Message From the President

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

Many times I get questions as to why the Board of Nursing isn’t doing something about staffing, overtime, etc. The Board of Nursing was established to promote and protect safe and effective nursing care in the interest of public protection. It is entrusted with the legal responsibility to see that the provisions of the law are carried out effectively and serves as a policy making and planning group. The purpose of the Board is to protect the public, the trust and competency of the Missouri public protection. It is entrusted with the duty of the Registered Nurse to ensure that nurses who may have different concerns. Please email us at nursing@mail.state.mo.us with the subject line of “strategic planning issues” and share with us the things you, as licensees would like the Board to be aware of as we plan for the coming years.

This year, the Board of Nursing introduced language to change the advanced practice nurse from "recognition" to licensure. This would give a common title of APRN (Advanced Practice Registered Nurse) to all advanced practice nurses. Currently there are 4397 RNs using the various specialty titles for Advanced Practice. A common title would help with the protection of the public by being more informed to recognize a "group" of nurses as APRNs rather than the varied titles we currently use. Only one license would be required, which would include the duties of the Registered Nurse and would be renewed every two years. The only opposition testimony provided in a public hearing was by MONA.

Senator Mary Bland and Representative Sherman Parker introduced the Nurse Compact Licensure to Missouri this year. This would enable nurses to practice in other states where a part of the compact under the laws set forth (that states much like the driver’s license). It would enable our Missouri nurses to practice in other states under one license as well. In the committee public hearing, MONA provided opposition testimony and recommended a substitute of reciprocity in its place. Reciprocity would allow nurses in bordering states to practice in Missouri under their state’s license. It would not allow Missouri nurses to practice in the bordering states. The Board of Nursing has the utmost regard for Missouri nurses and are confident they will deliver safe and effective nursing practice in the state. They would choose to practice in. There are currently 20 states that are a part of the compact. This group has experienced safe and effective practice and the discipline process has been used successfully with changes made as experience is gained.

In this age of technology, nursing is crossing borders of states daily. Giving phone advice, Internet communications, etc. is a common occurrence. Practice is defined as “where the patient is” and you will need a license in any state where you give advice or consult over the phone, via Internet, etc. with a patient. By enacting the Compact, this would ensure the regulation of safe practice as our society changes. The Board supports this model to allow nurses the ability to practice in the current market and protecting the public in our state.

Please share with us your ideas and concerns as we discuss strategic initiatives and your thoughts on Compact Licensure. Only by voicing your ideas, concerns and futuristic thinking can the Board make the best, educated decisions that impact nursing.
In order to increase communication with stakeholders, the Missouri State Board of Nursing will convene an Open Forum at each board meeting. The first Open Forum will be September 11, 2003 from 8:30 to 9:00 a.m. in Room 400 of the Harry S Truman State Office Building in Jefferson City, Missouri. The Open Forum will give the public, nurses and other interested individuals the opportunity to share ideas, issues and concerns with the Board regarding nursing regulation. This time frame may increase at subsequent Board meetings depending on participation.

"Open Forums should help the Board maintain a balanced posture toward nursing regulation issues that affect nurses, employers and the general public. They should also help the Board do a better job by getting direct input from stakeholders," says Robin Vogt, President of the Missouri State Board of Nursing.

**BOARD OF NURSING OFFICERS**

Election of Board officers was held during the June 4-6, 2003 meeting. The current officers retained their positions.

Robin Vogt, PhD, RN, FNP-C, – President
Charlotte York, LPN – Vice-President
Teri Murray, PhD, RN – Secretary
Paul Lineberry, PhD was recognized for his service as the public member on the Missouri State Board of Nursing from 1996-2003. Paul was commended for his dedicated service in the protection of the public and regulation of the nursing profession.

**LEGISLATIVE UPDATE**

There were two bills introduced this year to enact the nurse licensure compact, Senate Bill 200 and House Bill 520. Neither bill passed.

Senate Bill 515 that would have eliminated the need for advanced practice registered nurses to maintain two separate licenses did not pass. This bill would have also allowed advanced practice registered nurses to obtain a temporary permit to practice until final licensure requirements were met. In the current system, advanced practice registered nurses must first secure a Missouri RN license before an advanced practice registered nurse license can be approved. This has proven to be a regulatory barrier to practice, especially in rural areas of the state.

Several bills were passed that will impact the operations of the Missouri State Board of Nursing.

**HOUSE BILL 600 – TAXATION – SIGNED BY THE GOVERNOR**

1) Requires as a condition of state government employment that all state income taxes due be filed and paid by the employee.
2) Requires a tax clearance from the Department of Revenue prior to the issuance or renewal of any professional license. This bill requires that all governmental entities issuing professional licenses, certifi-
cates, registrations, or permits provide the director of revenue with the name and social security number of each applicant for licensure within one month of the date the application is filed or at least one month prior to the anticipated renewal of a licensee’s license. If such licensee is delinquent on any state taxes or has failed to file state income tax returns in the last three years, the director of Revenue shall then send notice to each such entity and licensee. In the case of such delinquency or failure to file, the licensee’s license shall be revoked within 90 days after notice of such delinquency or failure to file, unless the director of revenue verifies that such delinquency or failure has been remedied or arrangements have been made to achieve such remedy. Tax liability paid in protest or reasonably founded disputes with such liability shall be considered paid for the purposes of this section.

**SENATE BILL 299 – PERFORMANCE-BASED BUDGETING AND SUNSET ACT – PENDING GOVERNOR SIGNATURE**

The State Budget Director must develop and implement a performance-based budgeting system that establishes goals and objectives, provides detailed measures of program and fund performance against attainment of planned outcomes, and provides for program evaluation. Requires a performance based budgeting review at least every 5 years, beginning after January 1, 2005. This bill also creates the Missouri Sunset Act. Each new program enacted into law will sunset after a period of not more than 6 years. A program may be re-authorized for a period of up to 12 years.

**HOUSE BILL 390 – ANESTHESIOLOGIST ASSISTANTS – SIGNED BY THE GOVERNOR**

This bill creates a new profession of anesthesiologist assistant under the Board of Healing Arts. Of particular note is language added which reads, “A registered nurse who has graduated from a school of nurse anesthesia accredited by the Council on Accreditation of Educational Programs of Nurse Anesthesia or its predecessor and has been certified or is eligible for certification as a nurse anesthetist by the Council on Certification of Nurse Anesthetists, and any physician, dentist, or podiatrist who is immediately available if needed.”

The Missouri State Board of Nursing has taken the position that this statute is related only to the collaborative practice agreement and does not change CRNA licensure requirements.

Listed below are bills that were truly agreed and finally passed during session. At the writing of this article, some of the bills were pending signature by the Governor.

**HOUSE BILLS TRULY AGREED AND FINALLY PASSED**

- **HB 7 - Bearden, Carl** - Appropriates money for the expenses, grants, refunds, and distributions of the Department of Economic Development, Department of Insurance, and Department of Labor and Industrial Relations. This bill includes the Board of Nursing’s budget. The Governor signed this bill on May 30, 2003.

