

Statutes and Regulations **Nursing**

August 2007

(Centralized Statutes and Regulations not included)



DEPARTMENT OF COMMERCE, COMMUNITY,
AND ECONOMIC DEVELOPMENT

***DIVISION OF CORPORATIONS, BUSINESS
AND PROFESSIONAL LICENSING***

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**CHAPTER 68.
NURSING.**

Article

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**ARTICLE 1.
BOARD OF NURSING.**

Section

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Sec. 08.68.010. Creation and membership of Board of Nursing. There is created a Board of Nursing, consisting of seven members appointed by the governor. One member shall be a licensed practical nurse currently involved in institutional nursing service, one member shall be a registered nurse engaged in baccalaureate nursing education, three members shall be registered nurses at large, and two members shall be persons who have no direct financial interest in the health care industry.

Sec. 08.68.060. Qualifications of registered nurse and licensed practical nurse board members. The five members of the board who are nurses shall be licensed in the state, and shall have been actively engaged in nursing for not less than four years before appointment, three years of which were within the five years immediately preceding appointment.

Sec. 08.68.070. Election of Officers. The board shall annually elect a chairman and secretary from among its members.

Sec. 08.68.080. Meetings. The board shall meet at least four times a year.

Sec. 08.68.090. Quorum. A majority of the board constitutes a quorum.

Sec. 08.68.100. Duties and powers of board. (a) The board shall

(1) adopt regulations necessary to implement this chapter, including regulations pertaining to practice as an advanced nurse practitioner and a nurse anesthetist and regulations necessary to implement AS 08.68.331 – 08.68.336 relating to certified nurse aides in order to protect the health, safety, and welfare of clients served by nurse aides;

(2) approve curricula and adopt standards for basic education programs that prepare persons for licensing under AS 08.68.190;

(3) provide for surveys of the basic nursing education programs in the state at the times it considers necessary;

(4) approve education programs that meet the requirements of this chapter and of the board, and deny, revoke, or suspend approval of education programs for failure to meet the requirements;

(5) examine, license, and renew the licenses of qualified applicants;

(6) prescribe requirements for competence before a former nurse may resume the practice of nursing under this chapter;

(7) define by regulation the qualifications and duties of the executive secretary and delegate authority to the executive secretary that is necessary to conduct board business;

(8) develop reasonable and uniform standards for nursing practice;

(9) publish advisory opinions regarding whether nursing practice procedures or policies comply with acceptable standards of nursing practice as defined under this chapter.

- (b) The board may
 - (1) conduct hearings upon charges of alleged violations of this chapter or regulations adopted under it;
 - (2) invoke, or request the department to invoke, disciplinary action against a licensee;
 - (3) prescribe requirements for competence to continue practice.

Sec. 08.68.111. Executive secretary of the board. (a) The Department of Commerce, Community, and Economic Development, in consultation with the board, shall employ a licensed, registered nurse, who is not a member of the board, to serve as executive secretary of the board.

- (b) The executive secretary shall perform duties as prescribed by the board.
- (c) *[Repealed, 1982.]*
- (d) *[Repealed, 1974.]*

Sec. 08.68.140. Applicability of Administrative Procedure Act. Except as specified in AS 08.68.333(f), the board shall comply with the Administrative Procedure Act (AS 44.62).

Sec. 08.68.150. Expenses. Members of the board are entitled to the per diem and travel expenses allowed by law.

ARTICLE 2. EXAMINATION AND LICENSING.

Section

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Sec. 08.68.160. License required. A person practicing or offering to practice professional or practical nursing in the state shall submit evidence of qualification to practice, and shall be licensed under this chapter.

Sec. 08.68.170. Qualifications of registered or practical nurse applicants. An applicant for a license to practice registered or practical nursing shall submit to the board on forms and in the manner prescribed by the board, written evidence, verified by oath, that the applicant has successfully completed

- (1) a registered or practical nursing education program accredited by the board;
- (2) a registered or practical nursing education program outside the state which, in the opinion of the board, meets the minimum requirements of the board for an accredited program of study in this state at the time the applicant graduated; or
- (3) a registered or practical nursing education program accredited by the National League for Nursing at the time the applicant graduated.

Sec. 08.68.180. Qualifications of certain practical nurse applicants. (a) *[Repealed, 1982.]*

(b) A qualified student of the Mt. Edgecumbe School of Practical Nursing who was graduated before January 1, 1959, and had eighth grade pretraining is eligible for a license.

Sec. 08.68.190. License by examination. The applicant shall pass a written examination as prescribed by the board. The board shall issue a license to an applicant who passes the examination to practice registered or practical nursing provided the other qualifications outlined in AS 08.68.170 and 08.68.180 are also met. The board shall conduct examinations annually and as often as it considers necessary at locations designated by the board.

Sec. 08.68.200. License by endorsement. (a) The board may issue a license by endorsement to practice as a registered or practical nurse, whichever is appropriate, to an applicant who has worked as a nurse within the past five years if the applicant

(1) is licensed as either a registered or practical nurse under the laws of another state if, in the opinion of the board, the applicant meets the qualifications required for licensing in the state and meets the requirements of AS 08.68.170; or

(2) meets the requirements of AS 08.68.170 and has successfully completed the Canadian Nurses' Association Testing Service examination if the board determines it is comparable to the examination administered by this state.

(b) The board may issue a license by endorsement to practice as a registered or practical nurse, whichever is appropriate, to an applicant who has not worked as a nurse within the past five years if the applicant meets the requirements of either (a)(1) or (a)(2) of this section and

(1) meets the continuing competency requirements of the board; or

(2) completes a course of study approved by the board.

Sec. 08.68.210. Temporary permits. (a) The board may issue a temporary permit, nonrenewable and valid for a period not exceeding six months, to an applicant for a license by endorsement if the applicant

(1) submits proof satisfactory to the board that the applicant is currently licensed in another state or Canadian province or Canadian territory that administers an examination approved by the board under AS 08.68.200(a)(2);

(2) meets the requirements of AS 08.68.170; and

(3) pays the required fee.

(b) The board may issue a nonrenewable permit to an applicant for license by examination if the applicant (1) meets the qualifications of AS 08.68.170; or (2) is a graduate of a foreign school of nursing and has successfully completed the examination administered by the Commission on Graduates of Foreign Nursing Schools. The permit is valid for a period not extending beyond the time when the results are published of the first examination the applicant is eligible to take after the permit is issued; however, if the applicant does not take the examination for which the applicant is scheduled, the permit lapses on the day of the examination.

Sec. 08.68.220. Fees. The Department of Commerce, Community, and Economic Development shall set fees under AS 08.01.065 for each of the following:

(1) registered nursing:

(A) application;

(B) license by examination;

(C) license by endorsement;

(D) license renewal;

(E) temporary permit;

(2) practical or vocational nursing:

(A) application;

(B) license by examination;

(C) license by endorsement;

(D) license renewal;

(E) temporary permit.

Sec. 08.68.230. Use of title and abbreviation. (a) A person licensed to practice registered nursing in the state may use the title "licensed professional nurse," "registered nurse," and the abbreviation "R.N."

(b) A person licensed to practice practical nursing in the state may use the title "licensed practical nurse," or "licensed vocational nurse," and the abbreviation "L.P.N." or "L.V.N."

(c) A person who holds a temporary permit to practice as a registered nurse shall use the title "Temporary Registered Nurse" and the abbreviation "TRN."

(d) A person who holds a temporary permit to practice as a licensed practical nurse shall use the title "Temporary Licensed Practical Nurse" and the abbreviation "TLPN."

Sec. 08.68.240. Nurses licensed or holding temporary permits under previous law. A person holding a license to practice registered or practical nursing in the state under prior law is considered licensed as a registered or practical nurse.

Sec. 08.68.251. Lapsed licenses. (a) A lapsed license may be reinstated if it has not remained lapsed for more than five years by payment of the license fees for the current renewal period and the penalty fee. The person seeking reinstatement shall meet the continuing competency requirements of the board.

(b) If a license is lapsed for more than five years,

(1) the board shall require the applicant to complete a course of study approved by the board or to pass an examination prescribed by the board, and to pay the fees prescribed by this chapter; or

(2) if the board determines that the person applying for reinstatement was actively employed in nursing in another state during the time that the license has lapsed in this state, the license that has lapsed may be reinstated by payment of fees as required by (a) of this section.

Sec. 08.68.265. Supervision of practical nurses. A practical nurse shall work under the supervision of a licensed registered nurse, a licensed physician, or a licensed dentist.

Sec. 08.68.270. Grounds for denial, suspension, or revocation. The board may deny, suspend, or revoke the license of a person who

- (1) has obtained or attempted to obtain a license to practice nursing by fraud or deceit;
- (2) has been convicted of a felony or other crime if the felony or other crime is substantially related to the qualifications, functions or duties of the licensee;
- (3) habitually abuses alcoholic beverages, or illegally uses controlled substances;
- (4) has impersonated a registered or practical nurse;
- (5) has intentionally or negligently engaged in conduct that has resulted in a significant risk to the health or safety of a client or in injury to a client;
- (6) practices or attempts to practice nursing while afflicted with physical or mental illness, deterioration, or disability that interferes with the individual's performance of nursing functions;
- (7) is guilty of unprofessional conduct as defined by regulations adopted by the board;
- (8) has willfully or repeatedly violated a provision of this chapter or regulations adopted under it;
- (9) is professionally incompetent;
- (10) denies care or treatment to a patient or person seeking assistance if the sole reason for the denial is the failure or refusal of the patient or person seeking assistance to agree to arbitrate as provided in AS 09.55.535(a).

Sec. 08.68.275. Disciplinary sanctions. (a) The board may take the following disciplinary actions singly or in combination:

- (1) permanently revoke a license or permit to practice;
- (2) suspend a license for a stated period of time;
- (3) censure a licensee;
- (4) issue a letter of reprimand;
- (5) impose limitations or conditions on the professional practice of a licensee;
- (6) impose peer review;
- (7) impose professional education requirements until a satisfactory degree of skill has been attained in those aspects of professional practice determined by the board to need improvement;
- (8) impose probation and require the licensee to report regularly to the board upon matters involving the basis for the probation;
- (9) accept a voluntary surrender of a license.

(b) The board may withdraw probation status if it finds that the deficiencies that required the sanction have been remedied.

(c) The board may summarily suspend a licensee before final hearing or during the appeals process if the board finds that the licensee poses a clear and immediate danger to the public health and safety. A person whose license is suspended under this section is entitled to a hearing by the board within seven days after the effective date of the order. If, after a hearing, the board upholds the suspension, the licensee may appeal the suspension to a court of competent jurisdiction.

(d) The board may reinstate a license that has been suspended or revoked if the board finds, after a hearing, that the applicant is able to practice with skill and safety.

(e) The board may return a license that has been voluntarily surrendered if the board determines that the licensee is competent to resume practice and that the applicable renewal fees are paid.

(f) The board shall seek consistency in the application of disciplinary sanctions. A significant departure from prior decisions involving similar situations shall be explained in the findings of fact or order.

Sec. 08.68.276. Continuing competence required. A license to practice nursing may not be renewed unless the nurse has complied with continuing competence requirements established by the board by regulation.

Sec. 08.68.278. Immunity for certain reports to the board. A person who, under oath and in good faith, reports information to the board relating to alleged incidents of incompetent, unprofessional, or unlawful conduct of a nurse is not liable in a civil action for damages resulting from the reporting of the information.

Sec. 08.68.279. Whistleblower protection for nurses concerning delegated duties. An employer may not discharge, threaten, or otherwise discriminate against a nurse employed by the employer regarding the nurse's compensation, terms, conditions, location, or privileges of employment for the nurse's refusal to perform a task involving nursing care delegated to the nurse by the nurse's superior if

- (1) the nurse alleges that the task was improperly delegated;
- (2) the nurse reports the attempted improper delegation to the Board of Nursing within 24 hours after the attempted delegation was made; and
- (3) the Board of Nursing finds that the task was improperly delegated.

**ARTICLE 3.
NURSING EDUCATION PROGRAMS.**

Section

- 280. Nursing education program prohibited unless approved**
- 290. Application for accreditation**
- 330. List of approved programs**

Sec. 08.68.280. Nursing education program prohibited unless approved. A person, institution, or agency may not conduct a nursing education program that prepares persons for examination or licensing unless the program is approved by the board. A program may be approved by the board only if it is established through an approved postsecondary educational institution.

Sec. 08.68.290. Application for accreditation. An institution desiring to conduct a nursing education program to prepare registered or practical nurses shall apply to the board and submit evidence that

- (1) it is prepared to carry out the curriculum approved by the board for registered nursing or for practical nursing; and
- (2) it is prepared to meet other standards established by law and by the board.

Sec. 08.68.330. List of approved programs. The board shall prepare, maintain, and from time to time publish a list of approved nursing education programs in the state.

**ARTICLE 4.
CERTIFIED NURSE AIDES.**

Section

- 331. Certification of nurse aides**
- 332. Use of title**
- 333. Registry of certified nurse aides**
- 334. Grounds for denial, suspension, or revocation of certificate**
- 335. Immunity for certain reports to the board**
- 336. Fees**

Sec. 08.68.331. Certification of nurse aides. (a) The board or the Department of Commerce, Community, and Economic Development, as designated by the board, shall issue certification as a nurse aide to qualified applicants. The board, after consultation with affected agencies, may adopt regulations regarding the certification of nurse aides, including

- (1) the training, educational, and other qualifications for certification that will ensure that the nurse aides are competent to perform the tasks of their occupation;
 - (2) application, certification, renewal, and revocation procedures; and
 - (3) maintenance of a registry of certified nurse aides.
- (b) The board may
- (1) conduct hearings upon charges of alleged violations of this chapter or regulations adopted under it; and
 - (2) invoke, or request the department to invoke, disciplinary action under AS 08.01.075 against a certified nurse aide.

Sec. 08.68.332. Use of title. (a) A person may not use the title "certified nurse aide" or the abbreviation "C.N.A." unless the person is certified under this chapter.

(b) A person who knowingly violates this Section is guilty of a class B misdemeanor. In this subsection, "knowingly" has the meaning given in AS 11.81.900(a)

Sec. 08.68.333. Registry of certified nurse aides. (a) The board shall maintain a registry of certified nurse aides. At a minimum, this registry must include the information required under federal regulations that are applicable to nurse aides found to have committed abuse, neglect, or misappropriation of property in connection with their employment by a facility participating in the Medicaid or Medicare program.

(b) If the board finds that a certified nurse aide has committed abuse, neglect, or misappropriation of property in connection with employment as a nurse aide, the board shall revoke the nurse aide's certification and enter the finding in the registry.

(c) Upon receiving a notice of a finding under AS 47.05.055 that a certified nurse aide has committed abuse, neglect, or misappropriation of property, the board shall immediately revoke the nurse aide's certification without a hearing, enter the finding in the registry, and notify the nurse aide of the revocation and entry of the finding. Notice is considered given when delivered personally to the nurse aide or deposited in the United States mail addressed to the nurse aide's last known mailing address on file with the board. The department shall retain proof of mailing.

(d) If the certified nurse aide is employed in a skilled nursing facility or a nursing facility, other than an intermediate care facility for the mentally retarded, that is participating in the Medicaid or Medicare program, only the state survey and certification agency may make, and report to the Board of Nursing, a finding that the certified nurse aide has committed abuse, neglect, or misappropriation of property in connection with the nurse aide's employment at the facility.

