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STATE BOARD OF NURSING

NEWSLETTER

QUARTERLY CIRCULATION APPROXIMATELY 74,000 TO ALL RN'S, LPN'S, CNA'S AND STUDENT NURSES IN ARIZONA

The Official Publication of the Arizona State Board of Nursing
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Arizona Organization of Nurse Executives and Arizona Nurse's Association



From the Executive Director

by Joey Ridenour, RN, MN

In this Newsletter you will find a joint position statement by the Arizona Organization of Nurse Executives and Arizona Nurses Association entitled: "Position Statement-State Board of Nursing Reserves and Consolidation of Regulatory Boards."

The position statement is dispassionate and factual. Both the Arizona Nurse Executives and Arizona Nurses Association are convinced that the "sweeping of Board Funds" and "consolidation of regulatory boards" is not in the best interest of the state. We all recognize the fiscal difficulties of the State of Arizona, and as a result, are open to alternative solutions.

If you would like additional information on these issues, please let us know. If you have an opinion about the position statement, we respectfully request you contact those that may influence decisions on both the "sweeping of the fund balance" and the "consolidation of the regulatory boards."

On-Line Verification Now Available

Arizona State Board of Nursing (ASBN) is pleased to announce the implementation of **ON-LINE VERIFICATION**.

To verify RN/LPN/CNA licensure or certification online, follow the instructions below:

1. e-mail To: verify@azbn.org
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3. List all the RN/LPN/CNA numbers **OR** the Social Security# (do not use hyphens in ss#)

Examples:

License or Certificate numbers

RN +6 or 9 digits

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Social Security Number

111223333

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5. You may verify as many individuals as you like.

Results will be returned quickly and will give you the following information:

Name of the licensee or certificate holder

License, or certificate number

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Whether or not the individual has been fingerprinted by ASBN

Whether or not the nurse has Multi-State privileges

If you have questions or experience problems please call 602.331.8111.

Arizona Organization of Nurse Executives Position Statement Regarding the Arizona State Board of Nursing Reserves and Consolidation of Regulatory Boards

Summary:

The Arizona Nurses Association and the Arizona Organization of Nurse Executives oppose the sweeping of the fund balance / reserves of the Arizona State Board of Nursing. Although opposed, these associations recognize the fiscal difficulties of the State of Arizona, and as a result, are open to alternative solutions, which ultimately reserve the long-term integrity of the fund balance. In addition, the Arizona Nurses Association and the Arizona Organization of Nurse Executives oppose consolidating the regulatory boards.

Both the Joint Legislative Budget Committee and Governor's Office of Strategic Budgeting & Planning recommendations would negatively impact the Board of Nursing's ability to protect the public as well as increase fees for licensees. Sweeping the fund reserves from licensing fees from RNs and LPNs will result in the regulated population paying more into the general fund than others who are not regulated. In essence, the tax burden for nurses will be disproportionately higher than that of the general population.

In addition, sweeping of the reserves is estimated to result in an increase in licensing fees in order to pay for the expenses of licensing and disciplining those who may be a threat to the public as early as July 2004. Furthermore, consolidation of regulatory board operations has not resulted in promised economies of scale (Report on Texas Health Regulatory Programs, 2000). Larger consolidated boards are associated with more management levels and increased bureaucracy. In addition, other states' experiences with umbrella or consolidated board have shown an increase in the time to process investigations and a reduction in disciplinary actions per licensee.

Without sufficient funds to support the Board of Nursing activities, processing of applications and investigations will be slowed. In the midst of a shortage, new nurses applications will not be processed in a timely manner. In addition, slowed investigations can increase harm to the public.

Background/Rationale:

Health care regulatory agencies are in a unique position regarding the budget deficit facing Arizona. Revenue for the Board of Nursing comes from persons who pay a licensing fee, not from taxpayer contributions, in order to maintain the functions of the regulatory board to protect the public from unsafe or incompetent nurses and certified nursing assistants. As a 90/10 Agency, 90% of the revenue is used for operating expenses and 10% or approximately \$500,000 a year is deposited in the general fund. Additionally, approximately \$300,000 a year is paid for the services of the Attorney General and Human Resources. As is true with other health regulatory agencies and businesses, the Board of Nursing reserves a fund balance to cover expenses for 6-12 months in the future.

Approximately 70% of the annual expenditures of the Board of Nursing, or \$2,577,355, are for investigations, monitoring those on probation and hearings regarding allegations or determinations of violations of the Nurse Practice Act. During the past two years the Board has reviewed approximately actions 150 cases per month.

The Board of Nursing licenses approximately 52,000 Registered Nurses, 10,000 Licensed Practical Nurses and certifies approximately 20,000 Certified Nursing Assistants for a total of 82,000 individuals. During the past

two years, the Board has reviewed approximately actions 150 cases per month. Since fiscal year 2001:

- investigations have resulted in 429 applicants being denied licensure/certification, mostly due to past criminal histories that were determined to have high risk or harmful behaviors that put the public at risk.
- approximately 575 individuals have been revoked for voluntarily surrendered their license or certificate due to felony convictions, drug abuse, unsafe practice or unprofessional conduct which puts the public at risk or resulted in high harm with negative patient outcomes – including deaths.

According to research, independent boards have definite advantages in public protection over centralized boards including:

- administrative efficiency due to fewer management levels versus those created in centralized agencies
- less bureaucracy for the public to deal with
- ability to hire staff at the appropriate level and salary
- increased ownership for regulatory outcomes
- increased ability to make decisions without political pressure from the agency
- better control by the legislative checks and balances
- greater control over allocation of funds and reduced potential for subsidizing other regulated professions
- reduced cost and cycle times in completing investigations as cases do not have to compete for the investigator's limited times would be the case if investigating cases from many different agencies

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.....IF YOU HAVE CHANGED YOUR ADDRESS RECENTLY

Keeping your address current with the Board of Nursing helps ensure that License or Certification Renewals will reach you in a timely manner, before renewal/expiration date. For your convenience, you may use this form to submit your address change to the Board of Nursing

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License/Certification No: _____

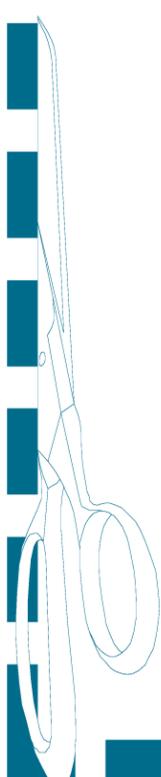
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New Phone No: (____) _____

PRIMARY STATE OF RESIDENCE: _____





Arizona Organization of Nurse Executives and Arizona Nurse's Association



Facts on State Board of Nursing Reserves:

- Revenue for the Board of Nursing comes from persons who pay a licensing fee, not from taxpayer contributions. As a 90/10 Agency, 90% of the revenue is used for operating expenses and 10% or approximately \$500,000 a year is deposited in the general fund. Additionally, approximately \$300,000 a year is paid for the services of the Attorney General and Human Resources. As a result, over \$800,000 a year from licensing fees is deposited into the General Fund. As is true with other health regulatory agencies and businesses, the Board of Nursing reserves a fund balance to cover expenses for 6-12 months in the future.
- Approximately 70% of the annual expenditures of the Board of Nursing is for investigations, monitoring those on probation and hearings regarding allegations, or determinations of violations of the Nurse Practice Act. Approximately 30% of the Board's remaining expenditures are for licensing and other operating expenses.
- The Board of Nursing licenses approximately 52,000 Registered Nurses, 10,000 Licensed Practical Nurses and certifies approximately 20,000 Certified Nursing Assistants for a total of 82,000 individuals.
- During the past two years the Board has reviewed approximately 150 cases per month. Since fiscal year 2001:
 - o investigations have resulted in 429 applicants being denied licensure/certification, mostly due to past criminal histories that were determined to have high risk or harmful behaviors that put the public at risk.
 - o approximately 575 individuals have been revoked for voluntarily surrendered their license or certificate due to felony convictions, drug abuse, unsafe practice or unprofessional conduct which puts the public at risk or resulted in high harm with negative patient outcomes – including deaths.
- If the reserves were swept as proposed, in FY 2004 there would be a deficit in the fund balance.

Depletion of the fund balance is estimated to increase the licensing fees as early as July 2004 in order to pay for the expenses of licensing and disciplining those who may be a threat to the public.

Facts on Regulatory Board Consolidation:

- Consolidation of regulatory boards may not result in the anticipated benefits.
 - Consolidated boards may lose administrative efficiency by requiring more levels of management than those of centralized boards. This also increases the bureaucracy for the public to encounter.
 - Independent boards appear to resolve two times the number of investigative cases on a timelier basis as well as take more total disciplinary actions per licensee than boards that are subordinate to centralized agencies.
- The costs and cycle times in investigations are reduced in independent boards. Cases do not have to compete for the investigators' limited time as would be the case if investigating cases from many different agencies.

• *Advisory Opinion* •

Prehospital Nursing

DATE APPROVED: 9/88

REVISED DATE: 1/91, 7/95, 01/02, 3/03

The Pre-hospital nurse provides care in first responder and interfacility transport situations which are under the aegis of the Emergency Medical System and a base hospital/physician.

It is within the Scope of Practice of a Registered Nurse (RN) to function within the pre-hospital environment if the following requirements are met:

I. General Requirements

- A. Written policy and procedures and contracts between the base hospital/physician and the employer are maintained by the employer/agency.
- B. Only RNs who have satisfactorily completed an instructional program and have had supervised clinical practice are allowed to practice in a pre-hospital setting.
- C. Documentation of satisfactory completion of the instructional program, supervised clinical practice, and clinical competency verification is on file with the employer.
- D. The pre-hospital nurse provides nursing care, and functions under the direction of an administrative base hospital/medical physician through policies, procedures, medical protocols and/or standing orders to maintain appropriate and effective levels of care for the patient.

- II. The education and training of an RN in the pre-hospital environment goes beyond the knowledge base of the emergency medical technician (EMT), intermediate emergency medical technician (IEMT), and certified emergency paramedic (CEP). A pre-hospital nurse curriculum builds on general nursing knowledge and experience and proceeds with further specialized knowledge, skills, qualifications, and clinical competencies in specific areas.

The Board of Nursing and Department of Health Services recognize the following guideline for obtaining

the knowledge and training for pre-hospital nursing.

The educational curriculum is administered or obtained through an education department or entity and is taught by qualified instructors.

The Course of Instruction is to include but not be limited to:

- A. Anatomy and physiology of medical disease and trauma processes of body systems.
- B. Assessment treatment and evaluation of interventions.
- C. Procedures for initiation of or provision of additional life support therapies or interventions.
- D. Documentation.
- E. Pharmacology.
- F. Extrication techniques.
- G. Invasive/non-invasive techniques and interventions.
- H. Field radio and telemetry communication.
- I. Scene Control and safety guidelines.
- J. Patient stabilization procedures.
- K. Transportation of patients.
- L. Triage and disaster management.
- M. Agencies, law and rules governing the pre-hospital environment.
- N. Hazardous materials/hazardous conditions.
- O. Infection control guidelines.
- P. Use of specialized equipment for the transport environment.
- Q. Nursing Care responsibilities.

RATIONALE

Registered Nurses generally are not (may or may not

be) certified as emergency medical technicians or paramedics but are otherwise qualified through educational preparation, experience and clinical competence to practice in this arena. These nurses have acquired training and skill in such areas as caring for unstable neonates, high risk obstetrical patients, seriously ill and injured adults and children having potential life threatening conditions. This practice is within the scope of a Registered Nurse.

REFERENCES

Cummings, R. O. (Ed.) (2001) Advanced cardiac life support provider manual. Dallas: American Heart Association.

Chameides L., & Hazinski M.F. (Eds.) (1997) Pediatric advanced life support. Dallas: American Heart Association.

Emergency Nurses Association (1995). National standard guidelines for prehospital nursing curriculum. Park Ridge, IL: Author.

Emergency Nurses Association/National Flight Nurses Association (1998). Role of the registered nurse in the pre-hospital environment: Position statement. Des Plaines, IL: Author.

Emergency Nurses Association (2000). Trauma nursing core course (provider) manual (5th Ed.). Des Plaines, IL: Author.

Semonin-Holleran, R. (1994). Prehospital nursing. St. Louis, MO: Mosby Yearbook.

Semonin-Holleran, R. (1996). Flight nursing: Principles & practices. (2nd Ed.). St. Louis, MO: Mosby.

Kentucky State Board of Nursing, 312 Wittington Parkway, Suite 300, Louisville, Kentucky

• *Advisory Opinion* •

Apheresis in the Out-patient Setting

DATE APPROVED: 03/03

It is within the Scope of Practice for a Licensed Practical Nurse (LPN) to perform Apheresis in an out-patient setting if the following criteria are met

The role of the LPN in Apheresis is a role delegated by the Registered Nurse (RN)

I. General Requirements

- A. The LPN functions under the supervision of an RN who is physically present in the facility.
- B. The LPN has successfully completed an organized program of study on Apheresis, including didactic and supervised clinical practice.
- C. The LPN has successfully completed an instruc-

tional program on intravenous therapy and medication skills (either in their AZ LPN core curriculum or at an organized course of instruction).

