applicant has passed a national recognized certification organization examination within the four (4) years immediately preceding the date of current application.

(b) Current health care provider course of cardio-pulmonary resuscitation unless completed within one (1) year of the date of application with a Georgia Board of Nursing approved RN reentry;

(c) Study of the Georgia Registered Professional Nurse Practice Act, O.C.G.A. §§ 43-26-1 *et seq.* and Board rules; and

(d) 160 hours of relevant advanced practice registered nursing supervised by an advanced practice registered nurse in a comparable specialty area and in accordance with other Board criteria.

(6) Biennial Renewal of Board Authorization to Practice as a Nurse Practitioner:

(a) The date for renewal of Board authorization as a nurse practitioner will coincide with the renewal license period. Authorization shall be administratively revoked if not renewed.

(b) For continued authority to practice, the nurse practitioner must:

1. Renew licensure as a registered professional nurse in Georgia;

2. Submit a completed renewal application for advanced nursing practice;

3. Attest to advanced practice registered nurse practice in accordance with applicable Georgia laws and rules; and

4. Submit payment of the renewal fee.

(c) Any licensee who fails to renew authorization must apply to reinstate the authorization.

Authority: O.C.G.A. §§ 43-1-4, 43-1-25, 43-26-2, 43-26-3 and 43-26-5

410-11.04 Rules for Certified Registered Nurse Anesthetists. Amended.

(1) Definition

(a) A certified registered nurse anesthetist is a registered professional nurse who has completed/graduated from a post-basic educational program for nurse anesthetists which includes theoretical and practical components and evidence of advanced pharmacology, is currently certified/recertified by the National Board of Certification and Recertification for Nurse Anesthetists, and is authorized to practice by the Board.

(2) Scope and Standards of Practice for the Certified Registered Nurse Anesthetist. The certified registered nurse anesthetist (CRNA) provides anesthesia and related care services in four general categories:

- (a) Preanesthetic preparation and evaluation;
- (b) Anesthesia induction, maintenance, and emergence;
- (c) Perianesthetic and clinical support functions; and
- (d) Postanesthesia care.

The certified registered nurse anesthetist must practice in accordance with Board approved American Association of Nurse Anesthetists' current *Guidelines and Standards for Nurse Anesthesia Practice*.

(3) Requirements to practice as a Certified Registered Nurse Anesthetist.

(a) An applicant who has graduated from an approved nurse anesthesia educational program prior to January 1, 1999, who submits the following items may be authorized to practice as a certified registered nurse anesthetist:

- 1. Evidence of current licensure as a registered professional nurse in Georgia;
- 2. A completed Board application with required fee;
- 3. Official transcript which verifies completion/graduation from a post-basic educational program for certified registered nurse anesthetists which includes theoretical and practical components and evidence of advanced pharmacology; and
- 4. Verification of current national certification/recertification from the National Board of Certification and Recertification for Nurse Anesthetists.

(b) An applicant who graduates from an approved nurse anesthesia education program on or after January 1, 1999, who submits the following items may be authorized to practice as a certified registered nurse anesthetist:

- 1. Evidence of current licensure as a registered professional nurse in Georgia;
- 2. A completed Board application with required fee;
- 3. Official transcript which verifies completion/graduation with a master's or higher degree in nursing with a concentration in anesthesia and evidence of advance pharmacology or a graduate degree with a concentration in anesthesia and evidence of advance pharmacology; and
- 4. Verification of current national certification/recertification from the National Board of Certification and Recertification for Nurse Anesthetists

(4) Biennial Renewal of Board authorization to practice as a Certified Registered Nurse Anesthetist.

(a) The data for renewal of Board authorization as a certified registered nurse anesthetist will coincide with the renewal of the registered professional nurse license.

(b) Authorization to practice as a certified registered nurse anesthetist shall expire on January 31st of odd-numbered years and shall be administratively revoked if not renewed.

(c) For continued authority to practice, the certified registered nurse anesthetist must submit:

- 1. A completed renewal application for advanced nursing practice;
- 2. A copy of current national certification/recertification as a certified registered nurse anesthetist which bears the expiration date; and
- 3. Payment of the renewal fee.

(d) A renewal application, received with a postmark date after January 31 of odd numbered years, will be returned to the applicant. Thereafter, the applicant must apply to reinstate the authorization.

Authority: O.C.G.A. §§ 43-1-4, 43-1-25, 43-26-2, 43-26-3 and 43-26-5

410-11-.05 Rules for Clinical Nurse Specialists, Psychiatric/Mental Health

(1) Definition

(a) A clinical nurse specialist, psychiatric/mental health, is a registered professional nurse who has graduated from a program of graduate study and supervised practice; has demonstrated depth and breadth of knowledge, competence and skill in the advanced practice of psychiatric/mental health nursing; and is authorized to practice by the Board.

(2) Scope and Standards of Practice for the Clinical Nurse Specialist, Psychiatric/Mental Health.

(a) The clinical nurse specialist, psychiatric/mental health, (CNS/PMH), is an advanced practice registered nurse who provides a full range of nursing services from mental health promotion to mental illness rehabilitation. As a primary mental health care provider, the clinical nurse specialist, psychiatric/mental health, provides psychotherapy, clinical supervision, consultation, and liaison services. The clinical nurse specialist, psychiatric/mental health, must practice in accordance with the Board-approved current standards of the

American Nurses Association's A Statement on Psychiatric-Mental Health Clinical Nursing Practice and Standards of Psychiatric-Mental Health Clinical Nursing Practice.

(3) Requirements to Practice as a Clinical Nurse Specialist, Psychiatric/Mental Health.

(a) Prior to January 1, 1999, an applicant who submits the following items may be authorized to practice as a clinical nurse specialist in psychiatric/mental health:

1. Evidence of current licensure as a registered professional nurse in Georgia;
2. Completed Board application with required fee; and
3. Official transcript which verifies a master's or higher degree in nursing with specialization in psychiatric/mental health nursing which includes a minimum of two (2) graduate courses in psychiatric/mental health nursing, supervised practice for each of the two (2) graduated courses and evidence of advanced pharmacology within the curriculum or as a separate course; or verification of current national certification as a clinical nurse specialist in psychiatric/mental health from the American Nurses Credentialing Center and evidence of advance pharmacology.

(b) Beginning January 1, 1999, an applicant requesting initial authority to practice as a clinical nurse specialist, psychiatric/mental health must submit the following:

1. Evidence of current licensure as a registered professional nurse in a Georgia;
2. A completed Board application with required fee;
3. Official transcript which verifies a master's or higher degree in nursing with specialization in psychiatric/mental health nursing which includes a minimum of two (2) graduate courses in psychiatric/mental health nursing, supervised practice for each of the two (2) graduate courses and evidence of advanced pharmacology within the curriculum or as a separate course; and
4. Verification of current national certification as a clinical nurse specialist in psychiatric/mental health from the American Nurses Credentialing Center.