- **HB 121 - Portwood, Dr. Charles R.** Requires health insurance carriers to include chiropractors as providers for covered conditions under basic health care coverage.

- **HB 156 - Phillips, Susan C.** - Requires informed consent at least 24 hours prior to an abortion and requires persons who perform abortions to maintain proof of financial responsibility.

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

- **HB 440 - Portwood, Dr. Charles R.** - Revises dental well-being committee. (Consent)

**SENATE BILLS – TRULY AGREED AND FINALY PASSED**

- **SB 556 - Clemens** - Includes the use of lasers within the definition of dentistry.

- **SB 0556 - Kinder** - Modifies various provisions relating to the protection of the elderly

You can view the status of bills that have been truly agreed and finally passed at [http://www.house.state.mo.us/bilis/fp/truagree.htm](http://www.house.state.mo.us/bilis/fp/truagree.htm)

**YOUR INPUT CAN MAKE A DIFFERENCE**

Since the end of session, I have received numerous calls from individuals wanting to know if the nurse licensure compact passed. Each person that I spoke to was in support of the compact. If you are in support or opposition of a bill, I urge you to voice your position to your legislators. As a licensed professional, you do have a voice in shaping the future of health care. The best decisions are made by those who are well informed. To find the legislators that represent you, go to [http://www.moga.state.mo.us](http://www.moga.state.mo.us) and select “Legislator Lookup.”

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We are pleased to announce the appointment of Linda K. Conner, BSN, RN, to the Board of Nursing. Linda has worked as a charge nurse, a recovery room and staff nurse, a director of nurses and an instructor. She is currently the DON at Scotland County Memorial Hospital and a Staff Nurse with the NOW program at Missouri University Hospital in Columbia, MO.

Linda holds April 9, 2003, the date of her confirmation as a Board member, as a most memorable day in her career. As far back as she can remember, her desire was always to become a nurse. She says, “Life leads each of us down many different pathways and mine was no exception. However, my desire to become a nurse and my will to accomplish that feat were never overcome by obstacles along the way. As a result, I learned to appreciate the different levels of nursing.” She attended and received her LPN education from Kirksville Technical Center in Kirksville, MO and obtained her LPN license in 1971. She completed her Associate Degree in Nursing in 1979 and her Associates of Arts Degree in 1993 both from Indian Hills Community College in Ottumwa, IA. In 1994 she received her Bachelor of Science in Nursing from Teikyo Marycrest University in Davenport, IA. Of her education she states, “While attending Marycrest University we were taught to envision nursing as global, an area I took great interest in but never dreamed in my career a door might open for that opportunity.”

One of the highlights in her career was in May 2000. Linda says, “I was chosen, as the first nursing instructor at Moberly Area Community College, to participate in the Missouri Consortium for Global Education (a 15 day visit exchange with Canterbury Christ Church University College in England to view their nursing program). During my time there I worked one day on a pediatric unit. The exposure to socialized medicine was an experience that made me appreciate what we have.”

Her interest in the Board of Nursing began while an instructor at Moberly Area Community College when she brought the first group of students from the ADN program to attend the Missouri State Board of Nursing hearings.

Linda has worked in several areas of nursing but as she says, “My greatest love is teaching, which I can do in any area I work and delivery of bedside nursing care to patients.” She remains active in practice as Director of Nurses at Scotland Memorial Hospital and in the NOW program at MU Hospital. She says, “Nursing is a giving and caring profession that touches many hearts not only that of the patient but also of the nurse.”

Welcome to the Board, Linda!

**Appointment of New Board Member**

**Conner**
Two Terms on the Nursing Board

By Paul Lineberry
Retiring Public Member

I have completed two terms on the Board and the time has come for me to leave. So what are my impressions after serving as a Board member?

1. There is a trade-off when a nursing license is obtained. After passing the license exam, the license is granted and the license holder is assumed to have certain basic skills and knowledge. While this license allows easy entry into the nursing profession, the employer expects (assumes) the license-holder will be competent in performing certain tasks. If it is found that this competency is lacking, a complaint may be filed and discipline be applied under the Nurse Practice Act. Thus, the trade-off: with a license, one can practice as a nurse, but the license can be sanctioned or revoked for improper conduct.

2. A deep sorrow for those who have been sanctioned or disciplined—they have worked hard to earn their licenses and for various reasons (knowledge, skills or attitudes) have failed to perform in the manner required of a license holder. The various disciplinary measures applied by the Board, hopefully, will help the person gain control of their lives again. But this can be an arduous and expensive task.

3. An awareness of the dangers of drug use. As a member of an older generation, drug use and its destructive influence on lives has been an eye-opener. I was not sure at the beginning whether there was such a thing as ‘addiction’ but I believe in it now. More importantly, casual use can lead to more destructive use, as can attempts to relieve severe pain.

4. Serving as a Public Member has been an interesting and invaluable experience. I have had an opportunity to learn about an important profession. I have learned a lot about the problems nurses face and have had a valuable personal experience. Finally I have enjoyed working with all the Board members and the staff. Both groups are extremely competent and perform a very important function.
Missouri State Board of Nursing Education Committee

Members:
- Art Bante, BSA, RN, CRNA
- Linda Conner, BSN, RN
- Teri Murray, PhD, RN, Chair
- Janet Vanderpool, MSN, RN

Intravenous Fluid Treatment Administration

The Board of Nursing’s IV Therapy Task Force began working on revising 4 CSR 200-6.010 Intravenous Fluid Treatment Administration in mid-December, 2001. This is the rule defining intravenous fluid treatment, the corresponding functions that may be performed by licensed practical nurses who are IV-Certified and those who are not, and the educational processes involved in obtaining IV-certification including requirements for those entities providing a course of study leading to IV-certification.

The IV Therapy Task Force has completed a draft of the revised rule and it was approved by the Missouri State Board of Nursing at its June 4-6, 2003 meeting. The rule is now undergoing Division and Department review. The next step will be to review the Division and Department’s comments to determine if the rule is ready to prepare for filing and publication in the Missouri Register or if the rule needs to undergo another review by the task force and board. After publishing, the public has 30 days from the date of the rule’s appearance in the Missouri Register to submit written comments. The Board of Nursing then has 60 days to review the comments and file the final order of rulemaking. The Final Order of Rulemaking is filed with the Joint Committee on Administrative Rules (JCAR), composed of state senators and representatives, who have 30 days to review the rule. The approved Final Order of Rulemaking is then filed with the Secretary of State’s Office and appears in the Missouri Register 30-45 days later. The Final Order of Rulemaking becomes effective 30 days after it appears in the Code of State Regulations. Thus, the revised rule cannot become effective until Spring, 2004 at the earliest.