(e) The board shall establish procedures under which a finding under AS 47.05.055 that a certified nurse aide has committed abuse, neglect, or misappropriation of property and the resulting revocation of certification will be removed from the registry if the certified nurse aide requests a hearing and can establish mistaken identity or the finding has been set aside by the reporting agency or by a court of competent jurisdiction.

(f) AS 44.62.330 - 44.62.630 do not apply to actions taken under (c) of this section.

Sec. 08.68.334. Grounds for denial, suspension, or revocation of certificate. The board may deny a certification to, or impose a disciplinary sanction authorized under AS 08.01.075 against, a person who

(1) has obtained or attempted to obtain certification as a nurse aide by fraud, deceit, or intentional misrepresentation;

(2) has been convicted of a crime substantially related to the qualifications, functions, or duties of a certified nurse aide;

(3) has impersonated a registered or practical nurse or other licensed health care provider;

(4) has intentionally or negligently engaged in conduct that has resulted in a significant risk to the health or safety of a client or in injury to a client;

(5) is incapable of working as a certified nurse aide with reasonable skill, competence, and safety for the public because of

(A) professional incompetence;

(B) addiction or severe dependency on alcohol or a drug that impairs the licensee's ability to practice safely;

(C) physical or mental disability; or

(D) other factors determined by the board;

(6) has knowingly or repeatedly failed to comply with this chapter, a regulation adopted under this chapter, or with an order of the board; or

(7) has misappropriated the property of, abused, or neglected a client.

Sec. 08.68.335. Immunity for certain reports to the board. A person who, in good faith, reports information to the board relating to alleged incidents of incompetent, unprofessional, or unlawful conduct of a certified nurse aide is not liable in a civil action for damages resulting from the reporting of the information.

Sec. 08.68.336. Fees. The Department of Commerce, Community, and Economic Development shall set fees under AS 08.01.065 for certified nurse aides for each of the following:

(1) application;

(2) examination;

(3) certification; and

(4) renewal of certification.

ARTICLE 5. UNLAWFUL ACTS.

Section

340. Prohibited conduct

360. Unlicensed practice a public nuisance

370. Application for injunction

380. Issuance of injunction

390. Remedy not exclusive

Sec. 08.68.340. Prohibited conduct. (a) It is a class B misdemeanor for a person to

(1) practice nursing under a diploma, license, or record that is unlawfully obtained, signed, or issued;

(2) practice or offer to practice nursing without a license, unless the person is practicing within the scope of a delegation properly made under AS 08.68.405 or is giving necessary aid to the ill, injured, or infirm in an emergency;

(3) employ as a nurse a person who is not licensed to practice nursing;

(4) use in connection with the person's name a designation that implies that the person is a licensed nurse unless the person is licensed;

(5) practice nursing during the time that the person's license is suspended or revoked;

(6) practice nursing with knowledge that the person's license has lapsed;

(7) conduct a nursing education program and represent or imply that it is accredited by the board, unless the program has been accredited by the board.

(b) It is a class A misdemeanor for a person to knowingly or intentionally do any of the acts described in (a)(1)-(5) and (7) of this section.

(c) It is a violation for a person to practice nursing during the time that the person's license has lapsed if the person does not know that the license has lapsed.

Sec. 08.68.360. Unlicensed practice a public nuisance. The practice of professional or practical nursing for compensation by a person who is not licensed, or whose license is suspended, or revoked, or expired, is declared to be inimical to the public welfare and to constitute a public nuisance.

Sec. 08.68.370. Application for injunction. The board may apply for an injunction in a competent court to enjoin a person not licensed or whose license is suspended or revoked or expired from practicing professional or practical nursing. The court may issue a temporary injunction enjoining the defendant from practicing professional or practical nursing.

Sec. 08.68.380. Issuance of injunction. If it is established that the defendant has been or is practicing professional or practical nursing without a license or has been or is practicing nursing after the defendant's license has been suspended or revoked, or has expired, the court may enjoin the defendant from further practice.

Sec. 08.68.390. Remedy not exclusive. If a person violates an injunction issued under this section, the person may be punished for contempt of court. The injunction proceeding is in addition to other penalties and remedies provided in this chapter.

ARTICLE 6. MISCELLANEOUS PROVISIONS.

Section

395. Determination of death by registered nurse.

Sec. 08.68.395. Determination of death by registered nurse. (a) A registered nurse licensed under this chapter may make a determination and pronouncement of death of a person under the following circumstances:

(1) an attending physician has documented in the person's medical or clinical record that the person's death is anticipated due to illness, infirmity, or disease; this prognosis is valid for purposes of this section for no more than 120 days from the date of the documentation;

(2) at the time of documentation under (1) of this subsection, the physician authorized in writing a specific registered nurse or nurses to make a determination and pronouncement of the person's death; however, if the person is in a health care facility and the health care facility has complied with (d) of this section, the physician may authorize all nurses employed by the facility to make a determination and pronouncement of the person's death.

(b) A registered nurse who has determined and pronounced death under this section shall document the clinical criteria for the determination and pronouncement in the person's medical or clinical record and notify the physician who determined that the prognosis for the patient was for an anticipated death. The registered nurse shall sign the death certificate, which must include the

- (1) name of the deceased;
- (2) presence of a contagious disease, if known; and
- (3) date and time of death.

(c) Except as otherwise provided under AS 18.50.230, a physician licensed under AS 08.64 shall certify a death determined under (b) of this section within 24 hours after the pronouncement by the registered nurse.

(d) In a health care facility in which a physician chooses to proceed under (a) of this section, written policies and procedures shall be adopted that provide for the determination and pronouncement of death by a registered nurse under this section. A registered nurse employed by a health care facility may not make a determination or pronouncement of death under this section unless the facility has written policies and procedures implementing and ensuring compliance with this section.

(e) Notwithstanding AS 08.68.400(a)(1), this section applies to a qualified nurse described in AS 08.68.400(a)(1) who is employed by a federal health care facility.

(f) The Department of Health and Social Services may adopt regulations to implement this section.

(g) In this section

(1) "determination of death" means observation and assessment that a person is dead, as defined in AS 09.68.120;

(2) "health care facility" means a private, municipal, state, or federal hospital, psychiatric hospital, tuberculosis hospital, skilled nursing facility, kidney disease treatment center (excluding freestanding hemodialysis units), intermediate care facility, or Alaska Pioneers' Home or Alaska Veterans' Home administered by the Department of Health and Social Services under AS 47.55.

ARTICLE 7.
GENERAL PROVISIONS.

Section

400. Exceptions to application of chapter

405. Delegation of nursing functions

410. Definitions

Sec. 08.68.400. Exceptions to application of chapter. (a) This chapter does not apply to

(1) a qualified nurse licensed in another state employed by the United States Government or a bureau, or agency, or division of the United States Government while in the discharge of official duties;

(2) nursing service given temporarily in the event of a public emergency, epidemic, or disaster;

(3) the practice of nursing by a student enrolled in a nursing education program accredited by the board when the practice is in connection with the student's course of study;

(4) the practice of nursing by an individual enrolled in an approved program or course of study approved by the board to satisfy the requirements of AS 08.68.251;

(5) the practice of nursing by a nurse licensed in another state who engages in nursing education or nursing consultation activities, if these activities and contact with clients do not exceed 20 working days within a licensing period; or

(6) the practice of nursing by a nurse licensed in another state whose employment responsibilities include transporting patients into, out of, or through this state; however, this exception is valid for a period not to exceed 48 hours for each transport.

(b) In this section the word "nurses" includes registered and practical nurses, and "nursing" means registered and practical nursing.

Sec. 08.68.405. Delegation of nursing functions. A registered or practical nurse licensed under this chapter may delegate nursing duties to other persons, including unlicensed assistive personnel, under regulations adopted by the board. A person to whom the nursing duties are delegated may perform the delegated duties without a license or certificate under this chapter if the person meets the applicable requirements established by the board.

Sec. AS 08.68.410. Definitions. In this chapter

(1) "advanced nurse practitioner" means a registered nurse authorized to practice in the state who, because of specialized education and experience, is certified to perform acts of medical diagnosis and the prescription and dispensing of medical, therapeutic, or corrective measures under regulations adopted by the board;

(2) "board" means the Board of Nursing;

(3) "certified nurse aide" is a person who is certified as a nurse aide by the board;

(4) "incompetent" means that a nurse does not possess the skills, knowledge, and awareness of the nurse's limitations and abilities to safely practice nursing;

(5) "licensed practical nurse" is equivalent to the title "licensed vocational nurse" and to the name suffix abbreviations L.P.N. and L.V.N.;

(6) "licensed registered nurse" is equivalent to the common title "registered nurse" and the name suffix abbreviation R.N.;

(7) "nurse anesthetist" means a registered nurse authorized to practice in the state who, because of specialized education and experience, is certified to select and administer anesthetic and give anesthesia care under regulations adopted by the board;

(8) "practice of practical nursing" means the performance for compensation or personal profit of nursing functions that do not require the substantial specialized skill, judgment, and knowledge of a registered nurse;

(9) "practice of registered nursing" means the performance for compensation or personal profit of acts of professional service that requires substantial specialized knowledge, judgment, and skill based on the principles of biological, physiological, behavioral, and sociological sciences in assessing and responding to the health needs of individuals, families, or communities through services that include

(A) assessment of problems, counseling, and teaching

(i) clients to maintain health or prevent illness; and

(ii) in the care of the ill, injured, or infirm;

(B) administration, supervision, delegation, and evaluation of nursing practice;

(C) teaching others the skills of nursing;

(D) execution of a medical regimen as prescribed by a person authorized by the state to practice medicine;

(E) performance of other acts that require education and training that are recognized by the nursing profession as properly performed by registered nurses;

(F) performance of acts of medical diagnosis and the prescription of medical therapeutic or corrective measures under regulations adopted by the board.

(10) "unlicensed assistive personnel" means persons, such as orderlies, assistants, attendants, technicians, members of a nursing client's immediate family, or the guardian of a nursing client, who are not licensed to practice practical nursing, registered nursing, medicine, or any other health occupation that requires a license in this state.

**CHAPTER 44.
BOARD OF NURSING.**

Article

1. **Nursing Education of Registered and Practical Nurses**
(12 AAC 44.010—12 AAC 44.140)
2. *[Repealed]*
3. **Examination and Licensure**
(12 AAC 44.290—12 AAC 44.321)
4. **Advanced Nurse Practitioner**
(12 AAC 44.322—12 AAC 44.490)
5. **Registered Nurse Anesthetists**
(12 AAC 44.500—12 AAC 44.560)
6. **Continuing Competency**
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7. **Disciplinary Guidelines**
(12 AAC 44.700—12 AAC 44.785)
8. **Certified Nurse Aide**
(12 AAC 44.800—12 AAC 44.895)
9. **General Provisions** (12 AAC 44.900—12 AAC 44.990)

**ARTICLE 1.
NURSING EDUCATION OF
REGISTERED AND PRACTICAL NURSES.**

Section

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130. **Curriculum requirements**
135. **Evaluation of nurse practitioner programs**
140. **Reports**

12 AAC 44.010. PURPOSE OF EDUCATION PROGRAM APPROVAL. The purpose of board approval of educational programs is

(1) to assure the safe practice of nursing by setting minimum requirements for the conduct of nursing education programs that prepare the nurse for practice;

(2) to assure the graduate of educational eligibility for admission to the licensing examination for nurses in Alaska; and

(3) to assure within the nursing education program the implementation of a comprehensive plan for the ongoing evaluation of that program.

Authority: AS 08.68.100(a) AS 08.68.290

12 AAC 44.020. TYPES OF PROGRAM APPROVAL. (a) Full approval is granted to a nursing education program that has met the requirements set out in 12 AAC 44.010 — 12 AAC 44.140.

(b) Provisional approval is granted to a nursing education program that has not been in operation long enough to meet the requirements set out in 12 AAC 44.010 — 12 AAC 44.140.

(c) Conditional approval is granted to a nursing education program that has failed to maintain standards and has been notified it must meet the requirements of the board within one year after the date of notice.

Authority: AS 08.68.100(a) AS 08.68.290

12 AAC 44.030. SURVEY. (a) The completed application for provisional approval must be submitted to the board when the nursing education program is ready for a survey visit.

(b) A survey of each nursing education program, including affiliations and statewide facilities, is required for the purpose of full approval. The survey must be made by one or more representatives of the board, and may include an educational consultant, as designated by the board.

(c) Each nursing education program shall permit periodic surveys by the board or its designated representative for the purpose of determining compliance with educational program standards. Each nursing education program shall permit a representative of the board to be included in national accreditation survey visits.

(d) Prior to a survey visit, specific information will be requested by the board.

(e) Repealed 1986.

Authority: AS 08.68.100(a) AS 08.68.290

12 AAC 44.040. ESTABLISHMENT OF NURSING EDUCATION PROGRAM. (a) A university or college wishing to establish a nursing education program shall inform the board in writing during its initial planning period.

(b) There shall be information on the availability of clinical facilities and job opportunities for graduates.

Authority: AS 08.68.100(a) AS 08.68.290

12 AAC 44.050. DISCONTINUANCE OF PROGRAM. If a university or college with a nursing education program plans on discontinuing its program it shall notify the board in writing as soon as the decision is made.

Authority: AS 08.68.100(a)

12 AAC 44.052. DENIAL, REVOCATION, AND REINSTATEMENT OF PROGRAM APPROVAL. (a) After a hearing under AS 44.62, the board will, in its discretion, deny approval of a nursing education program if it determines that the program fails substantially to meet the standards for nursing education defined by the board.

(b) After a hearing under AS 44.62, the board will, in its discretion, revoke approval if

(1) the program has been unable to achieve minimal standards within one year of conditional approval; or

(2) the board determines that a nursing education program has not provided sufficient evidence that the standards of nursing education are being met.

(c) The board will, in its discretion, consider reinstatement of approval of a nursing education program upon submission of satisfactory evidence that the program meets the standards of nursing education.

Authority: AS 08.68.100 AS 08.68.290

12 AAC 44.060. ORGANIZATION AND ADMINISTRATION. (a) A nursing education program must be an integral part of an accredited institution authorized by the state to confer credentials in nursing.

(b) A nursing education program must have statements of purpose, philosophy, and objectives that are consistent with the law governing the practice of nursing.

(c) A nursing education program must be organized with clearly defined authority, responsibility, and channels of communication.

(d) A nursing education program must be administered by a registered nurse who is currently licensed in Alaska and who has at least a master's degree in nursing, and preparation or experience in administration, education, and clinical nursing practice.

(e) The administrator of a nursing education program is responsible for:

(1) the development and implementation of the curriculum;

(2) preparation and administration of the budget;

(3) recommendation for appointment, promotion, tenure, and retention of faculty; and

(4) notifying the board of any major changes in the program or its administration.

Authority: AS 08.68.100 AS 08.68.290

12 AAC 44.072. RESOURCES, FACILITIES, AND SERVICES. (a) Written agreements with cooperating agencies must be mutually developed and maintained, and periodically reviewed.

(b) Cooperating agencies must be approved by any existing appropriate accreditation, evaluation or licensing bodies.

Authority: AS 08.68.100(a)

12 AAC 44.090. FACULTY. (a) There must be a sufficient number of qualified faculty to meet the purposes and objectives of the nursing education program.

(b) Unless waived by the board, the minimum ratio of faculty-to-students in clinical areas involving direct care of patients or clients is one faculty member to 10 students.

