Message From the President

How are your renewal fees spent?

by Robin S. Vogt, PhD, RN, FNP-C
Board President

With the RN renewal period upon us, some of you may be wondering what your renewal fee pays for. As a licensee who pays fees, you have the right to know how the funds you pay are expended.

Nursing regulation is the governmental oversight provided for nursing practice in each state. Nurses are regulated because it is one of the health professions that poses risk of harm to the public if practiced by someone who is unprepared or incompetent. The public may not have sufficient information and experience to identify an unqualified health care provider and is vulnerable to unsafe and incompetent practitioners. Through regulatory processes, the government permits only individuals who meet predetermined qualifications to practice nursing. The Board of Nursing in the authorized state entity with the legal authority to regulate nursing.

The Missouri State Board of Nursing approves individuals for licensure, approves educational programs for nurses, investigates complaints concerning licensees, compliance with the law, and determines and administers disciplinary actions in the event of proven violations of the Nurse Practice Act.

The current renewal fee is $80 for Registered Nurses and $72 for Licensed Practical Nurses. $10 of the RN and $2 of the LPN fee is deposited for the Department of Health for the nursing student loan program, which is administered by the Department of Health. You can access more information about the nursing student loan program at http://www.dbhs.state.mo.us/CommunityHealthInitiatives/PrimoNurseLoanProgram.html

The top three budget categories for our office are professional services to investigate complaints, office supplies and salaries. Office supplies include postage. This year, we mailed approximately 7,000 renewal notices for a total postage bill of approximately $30,000. We will send another $30,000 to mail renewed licenses. The Division of Professional Registration has plans to implement online license renewals, which, we hope, will decrease postage costs. One of the ways costs can be decreased is to keep your address current with our office. To date, we have mailed 1,382 duplicate renewal notices and re-mailed 1,875 renewal notices that had an expired forwarding address. There was a total of 2,533 renewal notices returned due to incorrect addresses. The Board of Nursing’s fund is also assessed costs from the Division of Professional Registration. Department of Nursing's fund is also assessed costs from the Division of Professional Registration.

Nurses Making a Difference, One Life At a Time

“Caring for the Children”

by Lavona Stafford, RN

I am a 1971 graduate of Burge School of Nursing in Springfield, MO. I received my BSN from Southwest Missouri State University in 1981. My experiences are varied, ranging from community health to critical care. I have 30 years of nursing experience.

In 1996 I traveled to Belarus, one of the former Soviet Union countries. I spent three weeks there on a medical mission. I thought I could do my good works and then return to life in the USA as I knew it. Little did I know that my life would be changed forever.

From that time forward, no matter what I did, I felt a lot of unrest and dissatisfaction. In 1999, I contacted the International Mission Board and said, “I am a nurse, can you use me?” Within six months I arrived in Zambia, Africa, a country unknown to me. I spent one year in the bush of Zambia, working as a nurse, doing healthcare, teaching and working in makeshift clinics. During this time, I developed a great love for the people of Zambia. I also became very aware of the plight of the orphans in Zambia. Fifty percent of the population is under the age of 15, with 50 percent of those being orphans. One in three people is HIV positive and the life expectancy is 30 years of age. Amazingly enough there have been some informal studies done to indicate that if an HIV positive infant is given proper nutrition, good health care and a loving environment that 80 percent of those will convert to negative by 18 months of age. AMAZING! What an opportunity we have to make a difference, if only one life at a time.

Being aware of these statistics, Zambia was never far from my mind after returning to the states. I felt a true call to assist in the plight of the orphans. Realizing it was not something I could do alone, I formed a non-profit organization called “Caring for Children.” The sole purpose of this organization is to raise funding by individual donations, grants or corporate sponsorship to assist in the crisis facing Zambia. After a lot of paperwork and a lot of letter writing, “Caring for Children” became a reality. In August of 2001, I traveled to Zambia to begin the formalities necessary to begin work there. In 2002 I spent three months in Zambia, again laying groundwork. In December of 2002, I arrived in Zambia with plans of staying at least five years. I am currently working with an orphanage in Ndola, where we have 25 babies (all dumped babies, with no parents, and some are HIV positive). “Caring for Children” is providing full support for this orphanage. I am...
Our newsletter articles are due approximately two months before the newsletter is actually published. By the time you receive this newsletter, the legislative session will have ended.

Of particular interest to the Missouri State Board of Nursing are Senate Bill 200 and House Bill 520, the nurse licensure compact language.

The first board of nursing began licensing nurses nearly 100 years ago, and for nearly 100 years the state nurse licensing systems have worked effectively, regulating practice within the geographic boundaries of a particular state. However, this regulatory system was designed when interstate travel and communication took weeks and days—not hours, minutes, and seconds. The concept of interstate practice was unimaginable. Today, integrated healthcare systems traverse state lines, nurses are more mobile, and modern communication technologies have substantially altered the way nursing is practiced.

Consumers need and accept access to qualified nurses without regard to state lines. Employers and nurses want expedited authorization to practice. To many, the current system is cumbersome and neither cost-effective nor efficient. Congress recognized that telepractice was increasing dramatically when it enacted the Telecommunications Act of 1996 which called for development of standards and an infrastructure for telecommunications in health care.

The practice of nursing crosses state lines using telecommunications such as telephones, satellite, and computers by teaching, consulting, triaging, advising or providing direct services. A nurse in Iowa may be on a hotline providing advice to clients in Missouri. Nursing faculty from other states are teaching via satellite. Some nurses are practicing from their offices to patient homes using computers by teaching, consulting, triaging, advising or providing direct services. A nurse in Iowa may be on a hotline providing advice to clients in Missouri. Nursing faculty from other states are teaching via satellite. Some nurses are practicing from their offices to patient homes using computers by teaching, consulting, triaging, advising or providing direct services.

This nurse licensure compact model allows the nurse with a license in his/her state of residence to practice in other party states without obtaining an additional license. Each state determines its own licensure requirements, which are similar but may vary. The model benefits the public by having a choice of qualified nurses who are readily available at locations convenient to the client (particularly in remote areas of our state); while protecting the client against incompetent or unsafe practitioners through better communication between boards of nursing and cooperative investigations.

It benefits employers by having a more mobile workforce and a convenient, available centralized database. It benefits nurses by improving their ability to be mobile, by allowing them to provide services to remote areas, and by decreasing bureaucratic barriers to practice.

Our board has followed the progress of the compact and has frequent communications with the 18 states that are now in the compact. The Board is satisfied that the compact is effective and efficient in improving the public’s ability to access care while eliminating duplicative administrative procedures and fees for nurses.

As with any change, there is bound to be discomfort, especially during transition periods. When modifying the long-established nursing regulatory model, regulators must accept responsibility, taking the necessary measures to protect the public they are charged to serve. To do so, they must be reflective and reactive to the changes occurring in healthcare, technology, and society. Only then can they create a new kind of nursing license for a new age of interstate practice.

Senate Bill 515 was also introduced this legislative session by Senator Mary Bland. The advanced practice registered nurse language:

• revises Section 335.016, the definition of Advanced Practice Nurse;
• adds one new section, 335.048, definition of...
Update cont. from pg. 2

Advanced Practice Registered Nurse; 
- defines licensed practitioner status; 
- allows the nurse to have one license with one renew-
   al date rather than two licenses with two separate 
   expiration dates; 
- revises 335.017 IV therapy language to represent 
   current terminology; 
- revises 335.049 exemption for those already recog-
   nized; and, 
- adds APRN title designation and protection. 

Listed below are other bills that may be of interest to health professionals.

HOUSE BILLS

HB 121 Portwood, Dr. Charles R. - Increases health 
   coverage for chiropractic care.

HB 145 Graham, Chuck. - Enacts the Dedication to 
   Donation Act.

HB 156 Phillips, Susan C. - Modifies the informed 
   consent for abortion statute and requires persons 
   who perform abortions to maintain proof of finan-
   cial responsibility.

HB 163 Pratt, Brian. - Makes it a crime to engage in 
   human cloning.

HB 193 Lundermeyer, Blaine. - Establishes the 
   Mandated Health Benefits Review Commission and 
   modifies the requirements for limited mandate 
   health insurance policies and contracts.

HB 209 Lemke, Jim. - Prohibits the cloning of human 
   embryos.

HB 217 Myers, Peter. - Prohibits physicians and sur-
   geons with federal whistle-blower protections from 
   having their professional license disciplined by the 
   State Board of Registration for the Healing Arts.

HB 223 Holand, Roy W. - Requires health insurers 
   to treat mental health in the same manner as other 
   medical services.

HB 264 Holand, Roy W. - Enacts nurse staffing 
   requirements for all hospitals licensed in this state.

HB 340 Byrd, Richard. - Establishes immediate 
   attentive care technicians-intermediate serving in 
   the City of St. Louis in the definition of “EMT-I” in 
   section 190.101.

HB 363 Cunningham, Jane. - Amends the require-
   ments for informed consent prior to the performance 
   of an abortion.

HB 390 Behnen, Bob. - Creates provisions relating to 
   anesthesiologist assistants.

HB 391 Avory, Jim. - Expands the practice of den-
   tistry to include the use of lasers.

HB 394 Reed, Richard. - Defines next-of-kin of 
   deceased persons for purposes of disposition of 
   deceased human remains.

HB 415 Holand, Dr. Charles R. - Changes the defi-
   nition of the practice of chiropractic.

HB 432 Wright, Mark. - Limit the application of the 
   certification of need to long-term care facilities 
   only.

HB 440 Portwood, Dr. Charles R. - Revises dental 
   benefit review committee.

HB 450 Avery, Jim. - Revises dentist licensure.