- D. Documentation of satisfactory completion of the instructional programs and supervised practice is on file with the employer.
- E. Documentation of annual reviews of competency, including the methods used for conducting outcome reviews.
- II. The following competencies are within the Scope of Practice of the Licensed Practical Nurse:
 - A. Administration of a topical anesthetic for the purpose of providing client comfort while initiating IV access.
 - B. Initiation of the Apheresis procedure.
 - C. Inspection and evaluation of the access site
 - D. Performing vascular access site care.
 - E. Monitoring and recording the Apheresis procedure.
 - F. Observation of changes in the client's status.
 - G. Reporting findings to the RN.
 - H. Adjusting the Apheresis procedure according to the client's needs, at the direction of the physician.
 - I. Monitoring anticoagulation medication associated with the Apheresis procedure.
 - J. Flushing of central venous ports and alteration of fluid rates as ordered.
 - K. Discontinuing the Apheresis procedure.

Rationale

To provide: (1) guidelines for practice changes related to the LPN working in the outpatient facility and , (2) protection of the public.

References

2001, Fresenius HemoCare, Inc. AS104 Therapeutic Plasma Exchange Training Manual. www.gambrobct.com

Epidural Analgesia by Nurse Anesthetist

DATE APPROVED: 01/03

It is within the scope of practice of a Nurse Anesthetist to provide epidural analgesia without the presence of a physician. If anesthesia is to be administered through the epidural, physician presence is required per A.R.S. § 32-1661.

GENERAL REQUIREMENTS

The Nurse Anesthetist must meet the educational requirements of A.R.S. § 32-1661 (A), completion of a nationally accredited program in the science of anesthesia.

Rationale

Nurse Anesthetists are qualified to provide epidural analgesia. There is a clinical distinction between the administration of epidural analgesia and epidural anesthesia. Because A.R.S. § 32-1661 requires physician presence during the administration of anesthesia, and not analgesia, physician presence is not required for a Nurse Anesthetist to administer epidural analgesia.

References

Qualifications and Capabilities of the Certified Registered Nurse Anesthetist, American Association of Nurse Anesthetists, 1999.

Scope and Standards for Nurse Anesthesia Practice, American Association of Nurse Anesthetists, 1996.

A.R.S. § 32-1661
A.A.C. R4-19-513

• *Advisory Opinion* •

Anesthetic Agents Administered by Registered Nurses for Limited Purposes: Airway Management or Peripheral Nerve Block

DATE APPROVED: 01/03

Registered nurses who do not meet the educational requirements of A.R.S. § 32-1661, completion of a nationally accredited program in the science of anesthesia, may assist a licensed provider by administering anesthetic agents in situations where the licensed provider is present but unable to personally inject the anesthetic agent because the provider is performing these critical tasks for the patient: airway management or placement of a peripheral nerve block requiring the use of both hands.

For the administration of sedation, see Conscious Sedation For Diagnostic And Therapeutic Procedures and Deep Sedation.

GENERAL REQUIREMENTS

1. A written policy and procedure is maintained by the employer. The written policy and procedure shall specify the required emergency equipment and medications that must be immediately available to the patient receiving any medication classified as an anesthetic agent. This shall include any and all emergency equipment and medication required to regain and/or maintain the patient's cardiac and respiratory state. These policies and procedures are readily available within the unit where the activity shall occur.
2. The registered nurse is required to have the same knowledge base for the anesthetic agents administered as for any other medication that the registered nurse administers. This knowledge base includes, but is not limited to:

- A. Assessment and monitoring of the patient receiving the medication.
- B. Dosing, effects, side effects, and contraindications for each drug to be administered.
- C. Potential complications of each drug and/or combination of drugs.
- D. Recognizing emergency situations and instituting appropriate nursing interventions.

RATIONALE

Anesthetic agents are commonly used to facilitate emergent intubation. To require the licensed provider who is managing the patient's airway to leave the airway in order to administer the anesthetic agent compromises patient safety. Similarly, placement of certain types of peripheral nerve blocks may require both hands of the provider to place the needle and keep it in place. To require the provider to use one of their hands to administer the anesthetic agent could again compromise the safety of the patient. Per A.R.S. § 32-1601 (13) (m), it is within the scope of practice of the registered nurse to perform additional acts that require education and training as prescribed by the Board and that are recognized by the nursing profession as proper to be performed by a professional nurse. A survey of state boards of nursing reflected that assisting licensed providers with anesthetic agent administration was accepted practice for registered nurses in 16 of 22 states who responded to the survey.

REFERENCES

Registered Nurse Administration of Medications Classified as Anesthetic Agents, Declaratory Ruling 2002-

1, Maryland Board of Nursing, 2002.

Advisory Opinion #27, South Carolina Board of Nursing, 2002.

Role of RN Administering IV Push Medications during Rapid Sequence Intubation, Declaratory Ruling, Wyoming State Board of Nursing, 2002.

Advisory Ruling/Injection of Anesthetic Agents to Produce Anesthesia Following Placement of the Needle by the Physician, Maine State Board of Nursing, 1993.

A.R.S. § 32-1661

A.R.S. § 32-1601(13)(m)

• *Advisory Opinion* •

Intrauterine Pressure Catheters

DATE APPROVED: 11/02

REVISED DATE: 3/03

It is NOT within the scope of practice for a Registered Nurse to insert an intrauterine pressure catheter.

Rationale:

During the process of insertion, the catheter could perforate the placenta or the uterus, both of which are life-threatening situations.

References:

Arkansas State Board of Nursing
South Dakota State Board of Nursing
Nebraska State Board of Nursing
Virginia State Board of Nursing

The Role of the Registered Nurse in Assessing Patient/Client Conditions

DATE APPROVED: 4/99

REVISED DATE: 02/02, 3/03

It is within the Scope of Practice for a Registered Nurse (RN) to*: (1.) *assess* patients, *recognize* the potential for, or existence or absence of an immediate life threatening condition or active labor; (2.) *initiate* appropriate nursing intervention and care; (3.) *report* findings to an appropriately licensed individual; and (4.) pursuant to orders, when such orders are required, *implement* care, treatments, medication administration, and either discharge the patient or *perform* ongoing assessment for either stabilization and/or transfer of the patient if the following requirements are met:

General Requirements

- A. Written policy, procedures and protocols regarding the RN's responsibilities in assessing patient conditions including the potential for or existence of an immediate life threatening condition and instituting appropriate nursing actions are developed and maintained by the agency/employer.
- B. Only RNs who have satisfactorily demonstrated competency in the area of practice in the clinical setting are allowed to perform such functions. These competencies include but are not limited to: knowledge of anatomy and physiology pertinent to the area of practice in the clinical setting, knowledge of indications of clinical conditions specific to the area of clinical expertise that have potential for or pres-

ence of actual life threatening condition, knowledge of parameters for assessing patient conditions and the presence of potential or existent life threatening conditions, knowledge of nursing interventions pertinent to clinical conditions of the area of clinical practice, and knowledge of parameters for reporting the findings of assessments and findings of life threatening conditions.

C. Documentation of supervised clinical practice and competency is on file with the agency/employer.

*While this Advisory Opinion is not limited to any particular nursing service, setting or specialty, examples of the types of assessments that RN's may perform include:

- Assessment of the presence or absence of labor including fetal heart tones, the regularity and duration of uterine contractions, cervical dilation and effacement, fetal station, and status of uterine membranes, i.e. ruptured, or intact.
- Assessment of risk of suicide or homicide, disorientation, and risk of assaultive behavior to self or others.

Rationale:

To ensure consistency and competency in performing physical assessments.

Reference:

Techniques in Clinical Nursing, Addison Wesley, 1999
The Lippincott Manual of Nursing Practice, Seventh Edition, 2000

• *Advisory Opinion* •

Conscious Sedation for Diagnostic and Therapeutic Procedures

DATE APPROVED: 7/90

REVISED DATE: 7/91, 4/96, 10/97, 2/01, 3/01, 6/01, 1/03

For the purposes of this advisory opinion, conscious sedation is defined as follows:

Conscious sedation: a medically controlled state of depressed consciousness, induced to allow the patient to tolerate procedures, that (1) allows protective reflexes and cardiovascular function to be maintained; (2) retains the patient's ability to maintain a patent airway independently and continuously; and (3) permits appropriate response by the patient to tactile stimulation or verbal command, eg., "open your eyes."

It is within the Scope of Practice of a Registered Nurse to administer medications* to provide conscious sedation for the purposes of diagnostic or therapeutic procedures. To provide conscious sedation, the following criteria must be met:

I. General Requirements

- A. A written policy and procedure is maintained by the employer.
 1. Administration of medications must be ordered by a provider licensed in this state to prescribe such medications. The licensed provider responsible for the treatment of the patient and/or prescription of drugs for sedation must be competent to use such techniques, to provide the level of monitoring provided in these requirements, and to manage complications of these techniques. The licensed provider responsible for the treatment of the patient and/or prescription of drugs for sedation must be present in the room from the time the medication is initiated through the completion of the procedure, and must be readily available in the facility to assume care of the patient during the post-procedure period.
 2. The employer has identified medications allowed for conscious sedation, preferably by an interdisciplinary committee, including nurses.
 3. A pre-sedation health assessment must be performed for each patient by a licensed provider and the administering registered nurse to determine that the patient is an appropriate candidate for conscious sedation. The health assessment should include, but is not limited to, age and weight, health history, focused physical examination including vital signs, auscultation of the heart and lungs, evaluation of the airway, physical status evaluation, and any necessary pre-procedure laboratory testing. Each patient is reevaluated immediately prior to conscious sedation.
 4. Monitoring of the patient's electrocardiogram, oxygenation, blood pressure, and ventilation are maintained throughout the procedure and recovery.
 5. For patients who receive IV medications,

patent intravenous access is maintained from the beginning of IV medication administration until the patient meets discharge criteria. For patients receiving oral sedative medication, for conscious sedation, an open IV line is optional.

6. The licensed provider who uses sedation and the administering registered nurse must have immediately available the facilities, personnel, and equipment to manage emergency situations. Provisions for maintaining and suctioning the airway, for administering oxygen and Cardio-pulmonary resuscitation are available. A protocol for access to back-up emergency services shall be clearly identified, with an outline of the procedures necessary for immediate use. For non-hospital facilities, an emergency assist system and ready access to ambulance service should be established.
7. During induction and administration of conscious sedation, the registered nurse responsible for monitoring the patient's airway and level of consciousness may not leave the patient unattended or engage in other tasks that compromise continuous monitoring.
8. There shall be sufficient numbers of personnel to do the procedure and monitor the patient.
- B. The registered nurse administering the medication and/or monitoring the patient receiving the medication shall have successfully completed an instructional program and supervised clinical practice, and shall have documented evidence of course completion in Advanced Cardiac Life Support, Pediatric Advanced Life Support, Neonatal Resuscitation Program or a substantially equivalent educational program.
- C. Documentation of satisfactory completion of the instructional program, supervised clinical practice, current competency, and ACLS/PALS/NRP or equivalent program is on file with the employer.
- II. Course of Instruction is to include, but not be limited to:
 - A. Anatomy and physiology of the respiratory and central nervous system. Physiology of the four levels of sedation and anesthesia; including minimal sedation, moderate sedation, deep sedation and anesthesia.
 - B. Indications and contraindications to conscious sedation.
 - C. Potential adverse reactions of conscious sedation.
 - D. Specific considerations, including but not limited to:
 1. Pharmacologic properties of each of the allowable drugs.
 2. Airway management to include oxygen delivery, transport, and uptake, and an understanding of oxygen delivery devices.
 3. Emergency management.

4. Use of monitoring devices.

5. Techniques of administration and termination of drugs.

6. Assessment of level of consciousness and physiological response to the drug.

7. Cardiac arrhythmia recognition.

E. Nursing care responsibilities, including but not limited to, assessment, monitoring, and documentation.

III. In addition to medications that meet the requirements for conscious sedation, the registered nurse may also administer dissociative agents (such as Ketamine Hydrochloride) in accordance with the provisions of I and II of this Advisory Opinion.

*Medications may include those classified as anesthetic agents, but are not to be administered to provide anesthesia as in A.R.S. § 32-1661, except as provided in the Anesthetic Agents Administered by Registered Nurses for Limited Purposes: Airway Management or Peripheral Nerve Block Advisory Opinion, or to provide deep sedation except as provided in the Deep Sedation Advisory Opinion.

References:

1. Standards and Intent for Sedation and Anesthesia Care of the Joint Commission. Revisions to Anesthesia Care Standards Comprehensive Accreditation Manuals for Hospitals, effective January 1, 2001.
2. Practice Guidelines for Sedation and Analgesia by Non-Anesthesiologists, American Society of Anesthesiology, 1996.
3. Position Statement from the American Association of Nurse Anesthetists Qualified Providers of Conscious Sedation, Revised June, 1996.
4. Considerations for Policy Guidelines for RN's Engaged in the Administration of Conscious Sedation, from American Association of Nurse Anesthetists. Revised June, 1996.
5. Guidelines for Monitoring and Management of Pediatric Patients During and After Sedation for Diagnostic and Therapeutic Procedures (RE9252), American Academy of Pediatrics, June, 1992.
6. Stapczynski Letter/Advisory Opinion on the Administration of Ketamine Hydrochloride, Kentucky Board of Nursing, 2002.
7. Position Statement on the Role of Registered Nurses (RNs) in the Administration of IV Conscious Sedation During Short Term Therapeutic, Diagnostic or Surgical Procedures, Massachusetts Board of Nursing, November, 1999.
8. Endorsement of Position Statement on the Role of the Registered Nurse (RN) in the Management of Patients Receiving IV Conscious Sedation for Short-Term Therapeutic, Diagnostic, or Surgical Procedures, American Nurses Association, 1991.
9. Conscious Sedation, California Board of Registered Nursing, 1995.