Teri Murray, PhD, RN, a Board Member and Director of the Undergraduate Nursing Program, Barnes College of Nursing at the University of Missouri-St. Louis, chairs the IV Therapy Task Force Committee. The committee met as a small group to do the preliminary groundwork and draft proposed changes to be submitted to a larger group. This small group consisted of:
- Darnell Roth, RN, CRNI, LNC-President of DR Intravenous Therapy Consulting, Inc. in St. Louis;
- Mary Stassi, RNC, Health Occupations Coordinator, St. Charles Community College in St. Peters;
- Rita Tadych, PhD, RN-Practice Administrator for the Board of Nursing; and
- Marilyn Nelson, MA, RN-Education Administrator for the Board of Nursing.

The proposed draft was reviewed by the total committee which consisted of RN’s and LPN’s working in the practice and/or education arena. The committee represented various areas of the state and different types and sizes of health care facilities. The members are:
- Kathryn Cardwell, LPN-Out Patient Services Staff Nurse, St. Mary’s Health Center in Jefferson City;
- Nancy Day, LPN-ICU, Staff Nurse, Columbia Regional Hospital in Columbia;
- Lana Jinkerson, MSN, RN-Coordinator, Practical Nursing Program, Mineral Area College in Park Hills;
- Billye McCravy, BSN, RN-Director of Quality Management, St. Francis Hospital and Health Services in Maryville;
- Barbara Marcus, BSN, RN, OCN-Administrative Director of Patient Care Services, Phelps County Regional Medical Center in Rolla; and
- Lynn Ott, MSN, RN-Vice-President Patient Care Services, Fitzgibbon Hospital in Marshall.

Remember that the rule has not yet changed. The Board encourages interested parties to review the proposed rule when it is published in the Missouri Register and submit written comments. We will keep you informed of the rule and provide you with a summary of changes in subsequent newsletter articles.

Arthur L. Davis Publishing Agency Scholarship

The Arthur L. Davis Publishing Agency, Inc. is again offering $1,000 in scholarship monies to be awarded to nursing students during 2003. The Board will follow similar procedures as it did last year and select one practical and one professional nursing student to receive $500 each. Programs of nursing have been notified and nominations are due in mid-October. The recipients will be selected at the December, 2003 Board of Nursing meeting.

Education Corner

by Marilyn K. Nelson, RN, MA
Education Administrator

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Darnell and Mary are actively involved in teaching an IV Therapy course. Darnell is the primary author of the Intravenous Therapy Instructional Manual published by the Instructional Materials Laboratory at the University of Missouri-Columbia, which is the Board of Nursing approved curriculum. Darnell is an active member of the Infusion Nurses Society at both the state and national level. The proposed draft was reviewed by the total committee which consisted of RN’s and LPN’s working in the practice and/or education arena. The committee represented various areas of the state and different types and sizes of health care facilities. The members are:
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Practice Corner

by Rita Tadych, PhD, RN
Practice Administrator

Missouri State Board of Nursing Practice Committee Members
Arthur Bante, BSA, RN, CRNA
Linda Conner BSN, RN
Paul Lineberry, PhD
Janet Vanderlinden, MSN, RN, CHN
Robin Vogt, PhD, RN, FNP-C
Charlotte York, LPN

We would like to take this opportunity to thank Dr. Rita Tadych for her dedication and service to the Missouri State Board of Nursing for the last 11 1/2 years. Rita is taking a new direction in her career and has accepted a position as Assistant Professor at the St. Louis University School of Nursing. Join us as we wish Rita success in all her future endeavors. — MSBN

RECENT BOARD ACTIONS OF INTEREST TO LICENSEES

At the June 2003 Full Board meeting, three (3) Board decisions were made that may be of particular interest to licensees:

✓ After more than a year of intensive group work by Board members, staff, and licensees in the Missouri community, the Board approved an IV therapy rule draft that will eventually replace the current rule, 4 CSR 200-6.010 Intravenous Fluid Treatment Administration. The new language will carry the same rule number, 4 CSR 200-6.010, but will have a new title, Venous Access and Intravenous Infusion Treatment Modalities. The Board-approved language does not become regulation until it makes its way through the entire rulemaking process. The rulemaking process is outlined on the Board of Nursing Website within the FOCUS ON PRACTICE button under “Differentiating Statute from Rule.” There is a step within the process that allows written, public comments. At that time, your review of the proposed rule and your submission of written comments will be welcomed by the Board.
✓ The Board approved the following with regard to the authorized scope of practice of Board-recognized pediatric nurse practitioners:
  - The Board reviewed past published materials and relevant past specific decisions and decided that pediatric nurse practitioners may provide services to the following individuals:
    - appropriate specialized knowledge, education, skills, training, judgment, and experience to provide health care services to the individual competently and safely, AND
    - Any collaborating physician’s health care activities include care of individuals from birth to age 21, then a pediatric nurse practitioner may provide services to individuals from birth through adolescence, when cessation of growth normally occurs.

Service to One (1) Board-recognized certifying body in circumstances where more than one (1) Board-accepted certifying body is available for the same clinical nursing specialty area and role (e.g., FNP, ANP, PNP).
- Aside from other rule requirements, such as new graduates sitting for the first available certification examination, licensees will have the ability to choose whichever Board-accepted certifying body they would like to tie to their Board recognition.

ADvanced practice nurses in Missouri

Given ongoing inquiries concerning the background of advanced practice nurses in Missouri, I have prepared the following general information as it may pertain to licensees recognized by the Missouri State Board of Nursing to title and practice in Missouri within the advanced practice nurse roles of nurse anesthetist, nurse midwife, nurse practitioner, and clinical nurse specialist.
You are also strongly encouraged to review additional, specific information at the Board’s Website within the ADVANCED PRACTICE button.

Practice cont. on pg. 8

Education
- Completion of a formal basic nursing education program (4 year baccalaureate degree, 3 year diploma, 2 year associate degree), that includes nursing theory and clinical nursing practice leading to licensure as a registered professional nurse, AND
  - Completion of a:
    - Formal post-basic nursing education program from or formally affiliated with an accredited college or university of at least 1 year in length with a concentration in an advanced practice nursing clinical specialty area that includes advanced nursing theory and clinical nursing practice, OR
    - Master’s degree or post-master’s certificate from an accredited college or university with a concentration in an advanced practice nursing clinical specialty area that includes advanced nursing theory and clinical nursing practice. A master’s degree or post-master’s certificate is the most frequent education program completed and is required for graduate status recognition by the...
Missouri State Board of Nursing

Practice cont. from pg. 7

Some advanced practice nurses also have Doctorates.
Total formal education may be up to 7 or more years.

Experience
• Many applicants to advanced practice nursing education programs will have practiced as registered professional nurses having cared for different patient populations in various clinical settings for varying number of years.

Board of Nursing-approved certifying bodies have eligibility criteria that include advanced nursing education program requirements (e.g., theory and clinical practice).

Collaboratively with physicians pursuant to 334.104.2 RSMo and 4 CSR 200-4.200, providing delegated medical services within their advanced practice clinical nursing specialty area and role.

Autonomously as registered professional nurses pursuant to 335.016 (10) RSMo, providing nursing services within their advanced practice clinical nursing specialty area and role, AND

Recertification eligibility criteria that include continuing education and clinical nursing practice requirements.