HB 480 Emery, Edward G. H. - Allows pharmacists to 
   refuse to fill prescriptions that are contrary to estab-
   lished policies or their beliefs.

HB 483 Holand, Roy W. - Modifies the regulation 
   and supervision of physician assistants.

HB 492 Morris, Larry. - Revises licensed profes-
   sional counselors.

HB 495 Johnson, Robert Thane. - Changes the name 
   of residential care facilities I and II to assisted living 
   facilities I and II.

HB 509 Schauf, Robert. - Revises physical therapist 
   practice.

HB 520 Parker, Sherman. - Creates the Nurse 
   Licensure Act (Nurse Licensure Compact)

HB 521 Holand, Roy W. - Modifies the licensing and 
   registration of naturopathic physicians.

HB 534 Muecke, Matt. - Requires medically thera-
   peutic circumcisions to be covered under the state 
   Medicaid program and, if funded, non-therapeutic, 
   elective or routine circumcision in a nondiscrimi-
   natory manner.

HB 540 Bishop, Dan. - Lifts the disclosure of non-
   public personal health information.

HB 550 Guest, Jan. - Establishes the Missouri State 
   Advisory Council on Pain and Symptom 
   Management in the Department of Health and 
   Senior Services.

HB 560 Parker, Sherman. - Creates the 
   Comprehensive Patient Education and Healthcare 
   Cost Improvement Pilot Program in the Department 
   of Health and Senior Services.

HB 564 Behnen, Bob. - Revises professional regis-
   tration laws.

HB 565 Behnen, Bob. - Modifies the law relating to 
   pharmacists, pharmacies, pharmaceutical services 
   and drug distributors.

HB 580 Johnson, Robert Thane. - Establishes the 
   Cancer Drug Repository Program in the Department 
   of Health and Senior Services to provide cancer 
   drugs to low-income Missouri residents.

HB 582 Stevenson, Bryan P. - Revises various 
   statutes pertaining to criminal history or other types 
   of background screening.

SENATE BILLS

SB 0023 - Bland. - Establishes the "Missouri 
   Universal Health Assurance Program" to provide 
   health care benefits to all Missouri citizens.

SB 0034 - Louden. - Imposes civil liability on any 
   person violating Missouri's informed consent law 
   for abortion.

SB 0042 - Dougherty. - Modifies various provisions 
   relating to the protection of the elderly.

SB 0070 - Yezell. - Requires informed consent by a 
   woman before the performance of an abortion.

SB 0092 - Coleman. - Regulates the prevention and 
   treatment of human papillomavirus (HPV) infection.

SB 0146 - Bland. - Requires parity between insur-
   ance coverage for mental health services and other 
   health care services.

SB 0182 - Cauthorn. - Requires consent 24-hours 
   prior to an abortion and proof of financial responsi-
   bility to perform abortions.

SB 0165 - Wheeler. - Creates the Missouri Office of 
   Pharmaceutical Reports.

SB 0191 - Ball. - Prohibits individuals from engag-
   ing in or using public funds and facilities for human 
   cloning.

SB 0200 - Ball. - Enacts reciprocal nurse licensure 
   compact.

SB 0237 - Steelman. - Establishes the Missouri 
   Pharmacists' Compensation Fund to assist health care 
   providers with excess liability coverage.

SB 0277 - Jacob. - Excuses ophthalmologists from 
   jury duty.

SB 0300 - Cauthorn. - Regulates the licensing and 
   registration of anesthesiologist assistants.

SB 0303 - Cauthorn. - Requires the health plans to 
   cover all services provided or ordered by registered 
   nurse practitioners.

SB 0372 - Yeckel. - Relating to the regulation and 
   licensing of the practice of naturopathic medicine.

SB 0377-Childers. - Creates a malpractice settlement 
   tax.

SB 0391 - Shields. - Establishes the Missouri State 
   Advisory Council on Pain and Symptom 
   Management.

SB 0397 - Grether. - Modifies the law relating to 
   vital records.

SB 0413 - Steelman. - Revises the definition of 
   "dentistry".

SB 0449 - Bartle. - Establishes the Missouri State 
   Board of Naturopathic Physicians.

SB 0458 - Thane. - Establishes the mandated health 
   benefit review commission and eliminates certain 
   limitations.

SB 0469 - Yezell. - Limits certificate of need to only 
   long-term care facilities.

SB 0506 - Clemens. - Includes the use of lasers with-
   in the definition of dentistry.

SB 0515 - Kennedy. - Relating to the regulation and 
   licensing of professional addiction counselors.

SB 0523 - Bland. - Relating to licensing of nurses.

SB 0543 - Dougherty. - Establishing relationships with 
   legislators and their legislative staff. It will give 
   them information on issues related to nursing.

SB 0556 - Dougherty. - Relating to background 
   checks.

SB 0565 - Yezell. - Requires specified training for 
   professional counselors wishing to diagnose mental 
   and emotional disorders.

SB 0576 - Shields. - Requires the modifying of the 
   malpractice settlement tax.

SB 0589 - Shields. - Relating to licensing of chiro-
   practors.

SB 0595 - Steelman. - Establishes the comprehen-
   sive patient education and healthcare cost improve-
   ment program.

SB 0603 - Kennedy. - Relating to the regulation and 
   licensing of professional addiction counselors.

SB 0664 - Childers. - Relating to laws or other types 
   of background screening.

SB 0666 - Childers. - Relating to statutes of limita-
   tion for medical malpractice.

As a professional, you do have a voice in shap-

1) Track legislation. The state's Web site is updated 
daily during the legislative session and has some great 
tools you can use to track legislation that will affect your practice. The Web address is 
www.state.mo.us.

2) You have an important role to play in educating pub-
lc officials about the issues you deal with every day. There are several ways you can stay active in 
legislative issues. They are letter writing, visits, and establishing relationships with legislators and their 
staff. Letter to your legislators know how to reach you, your area of expertise and that you are willing to 
give them information on issues related to nursing.

3) Keep your address current with the Board of Nursing so you can continue to receive newsletters. Any changes 
to the Nursing Practice Act will be communicated in the newsletter.

4) Utilize the services offered by professional organiza-
tions or a legislative monitoring agency. As a licensed professional, you do have a voice in shap-

5) Age, June, June, 2003

MISSOURI STATE BOARD OF NURSING • PAGE 3 •
After emergency Bypass and subsequent extubation, patient and RN are doing fine!

Congratulations to the winners of the Nursing Coalition Photo Contest! The winning pictures were to best depict a "Nurse Making a Difference, One Life at a Time." Entries were to be of bedside care, school care or community events. Winning photographs were selected on the basis of artistic composition, originality, visual appeal and good patient care.

Winners were selected at the annual Nursing Summit and honored during Nurse’s Week, May 5-11, 2003. The first prize of $250 went to Jane E. Stanley, Iberia, Mo. Her photo entitled, “WE WIN” is shown above. Second place ($100) went to Lauren D. Reece, Cape Girardeau and third place ($50) went to Candace Smothers, Webb City, Mo.

Children cont. from pg. 1

also working with a project in Kitwe, Zambia. We are building housing for 240 orphans, ranging from ages of 5-18. We will provide housing, emotional and spiritual counseling, education and medical care throughout their time with us. We have a school, grades 1-6, with plans to expand to further grades. Currently enrolled are 450 students (half are orphans). Those who can pay, pay a fee of 50,000 Kwacha per term (equivalent to 10 USD). The orphans are provided education at no charge. Their school uniforms are also provided at no charge.

As you can imagine, this is all a huge task. We are constantly searching for ways to generate sustainable income. Currently we have set up a tailoring class. Students pay a small fee for one year of tailoring instruction. We are also in the process of establishing a bakery that will be an excellent income-generating project. Of course these projects require some funding up front to begin. A few of our current needs are listed below:

- Feeding Program - to feed 125 orphans three times a week. A nutritional meal costs $250 per month.
- Medicine - We need about $50 per month to provide antibiotics, vitamins, etc., to the orphans in our school.
- School fees and uniforms - $15 per term.
- Wall & Security Fence - $10,000 to complete.
- Housing for the Children - $20,000 to complete one section.
- Proper chairs and desks for the students in the school - $3000.

Many days just as in the USA, are subject to constant interruptions such as a sick child requiring medication or time spent teaching the parents or caretakers. There are also many other problems that require immediate attention. Some days it is tempting to say, "I quit, I am only one person what difference can I make," but then a child comes to thank you for the medicine you gave them that makes them feel so much better. Or, you see the children eating, as a part of the feeding program, knowing that it will probably be the only nutritional meal they may have for 2-3 days. Any small sacrifice on my part is negated by the knowledge that I have made a difference in the lives of these children.

For more information about this project contact me at voonthego@zamnet.zm. A building team and a medical team are making plans to come in September. If anyone is interested in joining the team, please contact me. Tax-deductible monetary contributions are always welcome! Contributions may be sent to "Caring for Children", P.O. Box 1542, Ava, Missouri 65608. If you would like to be placed on our mailing or e-mail list send your mailing/email address to voonthego@zamnet.zm.

Nursing Coalition Photo Contest
NCSBN Introduces Online Public Access to Nursys™

The National Council of State Boards of Nursing (NCSBN) (www.ncsbn.org) is pleased to announce that it is now allowing public online access to Nursys™ to assist with nurse licensure verifications. Nursys is a national nurse licensure repository. Participating boards of nursing have been regularly feeding licensure and discipline data into Nursys since 1999. There are currently 22 boards of nursing providing data to Nursys and over one million licensure records of nurses. Public access to Nursys is limited to licensure verification information for registered and practical/vocational nurses.