(c) Nursing faculty who teach in a program offering the practical nurse certificate shall

(1) be currently licensed as a registered nurse in Alaska;

- (2) have a minimum of a baccalaureate degree in nursing; and
- (3) have one year of clinical nursing experience relevant to areas of responsibility.
- (d) Nursing faculty who teach in a program offering the associate degree or the baccalaureate degree in nursing shall
 - (1) be currently licensed as a registered nurse in Alaska;
 - (2) have a minimum of a masters degree in nursing; and
 - (3) have one year of clinical nursing experience relevant to areas of responsibility.
- (e) Adjunct faculty may be used for instruction of nursing courses and shall
 - (1) be currently licensed as a registered nurse in Alaska;
 - (2) have a minimum of a baccalaureate degree in nursing;
 - (3) have one year of clinical nursing experience relevant to areas of responsibility;
 - (4) be supervised by qualified nursing faculty.
- (f) Faculty with comparable education will, in the board's discretion, be considered to have met the degree requirement of (c)(2), (d)(2), or (e)(2) of this section.
- (g) Faculty are responsible for developing, implementing and evaluating the purpose, philosophy and objectives of the nursing program.

Authority: AS 08.68.100(a) AS 08.68.290

12 AAC 44.130. CURRICULUM REQUIREMENTS. (a) Curriculum must reflect the philosophy, conceptual framework, purpose, and objectives of the nursing education program, and must be consistent with laws governing the practice of nursing.

(b) The ratio between nursing and nonnursing credit must be based on a rationale to ensure sufficient preparation for the safe and effective practice of nursing.

(c) Learning experiences and methods of instruction must be selected to fulfill curriculum objectives.

(d) Curriculum must be evaluated by the faculty with provisions for student participation.

(e) Support courses must be taught by academic faculty prepared in those disciplines.

(f) Curriculum for programs offering the practical nurse certificate must include

(1) theory and practice in nursing encompassing the attainment and maintenance of physical and mental health and the prevention of illness for individuals and groups throughout the life process;

(2) concepts of anatomy, physiology, chemistry, physics, and microbiology;

(3) concepts of communication, growth and development, interpersonal relations, and cultural diversity;

(4) ethics, nursing history and trends, vocational and legal aspects of nursing;

(5) concepts of pharmacology, nutrition, and diet therapy; and

(6) concepts of the nursing process.

(g) Curriculum for programs offering the associate degree or baccalaureate degree in nursing must include

(1) theory and practice in nursing, encompassing the attainment and maintenance of physical and mental health and the prevention of illness for individuals and groups throughout the life process;

(2) concepts of anatomy, physiology, chemistry, microbiology, and physics;

(3) sociology, psychology, communications, growth and development, interpersonal relations, group dynamics, and cultural diversity;

(4) concepts of pharmacology, nutrition and diet therapy, and pathophysiology;

(5) concepts of ethics, nursing history and trends, and the professional and legal aspects of nursing;

(6) concepts of patient education;

(7) concepts of the nursing process.

Authority: AS 08.68.100(a) AS 08.68.290

12 AAC 44.135. Evaluation of nurse practitioner programs. (a) Beginning September 1, 2004, a nurse practitioner graduate program offered by a university or college in this state must meet the criteria established in (b) of this section.

(b) Pages 11 through 30 of the document titled *Criteria for Evaluation of Nurse Practitioner Programs 2002*, issued by the National Task Force on Quality Nurse Practitioner Education, are adopted by reference as the criteria for approval of a graduate program for nurse practitioners under (a) of this section.

Authority: AS 08.68.100 AS 08.68.280 AS 08.68.290

Editor's note: Copies of the *Criteria for Evaluation of Nurse Practitioner Programs 2002*, prepared by the National Task Force on Quality Nurse Practitioner Education, adopted by reference in 12 AAC 44.135(b) are available from the Division of Corporations, Business and Professional Licensing, Board of Nursing 550 W. 7th Avenue, Suite 1500, Anchorage, Alaska 99501-3567, telephone: (907) 269-8438 or the National Organization of Nurse Practitioner Faculties, One Dupont Circle, NW, Suite 530, Washington, DC 20036-1135, telephone: (202) 452-1405, email: NONPF@acn.nche.edu.

12 AAC 44.140. REPORTS. By October 1 of each year, unless otherwise designated by the board, nursing education programs shall submit to the board reports related to faculty, students, and current curriculum, as follows:

- (1) changes or new developments in the purpose, philosophy, objectives, conceptual framework, and subsequent curriculum changes;
- (2) changes in the administrative structure;
- (3) update on faculty membership;
- (4) student enrollment statistics;
- (5) resources and facilities data update;
- (6) a program evaluation and plan for program improvement;
- (7) projected changes for the school of nursing and curriculum for the next year;
- (8) results of studies of postgraduate activities relative to ongoing employment and accomplishments of graduates.

Authority: AS 08.68.100

**ARTICLE 2.
NURSING EDUCATION OF PRACTICAL NURSES.
REPEALED 1986**

**ARTICLE 3.
EXAMINATION AND LICENSURE.**

Section

- 290. Application for examination**
- 300. Examinations**
- 305. License by endorsement**
- 310. Licensure of graduates of foreign schools of nursing**
- 315. License renewal**
- 317. Reinstatement of a lapsed license**
- 319. Criminal justice information**
- 320. Temporary permits**
- 321. Review of applications**

12 AAC 44.290. APPLICATION FOR EXAMINATION. (a) An applicant for license by examination in this state shall

(1) submit a completed application, on a form provided by the department, for approval to take the licensing examination; the completed application must include

(A) for identification purposes, an original, passport type photograph of the applicant, approximately two inches by two inches of the face and shoulders, taken within the six months immediately preceding the date of application, signed and dated by the applicant, and the personal identification information requested on the application form;

(B) the name, location, and dates of attendance of the nursing education program attended by the applicant;

(C) the applicant's licensing and examination history;

(D) information on the applicant's physical and mental health related to the grounds for license denial, suspension, or revocation in AS 08.68.270;

(E) information on any criminal convictions related to the grounds for license denial, suspension, or revocation in AS 08.68.270;

(F) the applicant's notarized signature certifying that the information in the application is correct to the best of the applicant's knowledge;

(G) the applicant's fingerprint information described in 12 AAC 44.319(a).

(2) pay the application fee, the fingerprint processing fee, and the license fee specified in 12 AAC 02.280;

(3) provide the board with, if the applicant

(A) graduated from a school of nursing in the United States or Canada, a complete certified transcript of the applicant's nursing education, mailed directly to the department from the school of nursing;

(B) is a registered nurse applicant who graduated from a school of nursing outside of the United States or Canada, except Quebec, Canada, and except as provided in (e) of this section, verification of successful completion of the examination administered by the Commission on Graduates of Foreign Nursing Schools;

(C) is a practical nurse applicant who graduated from a school of nursing outside of the United States or Canada, except Quebec, Canada, and except as provided in (d) of this section, verification of passing the English proficiency examinations specified in this subparagraph with at least the following minimum scores:

(i) Test of English as a Foreign Language (TOEFL) - 530 points written examination or 197 points computerized examination;

- (ii) Test of Written English (TWE) - 4.0 points; and
- (iii) Test of Spoken English (TSE) - 50 points;
- (4) *repealed 1983*;
- (5) provide the nursing program verification form, completed by an official of the school of nursing attended, and mailed directly to the department from the school of nursing; and
- (6) provide, at the written request of the board, additional information that is necessary to demonstrate that the applicant has met the licensing requirements of AS 08.68 and this chapter.
- (b) The application, fees, and all supporting documents required under (a) of this section must be on file with the department before the applicant will be approved to take the licensing examination.
- (c) An applicant who is approved to take the licensing examination is eligible for examination for one year after the date the department sends a notice of approval to the applicant. An applicant who does not take the examination within that year shall reapply for approval under (a) of this section.
- (d) Instead of submitting verification of passing the English proficiency examinations required in (a)(3)(C) of this section, a practical nurse applicant may submit verification showing that the applicant graduated from an approved nursing program at a school of nursing in Australia, Ireland, New Zealand, the United Kingdom or Quebec, Canada in which the
 - (1) language used at the school of nursing was English; and
 - (2) textbooks used at the school of nursing were written in English.
- (e) Instead of submitting verification of successful completion of the examination administered by the Commission on Graduates of Foreign Nursing Schools as required in (a)(3)(B) of this section, a registered nurse applicant may submit verification showing that the applicant graduated from an approved nursing program at a school of nursing in Australia, Ireland, New Zealand, the United Kingdom, or Quebec, Canada in which the
 - (1) language used at the school of nursing was English; and
 - (2) textbooks used at the school of nursing were written in English.

Authority: AS 08.68.100 AS 08.68.190 AS 08.68.270
AS 08.68.170

Editor's note: *The Test of English as a Foreign Language (TOEFL), Test of Written English (TWE), and Test of Spoken English (TSE) examinations described in 12 AAC 44.290(a)(3)(C) are administered by the Educational Testing Services, P.O. Box 6151, Princeton, New Jersey 08541; Telephone: (609) 771-7100.*

12 AAC 44.300. EXAMINATIONS. (a) Candidates for a license by examination shall take the National Council Licensing Examination.

(b) Registered nurse candidates who receive a grade of "pass" on the examination will be issued a license by the board, provided all other qualifications and requirements outlined in AS 08.68 are also met.

(c) Practical nurse candidates who receive a grade of "pass" on the examination will be issued a license by the board, provided all other qualifications and requirements outlined in AS 08.68 are also met.

(d) Registered nurse candidates or practical nurse candidates who fail the examination may repeat the examination. A candidate who does not pass the examination within two years after the date the examination was first administered to the candidate must complete a remedial course approved by the board. The candidate must provide proof of having fulfilled the requirements of the remedial course before attempting to retake the examination.

(e) To apply for reexamination, a candidate shall submit

- (1) a written request for reexamination; and
- (2) the reexamination application fee required in 12 AAC 02.280.

(f) An applicant for a registered nurse license by examination who passes the examination but does not obtain licensure in this state or in another licensing jurisdiction within one year after taking the examination shall meet the requirements of 12 AAC 44.600(1) or (2)(A) and (B) in addition to the other licensure requirements.

Authority: AS 08.68.100 AS 08.68.190

12 AAC 44.305. LICENSE BY ENDORSEMENT. (a) An applicant for nursing license by endorsement shall submit

- (1) a completed application on a form provided by the department; the completed application must include
 - (A) the personal identification information requested on the form;
 - (B) the name, location, and dates of attendance of the nursing education program attended by the applicant;
 - (C) information on the applicant's physical and mental health related to the grounds for license denial, suspension, or revocation in AS 08.68.270;
 - (D) information on any criminal convictions related to the grounds for license denial, suspension, or revocation in AS 08.68.270;
 - (E) the applicant's history of any nursing-related employment for the five years immediately before the date of application;

(F) an original, passport type photograph of the applicant, approximately two inches by two inches of the face and shoulders, taken within the six months immediately preceding the date of application, and the applicant's notarized signature certifying that the information in the application is correct to the best of the applicant's knowledge; and

(G) the applicant's fingerprint information described in 12 AAC 44.319(a).

(2) the application fee, fingerprint processing fee, and the license fee specified in 12 AAC 02.280;

(3) verification that the applicant holds a current license to practice in another jurisdiction where licensing requirements meet the requirements set out in (b) of this section; and

(4) a reference letter, on a form provided by the department, from the applicant's past employer verifying that the applicant has been employed in a nursing capacity for at least 320 hours within the last two years before application; if the applicant has not worked within the preceding two years, the applicant must submit proof of meeting the continuing competency requirements of the board or complete a course of study approved by the board; if the applicant has not worked within the preceding five years, the applicant must submit proof of completion of a course of study approved by the board.

(b) In order to qualify for licensure by endorsement, an applicant must secure verification by an official of the licensing jurisdiction in which the applicant was licensed by examination, on a form provided by the department, or through the National Council of State Boards of Nursing online verification system, that the license was obtained by meeting the following qualifications:

(1) successful completion of a recognized nursing education program; and

(2) passing one of the following examinations:

(A) the National Council Licensing Examination given after October 30, 1988 with a "pass";

(B) the National Council Licensing Examination given after June 30, 1982 but before October 30, 1988, with a standard score of 1,600 for a registered nurse candidate or a standard score of 350 for a practical nurse candidate;

(C) the State Board Test Pool examination given before July 1, 1982, with a score of 350 on each section for registered nurses and 350 on the examination for licensed practical nurses; or

(D) an examination constructed by another licensing jurisdiction given before 1953, with a minimum score of 75 percent.

Authority: AS 08.68.100 AS 08.68.200 AS 08.68.270
AS 08.68.170

12 AAC 44.310. LICENSURE OF GRADUATES OF FOREIGN SCHOOLS OF NURSING. (a) Applicants shall submit all required documents accompanied by certified English translations if the original documents are not in English.

(b) Unless otherwise provided by this section, nurses who have received nursing education outside the United States shall write the National Council Licensing Examination.

(c) An applicant who has successfully passed the National Council Licensing Examination in another jurisdiction, is licensed in that jurisdiction, and has met the licensure requirements of AS 08.68 and 12 AAC 44.305 will be licensed by endorsement. If the applicant did not obtain licensure in that jurisdiction, the applicant will be licensed by examination.

(d) The board will, in its discretion, issue a license by endorsement under AS 08.68.200, to an applicant who was licensed in Canada as a result of passing the national Canadian examination

(1) before August 1980, with a score of at least 350 on each of the five parts of the examination; or

(2) after July 1980 but before July 1992, with a score of at least 400.

Authority: AS 08.68.100 AS 08.68.200 AS 08.68.210
AS 08.68.190

12 AAC 44.315. LICENSE RENEWAL. (a) A practical nurse license must be renewed biennially on or before September 30 of even-numbered years. A registered nurse license must be renewed biennially on or before November 30 of even-numbered years. A renewal form will be mailed to each currently licensed nurse at least 60 days before the renewal date.

(b) A license not renewed on or before the last day of the biennial licensing period lapses on the first day of the new licensing period. An applicant whose license has lapsed must meet the requirements under 12 AAC 44.317.

Authority: AS 08.68.100 AS 08.68.251 AS 08.68.276

12 AAC 44.317. REINSTATEMENT OF A LAPSED LICENSE. (a) The board will reinstate a license to practice as a registered or practical nurse, that has lapsed less than one year, if the applicant

(1) submits a completed renewal application, on a form provided by the department, that includes

(A) the applicant's name, address, social security number, and date of birth;

(B) the applicant's nursing license history;

(C) information on the applicant's physical and mental health related to the grounds for license denial, suspension, or revocation in AS 08.68.270;

(D) information regarding criminal convictions related to the grounds for license denial, suspension, or revocation in AS 08.68.270;

(E) information regarding the method used to satisfy the continuing competency requirements in 12 AAC 44.600 – 12 AAC 44.660; and

(F) an original, passport type photograph of the applicant, approximately two inches by two inches of the face and shoulders, taken within the six months immediately preceding the date of application, and the applicant's notarized signature certifying that the information in the application is correct to the best of the applicant's knowledge;

(2) pays the biennial license renewal fee established in 12 AAC 02.280;

(3) pays the penalty fee established in 12 AAC 02.280, if the license has lapsed more than 60 days;

(4) submits documentation of continuing competency activities in accordance with 12 AAC 44.600 – 12 AAC 44.660; the applicant must have completed those activities within the immediate two years before applying for reinstatement; and

(5) submits verification of licensure in each jurisdiction where the applicant held a license to practice nursing during the time period in which the applicant's license was lapsed in this state.