• *Advisory Opinion* •

Sheath Removal, Placement of Mechanical Compression Devices & Deployment of Vascular Closure Devices

DATE APPROVED: 1/90

REVISED DATE: 7/02, 3/03

It is not within the Scope of Practice for a Registered Nurse to deploy suture mediated closure devices.

It is within the Scope of Practice for a Registered Nurse to remove Intravascular (arterial or venous) sheaths and apply manual compression or mechanical compression devices and deploy vascular closure devices for hemostasis, if the following requirements are met:

- I. General Requirements
 - A. Written policies and procedures are maintained by the agency/employer.
 - B. Physician's order is obtained and a physician is readily available to manage complications related to deployment of vascular closure devices.
 - C. Only RNs who have satisfactorily completed an instructional program and have supervised clinical practice with return demonstration are allowed to remove sheaths, apply manual compression or mechanical compression devices and deploy vascular closure devices.
 - D. Documentation of satisfactory completion of an instructional program and supervised clinical practice is on file with the agency/employer.

- E. A periodic educational/competency validation mechanism is developed, and documentation of the successful demonstration of knowledge, skills, and abilities is on file for each nurse performing the procedures
- II. Course of instruction which provides didactic and classroom instruction, followed by supervised clinical practice that includes but is not limited to:
 - A. Anatomy and physiology related to femoral artery, vein, nerves and groin area structures.
 - B. Indications and contraindications of compression devices and deployment of vascular closure devices.
 - C. Demonstrated knowledge of potential adverse reactions and management of complications.
 - D. Technique of sheath removal, application of compression devices and deployment of vascular closure devices.
 - E. Sterile technique.
 - F. Cognitive and psychomotor skills necessary to deploy vascular closure devices.
 - G. Legal ramifications of deploying vascular closure device, including the RN's responsibility and liability in the event of untoward reaction or life-threatening complications.
 - H. Supervised clinical practice with a minimum of

six (6) successful deployments, three (3) which will be patients undergoing diagnostic catherizations, and three (3) which will be patients undergoing interventional cardiac procedures while on anticoagulant therapy.

- I. Nursing care responsibilities

Rationale

The guiding principle for this opinion is that sheath removal, manual compression, the use of mechanical compression devices, and deployment of vascular closure devices can be safely performed by a registered nurse with specialized training, skills, and knowledge.

References

- A. American Journal of Nursing 1992, 92: 34-37
- B. Arkansas State Board of Nursing, January 14, 1999, Little Rock, AR.
- C. Critical Care Nurse, 16(2): 32-6, 1996, April.
- D. Kentucky Board of Nursing, Deployment of Extravascular Collagen Plugs by Registered Nurses, Louisville, Kentucky: 1998, April. Opinion statement.
- E. Kentucky Board of Nursing, Removal of Arterial & Venous Sheaths by Registered Nurses, Louisville, Kentucky: 1992, April. Opinion Statement.
- F. South Carolina Board of Nursing, September, 2000. Advisory Opinion #38.

Supervision of Licensed Practical Nurse by Registered Nurses

DATE APPROVED: 12/87

REVISED DATE: 10/06, 2/01, 3/01, 12/02, 3/03

R4-19-101 "Supervision" means the direction, and periodic consultation, provided to an individual to whom a nursing task or patient care activity_

The Registered Nurse (RN) is responsible and accountable for the determination of the type of supervision required of the Licensed Practical Nurse (LPN) for those functions that can be legally performed by the LPN. The LPN is responsible to perform within the LPN scope of practice as defined by ARS 32-1601 (12).

When, in the judgment of the RN, the client's state is unstable/unpredictable and rapid change may be anticipated, supervision of the LPN is achieved when the RN is physically present and is able to readily intervene in the care of the client.

When, in the judgment of the RN, the client's state is stable/predictable and rapid change is not anticipated, supervision of the LPN under the supervision of a physician or a RN may be achieved without the physical presence of the RN. In this instance, the RN or licensed health care provider must be readily available by telephone/beeper. This does not preclude the fact that the RN is responsible for monitoring the care of all clients.

The functions that can be legally performed by the LPN under the supervision of a physician or a RN in accordance with ARS 32-1601 (12) include:

- a) Contributing to the assessment of the health status of individuals and groups.
- b) Participating in the development and modification of the strategy of care.
- c) Implementing aspects of the strategy of care within the nurse's scope of practice.
- d) Maintaining safe and effective nursing care that is rendered directly or indirectly.
- e) Participating in the evaluation of responses to interventions.
- f) Delegating nursing activities within the scope of practice of a practical nurse.
- g) Performing additional acts that require education and training as prescribed by the Board and that are recognized by the nursing profession as proper to be performed by a practical nurse.

RATIONALE:

To clarify the supervision requirements between RN and LPN.

REFERENCE:

Arizona Nurse Practice Act: ARS 32-1601 (12) (13).

Stress Testing: Pharmacological

DATE APPROVED: 7/95

REVISED DATE: 7/02, 3/03

When a physician is present it is within the scope of practice of a Registered Nurse to administer intravenous medications for the purposes of pharmacological cardiac stress testing as an alternative to physical stress testing.

Rationale

In many patients with coronary artery disease, clinical symptoms may only become evident when the heart is stressed.

Reference

Critical Care Nursing Diagnosis and Management, Third edition, 1998, pg. 429-430.

Advanced Practice Corner

by Karen Grady, MS, RN, FNP, BC
Advanced Practice Consultant

Advanced Practice Committee Highlights

The Advanced Practice Committee held meetings on January 17, 2003 and March 14, 2003. The next Committee meeting is scheduled for **Friday, May 9, 2003**.

The meetings are open to the public and are held at the Board office at 9:30 a.m. on the second Friday of every other month. The Committee is advisory in nature and makes recommendations to the Board regarding advanced practice issues.

Membership

Committee members are advanced practice nurses who are appointed by the Board for a 2-year term. Reappointments and new appointments to the Committee were made in April 2003. Advanced practice nurses interested in a Committee appointment may submit their curriculum vitae for consideration for future openings.

Recent Advisory Opinions

The Committee recently completed work on three advisory opinions that were approved by the Board in January: Epidural Analgesia by Nurse Anesthetist; Anesthetic Agents Administered by Registered Nurses for Limited Purposes: Airway Management or Peripheral Nerve Block; and Conscious Sedation for Diagnostic and Therapeutic Procedures. The Advisory Opinions are printed in this newsletter and in addition, may be viewed on our Web site, www.azboardofnursing.org, by selecting Advisory Opinions option on the menu.

Current Issues

In order to facilitate patient access to health care services that can be provided by nurse practitioners, the Committee is currently drafting an Advisory Opinion that delineates for the public the functions and scope of nurse practitioner practice.

Future Topics

In future meetings, the Committee will be discussing inconsistencies in state regulations that affect advanced practice, and will be exploring possible solutions. The Committee will also be providing input into the revision of Article 5 of the Nurse Practice Act.

If you have any questions about advanced practice or the Committee, please call Karen Grady at (602) 331-8111 ext. 190, or e-mail at kgrady@azbn.org.

• Education Corner •

by Pamela Randolph RN, MS, CPNP,
Nurse Practice Consultant

Non Approved Nursing Education Programs

It has come to the attention of Board staff that there are educational programs promising persons education in nursing but not approved or accredited by a recognized licensing authority. Two recent examples are:

- * A distance based nurse assistant course that offers participants a "new career." This course contains no clinical or "hands on" nursing. It contains a statement in small print that the program is only meant to "serve as an introduction or enhancement of the theoretical knowledge and...not intended as a substitute for licensing and/or certification requirements." This program charges \$449.
- * A distance-learning university located in the Caribbean offers education in a variety of fields. The institution is not accredited by an organization recognized by the U.S. Department of Education. An applicant submitted a transcript indicating that a nursing program was completed but the applicant and Board staff were unable to locate an NCLEX code. Calls to the registrar's office, located in a suite in Minnesota, were unanswered. The Minnesota Board denied knowledge of the program and the program's Web site did not indicate that it offered a nursing program. This university charges \$500 per semester.

Both these applicants did not complete an approved program. The person that graduated from the program located in the Caribbean may be able to qualify as a foreign candidate if he/she can demonstrate meeting criteria for graduates of foreign nursing programs. The nurse assistant applicant does not qualify for certification.

Lessons for consumers:

When considering a nursing program, ask about accreditation of the parent institution. Most institutions offering nursing programs are regionally accredited by an organization recognized by the U.S. Department of Education. All institutions offering approved programs in Arizona are regionally accredited. Additionally, the nursing program may be nationally accredited by the National League for Nursing Accrediting Commission (NLNAC) or

the Commission on Collegiate Nursing Education (CCNE).

Ask about approval of the program by the Board of Nursing in the jurisdiction where you are located. A Board of Nursing will generally approve programs in their jurisdiction that lead to licensure in that state without additional education or experience. This approval is generally recognized by other states.

If the program is based in another country, graduates must meet the criteria for graduates of foreign nursing programs, even if the education was delivered to the US via distance learning. Ask the program if graduates meet criteria for a Commission on Graduates of Foreign Nursing Schools (CGFNS) Certificate. Contact graduates that were licensed in the U.S. to verify the information.

Ask about graduate's success on the licensing exam (NCLEX).

Beware of programs that offer no clinical experience or validation of clinical skills.

If you are not satisfied with the answers, contact this consultant at 602-331-8111 ext. 139. A list of Arizona based approved program is available on the Board Web site: at www.azboardofnursing.org

Exam Committee News

The Exam Committee of the National Council of State Boards of Nursing oversees the NCLEX® examination process including item development, examination security, psychometrics, examination administration and quality assurance to ensure consistency with the Member Boards' need for examinations. This consultant has been appointed to a 2-year term on the committee. There are 10 members of the committee representing Boards of Nursing in Vermont, Pennsylvania, California VN, Nebraska, Arkansas, Louisiana PN, Massachusetts, Florida, Iowa and Arizona. The activities of the Exam Committee this year include:

- * Reviewing the practice analysis data and making recommendations on changes to the NCLEX test plan
- * Conducting research on why persons that graduate from a nursing program do not take the exam
- * Reviewing selected exam items
- * Reviewing innovative/alternative item formats (see FAQ's on innovative items in this newsletter)

- * Overseeing the change in test vendor from Chauncey to NCS Pearson
- * Developing mechanisms to compare the equivalency of NCLEX-RN to the Spanish language Puerto Rican nursing licensure exam
- * Individual members chair the item review subcommittee

Board Actions on Education Programs

January 22-24 Board Meeting

Approved new C.N.A. program at:

Gila County Community College District—Payson

Granted approval to Maricopa Community College District Nursing Program for a LPN to A.D. nursing program site at Rio Salado Community College

Granted provisional approval to Coconino Community College for a nursing program pending submission of revised level objectives and the names and qualifications of the faculty for the first year of operation at least 45 days before classes are offered.

Granted the request by University of Arizona to offer an accelerated partnership program.

Tabled request from Mohave Community College to offer a Paramedic to RN program.

Granted request by Yavapai College to increase nursing hours.

Reviewed investigative report on Northern Arizona University Nursing Program and required the program to submit a quarterly reports with a site visit in September 2003.

Reviewed investigative report on SouthWest Skill Center/Estrella Mountain Community College and offered consent agreement for violations of A.R.S. § 32-1666(B) and A.A.C. R4-19-207 (D) with terms limiting admissions to the program and requiring reports to the Board. The program signed the agreement.

March 5-7 Board meeting

Approved new C.N.A. Programs at:

College America—Flagstaff

Gila County Community College District—Globe

Received reports from SouthWest Skill Center/Estrella Mountain Community College and Northern Arizona University

Approved level objectives submitted by Coconino Community College

Frequently Asked Questions: Alternative NCLEX® Item Formats

The current NCLEX® examination program implemented computer adaptive testing as its administration modality in 1994. As part of the continuous quality improvement of the program, the National Council of State Boards of Nursing, Inc. (NCSBN) continually considers how to best measure entry-level nurse competence. In view of this commitment, the NCSBN is currently developing and researching items using alternative formats.

1. What is an alternative item format?

An alternative item format is an examination item that takes advantage of technology and uses a format other than standard, four-option, multiple-choice items to assess candidate ability. Alternative item formats may include multiple-choice items that require a 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. Any item formats, including standard multiple-choice items, may include charts, tables or graphic images.

Figures 1 through 3 represent some of the types of items that will be administered to candidates. Updated information on the NCLEX examination is posted on the NCSBN website ncsbn.org and is presented in the candidate bulletin.

2. How do alternative items differ from the current standard multiple-choice items?

Some of the new items present four or more response options, but, unlike the standard multiple-choice items, the new items require the candidates to select more than one option. Another format is the new fill-in-the-blank items which require candidates to type in the answer to the ques-

tion instead of selecting from among a set of four options.