(4) Biennial renewal of Board Authorization to Practice as a Clinical Nurse Specialist, Psychiatric/Mental Health:

(a) The date for renewal of Board Authorization as a clinical nurse specialist, psychiatric/mental health, will coincide with the renewal of the registered professional nurse license.

(b) Authorization to practice as a clinical nurse specialist, psychiatric/mental health, shall expire on January 31 of odd-numbered years and shall be administratively revoked if not renewed.

(c) For continued authority to practice, the clinical nurse specialist, psychiatric/mental health, must submit:

1. A completed renewal application for advanced nursing practice;
2. A copy of current national certification as a clinical nurse specialist, psychiatric/mental health which bears the expiration date, if initial authorization was based on national certification; and
3. Payment of the renewal fee.

(d) A renewal application, received with a postmark date after January 31 of odd numbered years, will be returned to the applicant. Thereafter, the applicant must apply to reinstate the authorization.

Authority: O.C.G.A. §§ 43-1-4, 43-1-25, 43-26-2, 43-34-3 and 43-26-5

Rule 410-11-.06 Rules for Clinical Nurse Specialists

(1) Definition:

A clinical nurse specialist ("CNS") is a registered professional nurse who has graduated from a program of graduate study and supervised practice; who holds a master's degree or other graduate degree from an approved nursing education program; who holds national board certification in his or her area of specialty; and is authorized to practice as an advanced practice registered nurse by the Board.

(2) Scope and Standards of Practice for the Clinical Nurse Specialist.

The clinical nurse specialist ("CNS") is an advanced practice registered nurse who provides a full range of nursing services from health promotion to illness rehabilitation. The clinical nurse specialist provides clinical supervision, consultation, and liaison services to nurses, patients and healthcare systems. The clinical nurse specialist must practice in accordance with the current standards of the national certifying organizations listed in Rule 410-11-.12 by which clinical nurse specialists are currently certified.

(3) Requirements to Practice as a Clinical Nurse Specialist.

(a) Beginning January 1, 2012, all applicants seeking initial authorization as an advanced practice registered nurse to practice as a clinical nurse specialist ("CNS") shall meet the following requirements:

1. Evidence of current licensure as a registered professional nurse in Georgia;
2. Completed Board authorization application with required fee;
3. Official transcript which verifies a master's or higher degree in nursing or a post-masters certificate from an approved nursing education program with specialization as a Clinical Nurse Specialist that includes evidence of advanced pharmacology, advanced physical assessment, and advanced pathophysiology within the curriculum or as a separate course.

4. Verification of current national certification as a clinical nurse specialist from the American Nurses Credentialing Center or approved national certifying body listed in Rule 410-12-.12.

(b) All applicants must document one of the following within four (4) years immediately preceding the date of the current authorization application:

1. 500 hours of practice as a CNS;

2. An official transcript which verifies a masters or higher degree in nursing or a post master's certificate from an approved nursing education program with a specialization as a Clinical Nurse Specialist; or

3. Completion of a Board approved advanced practice registered nurse reentry/refresher program consisting of forty (40) hours of study and one hundred and sixty hours (160) hours of supervised clinical practice within the four (4) years immediately preceding the date of application.

(c) Biennial renewal of board authorization to practice as a clinical nurse specialist:

1. The date for renewal of board authorization as a clinical nurse specialist will coincide with the renewal of the registered professional nurse license.

2. Authorization to practice as a clinical nurse specialist shall be administratively revoked if not renewed prior to the date of expiration.

3. For renewal of APRN-CNS authority to practice, the clinical nurse specialist must submit:

(i) A completed authorization renewal application for advanced nursing practice;

(ii) Maintain current national certification as a clinical nurse specialist;

(iii) Upon notification of Board audit, submit proof of current national certification as a clinical nurse specialist which bears the certification expiration date; and

(iv) Payment of the authorization renewal fee.

4. A renewal application, received with a postmark date after the date of authorization expiration, will not be accepted by the Board for renewal purposes. Thereafter, the applicant must apply to reinstate the authorization.

5. Renewal of a license to practice as a registered professional nurse shall not constitute renewal of authorization to practice as a CNS.

Authority: O.C.G.A. §§ 43-1-4, 43-1-25, 43-26-2, 43-26-3 and 43-26-5

410-11-.07 Failure of the Examination.

An applicant who fails the national certification examination shall not engage in advanced nursing practice until such time as all requirements are met and written authorization to practice as a certified nurse-midwife, nurse practitioner, certified registered nurse anesthetist, clinical nurse specialist or clinical nurse specialist in psychiatric/mental health is issued by the Board.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2 and 43-26-5

410-11-.08 Temporary Authority to Practice.

(1) Temporary authority to practice as a certified nurse-midwife, nurse practitioner, certified registered nurse anesthetist, clinical nurse specialist or clinical nurse specialist in psychiatric/mental health may be issued to a registered nurse who is an applicant for authorization for advanced practice nursing under the following circumstances:

(a) The Applicant has met all requirements for Board authorization but the Board review of the application is delayed due to an investigation of a possible period of questionable unauthorized nursing practice; or

(b) The Applicant has met all the requirements for Board authorization except current national certification because such certification has expired, and the applicant must meet specific practice requirements for recertification.

(2) Temporary authorization may be issued for a period of up to six (6) months, and may be renewable once for a period of up to six (6) months.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2 and 43-26-5

410-11-.09 Unauthorized Practice.

An applicant who is employed or engaged in advanced nursing practice as a certified nurse-midwife, nurse practitioner, certified registered nurse anesthetist, clinical nurse specialist or clinical nurse specialist in psychiatric/mental health in Georgia prior to Board authorization for such practice shall be in violation of 410-11-.01(4). Such conduct may result in action taken by the Board which may include a reprimand and fine as follows:

(a) A private or public reprimand and

(b) A fine:

1. Of \$50.00 per month (up to \$250.00) for practice between two (2) and six (6) months, or any portion thereof;
2. Of \$75.00 per month each additional month, or portion thereof, between seven (7) and twelve (12) months;
3. At the Board's discretion for unauthorized practice extending over one (1) year.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2 and 43-26-5

410-11-10 Revocation or Suspension

As provided on O.C.G.A. §§ 43-1-19 and 43-26-11, the Board may revoke, suspend, or otherwise discipline the registered professional nurse license and/or the authority to practice as a certified nurse-midwife, nurse practitioner, certified registered nurse anesthetist, clinical nurse specialist in psychiatric/mental health, or anyone so authorized who demonstrates unprofessional conduct according to 410-10-.03, fails to comply with current scope and standards of practice according to 410-11-.02(2), 410-11-.03(2), 410-11-.04(2), or 410-11-.05(2), or who fails to maintain national certification and/or continuing competency requirements.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2, and 43-26-5

410-11-11 Reinstatement of Authorization

(1) An advanced practice registered nurse whose authorization has expired may be eligible for reinstatement of authorization.