When a rule/regulation reference is made in the response to a question, you may go to the following Website to review the particular rule/regulation under Code of State Regulations (left side of screen): www.osa.state.mo.us

A: No. Individuals who contact the Board office with questions about securing CEUs for programs they want to offer nurses in Missouri are advised to contact the Missouri Nurses Association at 573-636-4623.

Q: Does the Missouri State Board of Nursing award continuing education units (CEUs)?
A: No. Pursuant to the statute, 335.016 (9) RSMo, permitting the individual to title and be in position and practice as an advanced practice nurse may take at least three (3) months because a current RN license (not a temporary permit) is required before the advanced practice nurse application can be approved, presuming all required application evidence has been submitted. Generally, it is the fingerprint checking process that accounts for this time involvement factor.

Q: I am recognized by the Board as an advanced practice nurse but I could not find my current "Document of Recognition" when my employer asked to see it. How do I obtain a duplicate one?
A: There is a "Form for Duplicate Document of Recognition" at the Board Website within the ADVANCED PRACTICE button.

Q: I live in Missouri. Can I use "RN" or "LPN" after my name if I have placed my Missouri license on inactive or if I have allowed my Missouri license to lapse?
A: No. Pursuant to the statute, 335.076 RSMo, individuals must hold a current nursing license to use the titles "registered professional nurse" or "licensed practical nurse" and the abbreviations "RN" or "LPN".

Q: I am a LPN licensed in Missouri and am employed by a pharmacist. Is my practice as a LPN covered since I am working under the pharmacist’s direction and supervision?
A: No. Pursuant to the statute, 335.016 (9) RSMo, performance of selected acts for the promotion of health and in the care of persons who are ill, injured, or experiencing alterations in normal health processes provided by a LPN shall be given under the direction of a person licensed by a state regulatory board to prescribe medications and treatments or under the direction of a registered professional nurse. If you wish to assist the pharmacist in the practice of pharmacy as a pharmacy technician, you must apply to the Missouri Board of Pharmacy for registration as a pharmacy technician (338.013 RSMo).

Q: I am a LPN licensed in Missouri and work evenings or nights in a long term care facility. Since my license requires that I perform nursing care under the direction of, in this case, a registered professional nurse, must she/he be physically present in the facility when I am working?
A: In the statute, 335.016 (9) RSMo, it states: "When practicing nursing care is delivered pursuant to a license personed by a state regulatory board to prescribe medications and treatments or under the direction of a registered professional nurse, such care may be delivered by a licensed practical nurse without direct physical oversight." It is the responsibility and accountability of the LPN and the supervising RN to make reasonable, defensible, and prudent nursing judgments and take reasonable, defensible, and prudent nursing actions within their respective licensure authorities; specialized knowledge, education, skills, training, and experience; and within their supervisory relationship.

Q: What is the time involvement for advanced practice nurse recognition if the applicant does not have a current RN license (not a temporary permit) in Missouri, such as might be the case if the individual is moving to Missouri for employment in an advanced practice nurse position?
A: Although issuance of a temporary RN license will permit the individual to title and be in position and practice as a registered professional nurse in Missouri, the issuance of an advanced practice nurse "Document of Recognition" to title and be in position and practice as an advanced practice nurse may take at least three (3) months because a current RN license (not a temporary permit) is required before the advanced practice nurse application can be approved, presuming all required application evidence has been submitted. Generally, it is the fingerprint checking process that accounts for this time involvement factor. Prospective employers should make sure out-of-state advanced practice nurse job applicants quickly begin the RN license endorsement process, along with completing the advanced practice nurse application.

Q: Many applicants to advanced practice nursing education programs will have practiced as registered professional nurses having cared for different patient populations in various clinical settings for varying number of years. Board of Nursing-approved certifying bodies have eligibility criteria that include continuing education and clinical nursing practice requirements.

Practice nursing judgments and take reasonable, defensible, and prudent nursing judgments and take reasonable, defensible, and prudent nursing actions within their respective licensure authorities; specialized knowledge, education, skills, training, and experience; and within their supervisory relationship.

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APN RECOGNITION SUMMARY STATE OF MISSOURI 08/05/2003*

CLINICAL NURSE SPECIALISTS 441*
• Pediatric 026
• Perinatal 005
• Gerontological 031
• Community Health 004
• Mental Child 005
• Advanced Oncology 025
• Medical-Surgical 171
• Adult Psychiatric/Mental Health 140
• Child/Adolescent Psychiatric/Mental Health 029
• Advanced Diabetes Management 001
• Adult Acute & Critical Care 004

NURSE ANESTHETISTS 1248*

NURSE MIDWIVES 093*

NURSE PRACTITIONERS 2547*
• Adult 401
• Advanced Oncology 002
• Family 1287
• School 0
• Neonatal 126
• Acute Care 039
• Pediatric 335
• Gerontological 093
• Family Psychiatric/Mental Health 004
• Women’s Health 245
• Adult Psychiatric/Mental Health 013
• Psychiatric Mental Health 002

TOTAL NUMBER OF RECOGNITIONS: 4329*

NOTE: Earliest recognition date was September1996
*Numbers of recognitions change monthly.

New actual number of recognitions may be less: (a) if continued recognition requirements have not been met before 'Document of Recognition' expiration date; or (b) if application does not permit the individual being recognized in more than one specialty area and/or role
UTILIZING DISCIPLINARY INFORMATION

As part of their role in protection of the public the Missouri State Board of Nursing publishes in their quarterly Newsletter the names of licensees who have had their nursing license disciplined. Additional information included are the Findings of Fact, which identifies the behaviors that resulted in disciplinary action being taken on the nurses’ license and the numbers (1) through (15) that identify the grounds for and/or portion of the Nursing Practice Act that was violated.

The Board is provided the ability to publish disciplinary information pursuant to Section 620.010.14 (7) RSMo and does so as one method of promotion of public safety for the general public, nursing colleagues and employers of nurses.

I believe that the utilization of this information can and should be carried out by the readers of the Newsletter in a manner and spirit that is professional, appropriate and proactive. The events, which led to discipline, fall into a variety of categories. For the purposes of this article, we will take a look at the educative value of the information in two frequently seen categories in which discipline is taken, practice issues and chemical dependency.

In the category of nursing practice, I have been informed by colleagues on several occasions that the information provided regarding such an event is an excellent teaching tool for student nurses as well as nurses who are currently licensed. The information contained in the Newsletter may give rise to nurses taking immediate corrective action in a behavior that he/she is currently engaged in thereby protecting the nurses’ patient(s).

Additionally, those individuals who are instructing or precepting students or recent graduates can utilize the information as examples of real world events that face nurses every day and use this opportunity for discussion to identify different methods of addressing issues.

Disciplined licensees have often told me that the critical event, which resulted in disciplinary action, have sometimes occurred because the individual did not listen to that ‘inner voice’ that would have given them pause to what action he/she was about to take thereby making a different choice. However, a poor choice was then made in the name of time, misjudgment, a perceived lack of colleague/administrative support or other circumstances and the ‘inner voice’ was ignored resulting in the critical event.