(b) The board will reinstate a license to practice as a registered or practical nurse that has been lapsed at least one year, but less than five years, if the applicant

(1) submits a completed application for reinstatement, on a form provided by the department, that includes

(A) the applicant's name, address, social security number, and date of birth;

(B) the applicant's nursing license history;

(C) information on the applicant's physical and mental health related to the grounds for license denial, suspension, or revocation in AS 08.68.270;

(D) information regarding criminal convictions related to the grounds for license denial, suspension, or revocation in AS 08.68.270;

(E) an original, passport type photograph of the applicant, approximately two inches by two inches of the face and shoulders, taken within the six months immediately preceding the date of application, and the applicant's notarized signature certifying that the information in the application is correct to the best of the applicant's knowledge; and

(F) the applicant's fingerprint information described in 12 AAC 44.319(a);

(2) pays the biennial license renewal fee, the fingerprint processing fee, and penalty fee established in 12 AAC 02.280;

(3) submits documentation of continuing competency activities in accordance with 12 AAC 44.600 – 12 AAC 44.660; the applicant must have completed those activities within the immediate two years before applying for reinstatement;

(4) submits verification of current licensure in each jurisdiction where the applicant held a license to practice nursing during the time period in which the applicant's license was lapsed in this state; and

(5) submits a reference letter, on a form provided by the department, from the applicant's past employer verifying that the applicant has been employed in a nursing capacity for at least 320 hours within the last five years before application; if the applicant has not worked within the preceding five years, the applicant must submit proof of completion of a course of study approved by the board.

(c) The board will reinstate a license to practice as a registered or practical nurse, that has been lapsed five years or more, if the applicant meets the requirements of AS 08.68.251 and (b) of this section.

Authority: AS 08.01.100 AS 08.68.251 AS 08.68.276
AS 08.68.100

12 AAC 44.319. CRIMINAL JUSTICE INFORMATION. (a) If submission of fingerprint information is required by 12 AAC 44.290 – 12 AAC 44.321, an applicant shall submit two complete fingerprint cards containing the applicant's fingerprints and other information required by the Department of Public Safety to obtain state and national criminal justice information under AS 12.62 and AS 12.64.

(b) The department shall submit the fingerprint cards received under this section to the Department of Public Safety and request the Department of Public Safety to

(1) submit the fingerprints to the Federal Bureau of Investigation for a report on national criminal justice information;

(2) perform a check for state criminal justice information; and

(3) report to the department the results of the criminal justice information checks under (1) and (2) of this subsection.

(c) The request under (b) of this section for a criminal justice information report shall not delay consideration of the applicant's license application. If criminal justice information that raises questions about an applicant's qualifications for licensure is received after a license has been issued to the applicant, the department and the board will take action under AS 08.68 and AS 44.62 as appropriate.

(d) The board may waive the requirements for submitting fingerprints for an applicant who has submitted at least two separate sets of fingerprints under this section that the Department of Public Safety or the Federal Bureau of Investigation have been unable to read.

(e) Unless an applicant has obtained a waiver under (d) of this section, an application for renewal or reinstatement of the applicant's initial license will be denied by the board if

(1) the criminal justice information requested under (b) of this section has not been received by the department;

(2) the department has notified the applicant in writing that the applicant's criminal justice information has not been received by the department and has directed the applicant to resubmit the documents and information required under (a) of this section; and

(3) the applicant has failed to resubmit the documents and information required under (a) of this section as directed by the department.

Authority: AS 08.68.100 AS 08.68.270

12 AAC 44.320. TEMPORARY PERMITS. (a) *Repealed 7/28/95.*

(b) The board may issue a temporary nonrenewable permit to an applicant for license by endorsement who submits

(1) a completed application as required in 12 AAC 44.305(a)(1) and (4);

(2) the application fee, the fingerprint processing fee, the license by endorsement fee, and the temporary permit fee specified in 12 AAC 02.280;

(3) verification of a current license to practice as a registered nurse or a practical nurse issued by another state licensing jurisdiction; and

(4) the applicant's fingerprint information described in 12 AAC 44.319(a).

(c) *Repealed 7/28/95.*

(d) A temporary nonrenewable permit issued under (b) of this section is valid for six months from the date of issuance or until a permanent license is issued or denied, whichever occurs first.

(e) The board may issue a temporary nonrenewable permit to an applicant by examination who

(1) applies for licensure by examination on a form provided by the department in accordance with 12 AAC 44.290;

(2) has not

(A) failed the NCLEX examination; and

(B) failed to appear and take the NCLEX examination for which the applicant was registered;

(3) pays the application fee, the fingerprint processing fee, the license by examination fee, and the temporary permit fee specified in 12 AAC 02.280;

(4) submits a certified or notarized nursing program verification form directly from the school of nursing attended verifying successful completion of the nursing program; and

(5) submits the applicant's fingerprint information described in 12 AAC 44.319(a).

(f) The temporary nonrenewable permit issued under (e) of this section is valid for six months or until the results of the NCLEX are made available to the board and notification of the results is received by the temporary permit holder whichever occurs first.

Authority: AS 08.68.100 AS 08.68.200 AS 08.68.210
AS 08.68.170

12 AAC 44.321. REVIEW OF APPLICATIONS. (a) An applicant who meets the requirements on the appropriate checklist established in this section has demonstrated the necessary qualifications for the license, permit, registration, or authorization applied for. An applicant who does not meet the requirements on the appropriate checklist in this section will not be issued a license, permit, registration, or authorization unless the board or the board's executive secretary further reviews the application and determines that the applicant meets the qualifications in AS 08.68 and this chapter for the license, permit, registration, or authorization applied for. An application that contains affirmative responses to questions about the applicant's disciplinary history, professional conduct, or personal history must be referred to the division's investigative staff for review and investigation before final action is taken on the application.

(b) The form titled *Application Checklist for Registered or Practical Nurse License by Examination or Temporary Permit*, dated February 2006, is adopted by reference. This form is established by the board for review by staff of an application for a registered or practical nurse license by examination, including a temporary nonrenewable permit.

(c) The form titled *Application Checklist for Registered or Practical Nurse License by Endorsement or Temporary Permit*, dated February 2006, is adopted by reference. This form is established by the board for review by staff of an application for a registered or practical nurse license by endorsement, including a temporary nonrenewable permit.

(d) The form titled *Application Checklist for Authorization to Practice as an Advanced Nurse Practitioner and to Have Prescriptive Authority*, dated February 2006, is adopted by reference. This form is established by the board

for review by staff of an application for initial authorization to practice as an advanced nurse practitioner, including a nonrenewable permit to practice as an advanced nurse practitioner and authority to prescribe and dispense legend drugs or prescribe controlled substances.

(e) The form titled *Application Checklist for Authorization to Practice as a Registered Nurse Anesthetist or to Have Prescriptive Authority*, dated February 2006, is adopted by reference. This form is established by the board for review by staff of an application for initial authorization to practice as a registered nurse anesthetist, including a nonrenewable registered nurse anesthetist permit and authority to prescribe legend drugs or controlled substances.

(f) The form titled *Application Checklist for Registered or Practical Nurse License Reinstatement*, dated February 2006, is adopted by reference. This form is established by the board for review by staff of an application for reinstatement of a nurse license.

(g) The form titled *Application Checklist for Advanced Nurse Practitioner Preceptorship Registration*, dated February 2006, is adopted by reference. This form is established by the board for review by staff of an application for advanced nurse practitioner preceptorship registration.

Authority:	AS 08.68.100	AS 08.68.200	AS 08.68.251
	AS 08.68.170	AS 08.68.210	AS 08.68.410
	AS 08.68.190		

Editor's note: The application checklist forms listed in 12 AAC 44.321 are available at the Department of Commerce, Community, and Economic Development, division of corporations, business and professional licensing offices in Anchorage and Juneau.

ARTICLE 4. ADVANCED NURSE PRACTITIONER.

Section

- 400. Requirements for initial authorization**
- 420. Recognized certification bodies**
- 430. Scope of practice**
- 440. Prescriptive authority**
- 445. Controlled substance prescriptive and dispensing authority**
- 447. Advanced nurse practitioner dispensing standards**
- 450. Temporary and nonrenewable advanced nurse practitioner permits**
- 460. Preceptorships**
- 465. Identification**
- 470. Renewal and reinstatement of authorization**
- 490. Applicability**

12 AAC 44.400. REQUIREMENTS FOR INITIAL AUTHORIZATION. (a) An applicant for initial authorization to practice as an advanced nurse practitioner as defined in AS 08.68.410(1)

(1) must have satisfactorily completed

(A) a formal one-academic-year educational course of study that

(i) prepares registered nurses to perform an expanded role in the delivery of health care;

(ii) includes a combination of classroom instruction and a component of supervised clinical practice;

and

(iii) awards a degree, diploma, or certificate to persons who successfully complete the course of

study;

(B) *repealed 4/27/97*;

(2) must hold a current license to practice as a registered nurse in Alaska;

(3) must hold a current certification of nurse practitioner in a speciality area of nursing granted by a national certification body recognized by the board;

(4) shall, in the absence of a continuing education requirement of the certifying body, submit documented evidence of having obtained 30 contact hours of continuing education in the specialty area of the nurse practitioner every two years;

(5) when delivering health care services to the public, shall have in effect a written plan that is kept current and made available to the board at any time the board considers it necessary for good cause; the plan must

(A) describe the applicant's clinical practice;

(B) identify the expected category of clients, which is within the scope of practice of the applicant;

(C) list the applicant's method of routine consultations and referrals, the method of documenting routine consultations and referrals in the patient record; and the names and titles of health care providers that the applicant will use for routine consultations and referrals, including at least one physician who is appropriate to the applicant's focus of practice if the applicant's practice will include medical diagnosis and treatment;

(D) list the applicant's method for emergency referrals, including the names and contact information for physicians, hospitals, and other medical personnel or facilities to be used in case of emergency;

(E) list the name of the pharmacist for potential use of dispensing privileges; and

(F) describe the process for quality assurance the applicant will use to evaluate the applicant's practice, including

- (i) the use of standards that apply to the area of practice;
- (ii) present or past review of the practice;
- (iii) use of preestablished criteria; and
- (iv) a written evaluation of the quality assurance review with a plan for corrective action, if indicated,

and follow up;

(6) shall submit a completed application on a form provided by the department; the completed application must include

(A) the names and addresses of three persons who may be contacted as professional references;

(B) one fully completed reference form, signed by one of the persons named under (A) of this paragraph, that indicates that the applicant is competent to practice; and

(C) the applicant's notarized signature certifying that the information in the application is correct to the best of the applicant's knowledge; and

(7) shall submit the initial biennial authorization fee established by 12 AAC 02.280.

(b) *Repealed 1984.*

(c) *Repealed 1997.*

(d) To meet the requirements of (a)(3) of this section, an applicant for an authorization to practice as an adult or family psychiatric mental health nurse practitioner, must submit

(1) certification issued by the American Nurses Credentialing Center before January 1, 2003 certifying that the applicant has passed the examination administered by the American Nurses Credentialing Center for

(A) psychiatric mental health clinical nurse specialist; or

(B) adult or family psychiatric mental health nurse practitioner; or

(2) certification issued by the American Nurses Credentialing Center on or after January 1, 2003 certifying that the applicant has passed the examination administered by the American Nurses Credentialing Center for adult or family psychiatric mental health nurse practitioner.

Authority: AS 08.68.100 AS 08.68.410

***Editor's note:** Information on the Psychiatric Mental Health Clinical Nurse Specialist examination and the Adult or Family Psychiatric Mental Health Nurse Practitioner examination referred to in 12 AAC 44.400 may be obtained from the American Nurses Credentialing Center, 600 Maryland Avenue, SW, Suite 100 West, Washington, DC 20024-2571; phone (202) 651-7000.*

12 AAC 44.420. RECOGNIZED CERTIFICATION BODIES. (a) The board will, in its discretion, recognize national certification bodies which certify advanced nurse practitioners by exercising responsibility for

(1) approving the basic education course of study in the specialty area;

(2) examining graduates of the course of study; and

(3) addressing the issue of ongoing competency.

(b) The board will annually review national certification bodies to assure that board requirements are met.

(c) The board will maintain a current list of certification bodies which it has reviewed and recognized.

(d) An applicant applying for an advanced nurse practitioner authorization by virtue of certification from a body not on the board's current list of certification bodies shall supply the board with sufficient data to evaluate the authority of the certifying body.

Authority: AS 08.68.100

12 AAC 44.430. SCOPE OF PRACTICE. The board recognizes advanced and specialized acts of nursing practice as those described in the scope of practice statements for nurse practitioners certified by national certification bodies recognized by the board.

Authority: AS 08.68.100(a)

12 AAC 44.440. PRESCRIPTIVE AUTHORITY. (a) The board will, in its discretion, authorize an advanced nurse practitioner or "ANP" to prescribe and dispense legend drugs in accordance with applicable state and federal laws.

(b) At least quarterly, the board will have available a list of all ANPs with prescriptive authority. The list will include

(1) the name of the authorized ANP;

(2) the prescriber's identification number assigned by the board; and

(3) the effective date of prescriptive authority.

- (c) An advanced nurse practitioner who applies for authorization to prescribe and dispense drugs
 - (1) must be currently designated as an ANP in Alaska at the time of application;
 - (2) shall provide evidence of completion of 15 contact hours of education in pharmacology and clinical management of drug therapy within the two-year period immediately before the date of application; and
 - (3) shall submit a completed application, as required in 12 AAC 44.400(a)(6) accompanied by the application fee established by 12 AAC 02.280.
- (d) Authorized prescriptions by an ANP must
 - (1) comply with all applicable state and federal laws; and
 - (2) contain the signature of the prescriber followed by the initials "ANP" and the prescriber's identification number assigned by the board.
- (e) Prescriptive authorization will, in the board's discretion, be terminated if the ANP has
 - (1) not maintained current authorization as an ANP;
 - (2) prescribed or dispensed outside the ANP scope of practice or for other than therapeutic purposes; or
 - (3) violated any provision of state or federal statutes and regulations pertaining to nursing practice.
- (f) ANP prescriptive authority must be renewed biennially with the ANP authorization. Documentation of eight contact hours of pharmacology during the previous two years must be submitted at the time of renewal.
- (g) Repealed 7/17/2003.
- (h) In this section, "prescriptive authority" includes authority to dispense prescriptions.

Authority: AS 08.68.100 AS 08.68.410

12 AAC 44.445. CONTROLLED SUBSTANCE PRESCRIPTIVE AND DISPENSING AUTHORITY. (a) In addition to the legend drug prescriptive and dispensing authority under 12 AAC 44.440, the board will, in its discretion, authorize an advanced nurse practitioner or "ANP" to prescribe and dispense schedule 2-5 controlled substances in accordance with applicable state and federal laws if an applicant

(1) submits a completed application on a form provided by the department; the completed application must include the applicant's

- (A) name, address, and phone number;
- (B) license number as an ANP;
- (C) date of birth;
- (D) prescribing experience for the five years immediately before the date of application under this section;

and

(E) notarized signature certifying that the information in the application is correct to the best of the applicant's knowledge;

(2) verifies the equivalent of one year of experience prescribing legend drugs under 12 AAC 44.440 within the five years immediately preceding the date of application; this paragraph does not apply to an applicant who is authorized under 12 AAC 44.400 to practice as an adult or family psychiatric mental health nurse practitioner; and

(3) pays the application fee established by 12 AAC 02.280.

(b) All the provisions of 12 AAC 44.440 apply to an ANP with controlled substance prescriptive authority under this section.