(2) The applicant must:

(a) Submit a completed reinstatement application, photograph and required fee;

(b) Request the appropriate national certifying organization to verify current certification on a form provided by the Board; and

(c) Be able to document three (3) months or 500 hours of licensed practice as a registered nurse (or advanced practice registered nurse) during the four (4) years immediately preceding the date of current application.

(3) An applicant who is unable to meet the requirement of 410-11-(2)(c) must comply with similar requirements of 410-4-.04 for an advanced practice registered nurse.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2, and 43-26-5

410-11-12 Recognition of National Certifying Organizations for Advanced Nursing Practice.

(1)The Board recognizes certification by: The American Midwifery Certification Board;

American Academy of Nurse Practitioners; National Certification Corporation; Pediatric

Nursing Certification Board; National Board of Certification and Recertification for Nurse Anesthetists; American Nurses Credentialing Center; and the American Association of Critical-Care Nurses Certification Corporation for titles recognized in Rules Chapter 410-11.

(2) The Board may discontinue recognition of a certifying organization if it deems that the respective certification process does not provide an accurate evaluation of the individual's ability to engage in advanced nursing practice.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2, 43-26-3, and 43-26-5

410-11-.13 Regulation of Protocol Use By Advanced Practice Registered Nurses as Authorized by O.C.G.A. § 43-34-26.1.

(1) The general purpose of these rules is to assist in protecting and safeguarding the public by regulating the practice of advanced practice registered nurses who use protocols as authorized by O.C.G.A. § 43-34-23.

(2) An advanced practice registered professional nurse who uses a protocol as authorized by O.C.G.A. §43-34-23 shall:

(a) Hold a current license to practice as a registered nurse in Georgia;

(b) Hold a current authorization as an advanced practice registered nurse in Georgia;

(c) Adhere to a written nurse protocol which is a written document mutually agreed upon and signed by the nurse and licensed physician which specifies delegated medical acts delegated by the physician to the nurse and provides for immediate consultation with the delegating physician or a physician designated in the absence of the delegating physician; and

(d) Document preparation and performance specific to each medical act authorized by a written nurse protocol, including the ordering and administering of controlled substances, ordering and dispensing of dangerous drugs, and ordering medical treatments and diagnostic studies in accordance with O.C.G.A. § 43-34-23.

(3) The nurse protocol agreement used by an advanced practice registered nurse under the provisions of O.C.G.A. § 43-34-23 shall comply with the following criteria:

(a) Shall be in writing and signed by the advanced practice nurse and the delegating physician;

(b) Shall be dated, available upon request and specify parameters under which medical acts delegated by the physician may be performed;

(c) Shall include provisions for periodic review of patient records by the delegating physician;

(d) Shall be reviewed, revised or updated annually;

(e) Shall include a provision for immediate consultation with the delegating physician or a physician designated in the absence of the delegating physician;

(f) Shall contain written provisions regarding the procedure for dispensing dangerous drugs which comply with O.C.G.A. §§ 43-34-23 (a)(3), (3.1), (4), and (5), if the dispensing of dangerous drugs is included as a delegated medical act in the nurse protocol agreement; and

(g) Shall contain written provisions regarding the procedure for ordering controlled substances which comply with paragraph (b)(1) of O.C.G.A. § 43-34-23, if the ordering of controlled substances is included as a delegated medical act in the nurse protocol agreement.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2, 43-26-3, and 43-26-5

410-11-14 Regulation of Protocol Use By Advanced Practice Registered Nurses as Authorized by O.C.G.A. § 43-34-26.3.

(1) An advanced practice registered nurse ("APRN") who uses a protocol authorized by O.C.G.A. § 43-34-25 shall:

(a) Hold a current license to practice as a registered professional nurse in Georgia;

(b) Hold a current authorization to practice as an advanced practice registered nurse in Georgia;

(c) Adhere to a written nurse protocol agreement that is dated and signed by the APRN, the delegating physician, and any other designated physician(s); the APRN's area of practice shall be in the same or comparable specialty as that of the delegating physician; the protocol shall specify the medical acts delegated to the APRN as provided by O.C.G.A. § 43-34-25 and shall provide for immediate consultation with the delegating physician or a designated physician if the delegating physician is not available; and

(d) Document preparation and performance specific to each medical act authorized by the written nurse protocol agreement including ordering drugs, medical treatments or diagnostic studies, medical devices, or, in life threatening situations, radiographic imaging tests.

(2) An APRN may practice under a nurse protocol agreement authorized by O.C.G.A. § 43-34-25 if the nurse protocol agreement adheres to the following criteria:

(a) Shall bear a current review date; be available upon request; and specify parameters under which delegated medical acts may be performed to include kinds of diagnostic studies which may be ordered, the extent to which radio logic image tests may be ordered, provisions for the reading and interpretation of such tests by a physician who is trained in the reading and interpretation of the tests, circumstances under which prescription drugs orders may be executed, number of refills which may be ordered, include a frequency of follow up review of the patient by the physician, including patients who are on controlled substances;

(b) Shall include a schedule for periodic review of patient records by the delegating physician, which records review may be achieved with a sampling of such records as determined by the delegating physician;

(c) Shall be reviewed, revised or updated annually by the APRN, the delegating physician, and any designated physician;

(d) Shall include a provision for immediate consultation with the delegating physician or a physician designated in the absence of the delegating physician; and

(e) Shall comply with the provisions of O.C.G.A. §43-34-25 regarding prescription drug orders placed by an APRN for a drug or medical device including, but not limited to, the following:

1. No prescription drug orders submitted by an APRN for Schedule I or II controlled substances;

2. No refills of any drug for more than 12 months from the date of the original Order, except in the case of oral contraceptives, hormone replacement therapy, or prenatal vitamins, which may be refilled for a period of 24 months;

3. No drug order or medical device that may result in the performance or occurrence of an abortion, including the administration, prescription or issuance of a drug order that is intended to cause an abortion to occur pharmacologically;

4. Written prescription drug orders shall be signed by the APRN, be written on forms that comply with the nurse protocol agreement, and such forms shall contain the information required by paragraph (d) of O.C.G.A. § 43-34-25;

5. A written provision in the nurse protocol agreement authorizing the APRN to request, receive, and sign for professional samples, and to distribute them to patients in accordance with a list of professional samples approved by the delegating physician that is maintained by the office or facility where the APRN works and that requires the documentation of each sample received and dispensed; and

6. Compliance with applicable state and federal laws and regulations pertaining to the ordering, maintenance, and dispensing of drugs.