The second category of events we will look at involves the misuse/abuse of chemicals; these situations give rise to educative opportunities for the readers of the Newsletter. One opportunity is an occasion for introspection and evaluation of one’s own habits relative to the misuse/abuse of chemicals. Also, the events can motivate the reader to learn about the disease of chemical dependency, utilizing the information as an opportunity for self-growth and a deeper understanding of our nursing colleagues who wrestle with the demon of addiction. The information also provides an opportunity to reiterate the importance of strict policies regarding documentation and procedures relative to controlled substances. Learning of events involving the misuse of chemicals should not be an occasion that gives rise to finger pointing or grapevine telegraphing but rather an opportunity for learning as well as an opportunity to provide support to the recovering nurse.

In conclusion, I believe that it is valuable for the readers to know that the behaviors and critical event(s) that result in discipline of a nursing license knows no boundary in practice venues, educational background, nursing roles and any number of years in practice. I do not believe that any one whose name appears in the Newsletter could have conceived at the beginning of their career that an event(s) would take place that could place his/her nursing license in jeopardy or compromise patient care. Feelings of shame, sadness and regret are often expressed by those whose license has been disciplined, not for getting caught, but for their perceived ‘black mark’ on their license and their profession. It is said that hindsight is 20/20 – let’s make our nursing vision 20/20.
Missouri State Board of Nursing Licensure Committee

Members:
Teni A. Murray, PhD, RN
Kay Thurston, ADN, RN
Robin Vogt, PhD, RN, FNP-C
Charlotte York, LPN

FEE INCREASE
Effective September 1, 2003, applicants for a license by examination or endorsement will be assessed an additional $16.00. This increase is due to the following:

1) Federal Bureau of Investigation (FBI) will increase their fee from $22.00 to $24.00 for a background check.
2) Missouri State Highway Patrol will begin charging $14.00 for the Missouri background check. The Missouri State Highway Patrol did not charge for background checks previously.

лектee/applicant's date of birth or social security number.

RN LICENSES EXPIRED APRIL 30, 2003
All RN licenses expired April 30, 2003. Licensees will now have to complete a RN Petition to Renew and pay the penalty fee of $50.00 and current $80.00 renewal fee to renew his/her license. If a licensee is currently working on a lapsed RN license they must cease practicing immediately until their Missouri RN License is renewed. Please contact our office at 573-751-0681 or by email at nursing@mail.state.mo.us for instructions on how to renew.

RN RENEWAL UPDATE
75,499 2003/2005 RN Renewals were mailed.
69,531 2003/2005 RN Renewals were approved.
Total of 91% RNs renewed - a 4.95% increase from the 2001/2003 renewal period.

LICENSE RENEWAL FOR DEPLOYED MILITARY PERSONNEL
State statute 41.950 states:
“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 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 sixty 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.

VERIFY LICENSES AND CURRENT DISCIPLINE ON-LINE
You can verify a nursing license at www.ecoders.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, suspended or no license issued);
• License certifications and dates (e.g. IV Certified);
and
• Disciplinary action taken against a licensee (i.e. suspension, probation, 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.
Licensure cont. from pg. 10

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/legislative/licensing/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 Division of Aging 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 number which is not public information and therefore cannot be verified by our office unless we are provided with a signed release from the licensee/applicant.

If you have a list of nurse licenses that you would like verified, you can send the list to our office 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 the license was issued 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) 751-6745 or (573) 751-0075
• Phone at (573) 751-0681
• e-mail at nursing@mail.state.mo.us

ON-Line License Search at www.ecodev.state.mo.us/pr

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
Summary of Actions - June 2003 Board Meeting

Administrative Matters

Elections
The following individuals were re-elected for the 2003-2004 year as officers of the Board of Nursing:
- Robin Vogt, PhD, RN, FNP-C – President
- Charlotte York, LPN – Vice-President
- Terri Murray, PhD, RN – Secretary

Requests
Request for support to have NCLEX® tests given in foreign countries from International Recruiting. The Board does not oppose offering the NCLEX® in foreign countries.

Open Forums
To increase communication with stakeholders an open forum will be scheduled at each Board meeting. The September 2003 forum will be on September 11 from 8:30 to 9:00 a.m.

Board of Nursing Seminars
The Board of Nursing will be conducting Nursing Seminars in conjunction with Missouri League for Nursing in February or March 2004. More information will be provided in upcoming issues.

Education Matters

Student Enrollment Changes
- Franklin Technology Center, Practical Nursing Program #17-195 request to increase student enrollment from 27 to 32 was approved.
- Kirksville AVTS, Practical Nursing Program #17-186 request to increase student enrollment from 24-27 was approved.
- Missouri Western State College, Baccalaureate Degree Nursing Program #17-502 request to increase student enrollment from 40 per class to 50 per class was approved.
- Ozarks Technical Community College, Practical Nursing Program #17-198 request to increase student enrollment on a one time basis only to 40 students for the class scheduled to graduate in December 2003 was approved.
- South Central Career Center, Practical Nursing Program #17-177 request to reduce class to one a year beginning in January 2004 was approved with enrollment of 31 students per class.

Curriculum Changes
- Sanford Brown College, Practical Nursing Program #17-104/St. Charles campus request to make curriculum changes and start 40 nursing students every other quarter instead of starting 50 nursing students twice a calendar year was approved.

The following items were reviewed and accepted:
- Reports of Five-year on-site visits
- 2002 Annual Reports – Practical Nursing Programs
- IV Therapy Annual Reports

Proposals
- Columbia College request to add a generic track and make curriculum changes to current ADN program was given initial approval pending site visit.

- Lebanon Technology and Career Center request to establish a practical nursing program in Lebanon, MO was given initial approval pending site visit.
- Southwest Missouri State University/West Plains request to establish an ADN Outreach Program in Branson was given initial approval pending site visit.

IV Therapy Revision Rule
Rule revision was approved.

Discipline Matters
The Board held 12 disciplinary hearings and 6 violation hearings.
The Discipline Committee reviewed 143 RN cases, 92 PN cases, 11 Litigation items and 43 disciplined licensee meeting reports.

Licensure Matters
The Licensure committee reviewed 35 applications.
Results of reviews as follows:
- Applications approved – 18
- Applications approved with probated licenses – 6
- Applications tabled – 6
- Applications denied - 5

Practice Matters
The Practice Committee addressed 6 open items and 2 closed items. Review of draft of new LPN IV Therapy Rule was conducted. Graduate and certified status advanced practice nurse application and recognition processes were reviewed and new Board guidelines were identified. Pediatric nurse practitioner scope of practice was delineated. A specific question regarding a registered nurse anesthetist’s scope of practice with postoperative femoral nerve blocks was answered.
Nurses Have the Opportunity to Help Develop the NCLEX® Examination

The National Council of State Boards of Nursing (NCSBN) is responsible for developing the NCLEX-RN® and NCLEX-PN® licensing examinations by utilizing contributions from nurse clinicians and educators. NCSBN encourages all nurses to become involved in the development of the exams by participating in the item (question) development program. Qualifications for participation are listed below.