The Nursys™ Verification Request Application is available to nurses required to provide licensure verification to a board of nursing. Nurses complete the verification request application and Nursys will post the corresponding licensure information for online review by all boards of nursing. Nurses pay $30 per application request, purchased online with a major credit card.

Nursys™ Licensure QuickConfirm provides online nurse licensure verification to employers and others. Verification reports provide data on licensure, discipline and status of privilege to practice in states within the Nurse Licensure Compact (compact). Proof of licensure is available for all nurses within participating compact jurisdictions (complete list found at www.nursys.com). State participation in the compact allows a nurse to have one license (in his or her state of residency) and practice in other compact states, subject to each state’s practice laws and regulations. Under this mutual recognition model, a nurse may practice across state lines unless otherwise restricted. Nursys is the only national verification source that reports practice privilege restrictions for nurses within compact jurisdictions. The fee to verify an unlimited number of licenses from compact states is $5 per nurse.

Additional information on the public access to Nursys can be found at www.nursys.com or via e-mail at nursysinfo@ncsbn.org.

NCSBN Salutes Patient Safety Awareness Week with a New Quarterly Fact Sheet on NCLEX® Statistics

All state and territorial boards of nursing recognize the NCLEX®, examination as a component to becoming a licensed nurse. NCLEX ensures safe and competent entry-level practice – a patient safety concern. Now the National Council of State Boards of Nursing (NCSBN) will make it easy for the public to see statistics about the people taking this exam, to help understand today’s emerging nurse workforce.

In recognition of Patient Safety Awareness Week (March 9-14), NCSBN salutes safe nursing care for patients by launching a quarterly fact sheet dedicated to informing the public about the quantity and type of nurses taking NCSBN’s NCLEX examinations. This new update will highlight a portion of the quarterly data NCSBN currently collects regarding NCLEX first-time test-takers (for both registered nurses (RNs) and practical or vocational nurses (PNs), repeat test-takers, the percentage of foreign-educated versus United States-educated nurses, and their countries of origin, etc.

The licensing authorities within each state or territory regulate entry into the practice of nursing in the United States and its territories. To ensure public protection, each jurisdiction requires a candidate for licensure to pass an examination that measures the competencies needed to perform safely and effectively as a newly licensed, entry-level registered or licensed practical nurse. NCSBN develops two licensure examinations, the National Council Licensure Examination for Registered Nurses (NCLEX-RN) and the National Council Licensure Examination for Practical Nurses (NCLEX-PN) that are used by state and territorial boards of nursing to assist in making licensure decisions. “NCLEX is one of NCSBN’s contributions to ensure safe nursing practice,” said Donna Dorsey, NCSBN board president. “Having a licensing examination that is recognized by all 61 state and territorial boards of nursing that is psychometrically sound and legally defensible, demonstrates entry level competence for safe patient care.”

These fact sheets will be available quarterly on the NCSBN website beginning April 15, 2003 at http://www.ncsbn.org/public/news/news_breaking.htm. Additional information regarding NCLEX for nurses interested in taking the test is available by phoning toll-free (866.293.9600) or visiting http://www.ncsbn.org/public/testing/testing_index.htm.

The mission of the National Council of State Boards of Nursing is to lead in nursing regulation by assisting Member Boards, collectively and individually, to promote safe and effective nursing practice in the interest of protecting public health and welfare. NCSBN is the organization through which the boards of nursing act and counsel together on matters of common interest and concern affecting public health, safety and welfare, which includes the development of licensure examinations for nursing.
Economic Development and Office of Administration. These costs include services such as computers, information technology support, purchasing staff, accounting staff, Web site maintenance, and licensing renewal processing staff. In addition, our office utilizes the Office of the Attorney General for legal counsel. These transfers total approximately 45% of our annual budget, while direct costs spent by our Board account for approximately 55% of our annual budget.

Some other transfer costs include a cost allocation transfer to the Office of Administration. Cost allocation plans are used to recover costs for services provided to others and are an acceptable accounting practice. Under this plan, the State is recovering the costs of services provided by the Office of Administration, the Department of Revenue, the State Auditor’s office, the State Treasurer’s office, and retiree health care to the various state funds. The cost allocation plan is based on the prior year’s expenditures, revenue and number of full-time employees in the Missouri Consolidated Health Care Plan. Last year, our share of this plan was $66,171, due, in part, that it was based on the 2001 budget year, where we received higher revenues and expended more money due to RN renewals. This year’s cost allocation will be $39,831 because it was based on 2002 when we received less revenue and expended less due to it being a LPN renewal year.

RNs renew every two years in odd-numbered years and LPNs renew every two years in even-numbered years. Since there are more RNs than LPNs, the Board receives more revenue in odd-numbered years than in even-numbered years. The RN renewal cycle is February to April. The LPN renewal cycle is March to May. When determining revenue and expenses, you have to plan to have enough reserve in the fund to pay expenses until the revenue from renewal fees is received. State statute 335.036.4, RSMo, indicates that the Board of Nursing funds cannot be placed to the credit of general revenue unless the amount in the fund at the end of the year exceeds three times our appropriation. This prevents the Board from charging excessive fees and also explains why renewal fees may fluctuate from year to year.

The Board of Nursing has a Finance Committee that meets quarterly to review projections (revenue and expenditures) against what we have actually spent. We are very cognizant of the fact that nurses pay for the operation of the Board and continually look for ways to cut costs.

In order to protect the public, the Board is required to investigate complaints that are received against licensees. Because the Board does not have statutory authority to impose fines to recoup costs from investigations, the costs for investigations are paid for out of the nursing fund, which is comprised of the fees collected from licensees. Since one of our largest expenditures is the cost of investigations, our Board members, Executive Director, Lori Schenck and Strategic Planner from the Division of Professional Registration, Gloria Andrews, recently completed an analysis of our current process. The Executive Director made recommended changes to our processes, which was approved unanimously by all Board members. The new process has already shown a 60% cost savings in investigative costs in the first 4 months of implementation.

We will utilize the savings by conducting research to determine root causes of practice errors. Our intent is to be proactive and educate nursing programs, students, employers and licensees on potential issues before they escalate to a complaint.

Budget cuts are a hot topic today. Most of the budget cuts are to state agencies that operate from tax dollars, commonly referred to as general revenue. The Missouri State Board of Nursing operates on fees collected from licensees. This does not mean that we are not affected by budget cuts. Since we are assessed fees through cost allocation plans, as other agencies suffer budget cuts, our cost allocation may increase. We review changes to projections and cost allocation plans at our quarterly Finance meetings.

This renewal cycle we were able to decrease fees from $100 to $80. In looking at projections, it is expected with the next renewal “cycle” (2005) there could be an additional modest increase. We will continue to monitor and strive to keep increases at a minimum for the licensee.

A copy of the budget is available for review at the Board office.
In today's rapidly changing healthcare environment, providing ongoing care for your nursing license in your nursing activities is a necessary and advisable endeavor.

Even though the most frequent cause for discipline is related to the misuse of chemicals, the majority of complaints received in the Board office occur in the area of practice. In the practice area there exists the potential for a variety of untoward occurrences, behaviors and critical events to occur that are directly and/or indirectly related to the nursing care that is being provided. The following are examples of such occurrences: medication errors, leaving duty without prior approval, unprofessional conduct, poor nursing judgment, practicing nursing with a lapsed license, working beyond the scope of a specific license type and other events/behaviors.

It is evident that there is a wide variety in the severity of the incidents that are reported, and it is important to remember that there also exist many variables in the circumstances surrounding each incident. Nurses, please consider developing a 'wellness' mindset for your license that will aid you in being pro-active in averting yourself from engagement in activities that are violations of the Nursing Practice Act. Complacency is not your friend, complacency and carelessness are the catalysts for incidents to occur that could result in a complaint being made against your license. Most importantly, don't lose sight of the most important factor of all, the safety of your patients, which is maintained through professional trust and confidence. Professional trust and confidence being that which your patients expect and are entitled to, by receiving safe care because you are a licensed professional.

Discipline Corner
by Liz Cardwell, RN, M.Ed.

Missouri State Board of Nursing Discipline Committee Members:
Charlotte York, LPN - Chair
Paul Lineberry, Ph.D.
Arthur Bante, BSA, RN, CRNA
Kay Thurston, ADN, RN
Janet Vanderpool, MSN, RN

PROVIDING 'WELLNESS' CARE FOR YOUR NURSING LICENSE

In today’s rapidly changing healthcare environment, providing ongoing care for your nursing license in your nursing activities is a necessary and advisable endeavor.

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It is a fact of life that you are responsible and accountable for your nursing activities - “I didn’t know, no one told me, we’ve always done it that way, other nurses do it or I didn’t get that in orientation,” does not relinquish you from your professional responsibilities. Not knowing or not abiding by the laws and rules that regulate nursing practice will not absolve you from the personal and professional repercussions of poor nursing judgment and practice.

As mentioned earlier in this article, there are specific areas where there appears to be an increased potential for the occurrence of events from which a complaint can develop. Vigilance in these areas is invaluable in your nursing license ‘wellness’ plan, some of these areas are as follows:
- utilizing the six rights of medication administration.
- documenting in an accurate and timely manner.
- following facility policies and procedures.
- practicing within the scope of practice of your particular license.
- developing an awareness of how your nursing activities may be perceived by the patient, the patient's family, colleagues and your employer.
- understanding the responsibilities as a supervisor, if that is your role.
- utilizing appropriate and adequate communication skills with your employer, colleagues and patients.
- practicing nursing in such a manner that your skills, knowledge and abilities as a nurse are evident.