3. How will alternative items improve the measurement of entry-level nursing ability?

It is anticipated that alternative items will allow candidates to demonstrate their entry-level nursing competence in ways that are different from the standard multiple-choice items. In addition, some nursing content areas and competencies may be assessed more readily and authentically with alternative items.

For example, the item in Figure 1 requires the candidate to perform a calculation without the benefit of selecting the answer from among four answer options. The ability to calculate is more readily assessed with this type of item than with a standard multiple-choice item. Similarly, the item in Figure 3 more accurately and directly assesses the skills needed for practice as compared to using a multiple-choice item. Use of alternative items is anticipated to improve the assessment of entry-level nursing practice.

4. When will these item formats be administered on NCLEX examinations?

These item formats may be administered to candidates after April 2003.

5. How are alternative items being developed?

The same rigorous process that is used to develop the standard multiple-choice NCLEX items is being used to develop the alternative items. Item writers from across the country who meet the stringent NCSBN criteria are selected to attend item writing sessions and write items based on item

pool needs. As with standard multiple-choice items, each item must be validated in at least two approved nursing textbooks or references.

6. How is the item scoring criteria being developed and validated?

As with the current process, nursing content experts from across the country review all the items. These content experts evaluate the items to determine the correct and acceptable answer based on their clinical expertise. In addition, these experts assess the item for currency, accuracy, scope of practice and entry-level practice.

7. Will the NCLEX-RN® and NCLEX-PN® Test Plans be followed for alternative items?

The development of the alternative items is based on the current *NCLEX-RN® Test Plan and NCLEX-PN® Test Plan*. The addition of alternative items will not change the test plan or the length of the test.

8. Will the items be pretested?

Yes. As with the standard items, the alternative items are pretested before becoming part of the operational, or 'scored' part of the examinations in order to gather statistical information about the items. As with multiple-choice items, these alternative items have to meet NCSBN's stringent statistical criteria.

9. Will alternative items replace the current NCLEX® items?

The alternative items will be added to the current NCLEX-RN® and NCLEX-PN® items pools; they will not replace the items that are in the current NCLEX examinations.

10. How is examinee performance scored on alternative items?

Alternative items are scored either right or wrong; there is no use of partial credit in the scoring of these items.

11. How much time will be needed to answer alternative items?

Based on cognitive processing theory, it is anticipated that some of the items will take less time and some will take more time than the standard multiple-choice items. Currently it is estimated that candidates require between 60 and 70 seconds per multiple-choice item. Information about length of time it takes to respond to an item is collected and used by the Examination Committee and staff to make decisions about each item.

12. Will the implementation of alternative items affect candidate pass rates?

These items formats will not affect candidate pass rates. These items have a calibrated difficulty level just like standard multiple-choice items, and, as such, will be counted just like standard items when computing a candidate's final competence estimate.

Figure 1

Candidate P Pearson [NCLEX-PN] Time Remaining 4:59:24

The nurse is completing the intake and output record for a client who had an abdominal cholecystectomy 2 days ago. The client has had the following intake and output during the shift.

Intake: 4 oz of orange juice
 ½ serving of scrambled eggs
 6 oz of water
 ½ cup of fruit-flavored gelatin
 1 cup of chicken broth
 400 cc of 0.45% sodium chloride (half-strength saline), IV

Output: 1,000 ml of urine
 120 ml of drainage from the T-Tube

How many milliliters should the nurse document as the client's intake?

Answer:

Click the Next(N) button or the Enter key or the ALT+N keys to confirm answer and proceed. Item 2

Next (N) Calculator (C)

Figure 2

Candidate P Pearson [NCLEX-RN] Time Remaining 4:59:23

The nurse is caring for a client who has a wound infected with methicillin-resistant *Staphylococcus aureus* (MRSA). Which of the following infection control precautions should the nurse implement?

Select all that apply.

1. Wear a protective gown when entering the client's room.

2. Put on a particulate respirator mask when administering medications to the client.

3. Wear gloves when delivering the client's meal tray.

4. Ask the client's visitors to wear a surgical mask when in the client's room.

5. Wear sterile gloves when removing the client's wound dressing.

6. Put on a face shield before irrigating the client's wound.

Select all that apply. Click the Next(N) button or the Enter key or the ALT+N keys to confirm answer and proceed. Item 2

Next (N) Calculator (C)

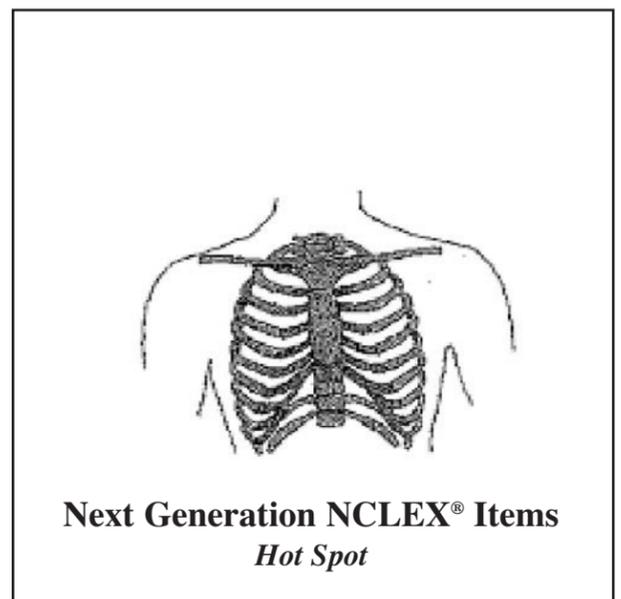


Figure 3

13. Will the candidate fee increase with the addition of alternative items?

The candidate fee will not increase based on the use of alternative item formats.

FAQ, cont. from pg. 13

14. Will the addition of alternative items affect the timeline for delivering NCLEX-RN® and NCLEX-PN® results to candidates and boards of nursing?

Use of alternative item types will not affect the operational processes for delivering results to candidates and boards of nursing.

15. What will need to be done to assist the nursing community to prepare for these types of items?

NCSBN has a commitment to keep the nursing community informed and will continue to supply updated information about alternative items research study on our website <http://www.ncsbn.org>.

16. What is being done to prepare candidates to understand alternative item types?

The NCSBN Web site, as well as the NCLEX® Examination Candidate Bulletin, provides candidates information regarding alternative item types. An addition to the current tutorial will explain new item types to the candidates.

Should you have any questions about the new NCLEX examination item formats, please contact NCSBN Testing Services by phone at: 312.787.6555, ext. 470 via e-mail: nclexinfo@ncsbn.org.

NCLEX® RESULTS FOR ALL FIRST-TIME CANDIDATES

EDUCATED IN ARIZONA 1995-2002

REGISTERED NURSES

1995--Pass % Nationally 90%	Pass % Arizona 93%	1999--Pass % Nationally 84.8%	Pass % Arizona 88.2%
1996--Pass % Nationally 86%	Pass % Arizona 92%	2000--Pass % Nationally 83.8%	Pass % Arizona 85.35%
1997--Pass % Nationally 88%	Pass % Arizona 92.1%	2001--Pass % Nationally 85.53	Pass % Arizona 83%
1998--Pass % Nationally 85%	Pass % Arizona 90.5%	2002--Pass % Nationally 86.7%	Pass % Arizona 85.7%

School	City	% Pass 1995	% Pass 1996	% Pass 1997	% Pass 1998	% Pass 1999	% Pass 2000	% Pass 2001	% Pass 2002
Northland Pioneer College	Show Low	95	100	91.2	94.1	87.5	84.2	67.6	44
Eastern Arizona College	Safford	NA	NA	88.9	90.0	88.2	85.7	83.3	71
Mohave Com. College	Kingman	83	89	86.1	95.5	74.1	84.4	82.9	80
Pima Com. College	Tucson	92	90	91.3	86.2	81.5	85.8	84.7	91
Central Arizona College	Coolidge	100	72	84	88.9	95.2	86.7	73.3	73
Cochise College	Douglas	97	89	87	81.4	86.7	91.4	96.2	94
Yavapai College	Prescott	89	90	93.6	82.7	80.5	86.3	73.2	98
Arizona Western College	Yuma	85	90	92.6	90.5	81.8	84.8	70	70
University of Arizona	Tucson	91	97	96.8	92.9	92.6	89.5	92.5	94
Arizona State University	Tempe	90	88	87.3	90.8	88.8	87.3	90.6	90
Grand Canyon University	Phoenix	97	92	93.3	94.0	87.5	88.4	90.6	79
Northern Arizona University	Flagstaff	97	84	92.5	80.4	94	67.6	65.3	80
*MCCDNP (Scottsdale CC, Glendale CC, Phoenix C, Mesa CC, Mesa Boswell, and GateWay CC.)	Maricopa Community Colleges							82.2	85

LICENSED PRACTICAL NURSES

1995 % Pass Nationally 91%	% Pass Arizona 96 %	1999 % Pass Nationally 86%	% Pass Arizona 93%
1996 % Pass Nationally 91%	% Pass Arizona 96%	2000% Pass Nationally 85.1%	% Pass Arizona 90.25
1997 % Pass Nationally 89%	% Pass Arizona 93%	2001% Pass Nationally 86.5%	% Pass Arizona 90.37%
1998 % Pass Nationally 87%	% Pass Arizona 95%	2002% Pass Nationally 85.4%	%Pass Arizona 93.2%

School	City	% Pass- 1995	% Pass- 1996	% Pass- 1997	% Pass- 1998	% Pass- 1999	% Pass- 2000	% Pass 2001	% Pass 2002
Scottsdale Com. College	Scottsdale	98	100	100	97.8	100	90	100	100
Yavapai College	Prescott	98	97	95.1	95.8	100	100	100	100
Phoenix College	Phoenix	97	97	100	96.3	93.8	93.8	85.7	100
Northland Pioneer	Show Low						85.7	76.9	90
Glendale Com. College	Glendale						100	100	92
Cochise College	Douglas	100	97	89.5	100.0	97.1	97.4	100	97
Mohave Com. College	Kingman	97	100	94.7	100.0	96.7	100	100	93
Central Arizona College	Coolidge	96	96	100	100.0	92.3	100	100	100
Mesa Com. College	Mesa	100	99	98	97.8	96.7	94.7	93.9	100
Metro Tech/VIP	Phoenix	74	90	73.7	88.9	93.8	93.3	69.2	88
Arizona Western College	Yuma	NA	94	100	100.0	80	100	92.9	100
Maricopa Skill Center	Phoenix	100	100	100	96.8	92	77.8	76.8	83
Pima Com. College/GTD	Tucson	90	89	88	87.0	85	90	86.4	90
Pima Com. College P.N.	Tucson	92	98	91.3	76.2	85	86.1	85.7	98
GateWay Com. College	Phoenix	98	95	85.7	92.6	92	87.5	97.9	96

Data are based on aggregate results from National Council of State Boards of Nursing and may contain minor errors due to miscoding by candidates. NCLEX® results are only one measure of program performance and due to natural variation can fluctuate from year to year.

*Results of the individual program sites may be obtained by contacting the campus

**NCLEX FIRST TIME PASS RATES
REGISTERED NURSING PROGRAMS
2002**

PROGRAM	TOTAL	PASS	FAIL	PERCENT
AZ State University	143	128	15	90%
AZ Western College	27	19	8	70%
Central AZ College	11	8	3	73%
Cochise College	33	31	2	94%
Eastern AZ College	21	15	6	71%
Grand Canyon U.	29	23	6	79%
MCCDNP*	393	336	57	85%
Mohave C.C.	64	51	13	80%
Northern AZ U.	59	47	12	80%
Northland Pioneer	25	11	14	44%
Pima CC West	137	125	12	91%
University of AZ	87	82	5	94%
Yavapai College	47	46	1	98%
Total AZ	1076	922	154	85.7%
Total National	70659	61233		86.7%

* Maricopa Community College District Nursing Program with campuses at Mesa Community College, Scottsdale Community College, Phoenix College, Glendale Community College, GateWay Community College and Mesa Borwell. For separate pass rates, please contact the individual campuses.

These charts may contain errors due to student misreading.

**NCLEX FIRST TIME PASS RATES
PRACTICAL NURSING PROGRAMS
2002**

PROGRAM	TOTAL	PASS	FAIL	PERCENT
*Scottsdale C.C.	24	24	0	100%
*Yavapai College	8	8	0	100%
*Phoenix College	13	13	0	100%
*Northland Pioneer	10	9	1	90%
*Glendale C.C.	26	24	2	92%
*Cochise College	31	30	1	97%
*Mohave CC	27	25	2	93%
*Central AZ	15	15	0	100%
*Mesa CC	42	42	0	100%
Metro Tech H.S.	16	14	2	88%
*AZ Western	3	3	0	100%
Maricopa Skill Ctr.	67	55	12	83%
Pima Skill Ctr.	72	65	7	90%
*GateWay C.C.	48	47	1	98%
*Pima C.C. West	26	25	1	96%
Total AZ	428	399	29	93.2%
Total National	33,240	28,399		85.4%

This chart may contain errors due to student misreading.