Serving on an NCLEX® item writing or review panel is an excellent opportunity to network with nurses from across the country, contribute to continuing excellence in nursing practice, and build new skills that are useful for professional growth.

Item development sessions are held throughout the year and include the item writing and item review panels. Item writing panelists are responsible for creating new test items that may later appear on one of the exams. Item review panelists examine both newly created and older items to help decide if the items are current and relevant to entry-level nursing practice.

All item development panels are held in Chicago, Illinois, and generally last 3-4 consecutive days. Panelists stay downtown in a deluxe hotel surrounded by the shopping and theater districts. Most travel and food expenses are covered and new panelists receive more than 30 CEUs for their participation.

For more information about the NCLEX item development program or to receive an application for the item development panels please call the NCSBN item development hotline at 312-525-3775 or visit our Web site at www.ncsbn.org.

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### ITEM WRITERS

Item writers create the multiple-choice questions, or items, used for the NCLEX, examination. To qualify, you must be:

1) Currently licensed in the jurisdiction where you practice.

2) A registered nurse (RN) with a master’s or higher degree (for NCLEX-RN, exam) or a licensed practical/vocational nurse (LPN/VN) or RN (for NCLEX-PN, exam.)

3) Responsible for teaching basic/undergraduate students in the clinical area OR currently employed in clinical nursing practice AND working directly with nurses who have entered practice within the last 12 months.

LPN/VNs who plan to take the NCLEX-RN examination within two years of service with NCSBN do not qualify for participation.

### ITEM REVIEWERS

Item reviewers review the items that are created by item writers. To qualify, you must be:

1) Currently licensed in the jurisdiction where you practice.

2) An RN (for NCLEX-RN, exam) or an LPN/VN or RN (for NCLEX-PN, exam.)

3) Currently employed in clinical nursing practice AND working directly with nurses who have entered nursing practice during the past 12 months.

LPN/VNs who plan to take the NCLEX-RN examination within two years of service with NCSBN do not qualify for participation.
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>Michelle Elaine</td>
<td>PN 2003012236</td>
<td>Section 335.066.1 and 2 (2), RSMo 2000 On 2/7/02, Licensee pled guilty to one count of using telephones in facilitating the commission of distribution and conspiracy to distribute and possess with the intent to distribute cocaine base, cocaine, and marijuana.</td>
<td>6/6/2003 to 6/6/2008</td>
</tr>
<tr>
<td>Portalatin</td>
<td></td>
<td></td>
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<tr>
<td>Florissant, MO</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Debra A Wisdom</td>
<td>RN 133750</td>
<td>Section 335.066.1 and 2 (1), (5), (8), (12), and (14), RSMo 2000 Licensee was licensed by the Oklahoma Board of Nursing (Oklahoma Board) as a registered professional nurse, License No. RO006303. On 1/28/99, the Oklahoma Board issued a Stipulation, Settlement and Order whereby the Licensee agreed to enter the Peer Assistance Program. The discipline was based on Licensee's repeated misappropriation of Demerol and Morphine from 9/1/98 through 12/31/98 for her own personal use.</td>
<td>6/6/2003 to 6/6/2008</td>
</tr>
<tr>
<td>Paula, KS</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
# CENSURED LIST