Authority: AS 08.68.100 AS 08.68.410

12 AAC 44.447. ADVANCED NURSE PRACTITIONER DISPENSING STANDARDS. (a) An advanced nurse practitioner or "ANP" with prescriptive and dispensing authority may dispense a prescription within the ANP's scope of practice only.

(b) An ANP with prescriptive and dispensing authority may dispense a medication prepackaged by a pharmacy or pharmaceutical manufacturer. A prepackaged medication must be dispensed in its original package.

(c) If an ANP dispenses less than the prepackaged quantity of a medication, the ANP shall adjust the label on the container to show the quantity dispensed. The ANP shall also dispose of the excess medication in accordance with established professional standards.

(d) When dispensing a prescription, an ANP with prescriptive and dispensing authority is responsible for

- (1) selection of the medication;
- (2) proper labeling of the container as required in (c) and (j) of this section;
- (3) delivery of the prescription; and
- (4) counseling the client, including giving the client information on

(A) the name, dosage, and purpose of the prescribed drug;

(B) the duration of the prescribed drug therapy;

(C) common side or adverse effects or food or drug interactions that may be encountered, how to avoid those effects or interactions, and what actions should be taken if those effects or interactions occur;

(D) the expected outcome of the prescribed drug therapy; and

(E) the plan for follow-up care.

(e) An ANP with prescriptive and dispensing authority shall keep a readily retrievable written record of prepackaged medication prescriptions dispensed, including lot number.

- (f) An ANP may delegate the delivery of a prescription to another individual if
 - (1) the ANP has developed a protocol on drug delivery and reviewed the protocol with the individual delivering the prescription;
 - (2) the ANP has provided orientation and training on drug delivery to the individual delivering the prescription;
 - (3) the ANP supervises the individual delivering the prescription; the supervision may be in person or by telephone; and
 - (4) the individual to whom the ANP has delegated the delivery of a prescription
 - (A) is 18 years of age or older; and
 - (B) can read and write the language of the ANP.
- (g) An ANP who delegates the delivery of a prescription and does not meet the requirements of (f) of this section is subject to disciplinary action by the board.
- (h) An ANP with prescriptive and dispensing authority may dispense a prescription packaged from a bulk supply of medication if the prescription was packaged according to the following standards:
 - (1) an individual licensed or certified in the administration of medications packaged the prescription;
 - (2) a health care professional with prescriptive authority supervised the packaging of the prescription and initialed the prescription on the same day that it was packaged;
 - (3) at the time of packaging, the prescription package was labeled with the information required in (j) of this section.
- (i) An ANP who dispenses a prescription packaged from a bulk supply of medication shall keep a readily retrievable record of packaging procedures for that prescription, including the
 - (1) date of packaging;
 - (2) manufacturer, lot number, and expiration date of the medication;
 - (3) signature of the individual who packaged the prescription; and
 - (4) signature of the individual with prescriptive authority who supervised the packaging of the prescription.
- (j) The label for a prescription that is to be dispensed by an ANP and that
 - (1) is a prepackaged medication must include
 - (A) the dispensing ANP's name and address;
 - (B) directions to the patient or a blank space for the instructions of the prescriber;
 - (C) a blank space for the name of the patient and, if applicable, the patient's identification number; and
 - (D) a blank space for the name of the prescriber;
 - (2) was packaged from a bulk supply of medication must include the information required in (1) of this subsection and
 - (A) the name, strength, and quantity of the medication in the container;
 - (B) a blank space for the date of delivery to the patient;
 - (C) a blank space for the initials of the person delivering the prescription to the patient;
 - (D) the manufacturer's lot number;
 - (E) the expiration date;
 - (F) warning labels appropriate to the specific medication in the container;
 - (G) the name, address, and phone number of the health care facility at which the prescription was packaged;
 - (H) the date the prescription was packaged; and
 - (I) the initials of the health care professional with prescriptive authority who supervised the packaging of the prescription.
- (k) For the purposes of this section,
 - (1) "delivery of a prescription" means completing the blank spaces on the label of the prescription drug container and actually handing the container to the client or an individual who is 18 years of age or older who is designated as the client's representative;
 - (2) "supervise the packaging of a prescription" means to
 - (A) be available to assist the individual packaging the prescription; and
 - (B) examine the prescription when the packaging is completed to verify its accuracy.

Authority: AS 08.68.100 AS 08.68.410

12 AAC 44.450. TEMPORARY AND NONRENEWABLE ADVANCED NURSE PRACTITIONER PERMITS. (a) The board will, in its discretion, grant a temporary permit to practice as an advanced nurse practitioner to an applicant who is currently certified as an advanced nurse practitioner in another state or jurisdiction with requirements at least equivalent to those of this state.

- (b) The board will, in its discretion, grant a nonrenewable permit to practice as an advanced nurse practitioner to an applicant who meets the requirements of 12 AAC 44.400(a)(1), (2), (4), (5), (6) and (7) of this chapter; and
 - (1) has been accepted to take the next specialty board examination; or
 - (2) is awaiting certification results.
- (c) A temporary permit granted under (a) of this section is nonrenewable and is valid for a period not to exceed six months.

(d) A nonrenewable temporary permit granted under (b)(1) of this section is valid only until the publication of the results of the first examination the applicant is eligible to take after the permit is issued.

(e) A nonrenewable permit granted under (b)(2) of this section is valid only until the applicant receives notice of certification results.

(f) An applicant who fails the certifying examination shall surrender a nonrenewable permit issued under this section.

Authority: AS 08.68.100 AS 08.68.210

12 AAC 44.460. PRECEPTORSHIPS. (a) The board will, in its discretion, register an applicant to engage in clinical practice in order to complete a course of study based outside of Alaska that meets the requirements of 12 AAC 44.400(a)(1)(A).

(b) The applicant shall submit

(1) documented evidence of a preceptorship arrangement to be approved by the board;

(2) verification of a current license in good standing to practice as a registered nurse issued by this state or another state licensing jurisdiction;

(3) documented evidence of current enrollment in an advanced nurse practitioner program as required in 12 AAC 44.400(a)(1)(A); and

(4) the application fee established in 12 AAC 02.280(1); the application fee will be credited toward the fees required in 12 AAC 44.400(a)(7).

(c) A registration under this section expires and must be surrendered to the board 12 months from the date of issue or at the time the preceptorship arrangement is terminated, whichever occurs first.

(d) A registration under this section may be renewed one time if the applicant again meets the requirements of (b) of this section.

(e) The board will, in its discretion, after a hearing under the Administrative Procedure Act (AS 44.62), terminate the registration of a person registered under this section who is found to have violated a provision of AS 08.68 or 12 AAC 44.

Authority: AS 08.01.075 AS 08.68.270 AS 08.68.410
AS 08.68.100 AS 08.68.275

12 AAC 44.465. IDENTIFICATION. An ANP shall conspicuously display

(1) on his or her uniform or clothing, a name plate including designation as an ANP;

(2) in his or her customary place of employment, a current authorization to practice as an ANP; and

(3) a sign at least five inches by eight inches in size informing the public of the definition of an advanced nurse practitioner in AS 08.68.410(1).

Authority: AS 08.68.100

12 AAC 44.470. RENEWAL AND REINSTATEMENT OF AUTHORIZATION. (a) An applicant for renewal of an advanced nurse practitioner authorization shall submit to the board

(1) a completed renewal application on a form provided by the department;

(2) evidence of continued national certification since the date of original authorization or reauthorization in each of the applicant's specialty areas;

(3) documentation of eight contact hours of pharmacology required under 12 AAC 44.440(f), if the applicant holds prescriptive authority under 12 AAC 44.440; and

(4) the biennial authorization renewal fee established by 12 AAC 02.280.

(b) Renewal of authorization to practice as an advanced nurse practitioner will coincide with the renewal of the applicant's registered nurse license under 12 AAC 44.315.

(c) The board will reinstate an authorization to practice as an advanced nurse practitioner that has lapsed five years or less, if the applicant submits

(1) a completed application for reinstatement, on a form provided by the department;

(2) evidence of compliance with (a)(2) of this section;

(3) evidence of compliance with (a)(3) of this section if reinstating prescriptive authority; and

(4) the biennial authorization fee established by 12 AAC 02.280.

(d) An applicant for reinstatement of an advanced nurse practitioner authorization who has not maintained continuing education or national certification under 12 AAC 44.440 and 12 AAC 44.470 during a biennial licensing period may provide evidence of continued national certification and continuing education credits after the expiration date of the license. However, the authorization or reauthorization will not be reinstated until the board receives proof of the national certification and continuing education credit. Credits or hours used for reinstatement under this subsection may not be used to satisfy the continuing education requirements for the next biennial licensing period.

Authority: AS 08.68.100

12 AAC 44.490. APPLICABILITY. (a) The provisions of 12 AAC 44.400—12 AAC 44.490 of this chapter are applicable only to a registered professional nurse whose authorization to perform acts of medical diagnosis and prescription of medical, therapeutic, and corrective measures comes from the nurse's educational preparation, national certification, and authorization to practice in compliance with regulations established by the board.

(b) Nothing in 12 AAC 44.400—12 AAC 44.490 limits the usual and customary practice of a registered nurse or licensed practical nurse in Alaska.

Authority: AS 08.68.100

ARTICLE 5. REGISTERED NURSE ANESTHETISTS.

Section

- 500. Requirements for initial authorization**
- 510. Scope of practice**
- 525. RNA prescriptive authority**
- 530. Nonrenewable registered nurse anesthetist permits**
- 540. Renewal and reinstatement of authorization**
- 560. Applicability**

12 AAC 44.500. REQUIREMENTS FOR INITIAL AUTHORIZATION. An applicant for initial authorization to practice as a registered nurse anesthetist shall

(1) submit documentation of having satisfactorily completed an educational program prescribed by a school of nurse anesthesia accredited by a nationally recognized accrediting agency approved by the United States Department of Education and the Board of Nursing;

(2) submit documentation of having successfully passed an examination administered by a nationally recognized certifying agency for nurse anesthetists following completion of the educational program described in (1) of this section;

(3) submit evidence of current national certification or recertification;

(4) submit written practice guidelines developed with appropriate health care professionals; the written practice guidelines shall be kept current and be provided to the board at any time the board considers it necessary for good cause; the written practice guidelines must include

(A) the primary physical location of the applicant's anesthesia practice and the location of any temporary assignments known in advance;

(B) the name of the anesthesiologist, physician, or dentist with whom the applicant will most frequently collaborate;

(C) a description of the applicant's communication plan for collaborating on cases with physicians during the preoperative, perioperative, and postoperative periods;

(D) a description of the applicant's procedure for transferring care of a patient to personnel responsible for postanesthesia care;

(E) the process for quality assurance the applicant will use to evaluate the applicant's practice, including

(i) the use of standards that apply to the area of practice;

(ii) present or past review of the practice;

(iii) a written evaluation of the quality assurance review with a plan for corrective action, if indicated,

and follow up;

(5) hold a current license to practice as a registered nurse in Alaska;

(6) submit a completed application on a form provided by the department; the completed application must include

(A) the names and addresses of three persons who may be contacted as professional references;

(B) one fully completed reference form, signed by one of the persons named under (A) of this paragraph, that indicates that the applicant is competent to practice; and

(C) the applicant's notarized signature certifying that the information in the application is correct to the best of the applicant's knowledge; and

(7) submit the application fee and the initial biennial authorization fee established by 12 AAC 02.280.

Authority: AS 08.68.100 AS 08.68.410

12 AAC 44.510. SCOPE OF PRACTICE. (a) To ensure available nurse anesthesia to the Alaska public in accordance with the standards set forth by the national certifying board for nurse anesthetists, a registered nurse anesthetist in Alaska is authorized within the scope of his or her educational preparation to perform procedures outlined by the *American Association Nurse Anesthetist Guidelines for the Practice of the Certified Registered Nurse Anesthetist*.

(b) A registered nurse anesthetist is authorized to administer anesthesia

- (1) in collaboration with the director of the anesthesia service or a qualified designee of the director; or
 - (2) in collaboration with the primary physician or qualified physician designee of the primary physician or of the dentist responsible for the patient's immediate care.
- (c) In this section, "collaboration" means a process which involves two or more parties working together, each contributing his or her respective area of expertise to provide more comprehensive care than one alone can offer.

Authority: AS 08.68.100

Editor's note: A copy of the American Association Nurse Anesthetist Guidelines for the Practice of the Certified Registered Nurse Anesthetist mentioned in 12 AAC 44.510(a), can be obtained from the American Association of Nurse Anesthetists, 216 Higgins Road, Park Ridge, Illinois 60068.

12 AAC 44.525. RNA PRESCRIPTIVE AUTHORITY. (a) The board will, in its discretion, authorize a registered nurse anesthetist or "RNA" to prescribe legend drugs and schedule II through V controlled substances in accordance with applicable state and federal laws.

(b) The board will have available, upon request, a list of all RNAs with prescriptive authority. The list will include

- (1) the name of the authorized RNA;
- (2) the prescriber's identification number assigned by the board; and
- (3) the effective date of prescriptive authority.

(c) An RNA who applies for authorization to prescribe drugs shall

- (1) be currently authorized as an RNA in Alaska;
- (2) provide evidence of completion of 15 contact hours of education in advanced pharmacology related to the administration of anesthesia within the two-year period immediately before the date of application; and
- (3) submit a completed, application, as required in 12 AAC 44.500(6) accompanied by the application fee established in 12 AAC 02.280.

(d) Authorized prescriptions by an RNA must

- (1) comply with all applicable state and federal laws; and
- (2) be signed by the prescriber with the initials "RNA" and the prescriber's identification number assigned by the board.

(e) Prescriptive authorization will, in the board's discretion, be terminated if the RNA has

- (1) not maintained current authorization as an RNA;
- (2) prescribed outside the RNA scope of practice or for other than therapeutic purposes; or
- (3) violated any provision of state or federal statutes and regulations pertaining to nursing practice.

(f) RNA prescriptive authority must be renewed biennially with the RNA authorization. Documentation of eight contact hours of advanced pharmacology relating to the administration of anesthesia during the previous two years must be submitted at the time of renewal.

(g) *Repealed 11/23/2003.*

Authority: AS 08.68.100 AS 08.68.410

12 AAC 44.530. NONRENEWABLE REGISTERED NURSE ANESTHETIST PERMITS. (a) The board will, in its discretion, grant a nonrenewable permit to practice as a registered nurse anesthetist to an applicant who meets the requirements of 12 AAC 44.500(1), (4), (5), (6) and (7); and

- (1) has been accepted to take the next scheduled certified registered nurse anesthetist examination; or
- (2) is awaiting results of the examination.

(b) A nonrenewable permit granted under (a)(1) of this section is valid only until the date of the first available certification examination if the applicant fails to sit for the examination, or, if the applicant does sit for the certification examination, until the applicant receives notification of having successfully passed the certification examination on the first attempt.

(c) A nonrenewable permit granted under (a)(1) or (a)(2) of this section is valid until the applicant receives notification of having successfully passed the certification examination.

(d) The holder of a nonrenewable permit to practice as a registered nurse anesthetist granted under (a)(1) or (a)(2) of this section who fails to successfully pass the certification examination on the first attempt must surrender his or her nonrenewable permit to the board within 48 hours of receiving notification of failure.

(e) The holder of a nonrenewable permit granted under (a)–(d) this section may practice only under the medical director of an anesthesia service, an anesthesiologist, or a registered nurse anesthetist.

(f) The board may grant a temporary permit to practice as a registered nurse anesthetist to an applicant who is currently certified as a registered nurse anesthetist in another state or jurisdiction with requirements at least equivalent to those of this state. A temporary permit granted under this subsection is nonrenewable and is valid for a period not to exceed six months.