Planning and maintaining wellness for your license can be likened to wellness health care for a family member or for ourselves. Some of the ways that we care for ourselves is by eating right, getting plenty of rest, dealing with stress appropriately and seeking medical help when we are ill. In order to be proactive in providing wellness care for your nursing license, consider the following:
- attain and maintain a healthy work environment - one that is commensurate with your skills, knowledge and abilities.
- pursue further education for what you don't understand or are unfamiliar with in nursing.
- work hours that allow you to have sufficient rest to be mentally and physically alert and capable.
- obtain assistance when needed.

Vigilance is invaluable in wellness care for your license. Remember to determine your priorities, establish your desired outcome and make a plan of action in caring for your nursing license.

Cardwell
Missouri State Board of Nursing Licensure

Committee Members:
- Janet Vanderpool, MSN, RN, Chair
- Teri A. Murray, PhD, RN
- Robin Vogt, PhD, RN, FNP-C
- Charlotte York, LPN

RN Licenses Expire April 30, 2003

Current RN licenses expire April 30, 2003. Renewal notices were mailed in January 2003. Contact our office if you have not received a renewal notice. Our office is staffed Monday through Friday from 8:00 AM to 5:00 PM, excluding state holidays. You may also reach our office by:
- Fax at (573) 751-6745 or (573) 751-0075
- Phone at (573) 751-0681
- e-mail at nursing@mail.state.mo.us

Failure to receive a renewal notice does not excuse the nurse from the requirements of license renewal or from the possibility of disciplinary action for practicing without a license.

The RN license renewal fee for 2003-2005 is $80.

License Renewal for Deployed Military Personnel

State statute 41.950 states:
41.950. 1. Any resident of this state who is a member of the National Guard or of any reserve component of the armed forces of the United States or who is a member of the United States Army, the United States Navy, the United States Air Force, the United States Marine Corps, the United States Coast Guard or an officer of the United States Public Health Service detailed by proper authority for duty with any branch of the United States armed forces described in this section and who is engaged in the performance of active duty in the military service of the United States in a military conflict in which reserve components have been called to active duty under the authority of 10 U.S.C. 672(d) or 10 U.S.C. 673b or any such subsequent call or order by the President or Congress for any period of thirty days or more shall be relieved from certain provisions of state law, as follows:

(4) Any person enrolled by the supreme court of Missouri or licensed, registered or certified under chapter 168, 256, 289, 317, 325, 326, 327, 328, 329, 330, 331, 332, 333, 334, 335, 336, 337, 338, 339, 340, 341, 342, 343, 344, 345, 346, 375, 640 or 644, RSMo, whose license, registration or certification expires while performing such military service, may renew such license, registration or certification within 60 days of completing such military service without penalty.

A nurse is licensed under chapter 335. If a nurse does not renew his/her license due to deployment, the nurse may renew his/her license without penalty if the license is renewed within 60 days of completing military service. When the nurse returns from military service, we ask that the nurse provide evidence of their service (including dates) for verification that they meet this exemption.

Phrase of the Month

“‘There must be something wrong with your telephone lines as I have been trying for days to get through to your office.’”

Please let me confirm that our telephone lines are working fine; however, due to RN Renewals our phone calls have increased to an average of 1500 licensure phone calls per day. We ask for your patience and encourage you to continue to try to contact our office should you have any questions. We expect our telephones will continue to busy through the month of June. As an alternative you may email us at nursing@mail.state.mo.us or fax to 573-751-6745 or 0075.

All RN licenses expire April 30, 2003. There is a grace period until May 31, 2003, to allow a licensee to renew with the renewal notice and without a penalty fee; however, this does not allow the licensee to continue to practice after April 30, 2003. After May 31, 2003 a licensee will have to complete a RN Petition to Renew and pay the penalty fee of $50 and the current $80 renewal fee.
You can verify a nursing license at www.e-codev.state.mo.us/pr. Click on LICENSEE SEARCH. You can search by name or license number. The search results will show the licensee’s name, city, state, original issue date, expiration date and whether there is any discipline currently on the license.

WHAT IS PUBLIC INFORMATION?
In accordance with Section 620.010.14(7), RSMo, the only information regarding an applicant/licensee that is public includes:

- Name (including maiden name and previous names);
- Address;
- License type, license number, dates of issuance and expiration date;
- License status (i.e. current, inactive, lapsed, surrendered or no license issued);
- License certifications and dates (e.g. IV Certified); and
- Disciplinary action taken against a license (i.e. censure, probation, suspension, revocation).

The above is the only information that may be released to the public, including family members, employers and the media.

Confidential information in an applicant/licensee’s file may only be released under the following circumstances:

- With the written authorization of the applicant/licensee;
- Through the course of voluntary interstate exchange of information with other boards of nursing;
- Pursuant to a court order; or
- To other administrative or law enforcement agencies acting within the scope of their statutory authority.

Occasionally, a caller might want to verify a licensee/applicant’s date of birth or social security number. A licensee or applicant’s date of birth and/or social security number is not public information and therefore cannot be verified by our office unless we are provided with a signed release from the licensee/applicant.

Missouri Nursing Practice Act Available Online
You may view the Missouri Nursing Practice Act on our Web site at http://www.ded.state.mo.us/regulatory/licensing/professionalregistration/nursing/. Click on Nursing Practice Act.

Commonly Asked Licensure Questions
Where do I call to verify a Certified Nurse Assistant (CNA) or Certified Medical Technician (CMT)?
Contact the Department of Health and Senior Services at (573) 526-5686.

Where do I call to verify an Emergency Medical Technician (EMT)?
Contact the Bureau of Emergency Medical Services at (573) 751-6356.

What is the process for the Board to endorse my license to another state?
You must contact the state board of nursing where you want a license and request an application for licensure. Contact information for boards of nursing can be found at http://www.ncsbn.org/public/regulation/boards_of_nursing_board.htm. At the time you apply for licensure in another state, that Board will give you a Nursys verification or you can download the form from http://www.ncsbn.org/public/regulation/res/verification.pdf. Complete your part of the form and send it to the address indicated on the form with a $30 money order.

VERIFICATION OF A LICENSE
You can verify licenses on-line at www.e-codev.state.mo.us/pr. Click on LICENSEE SEARCH. You can search by name or license number. The search results will display the licensee’s name, city, state, license number, original license issue date and license expiration date.

If you have a list of nurse licenses that you would like verified, you can send the list to our office electronically. We will match the list with our database and send the results back to you electronically. Your list needs to be an Excel document or a text file (tab or comma delimited). It should contain the nurse’s name and license number. E-mail the list to nursing@mail.state.mo.us.

In order to verify licensure, ask to see an original current Missouri license or temporary permit before the employee reports to orientation. A temporary permit will have a raised Board seal. A license will have the expiration date, profession and license number. The license number could be the profession code (RN or PN) followed by a 6-digit number or a 10-digit number, which consists of the year of license followed by a 6-digit number. Example of a 6-digit license number could be RN060619. An example for the 10-digit license number is 2000134178. When requesting verification from our office, you must provide the complete license number, which includes the year of license.

The name, address and licensure status of all currently licensed nurses is public information. If you have any questions, please call the Board office or use the Web to verify credentials before hiring. Our office is staffed Monday through Friday from 8:00 AM to 5:00 PM, excluding state holidays. You may also reach our office by:

- Fax at (573) 751-0681
- Phone at (573) 751-0075
- e-mail at nursing@mail.state.mo.us
- On-Line Licensure Search at www.e-codev.state.mo.us/pr
Graduate Nurse Practice

The Rule

State Regulation 4 CSR 200-4.020 (3) reads: "A graduate of a nursing program may practice as a graduate nurse until s/he has received the results of the first licensure examination taken by the nurse or until ninety (90) days after graduation, whichever first occurs."

Missouri does not issue a graduate temporary permit, however, if the individual qualifies s/he may practice as a graduate nurse under 4 CSR 200-4.020 (3).

The graduate must cease practice as soon as s/he fails the exam or 90 days after graduation, whichever is first.

We recommend that you have the graduate sign an Authorization to Release Confidential Information form so we may provide you with periodic updates on the person’s exam and licensure information. A sample authorization form is included with this article.

After the Examination

Graduates applying for an original license by exam in Missouri will be licensed automatically upon receipt of passing results provided all other licensure requirements are met. When results are received, the successful candidate will be sent the results and a “pass” letter authorizing the person to practice until the license is received.

There is a thirty (30)-day grace period for graduates who have successfully passed the first available licensing examination in another state following graduation to obtain a temporary permit or license in Missouri after the graduate has received his/her results. Graduates applying for endorsement to Missouri should begin the Missouri licensure process immediately following graduation.

As soon as the graduate receives passing results, the graduate should forward a copy of the results to our office so we can issue a temporary permit. A temporary permit cannot be issued until another state has issued the applicant the authority to practice in that state.

About Orientation

Orientation is considered to be employment. Any nurse in orientation must have either a valid Missouri temporary permit or current Missouri license. The only exception to this policy is if the nurse is practicing under an exemption as listed in Chapter 335.081 of the Missouri Nursing Practice Act or under State Regulation 4 CSR 200-4.020 (3).

Proper Supervision

According to 4 CSR 200-5.010 (1), proper supervision is defined as, “the general overseeing and the authorizing to direct in any given situation. This includes orientation, initial and ongoing direction, procedural guidance and periodic inspection and evaluation.”

AUTHORIZATION TO RELEASE CONFIDENTIAL INFORMATION

(Print Legibly in Black Ink)

I, _____________________________, hereby authorize the MISSOURI STATE BOARD OF NURSING to release any and all information regarding my licensure and exam application status as a Licensed Practical Nurse/Registered Professional Nurse to my employer, ____________________________, and/or their representatives.

This release authorizes the Missouri State Board of Nursing to release the following information: my name, address, nursing school name, graduation date, eligibility status, test appointment date, date exam was taken, whether or not I took the exam and my exam results.