(3) Only four (4) advanced practice registered nurses may enter into a nurse protocol agreement with a delegating physician at any one time under O.C.G.A. § 43-34-25, except this limitation shall not apply to an APRN that is practicing in the following settings:

(a) In a hospital licensed under Title 31;

(b) In any college or university as defined in Code Section 20-8-1;

(c) In the Department of Public Health;

(d) In any county board of health;

(e) In any free health clinic;

(f) In a birthing center;

(g) In any entity:

1. Which is exempt from federal taxes pursuant to Section 501(c)(3) of the Internal Revenue Code, as defined in Code Section 48-1-2, and primarily serves uninsured or indigent Medicaid and Medicare patients; or

2. Which has been established under the authority of or is receiving funds pursuant to 42 U.S.C. Section 254b or 254c of the United States Public Health Service Act;

(h) In any local board of education which has a school nurse program; or

(i) In a health maintenance organization that has an exclusive contract with a medical group practice and arranges for the provision of substantially all physician services to enrollees in health benefits of the health maintenance organization.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2, 43-26-3, and 43-26-5

Rule 410-12 – Mandatory Reporting

410-12-.01 Purpose, Definitions, Title, and Authority for Advanced Nursing Practice.

~~(1) Purpose.~~

~~(a) To promote, preserve, and protect public health, safety, and welfare by regulating advanced nursing practice.~~

~~(2) Definitions:~~

~~(a) The advanced practice registered nurse is a certified nurse-midwife (CNM), nurse practitioner (NP), certified registered nurse anesthetist (CRNA) or clinical nurse specialist in psychiatric/mental health (CNS,PMH), and is authorized to practice by the Georgia Board of Nursing ("the Board").~~

~~(b) "Advanced nursing practice" means practice by a registered professional nurse who meets those educational, practice, certification requirements, or any combination of such requirements, as specified by the Board and includes certified nurse-midwives, nurse practitioners, certified registered nurse anesthetists, clinical nurse specialists in psychiatric/mental health, and others required by the Board.~~

~~(3) Title.~~

~~(a) Advanced practice registered nurses are authorized to practice in the categories of certified nurse-midwife, nurse practitioner, certified registered nurse anesthetist and clinical nurse specialist in psychiatric/mental health. Each advanced practice registered nurse shall use the category designation for purposes of identification and documentation.~~

~~(4) Authority to Practice:~~

~~(a) Only a registered professional nurse authorized to practice according to these rules shall use the specified title, and practice or offer to practice, as a certified nurse-midwife, nurse practitioner, certified registered nurse anesthetist or clinical nurse specialist, psychiatric/mental health, unless otherwise authorized to do so by the Board.~~

~~(b) The advanced practice registered nurse is authorized to perform advanced nursing functions and certain medical acts which include, but are not limited to, ordering drugs, treatments, and diagnostic studies as provided in O.C.G.A. 43-34-26.1 and Chapter 410-13.~~

410-12-.01 Mandatory Reporting

(1) A nurse shall report names of subject individuals to the Georgia Board of Nursing if the nurse has reasonable cause to believe that any other nurse has violated any of the grounds for discipline provided in paragraph (4) of this rule.

(a) A nurse is not required to duplicate a report if he or she has reasonable cause to believe that such report has been made to the Board.

(b) A licensed health care professional is not required to report a nurse to the Board under O.C.G.A. § 43-26-51 or this rule as a result of professional knowledge obtained in the course of the health care professional-patient relationship when the nurse is the patient.

(2) Hospitals, nursing homes, temporary staffing agencies, and other employers of registered professional nurses, advanced practice registered nurses, or licensed practical nurses shall report to the to the Georgia Board of Nursing, or ensure that such report has in fact been made to the Board, the name of any nurse whose employment has been terminated or who has resigned in order to avoid termination for any reasons provided in paragraph (4) of this rule.

(3) A state agency that licenses, registers, or certifies hospitals, nursing homes, home health agencies, or other types of health care facilities, or surveys one of these facilities or agencies, shall report to the Georgia Board of Nursing, or ensure that such report has in fact been made to the Board, when such state agency has evidence that a nurse has violated the provisions of paragraph (4) of this rule.

(4) A nurse must be reported to the Board for the following conduct:

(a) Practicing nursing as a registered professional nurse, an advanced practice registered nurse, or a licensed practical nurse, without a valid, current license, except as otherwise permitted under Code Section 43-26-12 or 43-26-41, as applicable;

(b) Practicing nursing as a registered professional nurse, an advanced practice registered nurse, or a licensed practical nurse under cover of any diploma, license, or record illegally or fraudulently obtained, signed, or issued;

(c) Practicing nursing as a registered professional nurse, an advanced practice registered nurse, or a licensed practical nurse during the time the applicable license is suspended, revoked, surrendered, or administratively revoked for failure to renew;

(d) Using any words, abbreviations, figures, letters, title, sign, card, or device implying that such person is a registered professional nurse, an advanced practice registered nurse, or a licensed practical nurse unless such person is duly licensed or recognized by the applicable board to practice as such under the provisions of this chapter;

(e) Fraudulently furnishing a license to practice nursing as a registered professional nurse, an advanced practice registered nurse, or a licensed practical nurse;

(f) Knowingly aiding or abetting any person in violating this chapter;

(g) While holding a license as a nurse, convicted of any felony, crime involving moral turpitude, or crime violating a federal or state law relating to controlled substances or dangerous drugs in the courts of this state, any other state, territory, or country, or in the courts of the United States, including, but not limited to, a plea of nolo contendere entered to the charge; or

(h) While holding a license as a nurse, currently or previously displaying an inability to practice nursing as a registered professional nurse, an advanced practice registered nurse, a licensed undergraduate nurse, or a licensed practical nurse with reasonable skill and safety due to use of alcohol, drugs, narcotics, or chemicals.

(i) An error that contributed to a patient's death or serious harm.

(j) A violation of the Board's Unprofessional Conduct Rule 410-10-.03

Authority: O.C.G.A. §§ 43-1-25, 43-26-2, 43-26-5, 43-26-50, 43-26-51, 43-26-52 and 43-26-53

410-12-.02 Rules for Certified Nurse-Midwives. Amended.

(1) Definition.

(a) A certified nurse-midwife is a registered professional Nurse who has completed/graduated from a post-basic educational program for nurse midwives which included theoretical and practical components and evidence of advanced pharmacology within the curriculum or as a separate course. The certified nurse-midwife is certified by the ACNM Certification Council and is authorized to practice by the Board.

(2) Scope and Standards of Practice for the Certified Nurse-Midwife.

(a) The certified nurse-midwife (CNM) provides independent management of women's health care, focusing particularly on pregnancy, childbirth, the postpartum period, care of the newborn, and the family planning and gynecological needs of women. The certified nurse-midwife practices within a health care system that provides for consultation, collaborative management, or referral as indicated by the health status of the client. The certified nurse-midwife must practice in accordance with the Board-approved American College of Nurse-Midwives' current Standards for the Practice of Nurse-Midwifery.

(3) Requirements to Practice as a Certified Nurse-Midwife:

(a) Prior to January 1, 1999, and applicant who submits the following items may be authorized to practice as a certified nurse-midwife:

1. evidence of current licensure as a registered professional nurse in Georgia;

2. a completed Board application with required fee;

3. official transcript which verifies graduation from a post-basic educational program for nurse-midwives which includes theoretical and practical components and evidence of advanced pharmacology within the curriculum or as a separate course, and;

4. verification of current national certification from the ACNM Certification Council. If certified prior to January 1, 1996, evidence of enrollment in the Continuing Competency Assessment Program of the American College of Nurse-Midwives, which bears current cycle dates, must be provided.