Authority: AS 08.68.100

12 AAC 44.540. RENEWAL AND REINSTATEMENT OF AUTHORIZATION. (a) An applicant for renewal of a registered nurse anesthetist authorization shall submit to the board

- (1) a completed renewal application on a form provided by the department;
- (2) evidence of current national recertification;
- (3) documentation of eight contact hours of pharmacology required under 12 AAC 44.525(f), if the applicant holds prescriptive authority under 12 AAC 44.525;
- (4) the biennial authorization renewal fee established by 12 AAC 02.280.

(b) Renewal of authorization to practice as a registered nurse anesthetist will coincide with the renewal of the applicant's registered nurse license under 12 AAC 44.315.

(c) The board will reinstate an authorization to practice as a registered nurse anesthetist that has lapsed five years or less, if the applicant submits

- (1) a completed application for reinstatement, on a form provided by the department;
- (2) evidence of compliance with (a)(2) of this section;
- (3) evidence of compliance with (a)(3) of this section if reinstating prescriptive authority;
- (4) the biennial authorization fee established by 12 AAC 02.280.

(d) An applicant for reinstatement of a registered nurse anesthetist authorization who has not maintained continuing education or national certification under 12 AAC 44.525 and 12 AAC 44.540 during a biennial licensing period may provide evidence of continued national certification and continuing education credits after the expiration date of the license. However, the authorization or reauthorization will not be reinstated until the board receives proof of the national certification and continuing education credit. Credits or hours used for reinstatement under this subsection may not be used to satisfy the continuing education requirements for the next biennial licensing period.

Authority: AS 08.68.100

12 AAC 44.560. APPLICABILITY. (a) The provisions of 12 AAC 44.500—12 AAC 44.550 are applicable only to a registered nurse whose authorization to perform acts of anesthesia service comes from the nurse's educational preparation, national certification and authorization to practice in compliance with regulations established by the board.

(b) Nothing in 12 AAC 44.500—12 AAC 44.550 limits the usual and customary practice of a registered nurse or licensed practical nurse in the State of Alaska.

Authority: AS 08.68.100

ARTICLE 6. CONTINUING COMPETENCY.

Section

- 600. Purpose of continuing competency requirements**
- 610. Continuing education requirements**
- 620. Professional activities requirement**
- 630. Nursing employment requirement**
- 640. Alternative methods for continuing competency requirements**
- 650. Requirements for new licensees**
- 660. Audit and documentation**

12 AAC 44.600. PURPOSE OF CONTINUING COMPETENCY REQUIREMENTS. The purpose of continuing competency requirements is to ensure that nurses maintain the ability to safely and effectively apply nursing knowledge, principles, and concepts in the practice of registered or practical nursing as defined in AS 08.68.410. Before a license can be renewed each biennial period, a registered nurse or a licensed practical nurse must document either

- (1) compliance with 12 AAC 44.640; or
- (2) completion of two of the following three methods for maintaining continuing competency:
 - (A) continuing education as prescribed under 12 AAC 44.610;
 - (B) professional activities as prescribed under 12 AAC 44.620; and
 - (C) nursing employment as prescribed under 12 AAC 44.630.

Authority: AS 08.68.100 AS 08.68.276

12 AAC 44.610 CONTINUING EDUCATION REQUIREMENTS. (a) The board will accept continuing education toward fulfillment of the continuing competency requirements set out in 12 AAC 44.600 if the applicant documents

(1) completion of at least 30 contact hours of continuing education for renewal of a license; the applicant shall earn at least 20 of the contact hours in a continuing education program sponsored or approved by one of the following organizations:

- (A) American Nurses Association;
- (B) Alaska Nurses Association;
- (C) American Medical Association;
- (D) Alaska Medical Association;
- (E) a nurse practitioner certifying body;
- (F) a nurse anesthetist certifying body;

(G) an organization included on a list that the board maintains of approved continuing education sponsors; the board will approve only those sponsors who offer “continuing education” as defined in (c)(2) of this section;

(2) that no more than 10 of the contact hours required under (1) of this subsection were earned through in-service nursing education offered by a licensed health care facility; and

(3) that the contact hours required under (1) of this subsection were earned in at least one of the following subject areas:

- (A) nursing practice areas and special health care problems;
- (B) biological, physical, or behavioral sciences;
- (C) legal or ethical aspects of health care;
- (D) management or administration of health care personnel and patient care;
- (E) subjects approved by the board that are required as part of a formal nursing program but that are more advanced than those completed for original licensure.

(b) The board will accept continuing education contact hours that are part of a mediated learning system such as educational television, audio or video cassettes, or printed media, or that are part of an independent study program, if the system or program is accredited by an agency that the board has approved. The board will maintain a list of accrediting agencies and will approve an accrediting agency that is approved by a national certifying body.

(c) In this section,

(1) “contact hour” means a minimum of 50 minutes of actual organized instruction; academic credit will be converted to contact hours as follows:

- (A) one quarter academic credit equals 10 contact hours;
- (B) one semester academic credit equals 15 contact hours;

(2) “continuing education” means a systematic educational experience that grants academic credit or contact hours beyond the basic nursing program preparation.

Authority: AS 08.68.100 AS 08.68.276 AS 08.68.330

12 AAC 44.620. PROFESSIONAL ACTIVITIES REQUIREMENT. (a) The board will accept professional activities toward fulfillment of the continuing competency requirements set out in 12 AAC 44.600 if the applicant documents

- (1) completion of at least 30 hours of participation in professional activities for renewal of a license; and
- (2) that the hours of participation in professional activities were earned in at least one of the following ways:

- (A) work with a professional nursing or health-related organization;
- (B) authoring or contributing to an article, book, or publication related to health care;

(C) development and oral presentation of a paper before a professional or lay group on a subject that explores new or current areas of nursing theory, technique, or philosophy;

(D) design and conduct of a research study relating to nursing and health care;

(E) other professional activities approved by the board and included on a list that the board maintains; the board will approve only those activities that meet the definition of “professional activities” in (b) of this section.

(b) In this section “professional activities” means activities, performed without compensation, that use nursing knowledge and contribute to the health of individuals or the community.

Authority: AS 08.68.100 AS 08.68.276 AS 08.68.330

12 AAC 44.630. NURSING EMPLOYMENT REQUIREMENT. The board will accept nursing employment toward fulfillment of the continuing competency requirements set out in 12 AAC 44.600 if the applicant documents at least 320 hours of practice of practical nursing or registered nursing, as defined in AS 08.68.410, during the two years before the licensing period for which the applicant seeks renewal. The applicant shall document those hours on a renewal survey form provided by the board and shall include the name of the nurse’s employer.

Authority: AS 08.68.100 AS 08.68.276

12 AAC 44.640. ALTERNATIVE METHODS FOR CONTINUING COMPETENCY REQUIREMENTS. A nurse may meet continuing competency requirements without meeting the requirements of 12 AAC 44.610 – 12 AAC 44.630 by documenting that after the last renewal date, the nurse has

- (1) completed a nursing refresher course approved by the board; or

- (2) attained a degree or certificate in nursing, or made progress toward one, beyond the education requirements for the nurse's original license by successfully completing at least two required courses; or
- (3) successfully completed the National Council Licensing Examination.

Authority: AS 08.68.100 AS 08.68.276

12 AAC 44.650. REQUIREMENTS FOR NEW LICENSEES. (a) A licensee who receives his or her original license in the first year of the renewal period must comply with the continuing competency requirements of 12 AAC 44.600 – 12 AAC 44.640 before the first license renewal.

(b) A licensee who receives his or her original license in the second year of the renewal period must comply with the continuing competency requirements of 12 AAC 44.600—12 AAC 44.640 before the second license renewal.

Authority: AS 08.68.100 AS 08.68.276

12 AAC 44.660. AUDIT AND DOCUMENTATION. All information concerning continuing competency submitted with a renewal application is subject to audit at the discretion of the board. Satisfaction of continuing competency requirements must be documented on a renewal form provided by the board and must be submitted before license renewal.

Authority: AS 08.68.100 AS 08.68.276

ARTICLE 7. DISCIPLINARY GUIDELINES.

Section

- 700. Purpose of disciplinary guidelines**
- 705. Grounds for denial for criminal history**
- 710. Violations**
- 720. Disciplinary guidelines**
- 730. Terms of probation**
- 740. Use of alcohol or drugs**
- 745. Identification of licensed nurse**
- 750. Professional incompetence**
- 760. Mental or physical disabilities**
- 770. Unprofessional conduct**
- 780. Reinstatement of a suspended license or authorization**
- 785. Reinstatement of a revoked license or authorization**

12 AAC 44.700. PURPOSE OF DISCIPLINARY GUIDELINES. To ensure that the board's disciplinary policies are known and are administered consistently and fairly, the disciplinary guidelines in 12 AAC 44.700 – 12 AAC 44.785 are established.

Authority: AS 08.68.100 AS 08.68.270 AS 08.68.275

12 AAC 44.705. GROUNDS FOR DENIAL FOR CRIMINAL HISTORY. (a) As used in AS 08.68.270, AS 08.68.334, and this chapter, crimes that are substantially related to the qualifications, functions, or duties of a certified nurse aide, registered nurse, or practical nurse include

- (1) murder;
- (2) manslaughter;
- (3) criminally negligent homicide;
- (4) assault;
- (5) sexual assault;
- (6) sexual abuse of a minor;
- (7) unlawful exploitation of a minor, including possession or distribution of child pornography;
- (8) incest;
- (9) indecent exposure;
- (10) robbery;
- (11) extortion;
- (12) stalking;
- (13) kidnapping;
- (14) theft;
- (15) burglary;

- (16) forgery;
- (17) endangering the welfare of a child;
- (18) endangering the welfare of a vulnerable adult;
- (19) unlawful distribution or possession for distribution of a controlled substance; for purposes of this paragraph, "controlled substance" has the meaning given in AS 11.71.900;
- (20) reckless endangerment.

(b) Convictions of an offense in another jurisdiction with elements similar to an offense listed in (a) of this section are substantially related to the qualifications, functions, or duties of a certified nurse aide, registered nurse, or practical nurse.

Authority: AS 08.01.075 AS 08.68.270 AS 08.68.334
AS 08.68.100 AS 08.68.331

12 AAC 44.710. VIOLATIONS. (a) A nurse, who after a hearing under the Administrative Procedure Act (AS 44.62), is found to have violated a provision of AS 08.68 or 12 AAC 44, is subject to the disciplinary penalties listed in AS 08.01.075 and AS 08.68.275, including public notice of the violation and penalty in appropriate publications.

(b) Nothing in the guidelines set out in 12 AAC 44.720 prohibits the board from imposing greater or lesser penalties than those described in 12 AAC 44.720 or restricting the practice of a nurse depending upon the circumstances of a particular case.

Authority: AS 08.68.100 AS 08.68.270 AS 08.68.275

12 AAC 44.720. DISCIPLINARY GUIDELINES. (a) The board will, in its discretion, revoke a license if the licensee

- (1) commits a violation that is a second offense;
- (2) violates the terms of probation from a previous offense;
- (3) obtains or attempts to obtain, by fraud or deceit, a license to practice nursing;
- (4) is convicted of a felony or other crime, if the felony or other crime is substantially related to the qualification, functions, or duties of the licensee;
- (5) habitually abuses alcoholic beverages, or illegally uses a controlled substance, as defined in AS 11.71.900(4), to the extent that the abuse or use interferes with nursing functions, and if the licensee fails or refuses to participate in a rehabilitation program acceptable to the board;
- (6) impersonates another health care provider;
- (7) intentionally or negligently engages in conduct that results in a significant risk to the health or safety of a client or injury to a client;
- (8) engages in unprofessional conduct, as described in 12 AAC 44.770, if the health, safety, or welfare of another person is placed at risk; or
- (9) is professionally incompetent, if the incompetence results in risk of injury to a client.

(b) The board will, in its discretion, suspend a license for up to two years, followed by probation of not less than two years, if the licensee

- (1) habitually abuses alcoholic beverages or illegally uses controlled substances, as defined in AS 11.71.900(4), to the extent that the abuse or use interferes with nursing functions, but the licensee participates in a rehabilitation program acceptable to the board;
- (2) willfully or repeatedly violates a statute in AS 08.68 or a regulation of the board; or
- (3) is professionally incompetent, if the incompetence results in the public health, safety, or welfare, being placed at risk.

(c) The board will, in its discretion, suspend a license for up to one year, followed by probation for not more than one year, if the licensee

- (1) engages in unprofessional conduct as described in 12 AAC 44.770; or
- (2) denies care or treatment to a person seeking assistance because the person failed to or refused to agree to arbitrate as provided in AS 09.55.535(a).

(d) The board will review, on an individual basis, the need for revocation or limitation of the license of a licensee who practices or attempts to practice while afflicted with a physical or mental illness, deterioration, or disability that interferes with the individual performance of nursing functions.

Authority: AS 08.01.075 AS 08.68.270 AS 08.68.275
AS 08.68.100

12 AAC 44.730. TERMS OF PROBATION. A licensee who is placed on probation will, in the board's discretion, be subject to one or more of the following terms of probation, and to other relevant terms of probation including those set out in 12 AAC 44.740— 12 AAC 44.760:

- (1) obey all the laws of the United States, State of Alaska, and all laws pertaining to the practice of nursing in this state;

- (2) fully comply with the probation program established by the board, and cooperate with representatives of the board;
- (3) notify the board in writing of the dates of departure and return if the licensee leaves Alaska to reside or practice outside the state;
- (4) report in person at meetings of the board of nursing, or to its designated representatives, during the period of probation, as directed by the board;
- (5) submit written reports and verification of actions as are required by the board during the period of probation;
- (6) if employed in nursing at any time during the period of probation, have the employer submit to the board verification that the employer understands the conditions of probation;
- (7) be employed as a nurse only in a setting in which full supervision is provided, and not personally function as a supervisor.

Authority: AS 08.01.075 AS 08.68.270 AS 08.68.275
AS 08.68.100

12 AAC 44.740. USE OF ALCOHOL OR DRUGS. (a) In addition to one or more of the terms of probation set out in 12 AAC 44.730, a licensee placed on probation for the habitual abuse of alcohol or illegal use of controlled substances, as defined in AS 11.71.900(4), will, in the board’s discretion, also be subject to one or more of the relevant terms of probation including the following:

- (1) physical and mental health examinations, as determined by the board, to evaluate the licensee’s ability to perform the professional duties of a nurse;
- (2) as determined by the board, participation, until completion, in an ongoing program of rehabilitative counseling, alcoholics anonymous, narcotics anonymous, or an impaired nurse group, which includes progress reports from the care provider when requested by the board;
- (3) abstain from the personal use of alcohol;
- (4) abstain from the personal use of alcohol or controlled substances, as defined in AS 11.71.900(4), in any form, except when lawfully prescribed by a physician authorized to practice medicine in Alaska;
- (5) submit to tests and samples required for the detection of alcohol or controlled substances, as defined in AS 11.71.900(4), at the request of the board or the board’s representative.

(b) Access to controlled substances, as defined in AS 11.71.900(4), in the work setting will, in the board’s discretion, be restricted.

Authority: AS 08.01.075 AS 08.68.270 AS 08.68.275
AS 08.68.100

12 AAC 44.745. IDENTIFICATION OF LICENSED NURSE. An individual licensed under AS 08.68 and this chapter as a licensed practical nurse or a registered nurse shall conspicuously display on the licensee’s uniform or clothing a name tag or identification badge identifying the licensee as a licensed practical nurse or a registered nurse.