<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>Irma L. Brumfield</td>
<td>RN 072722</td>
<td>Section 335.066.2 (5) and (12), RSMo 2000 From April or May 2001 until September 2001, Licensee did not properly store and discard Camptosar on 2 to 4 occasions and Anzemet, on 1 occasion.</td>
<td>4/15/2003</td>
</tr>
<tr>
<td>Christine L Gilmer</td>
<td>RN 120584</td>
<td>Section 335.066.2 (5), (6), and (12), RSMo 2000 From 10/1/99 through 10/00, Licensee practiced as an advanced practice nurse without recognition from the Missouri State Board of Nursing.</td>
<td>4/18/2003</td>
</tr>
<tr>
<td>Catherine J Griffin</td>
<td>RN 072644</td>
<td>Section 335.066.2 (5), (6), and (12), RSMo 2000 From 7/1/01 through 8/02, Licensee practiced as an advanced practice nurse without recognition from the Missouri State Board of Nursing.</td>
<td>4/25/2003</td>
</tr>
<tr>
<td>Ramona C Herren</td>
<td>RN 126091</td>
<td>Section 335.066.2 (5) and (12), RSMo 2000 On 3/21/01, Licensee altered a prescription for Histusin HC cough syrup by changing the amount of authorized refills; the physician had ordered no refills. On 3/25/01, Licensee, after receiving a prescription from her physician for 12 Vicodin with no refills, altered the prescription indicating the prescription could be refilled.</td>
<td>3/20/2003</td>
</tr>
<tr>
<td>Jane A Hicks</td>
<td>RN 073796</td>
<td>Section 335.066.2 (6) and (14), RSMo 2000 While practicing as a pediatric nurse practitioner, on 3/22/01, Licensee wrote a prescription for Fiorinal a controlled substance. Neither registered professional nurses nor advanced practice nurses may prescribe controlled substances.</td>
<td>6/6/2003</td>
</tr>
<tr>
<td>Janice M Jones</td>
<td>PN 034903</td>
<td>Section 335.066.2 (1), (2), (5), and (12), RSMo 2000 On 3/21/02, Licensee pled guilty to DWI-Drug Intoxication. On 4/3/01, Licensee submitted to a drug screen, which was positive for Marijuana.</td>
<td>4/2/2003</td>
</tr>
<tr>
<td>Diane H Mackler</td>
<td>PN 057052</td>
<td>Section 335.066.2 (6) and (12), RSMo 2000 From 6/3/00 through 10/3/01, Licensee practiced as a licensed practical nurse on a lapsed license.</td>
<td>5/2/2003</td>
</tr>
<tr>
<td>Larry K Meyers</td>
<td>RN 081956</td>
<td>Section 335.066.2 (5), (6), and (12), RSMo 2000 From 8/1/01 through 7/30/02, Licensee practiced as a nurse anesthetist without recognition from the Missouri State Board of Nursing.</td>
<td>4/29/2003</td>
</tr>
<tr>
<td>Karen J Poc</td>
<td>PN 043889</td>
<td>Section 335.066.2 (5), (12), and (15), RSMo 2000 While employed as a home health nurse, Licensee submitted documentation to her employer for payment indicating that she had provided 4 hours of service to a patient on each of 12 days in May 2001; the patient was hospitalized during this period and did not receive any care from Licensee. On 7/30/02, Licensee was placed on the Department of Health and Senior Services Employment Disqualification list.</td>
<td>5/28/2003</td>
</tr>
<tr>
<td>Dana J Ruzicka</td>
<td>RN 139250</td>
<td>Section 335.066.2 (12), RSMo 2000 On 4/25/01, Licensee submitted to a drug screen, which tested positive for the presence of Cannabinoids.</td>
<td>4/12/2003</td>
</tr>
<tr>
<td>Dorothy E Tippett</td>
<td>PN 026326</td>
<td>Section 335.066.2 (5) and (12), RSMo 2000 On 1/18/02, Licensee entered a patient's room and forcibly removed a protective undergarment, which the patient was wearing. Licensee subsequently refused the patient use of the garment. On 1/18/02, Licensee failed to conduct any assessments of a patient during her shift.</td>
<td>6/11/2003</td>
</tr>
<tr>
<td>Patricia Ann Townsend</td>
<td>PN 040834</td>
<td>Section 335.066.2 (5), (6), and (12), RSMo 2000 From 2/20/01 through 6/3/02, Licensee practiced as a licensed practical nurse on a lapsed license.</td>
<td>5/31/2003</td>
</tr>
<tr>
<td>Wanda D Trotter</td>
<td>RN 052260</td>
<td>Section 335.066.2 (5), (6), and (12), RSMo 2000 Licensee practiced as an advanced practice nurse without recognition from the Missouri State Board of Nursing from 5/01 through 8/02.</td>
<td>3/25/2003</td>
</tr>
</tbody>
</table>
## 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>Cynthia Rae Allen</td>
<td>PN 050835</td>
<td>Section 620.153, RSMo 2000 - Licensee violated the terms of her disciplinary agreement by not attending scheduled meetings and by not submitting required documentation.</td>
<td>4/18/2003 to 4/18/2008</td>
</tr>
<tr>
<td>Linda S Askew</td>
<td>PN 041521</td>
<td>Section 355.066.2 (1), (5), (12), and (14), RSMo 2000 - Prior to 1/30/02, Licensee unlawfully possessed and consumed Marijuana and Cocaine. On 1/30/02, Licensee consumed her prescription Vicodin and Xanax prior to reporting to work. Licensee fraudulently called in a prescription for Lortab without physician authorization.</td>
<td>4/19/2003 to 4/19/2006</td>
</tr>
<tr>
<td>Steven J Baechle</td>
<td>RN 091431</td>
<td>Section 355.066.2 (1), (5), (12), and (14), RSMo 2000 - In 1/01, on 3 occasions, Licensee appeared at the home of a patient and misappropriated Oxycodone under the pretense of going over the patient's medications. In 12/01, Licensee relapsed on Ultram.</td>
<td>4/9/2003 to 4/9/2008</td>
</tr>
<tr>
<td>Christy Bidwell</td>
<td>PN 1999140556</td>
<td>Section 355.066, (6), RSMo 2000 - Kansas's nursing license was revoked 4/7/02 for violating facility policy regarding treatment of residents.</td>
<td>6/11/2003 to 6/11/2005</td>
</tr>
<tr>
<td>Hether Marie Bosworth</td>
<td>PN 1999140557</td>
<td>Section 355.066.2 (5) and (12), RSMo 2000 - On 4/17/02, Licensee failed to obtain a second signature attesting to the wastage of 5 mg of Ativan. On 4/22/02, Licensee failed to obtain a second signature attesting to the wastage of a Phenobarbital tablet. On 4/22/02, Licensee documented administering a noon dosage of .25 mg Ativan to a patient that did not have physician orders for a noon dosage. Licensee's noon charting was done after the evening nurse had already documenting administering the 5 pm dosage.</td>
<td>6/11/2003 to 6/11/2004</td>
</tr>
<tr>
<td>Nancy J Burkett</td>
<td>RN 069315</td>
<td>Section 621.110, RSMo 2000 and Section 355.066.3, RSMo 2000 - In 2/99, Licensee attempted to obtain Dilaudid by writing a telephone order for a patient; the physician had not authorized an order for this patient. Licensee failed to document receipt of a sealed box of 10 Dilaudid injectables.</td>
<td>4/18/2003 to 4/18/2006</td>
</tr>
<tr>
<td>Patricia L Delius</td>
<td>PN 052078</td>
<td>Section 355.066.2, (5) and (12), RSMo 2000 - On 9/30/01, Licensee received a telephone order for a patient with instructions to call the patient's pharmacy with discharge medication. Licensee failed to call the pharmacy as ordered. Licensee's discharge summary for the patient contained so many abbreviations it was confusing to the patient and patient's family. On 9/29/01, Licensee failed to administer a dose of Flagyl 500 mg at 18:00 as ordered by the patient's physician, but charted it as administered. On 10/10/01, Licensee removed a patient's IV site prior to administration of antibiotic, necessitating another IV stick for a saline lock. On 10/22/01, Licensee saline locked a patient's IV instead of continuing fluids. On 10/23/01, Licensee discontinued the IVPB Peptic instead of the fluids on a patient with physician orders to discontinue IV fluids.</td>
<td>5/28/2003 to 5/28/2005</td>
</tr>
<tr>
<td>Judith A Duncan</td>
<td>RN 038032</td>
<td>Section 355.066.2 (5) and (12), RSMo 2000 - On 11/10/00, Licensee did not notify the nurse on call or the physician that she was unable to start an IV as ordered by the physician. Licensee did not notify the physician, as ordered, of the same resident's continuing worsening condition.</td>
<td>4/29/2003 to 4/29/2005</td>
</tr>
<tr>
<td>Joseph Ronald Faries</td>
<td>RN 2000164881</td>
<td>Section 355.066.2 (5) and (12), RSMo 2000 - Licensee charted that he administered Morphine to the patient at 2130; however, the patient was pronounced dead at 2119. He later changed the time of the last dose on the narcotic sheet to 2110. Licensee signed for 7 tablets of Morphine for a resident when resident's orders were for 1 tablet every 8 hours. Licensee charted that he passed Demerol to a resident when the licensee was not on the work schedule and not in the facility. Licensee did not properly assess a resident and did not properly document assessment performed.</td>
<td>5/21/2003 to 5/21/2008</td>
</tr>
</tbody>
</table>