(b) Beginning January 1, 1999, for initial authority to practice as a certified nurse midwife,

and applicant must submit an official transcript which verifies completion/graduation with a master's or higher degree in nursing or a graduate degree with a concentration in nurse-midwifery, evidence of advanced pharmacology within the curriculum or as a separate course, in addition to the requirements stated in 410-12-.02(3)(a) 1., 2. and 4.

(4) Biennial Renewal of Board Authorization to Practice as a Certified Nurse-midwife:

(a) The date for renewal of Board authorization as a certified nurse-midwife will coincide with the renewal of the registered professional nurse license.

(b) Authorization to practice as a certified nurse-midwife shall expire on January 31st of odd-numbered years and shall be administratively revoked if not renewed.

(c) For continued authority to practice, the certified nurse-midwife must submit:

1. a completed renewal application for advanced nursing practice;

2. a copy of current national certification with expiration date from the ACNM Certification Council. If certified prior to January 1, 1996, evidence of enrollment in the Continuing Competency Assessment Program of the American College of Nurse-Midwives, which bears current cycle dates must be provided.

3. payment of the renewal fee.

(d) A renewal application, received with a postmark date after January 31 of odd numbered years, will be returned to the applicant. Thereafter, the applicant must apply to reinstate the authorization.

410-12-.02 Reporting of Minor Incidents

(1) The Georgia Board of Nursing believes that the protection of the public is not enhanced by the reporting of every minor incident that may be a violation of the Georgia Nurse Practice Act or a Board rule. This is particularly true when there are mechanisms in place in the nurse's practice setting to identify nursing errors, detect patterns of practice, and take corrective action to remediate deficits in a nurse's judgment, knowledge, training, or skill. This rule is intended to provide guidance to nurses, nursing peer review committees and others in determining whether a nurse has engaged in conduct that indicates the nurse's continued practice would pose a risk of harm to patients or others and should be reported to the board.

(2) A minor incident is defined by the Board as conduct by a nurse that may be a violation of the Nurse Practice Act or a Board rule but does not indicate the nurse's continued practice poses a risk of harm to a patient or another person.

(3) When evaluating if conduct must be reported to the Board the following factors should be considered:

(a) A nurse involved in a minor incident need not be reported to the Board unless the conduct indicates the nurse:

1. Ignored a substantial risk that exposed a patient or other person to significant physical, emotional or financial harm or the potential for such harm;

2. Lacked a conscientious approach to or accountability for his/her practice;

3. Lacked the knowledge and competencies to make appropriate clinical judgments and such knowledge and competencies cannot be easily remediated; or

4. Has engaged in a pattern of multiple minor incidents that demonstrate the nurse's continued practice would pose a risk of harm to patients or others.

(4) Other factors that may be considered in determining whether a minor incident should be reported to the Board are:

(a) The significance of the nurse's conduct in the particular practice setting; and

(b) The presence of contributing or mitigating circumstances, including systems issues or factors beyond the nurse's control, in relation to the nurse's conduct.

(5) When evaluating whether multiple incidents constitute grounds for reporting it is the responsibility of the nurse manager, supervisor or peer review committee to determine if the minor incidents indicate a pattern of practice that demonstrates the nurse's continued practice poses a risk and should be reported.

(6) Regardless of the time frame or number of minor incidents, if a nurse manager or supervisor believes the minor incidents indicate a pattern of practice that poses a risk of harm that cannot be remediated, the nurse should be reported to the Board.

Authority: O.C.G.A. §§ 43-1-25, 43-26-2, 43-26-5, 43-26-50, 43-26-51, 43-26-52 and 43-26-53

410-12-.03 Rules for Nurse Practitioners.

(1) Definition.

(a) A nurse practitioner is a registered professional nurse who is recognized by the Board to engage in advanced practice registered nursing.

(b) The nurse practitioner practices in a manner consistent with Chapter 410-13 of the Georgia Board of Nursing Rules and Regulations.

(2) Scope and Standards of Practice for the Nurse Practitioner:

(a) The nurse practitioner provides advanced practice nursing care and medical services specific to the nurse practitioner respective specialty to individuals, families and groups, emphasizing health promotion and disease prevention as well as the diagnosis and management of acute and chronic diseases. The nurse practitioner collaborates as necessary with a variety of individuals to diagnose and manage clients' health care problems.

(b) The nurse practitioner practices in a manner consistent with the nationally recognized nursing practice standards for the respective nurse practitioner specialty that is consistent with the Board recognized national certification organization identified in Rule 410-12-.12.

(3) Requirements for initial authority to Practice as a Nurse Practitioner:

(a) evidence of current licensure as a registered professional nurse in Georgia;

(b) a completed Board application with required fee;

(c) official transcript which verifies graduation with a master's or higher degree in nursing for the respective nurse practitioner specialty or a graduate level post-master's certificate in an advanced practice registered nurse practitioner specialty and evidence of advanced pharmacology within the curriculum or as a separate course, advanced physical assessment, and pathophysiology.

(d) verification of current national certification from the respective Board recognized certifying organization.

(4) The applicant must document one of the following within in four (4) years immediately preceding the date of current application:

(a) 500 hours of practice as an advanced practice registered nurse;

(b) graduation from a nursing education program or a graduate level post-master's certificate in an advanced practice registered nurse practitioner specialty; or

(c) completion of a Georgia Board approved advanced practice registered nurse reentry/refreshers program.

(5) An applicant who is unable to meet the requirements of (4)(a), (b), or (c) must satisfactorily complete the following:

(a) 40 hours of study relevant to advanced registered nursing practice within one (1) year of the date of application. Relevant advanced practice registered nurse study must include at least four (4) different content areas. The Board may waive the 40 hours of study if the applicant has passed a national recognized certification organization examination within the four (4) years immediately preceding the date of current application.

(b) current health care provider course of cardio-pulmonary resuscitation unless completed within one (1) year of the date of application with a Georgia Board of Nursing approved RN reentry;

(c) study of the Georgia Registered Professional Nurse Practice Act, O.C.G.A. §§ 43-26-1 *et seq.* and Board rules; and

(d) 160 hours of relevant advanced practice registered nursing supervised by an advanced practice registered nurse in a comparable specialty area and in accordance with other Board criteria.

(6) Biennial Renewal of Board Authorization to Practice as a Nurse Practitioner:

(a) The date for renewal of Board authorization as a nurse practitioner will coincide with the renewal license period. Authorization shall be administratively revoked if not renewed.

(b) For continued authority to practice, the nurse practitioner must:

1. renew licensure as a registered professional nurse in Georgia;

2. submit a completed renewal application for advanced nursing practice;

3. Attest to advanced practice registered nurse practice in accordance with applicable Georgia laws and rules; and

4. submit payment of the renewal fee.