Authority: AS 08.68.100 AS 08.68.230

12 AAC 44.750. PROFESSIONAL INCOMPETENCE. In addition to one or more of the terms of probation set out in 12 AAC 44.730, a licensee placed on probation after being found professionally incompetent will, in the board’s discretion, be subject to one or more of the following terms of probation:

- (1) successful completion of an appropriate course or courses in nursing, as determined by the board, before the end of the probationary period; or
- (2) participation in at least 30 contact hours of appropriate continuing competency education in nursing.

Authority: AS 08.01.075 AS 08.68.270 AS 08.68.275
AS 08.68.100

12 AAC 44.760. MENTAL OR PHYSICAL DISABILITIES. (a) In addition to one or more of the terms of probation set out in 12 AAC 44.730, a licensee placed on probation for practicing or attempting to practice nursing while afflicted with a physical or mental illness, deterioration, or disability that interferes with the licensee’s performance of nursing will, in the board’s discretion, be subject to a physical or mental health examination to evaluate the licensee’s ability to perform the professional duties of a nurse, and, if medically determined, must participate in and complete a recommended treatment program that includes written progress reports from the care provider when requested by the board.

(b) In this section, “care provider” means a person who or an organization that, by the nature of experience and training, is qualified in the opinion of the board to provide substance abuse counseling, rehabilitation, or related services to the public through established and recognized treatment programs.

Authority: AS 08.01.075
AS 08.68.100

AS 08.68.270

AS 08.68.275

12 AAC 44.770. UNPROFESSIONAL CONDUCT. Nursing conduct that could adversely affect the health and welfare of the public constitutes unprofessional conduct under AS 08.68.270(7) and includes the following:

- (1) failing to use sufficient knowledge, skills or nursing judgment in the practice of nursing as defined by the level of licensure;
- (2) assuming duties and responsibilities, on repeated occasions, without sufficient preparation or for which competency has not been maintained;
- (3) knowingly delegating a nursing care function, task, or responsibility to another who is not licensed under AS 08.68 to perform that function, task, or responsibility, when the delegation is contrary to AS 08.68 or 12 AAC 44 or involves a substantial risk or harm to a client;
- (4) failing to exercise adequate supervision over persons who are authorized to practice only under the supervision of the licensed professional;
- (5) failing to perform acts within the nurse's scope of competence which are necessary to prevent substantial risk or harm to a client;
- (6) violating the confidentiality of information or knowledge concerning a client;
- (7) neglecting or abusing a client by one of the following means:
 - (A) physically;
 - (B) emotionally;
 - (C) verbally;
- (8) using alcohol or other drugs to the extent that the use interferes with nursing functions;
- (9) violating state or federal laws regulating drugs, including but not limited to forging prescriptions or unlawfully distributing drugs or narcotics;
- (10) failing to maintain a record for each client which accurately reflects the nursing problems and interventions for the client, or falsifying a client's records or intentionally making an incorrect entry in a client's chart;
- (11) leaving a nursing assignment without properly notifying appropriate personnel;
- (12) permitting another person to use his or her nursing license or permit for any purpose;
- (13) failing to report, through proper channels, facts known to the nurse regarding incompetent, unprofessional, or illegal practice of a health care provider unless it has already been reported and the provider is already participating in a treatment or educational program approved by the appropriate board;
- (14) engaging in fraud, misrepresentation, or deceit in writing the licensing examination;
- (15) for any person not authorized to practice acts of medical diagnosis or medical therapeutics as an advanced nurse practitioner, to use the title nurse practitioner or advanced nurse practitioner, or the abbreviation NP or ANP or any other words, letters, signs, or figures to indicate that the person is an advanced nurse practitioner;
- (16) for an advanced nurse practitioner to perform duties other than those specified in 12 AAC 44.430;
- (17) for any person not authorized to practice as a registered nurse anesthetist to use the title registered nurse anesthetist, nurse anesthetist or certified registered nurse anesthetist or the abbreviation CRNA or any other words, letters, signs, or figures to indicate that the person is a registered nurse anesthetist;
- (18) for a registered nurse anesthetist to perform duties outside the scope of practice described in 12 AAC 44.510;
- (19) discrimination on the basis of race, religious creed, color, national origin, ancestry or sex in the provision of nursing services;
- (20) signing a record as a witness attesting to the wastage of controlled substances which the nurse did not actually witness;
- (21) exploiting the patient for financial gain or offering, giving, soliciting or receiving fees for referral of a patient or client;
- (22) intentionally misappropriating medications, property, supplies, equipment or other resources of the client or agency for personal or unauthorized use;
- (23) removal of a patient's life support system without appropriate medical or legal authorization;
- (24) untruthful or misleading advertising of nursing services;
- (25) knowingly violating laws regulating health insurance including those laws established in AS 21.36.360;
- (26) engaging in activities that constitute the unlicensed practice of pharmacy;
- (27) for an advanced nurse practitioner with prescriptive and dispensing authority prescribing or dispensing a prescription outside of the advanced nurse practitioner's scope of practice;
- (28) engaging in sexual misconduct with a client;
- (29) harassing, disruptive, or abusive behavior by a licensee directed at staff or a client, a client's relative, or a client's guardian;
- (30) disruptive behavior by a licensee at the workplace that interferes with the provision of client care;
- (31) failing to cooperate with an official investigation by the board or the board's representatives, including failing to timely provide requested information;
- (32) accepting healthcare provider orders from unlicensed assistive personnel.

Authority: AS 08.68.100

12 AAC 44.780. REINSTATEMENT OF A SUSPENDED LICENSE OR AUTHORIZATION. A suspended license or authorization may be reinstated only if the requirements in the suspension order have been met.

Authority: AS 08.68.100

12 AAC 44.785. REINSTATEMENT OF A REVOKED LICENSE OR AUTHORIZATION. (a) One year after revocation of a license or authorization, the nurse, registered nurse anesthetist, or authorized nurse practitioner may apply to the board in writing for reinstatement.

(b) The applicant for reinstatement shall appear before the board.

(c) The board will, in its discretion, impose restrictions upon the nurse, registered nurse anesthetist, or authorized nurse practitioner when reinstating a license or authorization.

(d) The applicant is responsible for providing a written evaluation from the employer regarding his or her performance and will be evaluated by the board to determine whether or not the license or authorization will be reinstated.

Authority: AS 08.68.100

ARTICLE 8. CERTIFIED NURSE AIDE.

Section

- 800. Certification by examination**
- 805. Certification by endorsement**
- 810. Application for certification**
- 812. Criminal justice information**
- 814. Temporary certification**
- 815. Issuance and renewal of certification**
- 818. Denial of certification**
- 820. Lapsed certification**
- 825. Continuing education requirements**
- 830. Application for training program approval**
- 835. Training program standards**
- 840. Program instructors**
- 845. Classroom curriculum**
- 847. Clinical training curriculum**
- 850. Nurse aide competency evaluation**
- 852. Nurse aide skills checklist**
- 855. Changes in training program**
- 857. Training program review**
- 860. Discontinuation of training program**
- 862. Withdrawal of approval**
- 865. Registry of certified nurse aides**
- 870. Unprofessional conduct**
- 875. Terms of probation**
- 880. Reinstatement of revoked certification**
- 885. Identification of nurse aides**
- 890. Delegation to department**
- 895. Definitions**

Editor's note: As of Register 149, the General Provisions article was renumbered as a new Article 9 and Article 8 contains new sections 12 AAC 44.800 - 12 AAC 44.895, titled "Certified Nurse Aide."

12 AAC 44.800. CERTIFICATION BY EXAMINATION. (a) An applicant is eligible for certification as a nurse aide by examination if the applicant meets one of the following requirements:

(1) successful completion, within two years immediately before the date of application, of a certified nurse aide training program approved under 12 AAC 44.835, or equivalent in content to the requirements of 12 AAC 44.835(c);

(2) possession of an unencumbered nursing license, either current or lapsed, issued by a state or territory of the United States, or by a province of Canada;

(3) successful completion, within five years immediately before the date of application, of one year or more of nursing education that includes both clinical and classroom instruction on nursing theory from a nursing school approved by a state or territory of the United States or by a province of Canada, and that is equivalent in content to the requirements of 12 AAC 44.835(c);

(4) successful completion, within 10 years immediately before the date of application, of a United States military corpsman or medic training program equivalent in content to the requirements of 12 AAC 44.835(c) and service in the United States military forces as a corpsman or medic within five years immediately before the date of application.

(5) successful completion of a nursing training program in a foreign country other than Canada; an applicant shall submit all required documents accompanied by certified English translations if the original documents are not in English.

(b) An applicant who meets the requirements of (a) of this section must also successfully complete the certified nurse aide competency evaluation described in 12 AAC 44.850. The board will deny permission to take the competency evaluation to an applicant who has committed an act or omission that would constitute grounds for denial of certification under 12 AAC 44.818, if the board determines that the gravity of that act or omission supports a denial of permission to take the competency evaluation.

Authority: AS 08.68.100 AS 08.68.331 AS 08.68.334

Editor's note: A list of nursing schools that have been approved by a state or territory of the United States may be obtained by contacting the National League of Nursing, 350 Hudson Street, New York, NY 10014.

12 AAC 44.805. CERTIFICATION BY ENDORSEMENT. An applicant is eligible for certification as a nurse aide by endorsement if the applicant meets the following requirements:

(1) successful completion of a certified nurse aide training program approved under 12 AAC 44.835, or equivalent in content to the requirements of 12 AAC 44.835(c); and

(2) possession of an unencumbered nurse aide certification or registration that is issued by a state or territory of the United States, or by a province of Canada, and that is current on the date of application, if the applicant has successfully completed a competency evaluation equivalent to that described in 12 AAC 44.850.

Authority: AS 08.68.100 AS 08.68.331

12 AAC 44.810. APPLICATION FOR CERTIFICATION. (a) An applicant for certification as a nurse aide must submit

(1) a completed application, on a form provided by the department, verifying that the applicant meets the requirements of 12 AAC 44.800(a) or 12 AAC 44.805; the completed application must include, for identification purposes,

(A) a photograph of the applicant;

(B) signature of the application; and

(C) personal identification information;

(2) the applicable fees established in 12 AAC 02.282; and

(3) the applicant's fingerprint information required by 12 AAC 44.812.

(b) If the applicant applies for certification under 12 AAC 44.800, the application for certification is also the application to take the competency evaluation required under 12 AAC 44.800(b).

Authority: AS 08.68.100 AS 08.68.331

12 AAC 44.812. CRIMINAL JUSTICE INFORMATION. (a) An applicant for certification as a nurse aide by examination or by endorsement shall submit two complete fingerprint cards containing the applicant's fingerprints and other information required by the Department of Public Safety to obtain state and national criminal justice information under AS 12.62 and AS 12.64.

(b) The department shall submit the fingerprint cards received under this section to the Department of Public Safety, and request the Department of Public Safety to

(1) submit the fingerprints to the Federal Bureau of Investigation for a report on national criminal justice information;

(2) perform a check for state criminal justice information; and

(3) report to the department the results of the criminal justice information checks under (1) and (2) of this subsection.

(c) Except as provided in 12 AAC 44.814 and (d) of this section, a certificate will not be issued to an applicant until the department receives from the Department of Public Safety a report of state and national criminal justice information regarding the applicant. Reports that include criminal justice information shall be referred to the board for review.

(d) The board may waive the requirements for submitting fingerprints for an applicant who has submitted at least two separate sets of fingerprints under this section that the Department of Public Safety or the Federal Bureau of Investigation have been unable to read.

(e) Unless an applicant has obtained a waiver under (d) of this section, an application for the renewal or reinstatement of the applicant's initial nurse aide certification will be denied by the board if

(1) the criminal justice information requested under (b) of this section has not been received by the department;

(2) the department has notified the applicant in writing that the applicant's criminal justice information has not been received by the department and has directed the applicant to resubmit the documents and information required under (a) of this section; and

(3) the applicant has failed to resubmit the documents and information required under (a) of this section as directed by the department

Authority: AS 08.68.100 AS 08.68.331 AS 08.68.334

12 AAC 44.814. TEMPORARY CERTIFICATION. (a) The board may issue a temporary certification to an applicant for certification by endorsement who meets the requirements of 12 AAC 44.805 and 12 AAC 44.810(a) and is waiting for the report of state and national criminal justice information under 12 AAC 44.812.

(b) The board may issue a temporary certification to an applicant for certification by examination who meets the requirements of 12 AAC 44.800 and 12 AAC 44.810(a) and is waiting for the report of state and national criminal justice information under 12 AAC 44.812.

(c) A temporary certification issued under (a) or (b) of this section is valid for six months from the date of issuance or until a permanent certification is issued or denied, whichever occurs first.

Authority: AS 08.68.100 AS 08.68.331

12 AAC 44.815. ISSUANCE AND RENEWAL OF CERTIFICATION. (a) An initial nurse aide certification is valid for the remainder of the current biennial certification period. A nurse aide certification must be renewed biennially on or before March 31 of even-numbered years. A certification that is not renewed lapses.

(b) To renew a nurse aide certification, a certified nurse aide must submit

(1) a completed application for renewal on a form provided by the department;

(2) the certification renewal fee established in 12 AAC 02.282; and

(3) verification that the applicant has met the continuing education requirements of 12 AAC 44.825 and the requirements of (c) or (d) of this section.

(c) A nurse aide certification will be renewed if the applicant was employed in a state or territory of the United States, or in a province of Canada as a certified nurse aide or in a similar position that performs nurse aide duties for monetary compensation for 160 hours or more during the concluding certification period.

(d) An applicant who was employed as a certified nurse aide or in a similar position that performs nurse aide duties for monetary compensation for more than eight hours, but less than 160 hours during the concluding certification period may not obtain the required experience after the applicant's nurse aide certificate has lapsed and must successfully complete a competency evaluation under 12 AAC 44.850 before the certification will be renewed.

(e) A certified nurse aide who is issued an initial nurse aide certification less than 12 months before the next renewal period is not required to satisfy the requirements of (c) and (d) of this section.

(f) A nurse aide certification that has been lapsed for 12 months or less may be renewed under this section.

(g) An applicant who was not employed as a certified nurse aide for monetary compensation during the concluding certification period and whose certified nurse aide training program was successfully completed more than two years ago, must complete another certified nurse aide training program approved under 12 AAC 44.835, or equivalent in content to the requirements of 12 AAC 44.835(c).

Authority: AS 08.01.100 AS 08.68.331 AS 08.68.336
AS 08.68.100

12 AAC 44.818. DENIAL OF CERTIFICATION. The board will deny certification to an applicant who has committed an act or omission that constitutes grounds for denial of certification under AS 08.68.334, or that would constitute unprofessional conduct by a certified nurse aide under 12 AAC 44.870, if the board determines that the gravity of that act or omission supports a denial of certification.

Authority: AS 08.68.100 AS 08.68.331 AS 08.68.336

12 AAC 44.820. LAPSED CERTIFICATION. (a) The board will reinstate a nurse aide certification that has been lapsed for at least one year, but less than five years, if the applicant submits

(1) a completed reinstatement application on a form provided by the department;

(2) the certification renewal fee and the fingerprint processing fee established in 12 AAC 02.282;

(3) verification of successful completion of all continuing education requirements in 12 AAC 44.825 that would have been required to maintain a current certification for the entire period the certification was lapsed, with at least 24 hours having been completed within the two years immediately preceding the date of application;

(4) verification that the applicant was employed in another state or territory of the United States, or in a province of Canada, as a certified nurse aide or in a similar position that performs nurse aide duties for monetary compensation as required under 12 AAC 44.815(c) for the total number of hours that would have been required to maintain a current certification for the entire period the certification was lapsed, with at least 160 hours having been completed within the two years immediately preceding the date of application; and

(5) the applicant's fingerprint information described in 12 AAC 44.812(a).