*Associate Degree Multiple Exit Program

Verification Contacts for Compact States

ARIZONA: To verify an Arizona License by phone, call 602.331.8111, and follow the menu options by pressing 1, then select the option you wish to verify by. **You will need to know the individual's social security number or license or certificate number.** To obtain on-line verification, send an email to verify@azbn.org using **only** the RN/LPN/CNA number or social security number without hyphens or spaces. LEAVE THE SUBJECT LINE BLANK

ARKANSAS: To verify an Arkansas license over the phone, interstate compact states may contact Margie Brauer at 501.686.2708 or Margie.brauer@mail.state.ar.us (first) or call our telephone voice response system at 501.682.2200. This automated system will provide licensure verification using a license number.

DELAWARE: Call 302.739.4522

IDAHO: Call 208.334.3110, press "0" and speak to anyone, or press 2 for their automated voice system, or fax request to 208.334.3262

IOWA: To verify an Iowa license over the phone, call the main telephone line at 515.281.3255 and press 2. The Automated Network of Nurse Information will provide licensure verification from a license number or a social security number. On-line verification is available at www.state.ia.us/nursing

MAINE: Call 207.287.1133, press "0". Speak with anyone to verify. Online verification www.maine.gov/boardofnursing.

MARYLAND: To verify a Maryland license over the phone, call 410.585.1900 and press "0". Online verification www.mbon.org.

MISSISSIPPI: Call 601.987.6858 for verifications.

NEBRASKA: Call 402.471.4376 for verifications or use their web site: www.hhs.state.ne.us/lis/lis.asp.

NORTH CAROLINA: The NC website verification information system includes a statement when the licensee has the multistate privilege to practice by virtue of NC being his/her primary state of residence. To access this verification information you need the SSN or certificate number of the licensee. Website is www.ncbon.org. To verify a NC license by phone, contact Angela Ellis at 919.782.3211, ext. 259 or Barbara Powell @ ext 245

SOUTH DAKOTA: To verify a South Dakota license over the phone, call 605.362.2760, or online www.state.sd.us/dcr/nursing.

TEXAS-RN: Call 512.305.7400 press "0" and anyone will verify or auto verification 512.305.7400, press 1 for RN and AP.

TEXAS-VN: Call 512.350.8100, press "1" for phone verification. Call 512.350.8100, press "0" and ask for Licensing Department for verbal verification.

UTAH: To verify a Utah license please call 801.530.6628, press "0" and ask for Nursing.

On-line verification available at www.dopl.utah.gov.

WISCONSIN: On-Line Verifications are available from the WI Department of Regulation and Licensing's website at <http://www.drl.state.wi.us>. Just click on "business and Professional License Lookup" for detail information. The verifications are JCAHO approved and you are able to print directly from our website. Phone verification available at 608.266.2112

Chemical Dependency Committee Call for Members

The Chemical Dependency Committee is seeking individuals interested in serving as a member on the CD Advisory Committee. Qualified applicants should have experience in the treatment and/or recovery monitoring of chemically dependent individuals. A letter of interest along with a current resume may be sent to:

Arizona State Board of Nursing
Attention: Stephanie Nelson, RN MS
Monitoring Department
1651 E. Morten Avenue, Suite 210
Phoenix, AZ 85020

Chemical Dependency Committee Highlights

by Stephanie Nelson, RN, MS
Nurse Practice Consultant, Monitoring

On January 25, 2003 the Chemical Dependency committee held a workshop, "Management Interventions with the Impaired Nurse" to provide current information regarding issues of impairment: recognizing the signs and symptoms, intervening and returning to work. The feedback from the workshop was positive and it was recommended that the workshop be held again.

On February 20, 2003 the Chemical Dependency Committee discussed the following:

- Establishing guidelines for nurses in Monitoring that have been prescribed narcotic analgesia and continue to practice nursing. Options being considered to determine if a nurse is safe to practice are: a Neuropsychological evaluation, independent Medical evaluation, limit access to narcotics, and pain management contracts.
- How to monitor Nurse Practitioner's with prescribing and dispensing privileges that are currently on probation or participating in the CANDO program.
- Review of the policy for urine drug screening and how to address CANDO/Monitoring participants that have been non-compliant.
- Review of the key restrictions policy for CANDO/Monitoring participants.

The Committee will continue to work on these issues and provide guidance to the Board on regulatory management of the impaired/chemically dependent nurses. The next scheduled meetings are: June 19, 2003, August 14, 2003, October 16, 2003, and December 4, 2003. All meetings are open to the public. If you would like further information about the committee, please contact Stephanie Nelson at 602-331-8111 Ext. 135 or Valerie Smith at Ext. 145.

RN/LPN DISCIPLINARY ACTION

January - March 2003

* Not reported in previous Newsletter

DATE	NAME	LICENSE	DISCIPLINE	VIOLATIONS
1/13/2003	ALLOCCO, PAMELA P.	LP014205	Decree of Censure	Positive Urine Drug Screen
12/13/2002*	ANDREWS, GINNY M.	RN040049	Revocation/Non-Voluntary	Failure to Renew, Violating Board Order
2/25/2003	ARIAS, KERRY L.	RN106871	Voluntary Surrender	Drug Use on Duty, Writing Illegal RX, Failure to Comply w/Requirements/Impaired Nurse Program
11/8/2002*	ATNIP, DAISY K.	LP ENDORSEMENT APPLICANT	License Denied	Unsafe Practice, Alcohol Abuse
11/8/2002*	AVILA, MONICA L.	LP ENDORSEMENT APPLICANT	License Denied	Misdemeanor, Theft
1/16/2003	BALDWIN, (ADNEY) SALLIE	RN069275	Voluntary Surrender	Unsafe Practice, Drug Abuse, Alcohol Abuse
12/13/2002*	BARNES, HOLLY H.	RN ENDORSEMENT APPLICANT	License Denied	Misdemeanor, Criminal Conviction-Other, Drug Abuse, Sexual Abuse
3/6/2003	BLACKMOUNTAIN, AURIAH G.	LP021563	Probation Completed	
3/10/2003	BOLTON, RYAN W.	RN106954	Probation	Documentation Errors, Medication Errors, Wastage Errors
1/6/2003	BUBACK, VICKIE L.	RN077833 (Suspension Completed)	Probation	Drug Abuse, Drug Diversion – Self, Failure to Comply w/Requirements/Impaired Nurse Program
12/13/2002*	BULLOCK, CARRIE	LP ENDORSEMENT APPLICANT	License Denied	Fraud, Deceit-Obtaining License, Action in Another Jurisdiction, Practicing without License
3/13/2003	CAMPBELL, PAIGE M.	RN101495	Voluntary Surrender	Drug Abuse, Failure to Comply w/Requirements/Impaired Nurse Program
1/7/2003	CAMPOS, ROBIN L.	LP033594	Decree of Censure	Misdemeanor, Alcohol Abuse
1/24/2003	CARDONA, CYNTHIA L.	RN ENDORSEMENT APPLICANT	License Denied	Misdemeanor, More than one DUI, Action in Another Jurisdiction
3/11/2003	CARRIZOSA, LORRAINE	RN117328	Probation Completed	
1/3/2003	CHIARAMONTE, EVELYN	LP033383	Voluntary Surrender	Documentation Errors, Medication Errors, Violating Board Order
3/2/2003	CHRISTIANSEN, NANCY A.	RN054319	Stayed Revocation w/Suspension	Drug Abuse, Drug Diversion – Self, Violating Board Order
2/19/2003	CLARKE, EARL F.	LP038286	Probation	Criminal Conviction, Theft - Employer
11/6/2002*	COHEN, SCOTT E.	RN100950	Revocation/Non-Voluntary	Documentation Errors, Medication Errors, Drug Abuse, Action in Another Jurisdiction
11/8/2002*	CORNELIUS, TIMOTHY B.	RN EXAM APPLICANT	License Denied	Sexual Abuse, Unprofessional Conduct
2/18/2003	COUCH, JOANN C.	RN087159	Probation	Misdemeanor, Drug Related, Drug Abuse
12/13/2002*	DAVIS, DEBRA A.	RN069636	Revocation/Non-Voluntary	Drug Abuse, Drug Use on Duty, Fraud, Deceit-Fraudulent Documentation
1/28/2003	DIFRANK, JULIE A.	RN048633	Decree of Censure	Unsafe Practice, Failure to Follow Orders, Medication Errors
12/13/2002*	DOOLEY, HEIDI B.	RN100963	Probation	Alcohol Abuse, Fraud, Deceit-Obtaining License, Positive Urine Drug Screen while on duty
2/12/2003	DYSINGER, ANN E.	RN111109/AP1157	Decree of Censure	Failure to Maintain Minimal Standards, Other (APRN)
2/14/2003	ERNST, ALYCIA S.	RN101841	Decree of Censure	Unsafe Practice, Failure to Assess, Failure to Intervene
11/6/2002*	FARLESS, TINA M.	LP032333	Revocation/Non-Voluntary	Medications Errors, Drug Abuse, Alcohol Abuse
12/5/2002*	FARMER, ROBIN S.	RN101328	Stayed Revocation w/Suspension	Alcohol Abuse, Drug Screen Positive, Failure to Comply w/Requirements/Impaired Nurse Program
1/4/2003	FARMER, ROBIN S.	RN101328	Revocation/Non-Voluntary	Alcohol Abuse, Violating Board Order
1/2/2003	FIGUEROA, ABRAHAM J.	RN091133	Stayed Revocation w/Suspension	Alcohol Abuse, Violating Board Order
1/9/2003	FISHER, CHARLES E.	RN038082	Voluntary Surrender	Unsafe Practice, Failure to Follow Orders, Failure to Assess

RN/LPN Disciplinary Action, cont. on pg. 21

*RN/LPN Disciplinary Action, cont. from pg. 20****RN/LPN DISCIPLINARY ACTION******October - December 2002***

* Not reported in previous Newsletter

<i>DATE</i>	<i>NAME</i>	<i>LICENSE</i>	<i>DISCIPLINE</i>	<i>VIOLATIONS</i>
2/18/2003	FRENCH, GINA M.	RN086974	Probation Completed	
1/10/2003	GEE, NANCY S.	RN072687	Probation Completed	
2/18/2003	GILMAN, SCOTT C.	RN111097	Voluntary Surrender	Drug Use on Duty, Drug Diversion – Self, Failure to Comply w/Requirements/Impaired Nurse Program
3/6/2003	GRIMES, JAMIE A.	LP031709	Probation Completed	
1/16/2003	GROUX, DEBROAH L.	LP026835	Probation	Misdemeanor, Criminal Conviction-Drug Related, Drug Abuse
2/25/2003	GUNN, DIANNE	RN044712	Voluntary Surrender	Violating Board Order
3/6/2003	HAMM, ELIZABETH A.	RN112057	Probation Completed	
12/31/2002*	HANDY, IVY M.	RN102740	Decree of Censure	Failure to Assess, Failure to Intervene, Failure to Supervise
1/14/2003	HANSON, MARGARET E.	RN038800	Reinstatement w/Probation	Alcohol Abuse, Reinstatement
3/4/2003	HOKE, SANDRA K.	RN100893	Stayed Revocation w/Probation	Drug Abuse, Failure to Comply w/Requirements/Impaired Nurse Program
2/24/2003	HOLMES, LINDA L.	RN054433	Decree of Censure	Unsafe Practice, Failure to Assess
2/15/2003	HUTCHINSON, DENISE L.	RN100514	Probation	Positive Drug Screen
1/23/2003	ISAACS, BARBARA J.	LP017916	Stayed Suspension w/Probation	Violating Board Order
2/10/2003	JARDINE, JON D.	LP034742	Suspension	Drug Abuse, Drug Diversion-Self, Drug Diversion-Others, Writing Illegal RX, Presenting Illegal RX, Executing Inappropriate Order
12/13/2002*	JOHNSON, TARA L.	LP ENDORSEMENT APPLICANT	License Denied	Misdemeanor, Theft, Failure to Cooperate
3/5/2003	JONES, KAREN A.	RN090538	Decree of Censure	Failure to Follow Orders, Failure to Assess, Failure to Intervene
2/13/2003	KELLOGG, HELEN D.	LP009565	Decree of Censure	Unsafe Practice
2/18/2003	KERCE, CHERYL M.	RN054550/AP0834	Voluntary Surrender	Drug Abuse, Writing Illegal RX
1/30/2003	KNOTT, BARBARA M.	LP008454	Decree of Censure	Failure to Maintain Minimal Standards, Unprofessional Conduct
1/23/2003	KOUNKEL, JOY I.	RN ENDORSEMENT APPLICANT	License Denied	Felony, Misdemeanor, Other-Theft, Drug Abuse
2/13/2003	KOVALCIK, SHANNON MARY	RN111951	Probation	Incompetent Practice Unsafe Practice, Failure to Maintain Minimal Standards
11/28/2002*	LACZNY, BRIDGIT A.	LP030082	Decree of Censure	Failure to Maintain Minimal Standards, Unsafe Practice, False Documentation, Documentation Errors, Medication Errors
2/4/2003	LEE, JEONG H.	RN109542	Probation	Failure to Maintain Minimal Standards, Failure to Intervene
1/20/2003	LIND, SHARI A.	RN080709	Reinstatement w/ Probation	Drug Abuse, Reinstatement
2/25/2003	LOWELL, STEPHANIE H.	RN051299/AP0062	Decree of Censure	Failure to Assess, TX Errors (APRN)
12/23/2002*	MANHEIMER, LUCITA	LP037269	Probation Completed	
3/4/2003	MANIS, BRISA L.	RN110806	Stayed Revocation w/Suspension	Failure to Comply w/Requirements/Impaired Nurse Program, Fraud, Deceit-Obtaining Employment, Failure to Maintain Minimal Standards, Alcohol Abuse
11/8/2002*	MARCUM, SARAH E.	RN ENDORSEMENT APPLICANT	License Denied	Action in Another Jurisdiction
12/10/2002*	MARINETTE, PAUL	LP029315	Probation	Unsafe Practice, Executing Inappropriate Orders, Practicing Beyond Scope