(c) Any licensee who fails to renew authorization must apply to reinstate the authorization.

410-12-.04 Rules for Certified Registered Nurse Anesthetists. Amended.

(1) Definition

(a) A certified registered nurse anesthetist is a registered professional nurse who has completed/graduated from a post-basic educational program for nurse anesthetists which includes theoretical and practical components and evidence of advanced pharmacology, is currently certified/recertified by the Council on Certification/Recertification of Nurse Anesthetists, and is authorized to practice by the Board.

(2) Scope and Standards of Practice for the Certified Registered Nurse Anesthetist. The certified registered nurse anesthetist (CRNA) provides anesthesia and related care services in four general categories:

(a) preanesthetic preparation and evaluation;

(b) anesthesia induction, maintenance, and emergence;

(c) perianesthetic and clinical support functions; and

(d) postanesthesia care.

The certified registered nurse anesthetist must practice in accordance with Board approved American Association of Nurse Anesthetists' current *Guidelines and Standards for Nurse Anesthesia Practice*.

(3) Requirements to practice as a Certified Registered Nurse Anesthetist.

(a) An applicant who has graduated from an approved nurse anesthesia educational program prior to January 1, 1999, who submits the following items may be authorized to practice as a certified registered nurse anesthetist:

(1) evidence of current licensure as a registered professional nurse in Georgia;

2. a completed Board application with required fee;

3. official transcript which verifies completion/graduation from a post-basic educational program for certified registered nurse anesthetists which includes theoretical and practical components and evidence of advanced pharmacology; and

4. verification of current national certification/recertification from the Council on Certification/Recertification of Nurse Anesthetists.

(b) An applicant who graduates from an approved nurse anesthesia education program on or after January 1, 1999, who submits the following items may be authorized to practice as a certified registered nurse anesthetist:

1. evidence of current licensure as a registered professional nurse in Georgia;
2. a completed Board application with required fee;
3. official transcript which verifies completion/graduation with a master's or higher degree in nursing with a concentration in anesthesia and evidence of advance pharmacology or a graduate degree with a concentration in anesthesia and evidence of advance pharmacology; and

4. verification of current national certification/recertification from the Council of Certification/Recertification of Nurse Anesthetist

(4) Biennial Renewal of Board authorization to practice as a Certified Registered Nurse Anesthetist.

(a) The date for renewal of Board authorization as a certified registered nurse anesthetist will coincide with the renewal of the registered professional nurse license.

(b) Authorization to practice as a certified registered nurse anesthetist shall expire on January 31st of odd-numbered years and shall be administratively revoked if not renewed.

(c) For continued authority to practice, the certified registered nurse anesthetist must submit:

1. a completed renewal application for advanced nursing practice;
2. a copy of current national certification/recertification as a certified registered nurse anesthetist which bears the expiration date; and
3. payment of the renewal fee.

(d) A renewal application, received with a postmark date after January 31 of odd-numbered years, will be returned to the applicant. Thereafter, the applicant must apply to reinstate the authorization.

410-12-.05 Rules for Clinical Nurse Specialists, Psychiatric/Mental Health. Amended.

(1) Definition

(a) A clinical nurse specialist, psychiatric/mental health, is a registered professional nurse who has graduated from a program of graduate study and supervised practice; has demonstrated depth and breadth of knowledge, competence and skill in the advanced practice of psychiatric/mental health nursing; and is authorized to practice by the Board.

(2) Scope and Standards of Practice for the Clinical Nurse Specialist, Psychiatric/Mental Health.

(a) The clinical nurse specialist, psychiatric/mental health, (CNS,PMH), is an advanced practice registered nurse who provides a full range of nursing services from mental health promotion to mental illness rehabilitation. As a primary mental health care provider, the clinical nurse specialist, psychiatric/mental health, provides psychotherapy, clinical supervision, consultation, and liaison services. The clinical nurse specialist, psychiatric/mental health, must practice in accordance with the Board approved current standards of the American Nurses Association's *A Statement on Psychiatric-Mental Health Clinical Nursing Practice and Standards of Psychiatric-Mental Health Clinical Nursing Practice*.

(3) Requirements to Practice as a Clinical Nurse Specialist, Psychiatric/Mental Health.

(a) Prior to January 1, 1999, an applicant who submits the following items may be authorized to practice as a clinical nurse specialist in psychiatric/mental health:

1. evidence of current licensure as a registered professional nurse in Georgia;
2. completed Board application with required fee; and
3. official transcript which verifies a master's or higher degree in nursing with specialization in psychiatric/mental health nursing which includes a minimum of two (2) graduate courses in psychiatric/mental health nursing, supervised practice for each of the two (2) graduated courses and evidence of advanced pharmacology within the curriculum or as a separate course; or verification of current national certification as a clinical nurse specialist in psychiatric/mental health from the American Nurses Credentialing Center and evidence of advance pharmacology.

(b) Beginning January 1, 1999, an applicant requesting initial authority to practice as a clinical nurse specialist, psychiatric/mental health must submit the following:

1. evidence of current licensure as a registered professional nurse in a Georgia;
2. a completed Board application with required fee;
3. official transcript which verifies a master's or higher degree in nursing with specialization in psychiatric/mental health nursing which includes a minimum of two (2) graduate courses in psychiatric/mental health nursing, supervised practice for each of the two (2) graduate courses and evidence of advanced pharmacology within the curriculum or as a separate course; and
4. verification of current national certification as a clinical nurse specialist in psychiatric/mental health from the American Nurses Credentialing Center.

(4) Biennial renewal of Board Authorization to Practice as a Clinical Nurse Specialist, Psychiatric/Mental Health:

(a) The date for renewal of Board Authorization as a clinical nurse specialist, psychiatric/mental health, will coincide with the renewal of the registered professional nurse license.

(b) Authorization to practice as a clinical nurse specialist, psychiatric/mental health, shall expire on January 31 of odd-numbered years and shall be administratively revoked if not renewed.

(c) For continued authority to practice, the clinical nurse specialist, psychiatric/mental health, must submit:

1. a completed renewal application for advanced nursing practice;
2. a copy of current national certification as a clinical nurse specialist, psychiatric/mental health which bears the expiration date, if initial authorization was based on national certification; and
3. payment of the renewal fee.

(d) A renewal application, received with a postmark date after January 31 of odd-numbered years, will be returned to the applicant. Thereafter, the applicant must apply to reinstate the authorization.

Rule 410-12-.06 Rule for Clinical Nurse Specialist

(1) Definition:

A clinical nurse specialist ("CNS") is a registered professional nurse who has graduated from a program of graduate study and supervised practice; who holds a master's degree or other graduate degree from an approved nursing education program; who holds national board certification in his or her area of specialty; and is authorized to practice as an advanced practice registered nurse by the Board.

(2) Scope and Standards of Practice for the Clinical Nurse Specialist.