A copy of this authorization will be considered as effective and valid as the original.

Date ____________________________

Applicant’s Signature ____________________________

Applicant’s Printed Name ____________________________

Applicant’s Social Security Number ____________________________

Fax to the Missouri State Board of Nursing at (573) 751-6745
Change is a constant in this day and age. And, in keeping with the times, the national licensure examination programs – NCLEX-RN® and NCLEX-PN® – are undergoing some "tweaking."

First, a little background information. The National Council of State Boards of Nursing, Inc. (NCSBN), who has ownership of the national licensure examinations, continually considers how best to test the knowledge, abilities, and skills essential to the safe and effective practice of nursing at the entry level. The NCSBN ensures that the licensing examinations reflect current practice by conducting a job analysis of newly licensed practical and professional nurses on an every three years basis. The results of these surveys are then used to evaluate the RN and PN test plans which guide the selection of content to be tested. The current NCLEX-PN® test plan became effective in April, 2002, and an updated NCLEX-RN® test plan is scheduled for 2004. (The present NCLEX-PN® test plan was discussed in the February, March, April 2002 Newsletter.) In 1994, computer adaptive testing (CAT) was implemented as the administration modality for the NCLEX® examination program. As of April, 2003, the NCSBN will be taking advantage of computer technology and the licensure examinations will include innovative format items.

An innovative format item is one that differs from the standard, four-option, multiple-choice question. These formats may include multiple-choice items requiring the candidate to select more than one response, fill-in-the-blank items, or items asking a candidate to identify an area on a picture or graphic. Such items allow a different way for candidate entry level competencies to be more readily and authentically assessed. To illustrate, an innovative item would list a patient’s fluid intake during the shift in various measurements such as ounces, cups, and cc’s and then ask the candidate to calculate the patient’s total intake for the shift in milliliters and type in the answer. This format would more accurately and directly assess the candidate’s calculation ability compared to a four-option multiple choice question.

The following is an example of an item requiring more than one response. The candidate is given a list of infection control measures and asked which ones are to be implemented while caring for a patient with a wound infected with Methicillin-Resistant Staphylococcus Aureus (MRSA). The candidate is to select all the measures that apply.

- Innovative items are scored either right or wrong; there is no partial credit given. The use of innovative or "next generation" items was presented at the NCSBN Annual Meeting in 1999. At the 2001 Annual Meeting, a final report on a pilot study using such items was presented in the Examination Committee’s Report to the Delegate Assembly. The innovative format items are pretested, just as the traditional standard items have been, before coming part of the operational or "scored" part of the examinations in order to gather the necessary statistical information about each item. As has been the practice of NCSBN, these items have to meet stringent statistical criteria just as the traditional multiple choice questions do. Also, the current rigorous process used to develop the standard multiple choice items has been utilized for the innovative format items. That is, item writers are selected from across the country and attend item writing sessions. Then nursing content experts from across the country review all the items to assess the item for currency, accuracy, scope of practice, and entry-level practice as well as the correct, acceptable answer.

The innovative items will be added to, not replace, the current NCLEX-RN® and NCLEX-PN® item pools and may be administered to candidates as "scored" items any time after April 2003. There is no established percentage of either licensure examination that will be devoted to these types of items. Use of these item types will not affect candidate pass rates or the timeline for delivering results to candidates and boards of nursing. Nor will the use of these items change the test plan or the length of the test.

Nursing program administrators were notified by the Board of Nursing via a memorandum of the upcoming use of various item types. Copies of the 2003 NCLEX® Examination Candidate Bulletin were distributed to each program in February. This bulletin presents information about and examples of various item formats that a candidate may encounter while taking the examination. The NCSBN Web site at http://www.ncsbn.org can also be accessed to obtain information and review examples. Thus, candidates sitting for the licensure examination in April 2003 and beyond should be adequately informed and prepared as to these format changes.

As with any change, there are questions and an adjustment period. As part of its continuous quality improvement program, the NCSBN will continue to supply updated information about the innovative items on its Web site and the Board of Nursing will also keep you informed via the newsletter.
Missouri State Board of Nursing Practice Committee Members:
Arthur Bame, BSA, RN, CRNA
Paul Lineberry, PhD
Kay Thurston, ADN, RN, Chair
Robin Vogt, PhD, RN, FNP-C
Charlotte York, LPN

FREQUENTLY ASKED QUESTIONS
When directed to the Missouri State Board of Nursing Web site, go to:
www.ded.state.mo.us/regulatory/licensing/professionalregis-
tration/nursing

When a statutory reference is made in the response to a question, you may go to the following Web site to review the particular statute: www.moga.state.mo.us/homestat.asp

When a rule/regulation reference is made in the response to a question, you may go to the following Web site to review the particular rule/regulation:
www.sos.state.mo.us/

Q: Can I refer to myself as a clinical nurse spe-
cialist or be in an employment position of clinical nurse specialist without recognition from the Board of Nursing?
A: No. If you are interested in applying for recogni-
tion to title, represent yourself, or be employed or practice as a clinical nurse specialist, please go to the Board Web site, ADVANCED PRACTICE button, where you can download an APN application.

Q: Can Board of Nursing-recognized advanced practice nurses in collaborative practice arrangements write prescriptions for controlled substances under any circumstances?
A: No. Please refer to provisions in statute, section 195.070, RSMo. Who may prescribe, and rule, 4 CSR 200-4.200 Collaborative Practice, subsection (3)(f).

Q: I understand the Board’s Practice section had difficulty verifying my registered professional nurse license and advanced practice nurse recognition status. Why would this happen?
A: Since instances of verification of licensure status need to be considered by every licensee, it is important that the name you intend to use for your professional activities be what the Board of Nursing has listed in its licensing sys-
tem. This becomes especially important if only a name is provided to the Board staff for verification. Please use the name on your license and the appropriate advanced prac-
tice nurse title designations for your professional activities. If you wish to make a change in your last name on your license, you will need to make this request in writing to the Board, including reason for the requested change in your last name. In your written request, be sure to identify your license number, current last name on your license, and your requested new last name. Date and sign your request with your requested new last name. If you intend to request a change in your first name, court documents are required.

Q: I am a Board of Nursing-recognized advanced practice nurse in a collaborative practice arrangement. The rule, 4 CSR 200-4.200 Collaborative Practice, subsection (3)(f), requires that retrievable dispensing logs be maintained for all prescription drugs dispensed. Where can I obtain guidance concerning what informa-
tion should be included in the dispensing log?
A: The following statute and rule provisions may provide assistance to you:
Section 338.059, RSMo, Prescriptions, how labeled, and 4 CSR 150-5.020 Nonpharmacy Dispensing, section (4). In instances when a physician is physically present in the clinic/office, the require-
ment in 4 CSR 200-4.200 Collaborative Practice, subsection (3)(f)(10) which limits prescription dispensing to 72 hours or less (NOTE: refers only to dispensed pre-
scription drug dosages for which patient is billed) may be offset by compliance with the requirements in 4 CSR 150-72.200 Nonpharmacy Dispensing, section (2). If, in your setting, you charge patients for prescribed drugs dispensed, you may, in order to demonstrate compliance, also want to include a column which will allow for specification of the physician who is physically present in the clinic/office dispense a new medication in the dispensing log. In instances when a physician is physically present in the clinical/office setting, you charge patients for prescribed drugs dispensed, you may, in order to demonstrate compliance, also want to include a column which will allow for specification of the physician who is physically present in the clinic/office dispense a new medication in the dispensing log.

Q: Does the 72 hour or less dispensing rule in 4 CSR 200-4.200 Collaborative Practice, subsection (3)(f), apply to dispensing of sample drugs?
A: No. Please review the NURSING PRACTICE ACT button at the Board Website, specifically provisions (1) through (6) in the rule, 4 CSR 200-6.010 Intravenous Fluid Treatment Administration. You are also advised to review the FOCUS ON PRACTICE button for additional LPN scope of practice information.

Q: Is a registered professional nurse required to enter into a written collaborative practice arrangement?
A: No. Please review the RN Scope of Practice Statement at the Board Website under the FOCUS ON PRACTICE button.

Q: Does the Board of Nursing maintain statistics on malpractice cases against licensed nurses?
A: No.

Q: I am a nurse licensed in another state who has been asked to accompany and care for a patient who is coming into Missouri to vacation and/or receive medical treatment. I do not have a Missouri license. May I accompany and care for this patient without getting a Missouri license?
A: Please review the NURSING PRACTICE ACT button on the Board Website, specifically the provisions in section 335.081, RSMo. Exempted practices and prac-
titioners, section (7), which states:
So long as the person involved does not represent or hold himself or herself out as a nurse licensed to practice in this state, no provision of sections 335.011 to 335.096, RSMo shall be construed as prohibiting:
(7) The practice of nursing in this state by any legally qualified nurse duly licensed to practice in another state whose engagement requires such nurse to accompany and care for a patient temporarily residing in this state for a period not to exceed six months.

Q: Where should I look on the Board Web site for LPN IV Therapy scope of practice guidance?
A: Please review the NURSING PRACTICE ACT button on the Board Website, specifically provisions (1) through (6) in the rule, 4 CSR 200-6.010 Intravenous Fluid Treatment Administration. You are also advised to review the FOCUS ON PRACTICE button for additional LPN scope of practice information.
Corrections

In the previous Newsletter, February, March, April 2003, Vol. 5, #1, incorrect information was inadvertently placed in the violation column for the following two licensees:

Paula N. Mayo. RN 149502. The positive drug screen occurred on 11/20/00, not 11/20/02.
Andrea F. Wells. PN 043245. The violation was based on not submitting required documentation, licensee did attend the required meetings.