RN/LPN Disciplinary Action, cont. on pg. 22

RN/LPN Disciplinary Action, cont. from pg. 21

RN/LPN DISCIPLINARY ACTION

January - March 2003

* Not reported in previous Newsletter

DATE	NAME	LICENSE	DISCIPLINE	VIOLATIONS
1/10/2003	McCARTT JR, SAMUEL T.	RN115283	Probation Completed	
2/19/2003	McCORMICK, KELLY A.	RN121929	Probation	Failure to Maintain Minimal Standards Practicing Beyond Scope
2/25/2003	MICCIA, ANTHONY C.	RN079914	Voluntary Surrender	Alcohol Abuse, Failure to Comply w/Requirements/Impaired Nurse Program
11/6/2002*	MOORE, JEREMY A.	LP035178	Revocation/Non-Voluntary	Felony, Against Person
11/6/2002*	MORPHEW, LISA K.	RN089026	Revocation/Non-Voluntary	Drug Abuse, Drug Diversion – Self, Failure to Comply w/Requirements/Impaired Nurse Program
2/20/2003	MOSHER, ELIZABETH A.	RN017401	Voluntary Surrender	Alcohol Abuse
2/15/2003	MOSS, MARY W.	RN075287	Probation	Criminal Conviction-Completed Court Diversion Program, Drug Abuse, Alcohol Abuse
12/26/2002*	MOURNING-RUIZ, ANGELA	RN049932	Decree of Censure	Failure to Maintain Minimal Standards
2/27/2003	MURRAY, TRACY F.	RN120023	Probation	Alcohol Abuse, Positive pre-employment drug screen
2/4/2003	NAVARRO, CYNTHIA I.	RN121804	Probation	Misdemeanor, Theft - Employer
1/20/2003	PAGE, STEPHANIE L.	RN090090	Decree of Censure	Failure to follow policy
12/20/2002*	PARKER, LES P.	RN103137	Stayed Revocation w/Suspension	Drug Abuse, Drug Use on Duty, Drug Diversion – Self, Failure to Comply w/Requirements/Impaired Nurse Program
1/30/2003	PARKER, LES P.	RN103137/LP032722	Revocation/Non-Voluntary	Violating Board Order
2/11/2003	PEARSON, KATHERINE C.	LP002856	Decree of Censure	Failure to Follow Orders, Practicing Beyond Scope
12/13/2002*	PRIESTER, JOLYN K.	RN083637	Revocation/Non-Voluntary	Documentation Errors, Drug Diversion – Self, Violating Board Order
2/5/2003	PULLIAM, DEBORAH J.	RN118922	Revocation/Non-Voluntary	Violating Board Order
3/2/2003	REED, LARRAINE E.	RN089438	Decree of Censure	Failure to Maintain Minimal Standards, Documentation Errors
1/6/2003	REYES, DIANN B.	RN098670	Decree of Censure	Failure to Assess, Failure to Intervene, Failure to Supervise
11/6/2002*	REYNOLDS, JANA L.	LP027218	Revocation/Non-Voluntary	Drug Abuse, Presenting Illegal RX, Failure to Comply w/Requirements/Impaired Nurse Program
1/9/2003	RICE, LINDA JO	LP035475	Voluntary Surrender	Drug Abuse, Drug Diversion – Self, Failure to Comply w/Requirements/Impaired Nurse Program
10/16/2002*	RICHARDSON, MARLA V.	RN089714	Decree of Censure	Failure to Assess, Failure to Intervene
12/13/2002*	ROZENZHAK, ZINAIDA	RN ENDORSEMENT APPLICANT	License Denied	Misdemeanor, Theft
1/9/2003	SAIMO, CYBELE E.	LP034051	Voluntary Surrender	Violating Board Order
11/8/2002*	SILVA, LINDA J.	RN ENDORSEMENT APPLICANT	License Denied	Failure to Maintain Minimal Standards, Documentation Errors, False Documentation
1/24/2003	SOUZA, BRIAN A.	RN ENDORSEMENT APPLICANT	License Denied	Felony, Misdemeanor, Disorderly Conduct/Prostitution Conviction, Alcohol Abuse
3/6/2003	STRUSE, MARILYN J.	RN087488	Probation Completed	
1/17/2003	STUCKLESS, JENNIFER M.	RN091401	Revocation/Non-Voluntary	Drug Abuse, Violating Board Order
1/11/2003	TELFORD, WENDELL T.	RN034482	Probation	Drug Abuse, Violating Board Order
11/8/2002*	THOMAS, DEBRA A.	LP ENDORSEMENT APPLICANT	License Denied	Misdemeanor, Alcohol Abuse, Failure to cooperate with the Board
11/6/2002*	TINSTON, JOAN A.	RN ENDORSEMENT APPLICANT	License Denied	Action in Another Jurisdiction
12/19/2002*	TURNEY, BARBARA A.	RN061038	Voluntary Surrender	Drug Abuse, Violating Board Order
1/23/2003	VOLK, NANCY J.	RN080809	Reinstatement Denied	Fraud, Deceit-Obtaining License, Documentation Errors, Unsafe Practice, Fraud, Deceit-Obtaining Employment
3/1/2003	WALSH, COLLEEN T.	RN111356	Decree of Censure	Unsafe Practice, Failure to Follow Orders, Medication Errors

CNA DISCIPLINARY ACTION

January - March 2003

* Not reported in previous Newsletter

<i>Date</i>	<i>Name</i>	<i>Certificate</i>	<i>Discipline</i>	<i>Violation(s)</i>
12/13/2002	Aguilar, Anthony David	CNA Applicant	Certificate Denied	Drug Related
1/23/2003	Alcorta, Edward Morales	CNA Applicant	Certificate Denied	Misdemeanor; Failure to Maintain Minimal Standards; Alcohol Abuse; Failure to cooperate
12/13/2002	Allen, Kenneth L.	CNA Applicant	Certificate Denied	Felony; Theft - Client; Violating State/Federal Statutes/Rules
11/7/2002	Antikiewic, Daniel s.	CNA999952022	Revocation/Non-voluntary	Felony; Misdemeanor; Obtaining Certificate by Fraud
11/7/2002	Antonio, Althea	CNA Applicant	Certificate Denied	Felony; Alcohol Abuse
12/13/2002	Arrowsmith, Amy Ann	CNA Applicant	Certificate Denied	Misdemeanor; Drug Related; Failure to Practice Safely
1/23/2003	Austin, Patika Arnetta	CNA Applicant	Certificate Denied	Misdemeanor; Sexual Misconduct-Multiple prostitution arrest
1/4/2003	Banks, Latonia R.	CNA267364641	Civil Penalty	Failure to Follow Orders; Leaving Duty Station
2/21/2003	Barrett, Cathleen	CNA Applicant	Civil Penalty	Misdemeanor; Alcohol Abuse
12/13/2002	Barszcz, Alice Dorothy	CNA Applicant	Certificate Denied	Theft - Client; Misconduct
1/23/2003	Begay, Kathleen	CNA Applicant	Certificate Denied	Misdemeanor; Criminal Conviction; Failure to cooperate with the Board
11/6/2002	Bencomo, Raymond	CNA587980803	Revocation/Non-voluntary	Misdemeanor; Alcohol Abuse; Violating Board Order
9/13/2002	Bernardo, Antonia M.	CNA Applicant	Certificate Denied	Fraud/Deceit; Failure to cooperate
11/7/2002	Blake, Elizabeth	CNA Applicant	Certificate Denied	Misdemeanor; Alcohol Abuse
3/17/2003	Bolton, Helena	CNA999987935	Suspension	Violating Board Order
12/14/2002	Bolton, Helena M.	CNA999987935	Civil Penalty	Physical Abuse
1/13/2003	Bowers, Asha Paris	CNA999987197	Suspension	Violating Board Order
12/13/2002	Brzezniak, David J.	CNA798213466	Revocation/Non-voluntary	Felony; Misdemeanor
12/13/2002	Carl, Cynthia L.	CNA999949065	Revocation/Court Ordered	Felony; Theft - Client; Theft - Employer; Drug Abuse
11/7/2002	Carlen, Chelsea	CNA Applicant	Certificate Denied	Drug Related; Fraud/Deceit; Failure to cooperate
11/7/2002	Catalano, Thomas M.	CNA Applicant	Certificate Denied	Drug Related
11/7/2002	Cessna, Tarish N.	CNA Applicant	Certificate Denied	Felony; Misdemeanor
12/13/2003	Chase, Barbera M.	CNA Applicant	Certificate Denied	Misdemeanor; Criminal Conviction; Alcohol Abuse
11/6/2002	Christie, Loretta A.	CNA284476441	Revocation/Non-voluntary	Felony
11/6/2002	Combs, Marian	CNA659428103	Revocation/Non-voluntary	Action in Another Jurisdiction; Failed to notify board of address change
11/7/2002	Cook, Summer E.	CNA Applicant	Certificate Denied	Misdemeanor
1/23/2003	Coons, Buster	CNA Applicant	Certificate Denied	Misdemeanor; Alcohol Abuse; Failure to cooperate
1/23/2003	Cornell, Annette	CNA Applicant	Certificate Denied	Misdemeanor; Criminal Conviction; Failure to cooperate
2/24/2003	Coronado, Gabriela	CNA Applicant	Civil Penalty	Misdemeanor; Drug Related
9/13/2002	Cotton, Lindsey L.	CNA Applicant	Certificate Denied	Felony; Misdemeanor
1/13/2003	Craig, Joy Lynn	CNA999952261	Suspension	Violating Board Order
2/11/2003	Datingaling, Josephine	CNA Applicant	Civil Penalty	Criminal Conviction; Misconduct; Fraud/Deceit
11/6/2002	Daum, Sandra K.	CNA194371969	Revocation/Non-voluntary	Felony; Misdemeanor
12/13/2002	Davis, Jennifer R.	CNA Applicant	Certificate Denied	Felony; Obtaining Certificate by Fraud; Failure to cooperate
11/7/2002	Delgado, Reynaldo G.	CNA Applicant	Certificate Denied	Misdemeanor; Obtaining Certificate by Fraud
12/13/2002 Employer	Denning, Leonard J.	CNA Applicant	Certificate Denied	False Documentation; Theft - Client; Theft -

CNA Disciplinary Action, cont. on pg. 24

CNA Disciplinary Action, cont. from pg. 23

CNA DISCIPLINARY ACTION, cont.