The clinical nurse specialist ("CNS") is an advanced practice registered nurse who provides a full range of nursing services from health promotion to illness rehabilitation. The clinical nurse specialist provides clinical supervision, consultation, and liaison services to nurses, patients and healthcare systems. The clinical nurse specialist must practice in accordance with the current standards of the national certifying organizations listed in Rule 410-12-.12 by which clinical nurse specialists are currently certified.

(3) Requirements to Practice as a Clinical Nurse Specialist.

(a) Beginning January 1, 2012, all applicants seeking initial authorization as an advanced practice registered nurse to practice as a clinical nurse specialist ("CNS") shall meet the following requirements:

1. evidence of current licensure as a registered professional nurse in Georgia;
2. completed Board authorization application with required fee;
3. official transcript which verifies a master's or higher degree in nursing or a post-masters certificate from an approved nursing education program with specialization as a Clinical Nurse Specialist that includes evidence of advanced pharmacology, advanced physical assessment, and advanced pathophysiology within the curriculum or as a separate course.
4. verification of current national certification as a clinical nurse specialist from the American Nurses Credentialing Center or approved national certifying body listed in Rule 410-12-.12.

(b) All applicants must document one of the following within four (4) years immediately preceding the date of the current authorization application:

1. 500 hours of practice as a CNS;
2. an official transcript which verifies a masters or higher degree in nursing or a post-master's certificate from an approved nursing education program with a specialization as a Clinical Nurse Specialist; or
3. completion of a Board approved advanced practice registered nurse reentry/refresher program consisting of forty (40) hours of study and one hundred and sixty hours (160) hours of supervised clinical practice within the four (4) years immediately preceding the date of application.

(c) Biennial renewal of board authorization to practice as a clinical nurse specialist:

1. the date for renewal of board authorization as a clinical nurse specialist will coincide with the renewal of the registered professional nurse license.
2. authorization to practice as a clinical nurse specialist shall be administratively revoked if not renewed prior to the date of expiration.
3. for renewal of APRN-CNS authority to practice, the clinical nurse specialist must submit:

(i) A completed authorization renewal application for advanced nursing practice;

(ii) Maintain current national certification as a clinical nurse specialist;

(iii) upon notification of Board audit, submit proof of current national certification as a clinical nurse specialist which bears the certification expiration date; and

(iv) payment of the authorization renewal fee.

4. A renewal application, received with a postmark date after the date of authorization expiration, will not be accepted by the Board for renewal purposes. Thereafter, the applicant must apply to reinstate the authorization.

5. Renewal of a license to practice as a registered professional nurse shall not constitute renewal of authorization to practice as a CNS.

410-12-.07 Failure of the Examination.

An applicant who fails the national certification examination shall not engage in advanced nursing practice until such time as all requirements are met and written authorization to practice as a certified nurse-midwife, nurse practitioner, certified registered nurse anesthetist or clinical nurse specialist in psychiatric/mental health is issued by the Board.

410-12-.08 Temporary Authority to Practice.

(1) Temporary authority to practice as a certified nurse-midwife, nurse practitioner, certified registered nurse anesthetist or clinical nurse specialist in psychiatric/mental health may be issued to a registered nurse who is an applicant for authorization for advanced practice nursing under the following circumstances:

- (a) The Applicant has met all requirements for Board authorization but the Board review of the application is delayed due to an investigation of a possible period of questionable unauthorized nursing practice; or
- (b) The Applicant has met all the requirements for Board authorization except current national certification because such certification has expired, and the applicant must meet specific practice requirements for recertification.

(2) Temporary authorization may be issued for a period of up to six (6) months, and may be renewable once for a period of up to six (6) months.

410-12-.09 Unauthorized Practice.

An applicant who is employed or engaged in advanced nursing practice as a certified nurse-midwife, nurse practitioner, certified registered nurse anesthetist or clinical nurse specialist in psychiatric/mental health in Georgia prior to Board authorization for such practice shall be in violation of 410-12-.01 (4). Such conduct may result in action taken by the Board which may include a reprimand and fine as follows:

- (a) a public reprimand and
- (b) a fine:

- 1. of \$50.00 per month (up to \$250.00) for practice between two (2) and six (6) months, or any portion thereof;
- 2. of \$75.00 per month each additional month, or portion thereof, between seven (7) and twelve (12) months;
- 3. at the Board's discretion for unauthorized practice extending over one (1) year.

410-12-.10 Revocation or Suspension.

As provided on O.C.G.A. 43-1-19 and 43-26-11, the Board may revoke, suspend, or otherwise discipline the registered professional nurse license and/or the authority to practice as a certified nurse-midwife, nurse practitioner, certified registered nurse anesthetist, clinical nurse specialist in psychiatric/mental health, or anyone so authorized who demonstrates unprofessional conduct according to 410-11-.02, fails to comply with current scope and standards of practice according to 410-12-.02 (2), 410-12-.03 (2), 410-12-.04 (2), or 410-12-.05 (2), or who fails to maintain national certification and/or continuing competency requirements.

410-12-.11 Reinstatement of Authorization.

(1) An advanced practice registered nurse whose authorization has expired may be eligible for reinstatement of authorization.

(2) The applicant must:

- (a) submit a completed reinstatement application, photograph and required fee;
- (b) request the appropriate national certifying organization to verify current certification on a form provided by the Board; and
- (c) be able to document three (3) months or 500 hours of licensed practice as a registered nurse (or advanced practice registered nurse) during the four (4) years immediately preceding the date of current application.

(3) An applicant who is unable to meet the requirement of 410-12-(2)(c) must comply with similar requirements of 410-6-.02 (2) (f) 1 through 7 for an advanced practice registered nurse.

410-12-.12 Recognition of National Certifying Organizations for Advanced Nursing Practice.

(1) The Board recognizes certification by: The American Midwifery Certification Board; American Academy of Nurse Practitioners; National Certification Corporation; Pediatric Nursing Certification Board; National Board on Certification and Recertification of Nurse Anesthetists; American Nurses Credentialing Center; and the American Association of Critical Care Nurses Certification Corporation for titles recognized in Rules Chapter 410-11.

(2) The Board may discontinue recognition of a certifying organization if it deems that the respective certification process does not provide an accurate evaluation of the individual's ability to engage in advanced nursing practice.

Rule 410-13 – Regulation of Protocol Use by Advanced Practice Registered Nurses

410-13-.01 Regulation of Protocol Use By Advanced Practice Registered Nurses as Authorized by O.C.G.A. § 43-34-26.1.

(1) The general purpose of these rules is to assist in protecting and safeguarding the public by regulating the practice of advanced practice registered nurses who use protocols as authorized by O.C.G.A. § 43-34-23.