HELP WANTED!

TOGETHER WE CAN MAKE A DIFFERENCE!

WE NEED YOU!
● Educate others about the profession of nursing.
● Participate in career days at your local schools, church, 4-H, Scouts, etc.

WE CAN HELP!
● Check out the Missouri Nursing Coalition’s web site at http://www.nursingcareers.cc/ for resources to help you recruit young people and individuals making career choices.

Brochure—provides important information regarding opportunities, education requirements, scholarship availability and additional information. To order copies call 573-635-5355.
● PowerPoint presentation—available to download and use to assist with recruiting individuals into the nursing field.

Missouri Nursing Coalition
Visit us on the web at www.nursingcareers.cc
Summary of Actions March 2003 Board Meeting

Education Matters

Changes in Curriculum – The following schools requested and were approved for changes in curriculum:

- Columbia Public Schools, PN Program #17-199
- Gibson AVTC, PN Program #17-164
- Nevada Regional Technical, PN Program #17-187
- Sanford Brown College/N. Kansas City, PN Program #17-152

Student Enrollment Increases

- Missouri Southern State College, BSN Program #17-510 request to increase student enrollment was approved.
- Jewish Hospital College of Nursing and Allied Health, ADN Program #17-420 request to increase student enrollment was approved.
- Cape Girardeau Career and Technology Center – PN Program #17-167 request to increase enrollment for evening class from 14 to 20 students was approved.

The following items were reviewed and accepted:

- Reports of Five-year on-site visits – 8
- 2002 Annual Reports – Diploma Programs – 1
- 2002 Annual Reports – BSN Programs - 19

Discipline Matters

The Board held 4 disciplinary hearing and 12 violation hearings.

The Discipline Committee reviewed 151 RN cases, 83 PN cases, 8 Litigation items and 127 disciplined licensee-meeting reports.

Licensure Matters

The Licensure committee reviewed 14 applications. Results of reviews as follows:

Applications approved – 10
Applications approved with probated licenses – 4

Practice Matters

- The Practice Committee conducted an evaluation of the Board’s currently accepted national certifying bodies and the Board decision was to not approve the Oncology Nursing Certification Corporation (ONCC).
- The Practice Committee recommended and the Board approved the summary of and response to comments prepared for filing the Final Order of Rulemaking on 4 CSR 200-4.200 Collaborative Practice.
- The Committee reviewed one scope of practice question and one advanced practice nurse application.
DISCIPLINARY ACTIONS**

Pursuant to Section 335.066.2 RSMo, the Board “may cause a complaint to be filed with the Administrative Hearing Commission as provided by chapter 621, RSMo, against any holder of any certificate of registration or authority, permit, or license required by sections 335.011 to 335.096 or any person who has failed to renew or has surrendered his certificate of registration or authority, permit or license” for violation of Chapter 335, the Nursing Practice Act.

**Please be advised that more than one licensee may have the same name. Therefore, in order to verify a licensee’s identity, please check the license number.

INITIAL PROBATIONARY LICENSE

Listed below are individuals who were issued an initial probationary license by the Board during the previous quarter with reference to the provisions of the Nursing Practice Act that were violated and a brief description of their conduct.

<table>
<thead>
<tr>
<th>Name</th>
<th>License Number</th>
<th>Violation</th>
<th>Effective Date of Censured License</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lisa Dunn RN</td>
<td>141883</td>
<td>Section 335.066.1. and 2, RSMo2000</td>
<td>03/10/2003 to 03/10/2006</td>
</tr>
<tr>
<td>Galena, MO</td>
<td></td>
<td>On 5/27/99, the Kansas State Board of Nursing suspended Licensee’s Kansas license for the balance of the licensing period. The discipline was based on Licensee’s failure to disclose her past criminal and chemical dependency history to the Kansas Board. On 6/24/00, Licensee’s California license was revoked following an administrative hearing. The discipline was based on Kansas’ action as well as her chemical dependency problems.</td>
<td></td>
</tr>
<tr>
<td>John Goodman PN</td>
<td>2003004631</td>
<td>Section 335.066.1. and 2, RSMo2000</td>
<td>03/07/2003 to 03/07/2005</td>
</tr>
<tr>
<td>Kirksville, MO</td>
<td></td>
<td>On 5/20/02, Licensee was treated for chemical dependency.</td>
<td></td>
</tr>
<tr>
<td>Debra Page PN</td>
<td>037765</td>
<td>Section 335.066.2, RSMo2000</td>
<td>03/07/2003 to 03/07/2006</td>
</tr>
<tr>
<td>Springfield, MO</td>
<td></td>
<td>On 4/22/97, Licensee possessed and consumed marijuana. On 4/22/97, Licensee failed a pre-employment drug screen, testing positive for marijuana. On 7/18/00, Licensee pled guilty to prostitution.</td>
<td></td>
</tr>
</tbody>
</table>
## CENSURED LIST

<table>
<thead>
<tr>
<th>Name</th>
<th>License Number</th>
<th>Violation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rhonda C. Anstead</td>
<td>PN 019004</td>
<td>Section 335.066.2 (5), (6), and (12), RSMo2000 Licensee practiced nursing</td>
</tr>
<tr>
<td>Grandview, MO</td>
<td></td>
<td>from 6/1/00 through 9/7/00 with a lapsed license. On 1/16/01 Licensee</td>
</tr>
<tr>
<td></td>
<td></td>
<td>called in a prescription for Lortab without physician authorization.</td>
</tr>
<tr>
<td>Karen J. Dugger</td>
<td>PN 024072</td>
<td>Section 335.066.2 (5) and (12), RSMo2000 On 1/14/02, while on duty.</td>
</tr>
<tr>
<td>Willow Springs, MO</td>
<td></td>
<td>Licensee slept from 11:00 p.m. until 6:00 a.m.</td>
</tr>
<tr>
<td>Carolyn Duncan</td>
<td>RN 134663</td>
<td>Section 335.066.2 (1) and (14), RSMo2000 On 2/1/02, Licensee submitted</td>
</tr>
<tr>
<td>Florissant, MO</td>
<td></td>
<td>to a drug screen, the results of which were positive for cocaine.</td>
</tr>
<tr>
<td>Dana J Hicks</td>
<td>RN 121679</td>
<td>Section 335.066.2 (5), (6), (12), and (14), RSMo2000 On 7/6/01, Licensee</td>
</tr>
<tr>
<td>Bolivar, MO</td>
<td></td>
<td>wrote a prescription for Percocet for a patient. On 9/11/01, Licensee,</td>
</tr>
<tr>
<td></td>
<td></td>
<td>without physician authorization, placed steri-strips on the incision of</td>
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<tr>
<td></td>
<td></td>
<td>a patient that had returned to the physician's office with wound</td>
</tr>
<tr>
<td></td>
<td></td>
<td>dehiscence, then sent the patient home; because of the tape, the</td>
</tr>
<tr>
<td></td>
<td></td>
<td>patient's toes were strangulated which caused them to become fiery red.</td>
</tr>
<tr>
<td>Janet Lynette King</td>
<td>RN 2001022471</td>
<td>Section 335.066.2 (5), (12) RSMo2000 On 1/23/02, Licensee accidentally</td>
</tr>
<tr>
<td>Poplar Bluff, MO</td>
<td></td>
<td>stuck herself with the same needle she used to inject the patient,</td>
</tr>
<tr>
<td></td>
<td></td>
<td>unaware of the needle stick to herself. Licensee was not wearing gloves</td>
</tr>
<tr>
<td></td>
<td></td>
<td>per employer policy.</td>
</tr>
<tr>
<td>Kathy A Lahmeyer</td>
<td>RN 113817</td>
<td>Section 335.066.2 (5) and (12), RSMo2000 On 8/18/01, Licensee removed</td>
</tr>
<tr>
<td>St Charles, MO</td>
<td></td>
<td>two Percocet for a patient but failed to document the administration</td>
</tr>
<tr>
<td></td>
<td></td>
<td>of the medication because she lost the medication. On the same day, on</td>
</tr>
<tr>
<td></td>
<td></td>
<td>four occasions, Licensee signed the signature of a patient care assistant</td>
</tr>
<tr>
<td></td>
<td></td>
<td>on a patient chart to reflect that the assistant had assessed the</td>
</tr>
<tr>
<td></td>
<td></td>
<td>patient and performed certain tasks.</td>
</tr>
<tr>
<td>Linda I. Lawson</td>
<td>RN 102254</td>
<td>Section 335.066.2 (8), RSMo2000 On 5/31/01, Licensee was placed on</td>
</tr>
<tr>
<td>Fairland, OK</td>
<td></td>
<td>probation by the Oklahoma Board of Nursing for directing a nursing</td>
</tr>
<tr>
<td></td>
<td></td>
<td>student to substitute pain medication without physician authorization;</td>
</tr>
<tr>
<td></td>
<td></td>
<td>on 2/1/01, Licensee instructed a nursing student to administer a</td>
</tr>
<tr>
<td></td>
<td></td>
<td>medication, which was subsequently identified as the wrong medication.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>On 3/27/02, Licensee was placed on an additional 6 months of probation</td>
</tr>
<tr>
<td></td>
<td></td>
<td>by the Oklahoma Board of Nursing for violating the terms of the initial</td>
</tr>
<tr>
<td></td>
<td></td>
<td>probation.</td>
</tr>
<tr>
<td>Tracy M Morris</td>
<td>PN 058195</td>
<td>Section 335.066.2 (5) and (12), RSMo2000 On 10/27/01, without first</td>
</tr>
<tr>
<td>Farmington, MO</td>
<td></td>
<td>obtaining a physician's order, Licensee placed a hot pack on the foot</td>
</tr>
<tr>
<td></td>
<td></td>
<td>of an inmate who was a quadriplegic and had no feeling in his foot.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Licensee left the hot pack on the foot for an extended period of time</td>
</tr>
<tr>
<td></td>
<td></td>
<td>resulting in two blisters on the inmate's foot. On 12/23/01, Licensee</td>
</tr>
<tr>
<td></td>
<td></td>
<td>received nine medical service requests from an inmate and on 12/26/01,</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Licensee discarded the nine requests without documenting them, which</td>
</tr>
<tr>
<td></td>
<td></td>
<td>would have made an appointment for the inmate to see the doctor.</td>
</tr>
<tr>
<td>John R Shannon</td>
<td>PN 058321</td>
<td>Section 335.066.2 (5) and (12), RSMo2000 On 4/1/02, Licensee, while</td>
</tr>
<tr>
<td>Harrison, AR</td>
<td></td>
<td>working the 7:00 p.m. to 7:00 a.m. shift, dozed off at the nurses desk</td>
</tr>
<tr>
<td></td>
<td></td>
<td>and was found sleeping in a bed in an unoccupied patient room.</td>
</tr>
<tr>
<td>Brandy I. Weaver</td>
<td>PN 058430</td>
<td>Section 335.066.2 (5), (6), and (12), RSMo2000 On 8/15/01, Licensee</td>
</tr>
<tr>
<td>Grandview, MO</td>
<td></td>
<td>manually administered medication to a patient via intravenous (I.V.)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>push.</td>
</tr>
</tbody>
</table>