January - March 2003

* Not reported in previous Newsletter

<i>Date</i>	<i>Name</i>	<i>Certificate</i>	<i>Discipline</i>	<i>Violation(s)</i>
2/12/2003	Downs, Gregory R.	CNA674623103	Civil Penalty	Leaving Duty Station; Verbal Abuse; Misconduct
12/28/2002	Encinas, Benjamin M.	CNA999952400	Civil Penalty	False Documentation
12/13/2002	Evans, Tracy	CNA Applicant	Certificate Denied	Alcohol Abuse
1/23/2003	Fernandez, Caroline	CNA Applicant	Certificate Denied	Misdemeanor; Obtaining Certificate by Fraud; Action in Another Jurisdiction
11/7/2002	Fitzgerald, Brenda L.	CNA Applicant	Civil Penalty	Misdemeanor; Against Person
11/6/2002	Fitzgerald, Dawn	CNA595467103	Revocation/Non-voluntary	Misdemeanor; Against Person; Practicing without License
9/13/2002	Forrer, Valerie	CNA Applicant	Certificate Denied	Misdemeanor; Drug Related
1/23/2003	Galaviz, Marcelo A.	CNA Applicant	Certificate Denied	Misdemeanor; Failure to cooperate
1/23/2003	Getzen, David M.	CNA Applicant	Certificate Denied	Felony; Misdemeanor; Alcohol Abuse
12/13/2002	Gillett, Ward D.	CNA999949379	Revocation/Non-voluntary	Misdemeanor; Against Person; Drug Abuse
1/23/2003	Goode, Carol S.	CNA Applicant	Certificate Denied	Misdemeanor; Drug Related; Failure to cooperate
1/24/2003	Greenwald, Keri Virginia	CNA999997034	Civil Penalty	Misdemeanor
11/20/2002	Hance, Maria A.	CNA800890413	Civil Penalty	Verbal Abuse
7/25/2002	Hand, Danya C.	CNA999995245	Suspension	Drug Abuse
2/16/2003	Hanus, Carrie	CNA999997356	Civil Penalty	Misdemeanor
1/23/2003	Harris, Andrea May	CNA Applicant	Certificate Denied	Drug Abuse; Sale of Drugs
1/10/2003	Heller, Kimba S.	CNA471153696	Civil Penalty	Failure to Maintain Minimal Standards; Obtaining Certificate by Fraud; Practicing without certificate
11/6/2002	Herington, Julie A.	CNA960407543	Revocation/Non-voluntary	Verbal Abuse; Misconduct; Failed to respond to Board
1/10/2003	Hernandez, Maria D.	CNA769795803	Civil Penalty	Unprofessional Conduct; Leaving Duty Station; Misconduct
11/7/2002	Hines, Rhonda M.	CNA Applicant	Certificate Denied	Misdemeanor; Drug Abuse
11/7/2002	Hodges, Jahmal A.	CNA Applicant	Certificate Denied	Misdemeanor; Against Person; Criminal Conviction; Drug Related; Fraud/Deceit; Failing to cooperate
12/19/2002	Hodgman, Susie Y.	CNA202028103	Civil Penalty	Failure to Maintain Minimal Standards; Unsafe Practice
11/6/2002	Huckaby, Antonette	CNA487260803	Revocation/Non-voluntary	Physical Abuse; Verbal Abuse; Drug Related
11/7/2002	Jackowick, Laura B.	CNA Applicant	Certificate Denied	Failure to Maintain Minimal Standards; Criminal Conviction-Other alcohol related; Failure to cooperate with Board
6/7/2002	Jim, Clara	CNA Applicant	Certificate Denied	Alcohol Abuse
11/6/2002	Johnson, Shannon D.	CNA999949432	Revocation/Non-voluntary	Misdemeanor; Drug Related
9/12/2002	Joseph, Leah J.	CNA Applicant	Certificate Denied	Misdemeanor; Failure to cooperate
12/13/2002	Kessler, David J.	CNA999950202	Revocation/Non-voluntary	Failure to Maintain Minimal Standards; Physical Abuse; Violating Board Order
11/6/2002	Kirkwood, Kristine L.	CNA327313773	Revocation/Non-voluntary	Drug Abuse; Alcohol Abuse
11/6/2002	Knapp, April B.	CNA705708809	Revocation/Non-voluntary	Felony; Drug Related
1/23/2003	Koch, Richard A.	CNA Applicant	Certificate Denied	Misdemeanor; Against Person; Failure to cooperate
11/6/2002	Kueneman, Barbara Grace	CNA999953478	Revocation/Non-voluntary	Drug Abuse; Drug Related
1/23/2003	Lemart, Betty Lois	CNA Applicant	Certificate Denied	Misdemeanor; Failure to Maintain Minimal Standards
12/13/2002	Lopez, Angie M.	CNA084858803	Revocation/Non-voluntary	Theft - Client; Misconduct; Fraud/Deceit; Failure to cooperate during investigation;
11/6/2002	Lucchesi, Gail S.	CNA515341609	Revocation/Non-voluntary	Verbal Abuse; Misconduct; Fraud/Deceit; Failing to respond to board

CNA Disciplinary Action, cont. on pg. 25

CNA Disciplinary Action, cont. from pg. 24

CNA DISCIPLINARY ACTION, cont.

January - March 2003

* Not reported in previous Newsletter

<i>Date</i>	<i>Name</i>	<i>Certificate</i>	<i>Discipline</i>	<i>Violation(s)</i>
1/23/2003	Macmillan, Jessie P.	CNA Applicant	Certificate Denied	Obtaining Certificate by Fraud; Failure to cooperate
11/6/2002	Mantalaba, Norma P.	CNA572741341	Revocation/Non-voluntary	Action in Another Jurisdiction
1/23/2003	Martinez, Michelle D.	CNA Applicant	Certificate Denied	Misdemeanor; Theft - Employer
11/7/2002	Mason, Thomas	CNA Applicant	Certificate Denied	Felony; Drug Related; Sale of Drugs
11/7/2002	Mayer, Joseph P.	CNA Applicant	Certificate Denied	Misdemeanor; Drug Related; Failure to cooperate with board
7/16/2002	McElroy, Alba D.	CNA999989078	Suspension	Incompetent Practice; False Documentation
11/7/2002	Mclain, Tomi B.	CNA Applicant	Certificate Denied	Misdemeanor
12/26/2002	Meshake, Mary Elizabeth	CNA9999953411	Civil Penalty	Physical Abuse; Verbal Abuse; Alcohol Abuse
11/7/2002	Miksell, Corey	CNA Applicant	Certificate Denied	Misdemeanor; Failure to Cooperate
11/6/2002	Mills, Janice M.	CNA563967103	Revocation/Non-voluntary	Misdemeanor; Drug Related; Drug Abuse
12/13/2002	Mills, Sullivan	CNA Applicant	Certificate Denied	Felony; Misdemeanor; Drug Abuse
11/6/2002	Minatrea, William	CNA620027337	Revocation/Non-voluntary	False Documentation; Leaving Duty Station; Drug Abuse
12/13/2002	Morneweg, Laura S.	CNA Applicant	Certificate Denied	Felony
9/12/2002	Mullins, Carla J.	CNA Applicant	Certificate Denied	Misdemeanor; Criminal Conviction; Obtaining Certificate by Fraud
11/7/2002	O'Neal, Al Maurice	CNA Applicant	Certificate Denied	Misdemeanor; Failure to Maintain Minimal Standards; Sale of Drugs; Violating State/Federal Statutes/Rules
2/11/2003	Odoms, April D.	CNA999997283	Civil Penalty	Misdemeanor; Fraud/Deceit
11/6/2002	Ohoro, Cheryl D.	CNA781862103	Revocation/Non-voluntary	Misdemeanor; Alcohol Abuse; Obtaining Certificate by Fraud
1/23/2003	Oliver, Danielle R.	CNA Applicant	Certificate Denied	Alcohol and assault related arrests; Failure to cooperate
11/6/2002	Orozco, George M.	CNA329881103	Revocation/Non-voluntary	Violating Board Order
12/13/2002	Osetek, Margaret M.	CNA999948398	Revocation/Non-voluntary	Verbal Abuse; Fraud/Deceit
12/13/2002	Patel, Vinodrai M.	CNA Applicant	Certificate Denied	Misdemeanor; Alcohol Related, Drug Related; Failure to cooperate
1/13/2003	Peaches, Geniece M.	CNA999995235	Suspension	Violating Board Order
12/23/2002	Pedrego, Francine M.	CNA999996731	Civil Penalty	Misdemeanor
12/13/2002	Peralta, Marie A.	CNA999991357	Civil Penalty	Neglect
11/7/2002	Phillips, Anthony	CNA Applicant	Certificate Denied	Failure to Maintain Minimal Standards; Failure to cooperate; Other-positive drug screen
11/6/2002	Pickering, Joanne M.	CNA999947929	Revocation/Non-voluntary	Writing Illegal RX; Presenting Illegal RX; Obtaining Other Credential; Fraud/Deceit
1/23/2003	Pulliam, Jacquelyn R.	CNA Applicant	Certificate Denied	DUI more than 1; Failure to Maintain Minimal Standards; Failure to cooperate with the investigation;
1/29/2003	Recio, Amanda H.	CNA999947924	Revocation/Non-voluntary	Misdemeanor; Against Property; Drug Abuse
9/11/2002	Redus, Sheronda Y.	CNA082439237	Revocation/Court Ordered	Felony; Unsafe Practice; Obtaining Certificate by Fraud
12/13/2002	Reyes, Claudia	CNA Applicant	Certificate Denied	Felony; Misdemeanor; Drug Related; Criminal Conviction
11/6/2002	Reyes, Edwin	CNA847773246	Revocation/Court Ordered	Leaving Duty Station; Alcohol Abuse
11/6/2002	Roberson, Ellick	CNA561057614	Revocation/Court Ordered	Felony; Drug Related
11/6/2002	Roberts, Sheila A.	CNA999947400	Revocation/Non-voluntary	Misdemeanor; Obtaining Certificate by Fraud; Failure to cooperate
2/12/2003	Robertson, Colin D.	CNA Applicant	Civil Penalty	Misdemeanor; Drug Related

CNA Disciplinary Action, cont. on pg. 26

CNA Disciplinary Action, cont. from pg. 25

CNA DISCIPLINARY ACTION, cont.

January - March 2003

* Not reported in previous Newsletter

<i>Date</i>	<i>Name</i>	<i>Certificate</i>	<i>Discipline</i>	<i>Violation(s)</i>
7/18/2002	Robinson, Betty J.	CNA Applicant	Certificate Denied	Felony
11/7/2002	Robinson, Erlinda	CNA Applicant	Certificate Denied	Felony; Drug Abuse; Obtaining Certificate by Fraud
11/7/2002	Robles, Tanica	CNA Applicant	Certificate Denied	Misdemeanor; Theft - Employer; Alcohol Abuse; Fraud/Deceit;
11/7/2002	Rodriquez, Patricia	CNA Applicant	Certificate Denied	Felony; Theft – Employer
3/17/2003	Rogers, Brian F.	CNA999996373	Suspension	Violating Board Order
12/27/2002	Rohling, Laura L.	CNA835824441	Civil Penalty	False Documentation; Failure to cooperate
2/7/2003	Romero, Gabriel R.	CNA999997225	Civil Penalty	Misdemeanor; Alcohol Abuse
9/13/2002	Ross, Adam	CNA Applicant	Certificate Denied	Criminal Conviction; Failure to cooperate
1/23/2003	Sainval, Yvette	CNA Applicant	Certificate Denied	Failure to Maintain Minimal Standards; Adjudication Mentally Ill; Failure to cooperate
6/28/2002	Salas, Angela A.	CNA999990735	Voluntary Surrender	Drug Abuse
1/15/2003	Shepherd, Ronetta A.	CNA549255349	Civil Penalty	Criminal Conviction; Alcohol Abuse
11/7/2002	Shepherd, Vanessa M.	CNA Applicant	Certificate Denied	Misdemeanor; Drug Abuse
9/13/2002	Sigler, Teresa A.	CNA Applicant	Certificate Denied	Failure to Maintain Minimal Standards
1/27/2003	Skatvold, Kimberly J.	CNA999997055	Civil Penalty	Criminal Conviction
11/7/2002	Smith, Lisa D.	CNA Applicant	Certificate Denied	Failure to Maintain Minimal Standards; Misd. Alcohol related; Failure to cooperate
11/19/2002	Thomas, Elvera	CNA999990626	Revocation/Court Ordered	Physical Abuse
1/13/2003	Valtierra, Doris F.	CNA918195803	Civil Penalty	False Documentation
2/13/2003	Verdugo, Renee	CNA Applicant	Civil Penalty	Misdemeanor; Criminal Conviction
11/6/2002	Vida, Gretchen A.	CNA089045459	Revocation/Non-voluntary	Drug Abuse; Alcohol Abuse
9/13/2002	Villareal, Leticia	CNA Applicant	Certificate Denied	Misdemeanor; Criminal Conviction; Fraud/Deceit
1/23/2003	Wagner, Jeri Lynn	CNA Applicant	Certificate Denied	Misdemeanor; Misconduct; Failure to cooperate with the investigation
12/17/2002	Warr, Don	CNA999989800	Civil Penalty	Theft - Employer; Failure to Renew
11/6/2002	Wasserman, Jaymie R.	CNA999950009	Revocation/Non-voluntary	Drug Related; Obtaining Certificate by Fraud; Failure to respond
12/13/2002	Weaver, Deanna E.	CNA236967103	Revocation/Non-voluntary	Drug Abuse; Fraud/Deceit; Felony
2/26/2003	Whipple, Julia J.	CNA180102353	Civil Penalty	Failure to Maintain Minimal Standards; False Documentation; Fraudulent Billing
11/7/2002	White, Lori Kay	CNA Applicant	Certificate Denied	Felony; Misdemeanor
11/7/2002	Wilcox, Joan C.	CNA Applicant	Certificate Denied	Felony; Obtaining Certificate by Fraud
11/6/2002	Williams, Heather	CNA Applicant	Certificate Denied	Drug Abuse; Failure to cooperate
11/6/2002	Williams, Nyla S.	CNA999952378	Revocation/Non-voluntary	Felony; Drug Use on Duty; Drug Related
12/13/2002	Williams, Verona T.	CNA879254103	Revocation/Non-voluntary	Misdemeanor; Fraud/Deceit; Failure to cooperate
12/13/2002	Wood, Robert A.	CNA563701046	Revocation/Non-voluntary	Drug Abuse; Drug Use on Duty
12/30/2002	Yazzie, Helena R.	CNA762942353	Civil Penalty	Unsafe Practice; Misconduct
1/23/2003	Yazzie, Ivalou	CNA Applicant	Certificate Denied	Misdemeanor; Criminal Conviction; Alcohol Abuse; Failure to cooperate

Regulation Rundown

by Pamela Randolph RN, MS, CPNP,
Nurse Practice Consultant

Current Rule Activity

Articles 6 and 7 Rules on Practice and Procedure and Public Participation

These articles were identified for change and updating in the five-year rule review. A docket and proposed rules were filed with the Secretary of State on June 28, 2002. An oral proceeding was held on August 23, 2002, at 9 a.m. in the Board offices. No persons testified. The final rule was approved by the Board and was submitted to the Governor's Regulatory Review Council on September 16, 2002. Due to some changes that are not substantial, the rule was delayed but will be heard at the Governor's Regulatory Review Council (GRRC) on April 1, 2003, and should be effective some time in June.

Future Rule Activity

Article 3. Licensure. The Scope of Practice Committee reviewed three drafts of this future rulemaking. The Education Committee will review a second draft of the rule at their March meeting. Work and revision is almost completed and a courtesy review by GRRC had been requested. Anyone wishing to view a draft to offer input may contact me at prandolph@azbn.org.