(2) An advanced practice registered professional nurse who uses a protocol as authorized by O.C.G.A. § 43-34-23 shall:

- (a) hold a current license to practice as a registered nurse in Georgia;
- (b) hold a current authorization as an advanced practice registered nurse in Georgia;
- (c) adhere to a written nurse protocol which is a written document mutually agreed upon and signed by the nurse and licensed physician which specifies delegated medical acts delegated by the physician to the nurse and provides for immediate consultation with the delegating physician or a physician designated in the absence of the delegating physician; and
- (d) document preparation and performance specific to each medical act authorized by a written nurse protocol, including the ordering and administering of controlled substances, ordering and dispensing of dangerous drugs, and ordering medical treatments and diagnostic studies in accordance with O.C.G.A. § 43-34-23.

(3) The nurse protocol agreement used by an advanced practice registered nurse under the provisions of O.C.G.A. § 43-34-23 shall comply with the following criteria:

- (a) shall be in writing and signed by the advanced practice nurse and the delegating physician;
- (b) shall be dated, available upon request and specify parameters under which medical acts delegated by the physician may be performed;
- (c) shall include provisions for periodic review of patient records by the delegating physician;
- (d) shall be reviewed, revised or updated annually;
- (e) shall include a provision for immediate consultation with the delegating physician or a physician designated in the absence of the delegating physician;
- (f) shall contain written provisions regarding the procedure for dispensing dangerous drugs which comply with O.C.G.A. §§ 43-34-23 (a)(3), (3.1), (4), and (5), if the dispensing of dangerous drugs is included as a delegated medical act in the nurse protocol agreement; and
- (g) shall contain written provisions regarding the procedure for ordering controlled substances which comply with paragraph (b)(1) of O.C.G.A. § 43-34-23, if the ordering of controlled substances is included as a delegated medical act in the nurse protocol agreement.

410-13-.02 Regulation of Protocol Use By Advanced Practice Registered Nurses as Authorized by O.C.G.A. § 43-34-26.3.

(1) An advanced practice registered nurse ("APRN") who uses a protocol authorized by O.C.G.A. § 43-34-25 shall:

- (a) hold a current license to practice as a registered professional nurse in Georgia;
- (b) hold a current authorization to practice as an advanced practice registered nurse in Georgia;
- (c) adhere to a written nurse protocol agreement that is dated and signed by the APRN, the delegating physician, and any other designated physician(s); the APRN's area of practice shall be in the same or comparable specialty as that of the delegating physician; the protocol shall specify the medical acts delegated to the APRN as provided by O.C.G.A. § 43-34-25 and shall provide for immediate consultation with the delegating physician or a designated physician if the delegating physician is not available; and
- (d) document preparation and performance specific to each medical act authorized by the written nurse protocol agreement including ordering drugs, medical treatments or diagnostic studies, medical devices, or, in life-threatening situations, radiographic imaging tests.

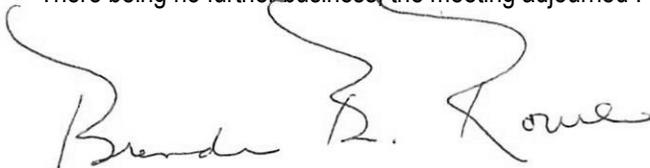
(2) An APRN may practice under a nurse protocol agreement authorized by O.C.G.A. § 43-34-25 if the nurse protocol agreement adheres to the following criteria:

- (a) shall bear a current review date; be available upon request; and specify parameters under which delegated medical acts may be performed to include kinds of diagnostic studies which may be ordered, the extent to which radiologic image tests may be ordered, provisions for the reading and interpretation of such tests by a physician who is trained in the reading and interpretation of the tests, circumstances under which prescription drugs orders may be executed, number of refills which may be ordered, include a frequency of follow-up review of the patient by the physician, including patients who are on controlled substances;
- (b) shall include a schedule for periodic review of patient records by the delegating physician, which records review may be achieved with a sampling of such records as determined by the delegating physician;
- (c) shall be reviewed, revised or updated annually by the APRN, the delegating physician, and any designated physician;
- (d) shall include a provision for immediate consultation with the delegating physician or a physician designated in the absence of the delegating physician; and
- (e) shall comply with the provisions of O.C.G.A. § 43-34-25 regarding prescription drug orders placed by an APRN for a drug or medical device including, but not limited to, the following:
 1. no prescription drug orders submitted by an APRN for Schedule I or II controlled substances;
 2. no refills of any drug for more than 12 months from the date of the original Order, except in the case of oral contraceptives, hormone replacement therapy, or prenatal vitamins, which may be refilled for a period of 24 months;
 3. no drug order or medical device that may result in the performance or occurrence of an abortion, including the administration, prescription or issuance of a drug order that is intended to cause an abortion to occur pharmacologically;

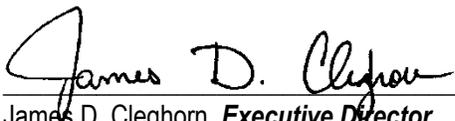
4. written prescription drug orders shall be signed by the APRN, be written on forms that comply with the nurse protocol agreement, and such forms shall contain the information required by paragraph (d) of O.C.G.A. § 43-34-25;
5. a written provision in the nurse protocol agreement authorizing the APRN to request, receive, and sign for professional samples, and to distribute them to patients in accordance with a list of professional samples approved by the delegating physician that is maintained by the office or facility where the APRN works and that requires the documentation of each sample received and dispensed; and
6. compliance with applicable state and federal laws and regulations pertaining to the ordering, maintenance, and dispensing of drugs.
- (3) Only four (4) advanced practice registered nurses may enter into a nurse protocol agreement with a delegating physician at any one time under O.C.G.A. § 43-34-25, except this limitation shall not apply to an APRN that is practicing in the following settings:
- (a) In a hospital licensed under Title 31;
 - (b) In any college or university as defined in Code Section 20-8-1;
 - (c) In the Department of Public Health;
 - (d) In any county board of health;
 - (e) In any free health clinic;
 - (f) In a birthing center;
 - (g) In any entity:
 1. Which is exempt from federal taxes pursuant to Section 501(c)(3) of the Internal Revenue Code, as defined in Code Section 48-1-2, and primarily serves uninsured or indigent Medicaid and Medicare patients; or
 2. Which has been established under the authority of or is receiving funds pursuant to 42 U.S.C. Section 254b or 254c of the United States Public Health Service Act;
 - (h) In any local board of education which has a school nurse program; or
 - (i) In a health maintenance organization that has an exclusive contract with a medical group practice and arranges for the provision of substantially all physician services to enrollees in health benefits of the health maintenance organization.

Shilling moved that the formulation and adoption of these rules does not impose excessive regulatory cost on any licensee and any cost to comply with the proposed rules cannot be reduced by a less expensive alternative that fully accomplishes the objectives of the applicable laws as required by O.C.G.A. § 50-13-4. Lockwood seconded the motion and it carried unanimously.

There being no further business, the meeting adjourned Friday, May 15, 2015 at 12:00 p.m.



Brenda Rowe, **President**



James D. Cleghorn, **Executive Director**

Approved on