Effective Date of Censured License:
- Rhonda C. Anstead: 12/19/2002
- Karen J. Dugger: 2/25/2003
- Carolyn Duncan: 3/5/2003
- Dana J Hicks: 1/16/2003
- Janet Lynette King: 1/30/2003
- Kathy A Lahmeyer: 3/14/2003
- Linda I. Lawson: 3/7/2003
- Tracy M Morris: 2/18/2003
- John R Shannon: 2/13/2003
- Brandy I. Weaver: 2/5/2003
## Probation List

<table>
<thead>
<tr>
<th>Name</th>
<th>License Number</th>
<th>Violation</th>
<th>Effective Date of Probation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kellie M Allen</td>
<td>RN 099370</td>
<td>Section 335.066.2 (1), (2), (5), (12), and (14), RSMo2000 On 1/1/02, Licensee pled guilty to stealing, possession of controlled substances, and possession of drug paraphernalia.</td>
<td>1/24/2003 to 1/24/2007</td>
</tr>
<tr>
<td>Janetta Ruth Austin</td>
<td>RN 2000160125</td>
<td>Section 335.066.2 (1), (5), (12), and (14) RSMo2000 Between 2/9/1 and 9/9/1, Licensee repeatedly misappropriated Lortab, Percocet, Darvocet, Morphine, and Demerol from the pyxis system for her personal consumption.</td>
<td>1/24/2003 to 1/24/2006</td>
</tr>
<tr>
<td>Michelle L Barnett</td>
<td>RN 149480</td>
<td>Section 335.066.2 (1), (5), (12), and (14), RSMo2000 On 12/1/01, Licensee accessed narcotics through the hospital's Pyxis system, using a current patient's name to obtain approximately 10 pills of Percocet for her personal use and consumption.</td>
<td>2/28/2003 to 2/28/2006</td>
</tr>
<tr>
<td>Sheila K Barr</td>
<td>PN 054801</td>
<td>Section 335.066.2 (2), RSMo1994 On 10/9/96, 1/3/98, and 7/19/99, Licensee pled guilty to DWI, persistent offender.</td>
<td>1/31/2003 to 1/31/2005</td>
</tr>
<tr>
<td>Margaret E Caruthers</td>
<td>PN 052408</td>
<td>Section 335.086.2 (5) and (12), RSMo2000 On 6/27/97, Licensee refused to assist a resident who had fallen and informed the aides to let him lay and die. On 8/27/97, Licensee cursed the same resident when the resident accidentally bit the Licensee's finger as the Licensee administered medication.</td>
<td>1/31/2003 to 1/31/2005</td>
</tr>
<tr>
<td>Anna M Clifton</td>
<td>RN 097282</td>
<td>Section 335.066.2 (1), (5), and (12), RSMo2000 On 2/2/00, 4/17/00, and in 5/00, Licensee reported to work under the influence of alcohol; blood alcohol tests on all three occasions were positive for the presence of alcohol. In 6/00, Licensee was arrested for driving while intoxicated.</td>
<td>1/18/2003 to 1/18/2005</td>
</tr>
<tr>
<td>Susan L Crayton</td>
<td>RN 116582</td>
<td>Section 335.066.2 (1), (2), (5), and (12), RSMo2000 On 9/11/00, Licensee entered a guilty plea to the misdemeanor of passing a bad check. On 5/4/00, Licensee submitted to a random urine alcohol/drug-screening test, which revealed that her blood alcohol level was .15 percent.</td>
<td>1/31/2003 to 1/31/2006</td>
</tr>
<tr>
<td>Patricia M Fox</td>
<td>RN 093074</td>
<td>Section 335.066.2 (1), (5), (12), and (14), RSMo2000 On 11/28/00, Licensee charted the administration of Demerol and Vistaril to a patient but there was no physician's order for the medication. Licensee misappropriated the Demerol and Vistaril for her personal consumption. While previously employed at another hospital, Licensee misappropriated an injectable medication for her personal consumption.</td>
<td>3/11/2007 to 3/11/2007</td>
</tr>
<tr>
<td>Mary Jane Farmer</td>
<td>RN 119095</td>
<td>Section 335.066.2 (1), (5), (12), and (14), RSMo2000 From 4/9/1 through 2/02, Licensee misappropriated controlled substances for her own consumption by withdrawing such controlled substances for patients without prescription and/or by withdrawing more than the amount prescribed for patients. On 3/28/02, Licensee submitted to a drug screen which tested positive for Morphine.</td>
<td>3/4/2006 to 3/4/2006</td>
</tr>
<tr>
<td>Frank L Gifford</td>
<td>RN 101763</td>
<td>Section 335.066.2 (1), (5), (12), and (14), RSMo2000 From 9/7/01 through 10/21/01, Licensee misappropriated Demerol for his personal consumption while on duty.</td>
<td>2/1/2007 to 2/1/2007</td>
</tr>
<tr>
<td>Kim M Gildewell</td>
<td>PN 056874</td>
<td>Section 335.066.2 (2), RSMo2000 On 2/28/00, Licensee pled guilty to Felony - possession of a controlled substance and DWI. On 6/18/01, Licensee's probation was revoked for an unexcused and unjustified violation of a substantial condition of her probation.</td>
<td>3/19/2006 to 3/19/2006</td>
</tr>
<tr>
<td>Name</td>
<td>License Number</td>
<td>Violation</td>
<td>Effective Date of Probation</td>
</tr>
<tr>
<td>-----------------------</td>
<td>----------------</td>
<td>---------------------------------------------------------------------------</td>
<td>-----------------------------</td>
</tr>
<tr>
<td>Amy E Huff</td>
<td>RN 12393/</td>
<td>Section 335.066.2 (1) and (14), RSMo2000</td>
<td>3/14/2003 to 3/14/2007</td>
</tr>
<tr>
<td></td>
<td>PN 044995</td>
<td>On 7/1/3006, Licensee submitted to a post-injury drug screen and tested positive for marijuana and amphetamines. Licensee had listed medications she was taking which would have resulted positive for amphetamines.</td>
<td></td>
</tr>
<tr>
<td>Lana J Pendergast</td>
<td>RN 119233</td>
<td>Section 335.066.2 (1), (5), and (12), RSMo2000</td>
<td>2/20/2003 to 2/20/2005</td>
</tr>
<tr>
<td></td>
<td></td>
<td>On 11/29/01, Licensee reported to work with an odor of an intoxicating beverage on her person and was subsequently referred to the facility's EAP. On 4/25/02, Licensee reported to work with an odor of an intoxicating beverage on her person; Licensee submitted to a breath and blood test, the results of which were positive for alcohol.</td>
<td></td>
</tr>
<tr>
<td>Janet Perkins</td>
<td>PN 010126</td>
<td>Section 335.066.2 (2), (3), and (11), RSMo2000</td>
<td>1/31/2003 to 1/31/2006</td>
</tr>
<tr>
<td>Kristen Anne Pretsch</td>
<td>RN 2003002174</td>
<td>Section 335.066.1 and .2 (1), (5), (12), and (14), RSMo2000</td>
<td>1/31/2003 to 1/31/2006</td>
</tr>
<tr>
<td></td>
<td></td>
<td>While employed as a nurse, Licensee abused Percocet while on duty. Licensee obtained her supply by misappropriating the drug from the narcotic box. On 1/11/02, Licensee self-admitted into a program for chemical dependency treatment.</td>
<td></td>
</tr>
<tr>
<td>Kathy Lynne Shelton</td>
<td>RN 120475</td>
<td>Section 335.066.2 (1), (5), (12), and (14), RSMo2000</td>
<td>12/31/2002 to 12/31/2005</td>
</tr>
<tr>
<td></td>
<td></td>
<td>From 11/00 through 4/26/01, Licensee misappropriated Oxycodone for her personal consumption. On 1/14/02, Licensee was found guilty of Felony Possession of Narcotics.</td>
<td></td>
</tr>
<tr>
<td>Laura L Smith</td>
<td>RN 143403</td>
<td>Section 335.066.2 (5) and (12), RSMo2000</td>
<td>12/25/2002 to 12/25/2004</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Between 6/18-19/01, Licensee failed to document the administration and/or wastage of 7 Xanax. Between 6/18-24/31, Licensee failed to document the administration and/or wastage of 14 vials of Morphine. The Licensee violated hospital policy by not revealing that she was taking the prescription medication.</td>
<td></td>
</tr>
<tr>
<td>Misti M Soule</td>
<td>PN 055177</td>
<td>Section 335.066.2 (5) and (12), RSMo2000</td>
<td>1/18/2003 to 1/18/2004</td>
</tr>
<tr>
<td></td>
<td></td>
<td>On 2/5/02, Licensee administered 5 Vicodin between 12:45 a.m. and 4 a.m., without a physician's order and without consulting the physician.</td>
<td></td>
</tr>
<tr>
<td>Jeffrey Michael Stavron</td>
<td>PN 1999137676</td>
<td>Section 335.066.2 (1), (12), and (14), RSMo2000</td>
<td>1/31/2003 to 1/31/2007</td>
</tr>
<tr>
<td></td>
<td></td>
<td>On 2/01, Licensee admitted to being addicted to methamphetamine and was allowed to enter the employee assistance program, while in the employee assistance program, Licensee continued to consume methamphetamine, and also unlawfully possessed and consumed marijuana and opiates.</td>
<td></td>
</tr>
<tr>
<td>Nina J Taylor</td>
<td>RN 102550</td>
<td>Section 335.066.2 (5) and (12), RSMo2000</td>
<td>3/7/2003 to 3/8/2003</td>
</tr>
<tr>
<td></td>
<td></td>
<td>On 9/1/01, Licensee failed to administer treatments or document that these treatments were not done for 5 residents, which included bandage changes and ointment applications.</td>
<td></td>
</tr>
</tbody>
</table>
### Probation List cont. from pg. 19