Article 5. Advanced Practice Nursing. Work is commencing on a preliminary draft that will be reviewed by the Advanced Practice Committee at their next meeting in May.

Article 4. Regulation. The Board anticipates that rule-making will begin by December 2003. The Scope of Practice, Education, and Chemical Dependency Committees will participate in reviewing drafts of the rule.

The person to contact at the Board regarding rules is:

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Nurse Aide Program Sanctions Currently In Effect

FACILITY	CITY	BEGIN DATE	END DATE	COMMENTS
Chinle Nursing Home	Chinle	12/18/01	12/18/03	Waiver currently in effect
Chris Ridge Village	Phoenix	10/03/01	10/03/03	
Infinia at Foothills (formerly Foothills Manor)	Phoenix	08/23/01	08/23/03	
Glendale Care Center	Glendale	12/11/01	12/11/03	
Life Care Center of Paradise Valley	Phoenix	09/23/02	09/23/04	Waiver currently in effect
Meadow Park Care Center	Prescott	05/24/01	05/24/03	
Plaza Healthcare	Scottsdale	05/17/01	05/17/03	
Infinia at Show Low (formerly Pueblo Norte Nursing)	Show Low	11/13/01	11/13/03	
Sabino Canyon Nursing & Rehab	Tucson	04/27/01	04/27/03	
Sunbridge Park Villa	Tucson	11/16/01	11/16/03	

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Arizona State Board of Nursing

Nursing Assistant Programs Current Approved Program List — March 2003

Facility

Apache Junction Health Care Center	Apache Junction	(480) 983-0700
Arizona Eastern Star	Phoenix	(602) 954-9178
Beatitudes Campus of Care	Phoenix	(602) 995-2611
Beverly Healthcare Shadow Mountain	Scottsdale	(480) 860-1766
Bryans Extended Care	Phoenix	(602) 870-6060
Capri Care Center	Phoenix	(602) 944-1574
Casa Del Mar Nursing & Sunbridge Rehabilitation Center	Scottsdale	(480) 994-1333
Catalina Care Center, Sunbridge	Tucson	(520) 795-9574
Chandler Health Care Center	Chandler	(480) 899-6717
Christian Care Nursing Center	Phoenix	(602) 861-3241
Chula Vista Nursing Home	Mesa	(480) 832-3903
Citadel Care Center	Mesa	(480) 832-5555
Desert Cove Nursing Center	Chandler	(480) 899-0641
Desert Life Rehabilitation and Care Center	Tucson	(520) 297-8311
Devon Gables Health Care Center	Tucson	(520) 296-6181
East Mesa Care Center, Sunbridge	Mesa	(480) 832-8333
Gardens Rehab & Care Center, The	Kingman	(928) 719-0718
Gila River Indian Care Center	Laveen	(520) 430-3813
Good Shepherd Retirement Community	Peoria	(623) 875-0100
Handmaker's Jewish Services for the Aging	Tucson	(520) 881-2323
Havasu Nursing Center	Lake Havasu	(928) 453-1500
Heather Glen Care Center	Glendale	(623) 842-4025
Infinia at Camp Verde, formerly Arbors Healthcare	Camp Verde	(928) 567-5253
Infinia at Flagstaff	Flagstaff	(928) 779-6931
Kachina Point Healthcare	Sedona	(928) 284-1000
Kivel Campus of Care	Phoenix	(602) 956-3110
La Canada Care Center	Tucson	(520) 797-1191
La Colina Health Care	Tucson	(520) 294-0005
Lake Hills Inn	Lake Havasu City	(928) 505-5552
Las Flores Nursing Center	Mesa	(480) 832-5160
Laurel Mesa Health Care Ctr aka East Valley Medical & Rehab. Center	Mesa	(480) 833-4226
Life Care Center at South Mountain	Phoenix	(602) 243-2780
Life Care Center of North Glendale	Glendale	(602) 843-8433
Life Care Center of Scottsdale	Scottsdale	(480) 860-6396
Life Care Center of Tucson	Tucson	(520) 575-0900
Marriott's Forum Pueblo Norte	Scottsdale	(480) 948-5800
Mi Casa Nursing Center	Mesa	(480) 981-0687
Mountain View Care Center	Tucson	(520) 797-2600
Mountain View Manor	Prescott	(928) 778-4837
Northern Cochise Nursing Home	Wilcox	(520) 384-3541
Payson Care Center	Payson	(520) 474-6896
Phoenix Mountain Nursing Center	Phoenix	(602) 996-5200
Plaza Del Rio Care Center	Peoria	(623) 933-7722
Prescott Samaritan Village	Prescott	(928) 778-2450
Prescott Valley Samaritan Center	Prescott Valley	(928) 775-0045
Quiburi Mission	Benson	(520) 586-2372
Ridgecrest Health Care, FKA Grancare Medical Center of Paradise Valley	Phoenix	(602) 482-6671
Safford Care Center: Infinia	Safford	(520) 428-4910
Scottsdale Heritage Court	Scottsdale	(480) 949-5400
SilverRidge Village	Bullhead City	(928) 763-1404
Southern Arizona Veteran's Administration Medical Center	Tucson	(520) 629-6787
Springdale Village	Mesa	(480) 981-8844
CNA Training Program		
Sun Grove Village Care Center	Peoria	(623) 566-0642
The Peaks	Flagstaff	(928) 774-7160
Village Green Healthcare Center	Phoenix	(602) 264-5274
Westview Manor	Sun City	(623) 933-0022

Hospital

Pima Community College @ Holy Cross Hospital	Tucson	(520) 206-5140
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Independent

Academy for Caregiving - Chapter Classroom - American Red Cross	Phoenix	(602) 336-6660
Academy for Caregiving @ East Valley Service Center American Red Cross	Phoenix	(602) 336-6660
Academy for Caregiving @ Goodwill Industries - American Red Cross	Phoenix	(602) 336-6600
Academy for Caregiving @ Humanities & Science	Phoenix	(602) 336-6660
Academy for Caregiving @ Pioneer Home Prescott	Phoenix	(602) 336-6660
Academy for Caregiving at East Mesa Care Center - American Red Cross	Phoenix	(602) 336-6660
Academy for Caregiving at Sun Health	Phoenix	(602) 336-6660
Banker's NA Program at Desert Highlands	Kingman	(928) 716-3035
Caring Connection, The	Amado	(520) 398-2090
Direct Care Giver Association	Tucson	(520) 325-4870
Dynamic Registry Nursing Assistant Program	Glendale	(623) 435-9000
Fred G. Acosta Job Corps	Tucson	(520) 792-3015
Horizon Health Care Inst @ Wickenburg Regional Med Center - Wickenburg AZ	Sierra Vista	(520) 417-2955
Horizon Health Care Inst. @ Las Fuentes - Care Center, Prescott	Sierra Vista	(520) 417-2955
Horizon Health Care Institute	Sierra Vista	(520) 417-2955
Horizon Health Care AZ Pioneer Home	Sierra Vista	(520) 417-2955
Horizon Health Care Inst. @ Infinia of Douglas	Sierra Vista	(520) 417-2955
Phoenix Shanti Group	Phoenix	(602) 279-0008
Referral for Senior Adult Assistance	Mesa	(480) 835-7679
Reflections Behavior Health	Tucson	(520) 297-3872
Saunders Assoc. @ Chinle Nursing Home	Chinle	(920) 739-4653
The Caring Connection	AMADO	(520) 398-2090
PRECEPTOR COURSE		
The River CNA Program @ Silver Ridge Village	Bull Head	(928) 763-1404
Tuba City Regional Health Care NA Program	Tuba City	(928) 283-2524
Yuma Private Industry Council - Palm View Rehab & Care Center	Yuma	(520) 344-5529
Yuma Private Industry Council @ Life Care Center	Yuma	(520) 329-0990
Yuma Private Industry Council at La Mesa Rehabilitation and Care Center	Yuma	(520) 329-0990
Yuma Private Industry Council at Yuma Nursing Center	Yuma	(520) 329-0990
School		
Arizona Institute of Business and Technology - Intl. Institute of Americas	Phoenix	(623) 849-8208
Arizona Western College	Yuma	(928) 726-1000
AWC Nursing Assistant at La Paz	Parker	
Buckeye Union High School CNA Training Program	Buckeye	(623) 386-9719
Cactus High School, CNA Program	Glendale	(623) 412-5000
Centennial High School	Peoria	(623) 412-4445
Central Arizona College - Signal Peak Campus	Apache Junction	(480) 288-4017
Central Arizona College - Signal Peak Campus/NUR121	Apache Junction	(480) 228-4017
Central Arizona College @ Casa Grand UHS	Apache Junction	(480) 288-4017
Central Arizona College @ Santa Cruz High School	Apache Junction	(480) 288-4017
Central Arizona College Aravaipa Campus	Apache Junction	(480) 288-4017
Central Arizona College Superstition Mtn Campus	Apache Junction	(480) 288-4404
Cochise College @ St. David High School	Douglas	(520) 417-4016
Cochise College Douglas	Douglas	(520) 364-7943
Cochise College, Nur 122	Douglas,	(520) 417-4016
Cochise College/Benson Outreach	Benson	(800) 966-7943
Cochise College-Douglas Outreach Program	Sierra Vista	(520) 364-7943

Programs, cont. on pg. 29

Programs, cont. from pg. 28

Cochise College-Sierra Vista	Sierra Vista	(520) 364-7943
Coconino Community College	Flagstaff	(928) 527-1222
Coconino Community College/Page	PAGE	(928) 645-3987
Coconino High School	Flagstaff	(928) 522-6140
College America CNA Program	Flagstaff	(928) 526-0763
Cortez High School Glendale District	Phoenix	(602) 993-6826
Dysart High School	El Mirage	(623) 876-7000
Dysart HS @ Southwest Skill Center	Avondale	(623) 535-2772
East Valley Institute of Technology	Mesa	(480) 461-4052
Eastern Arizona College - Thatcher	Thatcher	(520) 428-8389
Flagstaff High School	Flagstaff	(928) 773-8135
Gateway Community College	Phoenix	(602) 392-5025
Gila County Community College Dist. - Globe	Globe	(928) 425-8481
Gila County Community College Dist. - Rim Country	Payson	(928) 468-8039
Glendale Community College	Glendale	(623) 845-3264
Globe High School	Globe	(602) 425-3211
Lamson College	Scottsdale	(480) 898-7000
Maricopa Skill Center	Phoenix	(602) 238-4300
Mesa Community College	Mesa	(480) 461-7106
Mesa Community College/Boswell	Sun City	(623) 974-7837
Metro Tech	Phoenix	(602) 271-2650
Miami High School	Miami	(928) 425-3271
Mingus Union High School	Cottonwood	(928) 634-7531
Mohave Community College - North Campus	Colorado City	(928) 875-2831
Mohave Community College-Bullhead City	Bullhead City	(928) 855-7812
Mohave Community College-Kingman	Kingman	(928) 855-7812
Mohave Community College-LHC	Lake Havasu City	(928) 855-7812
Northern Pioneer College NAT	Holbrook	(928) 532-6133
101 White Mountain Campus High School		
Northern Pioneer College NAT 101 WMC	Holbrook	(928) 532-1633

8 Week Course		
Northland Pioneer College - Springerville High School	Holbrook	(928) 352-6133
Northland Pioneer College, NAT 101 LLC 5 WK	Holbrook	(928) 289-4678
Northland Pioneer, Nat 101 Video,	Holbrook	(928) 352-6133
Northwest Education Ctr	Glendale	(623) 845-4000
NPC - Hopi Center	Holbrook	(928) 532-6133
Page High School	Page	(928) 608-4144
Paradise Valley Community College	Phoenix	(602) 787-7288
Paradise Valley High School	Phoenix	(602) 867-5554
fka Paradise Valley Unified School District		
Peoria High School, C.N.A. Program	PEORIA	(623) 486-6300
Phoenix College	Phoenix	(602) 285-7133
Phoenix Job Corps Center	Phoenix	(602) 254-5921
Pima Community College CTD @	Tucson	(520) 206-5113
Tucson Medical Center		
Pima Community College CTD @ Carondolet	Tucson	(520) 206-5113
Pima Community College/Desert Vista	Tucson	(520) 295-5113
Pima Community College-West-NRS101	Tucson	(520) 206-4500
Pima Community College-West-NRS104	Tucson	(520) 206-6661
Pima Medical Institute/Mesa	Mesa	(480) 898-9898
Pimeria Alta Green Valley	Green Valley,	(520) 339-0135
Precision High School	Phoenix,	(602) 453-3661
Saguaro High School	Scottsdale	(480) 443-7200
Scottsdale Community College	Scottsdale	(480) 423-6000
Southwest Skill Center @ Estrella Mtn. CC	Avondale	(623) 535-2772
Sunnyslope High School and	Phoenix	(602) 870-6060
Bryans Extended Care Partnership		
Thunderbird - Greenway CNA Program	Glendale	(602) 588-5775
Nursing Assistant Program		
Tucson College	Tucson	(520) 296-3261
Yavapai Community College-Prescott	Prescott	(928) 778-2450
Yavapai Community College-Verde Campus	Clarksdale	(928) 445-7300