Probation cont. on pg.18
## 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>Terri L Flynn</td>
<td>RN 143606</td>
<td>Section 335.066.2 (1), (5), (12), and (14), RSMo 2000</td>
<td>4/12/2003 to 4/12/2005</td>
</tr>
<tr>
<td>Denise L Graves</td>
<td>RN 124599</td>
<td>Section 335.066.2 (5) and (12), RSMo 2000</td>
<td>2/21/2003 to 2/21/2008</td>
</tr>
<tr>
<td>Jason E Irwin</td>
<td>PN 052533</td>
<td>Section 335.066.2 (1), (2), (5), (12), and (14), RSMo 2000</td>
<td>6/6/2003 to 6/6/2005</td>
</tr>
<tr>
<td>Frances A Manning</td>
<td>RN 065362</td>
<td>Section 620.153, RSMo 2000</td>
<td>4/18/2003 to 4/18/2005</td>
</tr>
<tr>
<td>Emma J Maudlin</td>
<td>RN 141028</td>
<td>Section 335.066.2 (5) and (12), RSMo 2000</td>
<td>3/25/2003 to 3/25/2004</td>
</tr>
<tr>
<td>Tina M Meade</td>
<td>PN 089404</td>
<td>Section 335.066.2 (5) and (12), RSMo 2000</td>
<td>4/1/2003 to 4/1/2004</td>
</tr>
<tr>
<td>Denise E Mining</td>
<td>RN 112056</td>
<td>Section 335.066.2 (1), (5), (12), and (14), RSMo 2000</td>
<td>5/21/2003 to 5/21/2006</td>
</tr>
<tr>
<td>Glorera Muhammad</td>
<td>RN 061877</td>
<td>Section 621.100, RSMo 2000 and Section 335.066.3, RSMo 2000</td>
<td>4/18/2003 to 4/18/2005</td>
</tr>
<tr>
<td>Robert Scott Province</td>
<td>RN 2001002261</td>
<td>Section 335.066.2 (5) and (12), RSMo 2000</td>
<td>5/21/2003 to 5/21/2004</td>
</tr>
<tr>
<td>Kelly Settles</td>
<td>RN 108345</td>
<td>Section 335.066.2 (1), (5), (12), and (14), RSMo 2000</td>
<td>4/17/2003 to 4/17/2005</td>
</tr>
<tr>
<td>Chad Michael Shauns</td>
<td>RN 2000160158</td>
<td>Section 335.066.2 (1), (5), (12), and (14), RSMo 2000</td>
<td>6/7/2003 to 6/7/2006</td>
</tr>
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### 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>Tanya L Smith</td>
<td>RN 083601</td>
<td>Section 335.066.2 (1), (5), (12), and (14), RSMo 2000</td>
<td>5/10/2003 to 5/10/2006</td>
</tr>
<tr>
<td>Tracy L Smith</td>
<td>PN 051675</td>
<td>Section 621.110, RSMo 2000 and 335.066.3, RSMo 2000</td>
<td>4/18/2003 to 4/18/2006</td>
</tr>
<tr>
<td>Jeannine Spencer</td>
<td>RN 100523</td>
<td>Section 335.066.2 (1), (5), and (12), RSMo 2000</td>
<td>5/2/2003 to 5/2/2005</td>
</tr>
<tr>
<td>Janette L Sturma</td>
<td>RN 072829</td>
<td>Section 335.066.2 (1), (12), and (14), RSMo 2000</td>
<td>6/6/2003 to 6/6/2005</td>
</tr>
<tr>
<td>Barbara J Ten Eyck</td>
<td>RN 106658</td>
<td>Section 335.066.2 (5) and (12), RSMo 2000</td>
<td>5/20/2003 to 5/20/2007</td>
</tr>
<tr>
<td>Matthew S Wallace</td>
<td>PN 053147</td>
<td>Section 620.153, RSMo 2000</td>
<td>4/18/2003 to 4/18/2005</td>
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</table>

### SUSPENSION/PROBATION LIST

<table>
<thead>
<tr>
<th>Name</th>
<th>License Number</th>
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<th>Effective Date of Suspension/Probation</th>
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</thead>
</table>
## REVOKED 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>Pamela M Bell</td>
<td>RN 103767</td>
<td>Section 335.066.2 (2), RSMo 2000</td>
<td>4/8/2003</td>
</tr>
<tr>
<td>Ericka L Di Re</td>
<td>RN 100375</td>
<td>Section 335.066.2 (2), RSMo 2000</td>
<td>4/8/2003</td>
</tr>
<tr>
<td>Jennifer A Galler</td>
<td>PN 035937</td>
<td>Section 335.066.2 (1), (5), (12), and (14), RSMo 2000</td>
<td>6/4/2003</td>
</tr>
<tr>
<td>Alice Fawn Garrett</td>
<td>PN 030103</td>
<td>Section 335.066.2 (2), RSMo 2000</td>
<td>4/17/2003</td>
</tr>
<tr>
<td>Michael F Stevenson</td>
<td>PN 035739</td>
<td>Section 335.066.2 (2), RSMo 2000</td>
<td>5/10/2003</td>
</tr>
<tr>
<td>Ruth A. Topel</td>
<td>PN 058704</td>
<td>Section 335.066.2 (2), RSMo 2000</td>
<td>5/10/2003</td>
</tr>
<tr>
<td>Renee L. Vahey</td>
<td>RN 103075</td>
<td>Section 621.110, RSMo2000 and Section 335.066.3, RSMo 2000</td>
<td>4/18/2003</td>
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</table>

## VOLUNTARY SURRENDER*

<table>
<thead>
<tr>
<th>Name</th>
<th>License Number</th>
<th>Effective Date of Voluntary Surrender</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pamela M Bell</td>
<td>RN 103767</td>
<td>4/8/2003</td>
</tr>
<tr>
<td>Ericka L Di Re</td>
<td>RN 100375</td>
<td>4/8/2003</td>
</tr>
<tr>
<td>Alice Fawn Garrett</td>
<td>PN 030103</td>
<td>4/17/2003</td>
</tr>
<tr>
<td>Michael F Stevenson</td>
<td>PN 035739</td>
<td>5/10/2003</td>
</tr>
</tbody>
</table>

*Surrender is not considered a disciplinary action under current statutes.
NUMBER OF NURSES CURRENTLY LICENSED IN THE STATE OF MISSOURI
As of August 7, 2003

<table>
<thead>
<tr>
<th>Profession</th>
<th>Number</th>
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</thead>
<tbody>
<tr>
<td>Licensed Practical Nurse</td>
<td>22,574</td>
</tr>
<tr>
<td>Registered Professional Nurse</td>
<td>72,675</td>
</tr>
<tr>
<td>Total</td>
<td>95,249</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 the form or contact information below to notify the board office directly of any changes.

<table>
<thead>
<tr>
<th>NAME AND ADDRESS CHANGE NOTICE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Is this an address change? □ YES □ NO</td>
</tr>
<tr>
<td>2. Is this a name change? □ YES □ NO</td>
</tr>
<tr>
<td>Missouri License Number</td>
</tr>
<tr>
<td>☐ RN ☐ LPN</td>
</tr>
</tbody>
</table>

**OLD INFORMATION (please print):**

<table>
<thead>
<tr>
<th>First Name</th>
<th>Last Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address :</td>
<td></td>
</tr>
<tr>
<td>City</td>
<td>State</td>
</tr>
</tbody>
</table>

**NEW INFORMATION (please print):**

<table>
<thead>
<tr>
<th>First Name</th>
<th>Last Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address (if your address is a PO Box, you must also provide a street address):</td>
<td></td>
</tr>
<tr>
<td>City</td>
<td>State</td>
</tr>
<tr>
<td>Telephone Number</td>
<td></td>
</tr>
</tbody>
</table>

**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/or wall hanging document), and the required fee of $15.00 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 and request an Affidavit for Duplicate License form or you may obtain it from the LICENSURE INFO/FORMS tab on our website at www.ecodev.state.mo.us/pr/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: 573-751-0681 (address changes only)