<table>
<thead>
<tr>
<th>Name</th>
<th>License Number</th>
<th>Violation</th>
<th>Effective Date of Probation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thomas J Tucker</td>
<td>RN 098389</td>
<td>Section 335.066.2 (1), (5), (6), and (12), RSMo2000</td>
<td>2/20/2003 to 2/20/2006</td>
</tr>
<tr>
<td></td>
<td></td>
<td>On 12/31/00, while on call for the hospital’s operating room, Licensee was called in to work. Licensee had consumed alcohol at home and did respond to the hospital’s summons. The odor of alcohol was detected on the Licensee and a breath scan was positive for alcohol. Licensee sought treatment and during the aftercare program, license experienced two relapses on 5/30/01 and 10/3/01.</td>
<td></td>
</tr>
<tr>
<td>Janice D Keys-Jeffers</td>
<td>RN 089210</td>
<td>Section 335.066.2 (5), (6), and (12), RSMo2000</td>
<td>2/1/2003 to 2/1/2005</td>
</tr>
<tr>
<td></td>
<td></td>
<td>From 5/1/99 to 4/1/02, Licensee worked as a registered professional nurse and Family Nurse Practitioner with an expired registered professional nurse license.</td>
<td></td>
</tr>
<tr>
<td>Jeannette E Warren</td>
<td>PN 052772</td>
<td>Section 335.066.2 (1), (5), (12), and (14), RSMo2000</td>
<td>12/26/2002 to 12/26/2005</td>
</tr>
<tr>
<td></td>
<td></td>
<td>From 1/20/00 through 10/7/00, Licensee called in the prescriptions, Soma, Valium, Dantrium, and Lortab for her personal consumption.</td>
<td></td>
</tr>
<tr>
<td>Tammy L Wilcox</td>
<td>RN 111848</td>
<td>Section 335.066.2 (5) and (12), RSMo2000</td>
<td>2/6/2003 to 2/6/2006</td>
</tr>
<tr>
<td></td>
<td></td>
<td>From 9/99 through 6/00, Licensee, while employed as a Regional QA nurse and visiting various facilities, misappropriated from the facilities, prescription medications for her personal consumption.</td>
<td></td>
</tr>
<tr>
<td>Madeline Marie Wilks</td>
<td>RN 2000151255</td>
<td>Section 335.066.2 (5) and (12), RSMo2000</td>
<td>2/5/2003 to 2/5/2004</td>
</tr>
<tr>
<td></td>
<td></td>
<td>On 10/10/01, Licensee while working an extended shift, pre-charted entries in the patient assessments, nurse’s notes and flow sheet as far as 6 hours in advance.</td>
<td></td>
</tr>
<tr>
<td>Sheri L Wood</td>
<td>RN 138774</td>
<td>Section 335.066.2 (8), RSMo2000</td>
<td>12/31/2002 to 12/31/2005</td>
</tr>
<tr>
<td></td>
<td></td>
<td>On 8/1/01, Licensee’s license to practice as a registered professional nurse in the state of Arizona was revoked by the Arizona State Board of Nursing for violations of the Arizona Nursing Practice Act.</td>
<td></td>
</tr>
</tbody>
</table>

### REVOCATION LIST

<table>
<thead>
<tr>
<th>Name</th>
<th>License Number</th>
<th>Violation</th>
<th>Effective Date of Revocation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sharon M Hopper</td>
<td>PN 017944</td>
<td>Section 335.066.2 (2), RSMo2000</td>
<td>1/13/2003</td>
</tr>
<tr>
<td></td>
<td></td>
<td>On 9/3/02, Licensee pled guilty to attempted murder in the second degree and felonious restraint.</td>
<td></td>
</tr>
<tr>
<td>Janice D Keys-Jeffers</td>
<td>PN 052839</td>
<td>Section 335.066.2 (2), (12), and (14), RSMo2000</td>
<td>1/11/2003</td>
</tr>
<tr>
<td>Sheryl M Neumann O Fallon</td>
<td>RN 100294</td>
<td>Section 620.153, RSMo2000</td>
<td>1/1/2003</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Violated the Missouri State Board of Nursing agreement by not attending the required meetings and not submitting required documentation.</td>
<td></td>
</tr>
<tr>
<td>Valery C Richards H Oilster</td>
<td>PN 038979</td>
<td>Section 620.153, RSMo2000</td>
<td>1/1/2003</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Violated the Missouri State Board of Nursing agreement by not attending the required meetings and not submitting required documentation.</td>
<td></td>
</tr>
<tr>
<td>Michael R Starnes</td>
<td>RN 083534</td>
<td>Section 335.066.2 (1), (5), (12), and (14), RSMo2000</td>
<td>1/1/2003</td>
</tr>
</tbody>
</table>
SCHEDULE OF BOARD MEETING DATES THROUGH 2004

June 4-6, 2003  March 3-5, 2004
September 10-12, 2003  June 9-11, 2004
December 3-5, 2003  September 1-3, 2004
December 1-3, 2004

All meetings will be held at the Harry S. Truman State Office Building, 301 West High Street in Jefferson City, Missouri. Photo ID is required.

If you are planning on attending any of the meetings listed above, notification of special needs should be forwarded to the Missouri State Board of Nursing, PO Box 656, Jefferson City, MO 65102 or by calling 573-751-0681 to ensure available accommodations. The text telephone for the hearing impaired is 800-735-2966.

Dates, times and locations are subject to change. Please contact the Board office for current information.

Note: Committee Meeting Notices are posted on our web site at http://www.ded.state.mo.us/regulatorylicensing/professionalregistration/nursing

NUMBER OF NURSES CURRENTLY LICENSED IN THE STATE OF MISSOURI

As of May 5, 2003

<table>
<thead>
<tr>
<th>Profession</th>
<th>Number</th>
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<tbody>
<tr>
<td>Licensed Practical Nurse</td>
<td>22,196</td>
</tr>
<tr>
<td>Registered Professional Nurse</td>
<td>74,609</td>
</tr>
<tr>
<td>Total</td>
<td>96,861</td>
</tr>
</tbody>
</table>
DID YOU CHANGE YOUR NAME?  
DID YOU CHANGE YOUR ADDRESS?  
DID YOU NOTIFY THE MISSOURI BOARD OF NURSING?

4 CSR 200-4.020 (15)(b) (1) says in part "If a change of name has occurred since the issuance of the current license, the licensee must notify the board of the name change in writing,..." and (2) "If a change of address has occurred since the issuance of the current license, the licensee must notify the board of the address change...".

Note: Change of address forms submitted to the post office will not ensure a change of address with the Board office. Please use this form or the contact information below to notify the Board office directly of any changes.

NAME AND ADDRESS CHANGE NOTICE

1. Is this an address change?  YES  NO
2. Is this a name change?  YES  NO

RN  LPN Missouri License Number

OLD INFORMATION (please print):
First Name  Last Name
Address:  City  State  Zip Code

NEW INFORMATION (please print):
First Name  Last Name
Address (if your address is a PO Box, you must also provide a street address):  City  State  Zip Code  Telephone Number

Please provide signature:

Duplicate license instructions:
It is not mandatory that you obtain a duplicate license. You may practice nursing in Missouri as long as your Missouri nursing license is current and valid. If you wish to request a duplicate license reflecting your new name, you must return ALL current evidence of licensure (the wallet size card and wall hanging document), and the required fee of $15 for processing a duplicate license.

Is Your License Lost or Has It Been Stolen?
If you would like to obtain a duplicate license because your license has been lost or stolen, please contact our office. Request an Affidavit for Duplicate License form or you may obtain it from the LICENSURE INFO/FORMS tab on the web site at www.codedev.state.mo.us/nursing.

You may contact our office in one of the following manners:
- Internet E-mail: nursing@mail.state.mo.us (address changes only)
- Fax: 573-751-6745 or 573-751-0075
- Mail: Missouri State Board of Nursing, P.O. Box 656, Jefferson City MO 65102
- Telephone: 573-751-6601 (address changes only)