(b) An applicant for reinstatement of a nurse aide certification under this section who has successfully completed a competency evaluation under 12 AAC 44.850 within the 24 months immediately preceding application for reinstatement is not required to meet the requirements of (a)(3) and (4) of this section.

(c) The board will not reinstate a nurse aide certification that has been lapsed for five years or more. The holder of a nurse aide certification that has been lapsed for five years or more may reapply for initial certification.

Authority: AS 08.01.100 AS 08.68.100 AS 08.68.331

12 AAC 44.825. CONTINUING EDUCATION REQUIREMENTS. (a) Except as provided in (b) of this section, an applicant for renewal of a nurse aide certification must have successfully completed 24 contact hours of continuing education during the concluding certification period.

(b) An applicant for renewal of a nurse aide certification for the first time

(1) must have successfully completed 12 contact hours of continuing education during the concluding certification period, if the applicant has been certified for at least one year during that period; and

(2) is not required to complete continuing education requirements for the concluding certification period, if the applicant has been certified for less than one year during that period.

(c) An applicant for renewal of a nurse aide certification who has not completed the required number of continuing education contact hours during a biennial certification period may obtain the required number of contact hours after the expiration date of the certification. Continuing education contact hours used for renewal under this subsection may not be used to satisfy the continuing education requirements for the next biennial certification period.

Authority: AS 08.68.100 AS 08.68.331

12 AAC 44.830. APPLICATION FOR TRAINING PROGRAM APPROVAL. (a) An applicant seeking to establish a certified nursing aide training program must submit, at least 90 days before the date training is expected to begin,

(1) a completed application on a form provided by the department;

(2) any fee established in 12 AAC 02.282;

(3) a copy of the curriculum and other instructional materials; and

(4) a description of the classroom and clinical facilities.

(b) The application must include

(1) a summary of the rationale, philosophy, and purpose of the program;

(2) qualifications of the faculty;

(3) an outline of the program, including the program's title, objectives, content, and teaching methodology, and the number of classroom and clinical instruction hours;

(4) a copy of the nurse aide skills checklist to be used to measure student clinical skills as required in 12 AAC 44.852;

(5) program location;

(6) the name and resume of each classroom instructor;

(7) a schedule of classroom and clinical instruction hours; and

(8) a copy of the final examination.

(c) Within 90 days after receipt of the application the board will advise the applicant whether additional information is needed to complete the application. Once an application is complete, if the program meets the requirements of 12 AAC 44.835 - 12 AAC 44.847 and 12 AAC 44.852, the board will provisionally approve the program. A program that has received provisional approval is authorized to conduct training until the board's final decision on the application for approval.

(d) The board will conduct an on-site review of the training facilities and personnel of a provisionally approved program during the first training offered by that program. After the on-site review the board will notify the program provider whether the board has determined that

(1) deficiencies in the provisionally approved program exist because of noncompliance with 12 AAC 44.835 - 12 AAC 44.847 and 12 AAC 44.852; and

(2) a follow-up on-site visit is necessary to ensure that the program provider corrects those deficiencies.

(e) If the board determines deficiencies to exist under (d)(1) of this section, the program provider shall correct those deficiencies and notify the board when the deficiencies have been corrected. After any follow-up on-site

review that the board requires under (d)(2) of this section, if the board determines that those deficiencies have not been corrected, the board will deny approval of the program.

(f) A program provider whose application has been denied may request a hearing under AS 44.62.330 – 44.62.630 (Administrative Procedure Act) to appeal the denial of training program approval.

Authority: AS 08.68.100 AS 08.68.331

12 AAC 44.835. TRAINING PROGRAM STANDARDS. (a) A certified nurse aide training program must be conducted in a manner to assure that clients receive safe and competent care, and must train a certified nurse aide to

- (1) form a relationship, communicate, and interact competently with the client;
- (2) demonstrate sensitivity to the emotional, social, and mental health needs of a client through skillful and directed interactions;
- (3) assist a client in attaining and maintaining independence;
- (4) exhibit behavior that supports and promotes the rights of a client; and
- (5) demonstrate the skills of observing, caregiving, and reporting needed to document the health, physical condition, and well-being of a client.

(b) To be approved by the board, a certified nurse aide training program must provide the following:

- (1) curriculum that meets the requirements of 12 AAC 44.845 and 12 AAC 44.847;
- (2) instructors who meet the requirements of 12 AAC 44.840;
- (3) classroom and clinical facilities that meet the requirements of (f) of this section;
- (4) maintenance of records showing the disposition of complaints received against the program.

(c) In addition to the requirements of (b) of this section, a certified nurse aide training program must consist of at least 140 hours of training that

- (1) includes a minimum of 60 hours of classroom instruction that meets the requirements of 12 AAC 44.845;
- (2) includes a minimum of 80 hours of supervised clinical experience that meets the requirements of 12 AAC 44.847; at least 32 of these hours must be supervised practical training; and
- (3) documents each student's demonstration of skills by completion of the nurse aide skills checklist required under 12 AAC 44.852.

(d) A student may not provide clinical care to a client unless the student has been trained and found proficient by the instructor in the skill that the student is to exercise. A ratio of ten students to one instructor may not be exceeded if a student is providing clinical care to a client. Before having any direct contact with a client, a student must complete a minimum of 16 hours of classroom training and 16 hours of specific skill training that includes

- (1) communication and interpersonal skills;
- (2) infection control, including standard precautions;
- (3) safety and emergency procedures; and
- (4) respecting and promoting the rights of the client.

(e) The training required under this section is in addition to a nursing facility's initial employee orientation requirements.

(f) Classroom and clinical facilities must provide space, comfort, safety, and equipment sufficient for conducting a professional certified nurse aide training program. When evaluating the sufficiency of classroom and clinical facilities, the board will consider whether

- (1) the facilities appear to be clean and in good repair;
- (2) a comfortable temperature is maintained;
- (3) the lighting is bright enough to allow performance of classroom work, including reading and writing, and whether increased lighting is available as needed for specific clinical instruction;
- (4) students have ready access to toilets and lavatories;
- (5) space is sufficient to allow each student to be seated and take written notes during lectures, and to provide students with an unobstructed view during demonstrations of clinical skill tasks;
- (6) the acoustics allow students to hear the instructor; and
- (7) an aspect of the facilities likely could interfere with the effective presentation of a certified nurse aide training program.

(g) Except as provided in (h) of this section, the board will not approve a certified nurse aide training program offered in or by a nursing facility that the state survey and certification agency or the Health Care Financing Administration, United States Department of Health and Human Services, has determined to be ineligible under federal Medicare or Medicaid regulations to offer a nurse aide training and competency evaluation program within the 24 months preceding the board's review of the nursing facility's program.

(h) The board will approve a certified nurse aide training program to be conducted in a nursing facility described under (g) of this section if a program provider other than that nursing facility offers the training program, and if the state survey and certification agency has

- (1) determined that a similar program is not offered within a reasonable distance of the facility;
- (2) determined that an environment exists that is adequate for the operation of the program in the facility; and
- (3) provided notice of its determinations to the office of long term care ombudsman established under AS 44.21.231.

(i) The board will maintain a current list of approved training programs. Those training programs approved by the board as of October 9, 1998 are determined to be in compliance with the requirements of 42 C.F.R. 483.152 and 42 C.F.R. 483.154. The board will review these programs as provided in 12 AAC 44.857.

Authority: AS 08.68.100 AS 08.68.331

***Editor's note:** A list of the certified nurse aide training programs that the board has approved as of October 9, 1998 may be obtained from the Board of Nursing, Department of Commerce, Community, and Economic Development, 550 W. 7th Avenue, Suite 1500, Anchorage, AK 99501-3567.*

12 AAC 44.840. PROGRAM INSTRUCTORS. (a) Except as provided in (b) of this section, in a certified nurse aide training program the training must be performed by, or under the general supervision of, a registered nurse licensed under AS 08.68 who

(1) has at least two years of nursing experience, at least one year of which must be in the provision of long term care facility services; and

(2) has completed a course in teaching adults or has experience in teaching adults.

(b) In a facility-based certified nurse aide training program, the training may be performed under the general supervision of the director of nursing for the facility.

(c) The primary instructor in a certified nurse aide training program offered in a nursing facility must be a registered nurse or a licensed practical nurse, licensed under AS 08.68, who has at least two years of experience as a nurse in a nursing facility.

(d) The primary instructor in a certified nurse aide training program offered in connection with a home health agency must have

(1) at least two years of experience in caring for the elderly and for the chronically ill of any age; and

(2) six months of experience in providing home health care.

(e) A registered nurse or a licensed practical nurse, licensed under AS 08.68, must supervise students who provide clinical care to clients during the training.

(f) Supplemental personnel may be used to meet the program objectives for specific topics in a certified nurse aide program. Supplemental personnel must have at least one year of experience in the field or specialty in which the training is to be provided.

Authority: AS 08.68.100 AS 08.68.331

12 AAC 44.845. CLASSROOM CURRICULUM. The 60 hours of classroom instruction required in 12 AAC 44.835(c)(1) must include the following topics:

(1) the role of a certified nurse aide, including

(A) ethical standards;

(B) legal issues;

(C) the certified nurse aide as a member of the health care team; and

(D) the client's rights and responsibilities;

(2) basic nursing skills, including

(A) monitoring body functions;

(B) taking and recording vital signs;

(C) measuring and recording a client's height and weight;

(D) caring for the client's environment;

(E) non-invasive collection and testing of physical specimens;

(F) measuring and recording fluid and food intake and output;

(G) caring for a client if the client's death is imminent; and

(H) post mortem care;

(3) personal care skills, including

(A) bathing;

(B) oral hygiene;

(C) grooming;

(D) dressing;

(E) toileting;

(F) assisting with eating and hydrating;

(G) proper feeding techniques; and

(H) skin care;

(4) safety concepts related to nursing, including

(A) medical aseptic technique, including isolation;

(B) basic life support;

(C) environment;

(D) body mechanics;

(E) transfer and ambulation;

- (F) restraints and other protective devices;
- (G) fire and disaster;
- (H) food service; and
- (I) infection control, including standard precautions;
- (5) communication skills, including
 - (A) psychosocial needs of clients;
 - (B) verbal and nonverbal communications;
 - (C) knowledge of communication modifications for clients with limited abilities;
 - (D) medical and nursing terminology; and
 - (E) recording and reporting;
- (6) hygiene and restorative nursing care, including
 - (A) personal hygiene;
 - (B) activities of daily living;
 - (C) adequate nutrition and fluid intake;
 - (D) excretory system;
 - (E) bladder and bowel retraining; and
 - (F) preventive maintenance and rehabilitative measures;
- (7) human growth and development, including
 - (A) basic needs;
 - (B) developmental needs;
 - (C) care of the cognitively impaired;
 - (D) mental health and social service needs;
 - (E) cultural factors;
 - (F) sexuality;
 - (G) process of aging; and
 - (H) death and dying.

Authority: AS 08.68.100 AS 08.68.331

12 AAC 44.847. CLINICAL TRAINING CURRICULUM. The 80 hours of supervised clinical experience required in 12 AAC 44.835(c)(2) must provide an opportunity for a student to gain the following competencies:

- (1) perform according to a nurse aide's role and responsibility by
 - (A) using ethical and legal concepts in relationships and communication with others, including other health care providers and the client;
 - (B) maintaining confidentiality of client information;
 - (C) identifying the lines of authority and reporting problems to the appropriate person;
 - (D) identifying the range and limitation of certified nurse aide functions;
 - (E) accepting responsibility for one's actions;
 - (F) demonstrating promptness and dependability;
 - (G) seeking assistance when unsure about appropriate action;
 - (H) participating as a member of the health care team, including providing input to licensed nursing staff in the development and updating of client care plans; and
 - (I) using the concept of client's rights and responsibilities in client relationships, including the rights described in 7 AAC 12.890;
- (2) demonstrate an understanding of the basic nursing skills of
 - (A) monitoring body functions;
 - (B) taking and recording vital signs;
 - (C) non-invasive physical specimen collection and testing, including recognizing and reporting deviations from normal limits;
 - (D) measuring and recording height and weight;
 - (E) recognizing abnormal signs and symptoms of common diseases and conditions, including the following:
 - (i) shortness of breath;
 - (ii) rapid respiration;
 - (iii) fever, chills, or coughs;
 - (iv) pain in the chest or abdomen;
 - (v) nausea and vomiting;
 - (vi) blue color to the lips;
 - (vii) drowsiness;
 - (viii) excessive thirst or sweating;
 - (ix) pus, blood, or sediment in urine;
 - (x) urinating difficulties, urinating in frequent small amounts, pain or burning during urination, or urine with dark color or strong odor;
 - (F) transfers, positioning, and turning of clients;

- (3) demonstrate an understanding of basic personal care skills by assisting clients with
 - (A) bathing;
 - (B) oral hygiene;
 - (C) grooming;
 - (D) dressing;
 - (E) toileting;
 - (F) eating and hydration;
 - (G) proper feeding techniques; and
 - (H) skin care;
- (4) demonstrate knowledge of safety concepts by
 - (A) using the principles of medical asepsis and isolation techniques;
 - (B) showing proficiency in basic life support;
 - (C) providing adequate ventilation, warmth, light, and therapeutic environment;
 - (D) using appropriate measures to relieve pain and promote rest and sleep;
 - (E) maintaining equipment and keeping client space clean and orderly;
 - (F) identifying and using accident prevention measures;
 - (G) applying principles of body mechanics in transferring and ambulation of a client;
 - (H) demonstrating the proper application and release of restraints and other protective devices;
 - (I) demonstrating the proper care of the client in protective devices;
 - (J) demonstrating knowledge of fire and disaster procedures; and
 - (K) applying principles of health and sanitation in the service of food to a client;
- (5) demonstrate appropriate communication skills by
 - (A) listening and responding to a client's verbal and nonverbal communications;
 - (B) recognizing that the certified nurse aide's own behavior influences a client's behavior;
 - (C) seeking assistance in understanding a client's behavior;
 - (D) giving appropriate positive and negative reinforcement;
 - (E) making adjustments for the physical or mental limitations of a client;
 - (F) using terminology accepted in the employing facility to record and report observations and pertinent information;
 - (G) recording and reporting observations, activities, and communications accurately;
- (6) demonstrate knowledge of hygiene and restorative nursing care by
 - (A) providing appropriate personal hygiene services to the client;
 - (B) using measures that promote good skin care, including the use of anti-pressure procedures and devices;
 - (C) carrying out preventive maintenance and rehabilitative measures such as therapeutic ambulation, exercise, range of motion, and bed and chair positioning in daily care;
 - (D) recognizing and promoting opportunities for self-care, according to the client's ability;
 - (E) helping to provide adequate nutrition, including fluid intake and progressive self-feeding;
 - (F) identifying and monitoring special dietary needs;
 - (G) following correct procedures to aid adequate elimination from the bladder and bowel, including measuring output;
 - (H) demonstrating an understanding of the concepts of bladder and bowel retraining; and
 - (I) making adjustments for physical or mental limitations;
- (7) demonstrate knowledge of growth and development concepts by
 - (A) identifying basic human needs;
 - (B) helping to provide for a client's spiritual needs;
 - (C) recognizing the client's family as an influence on behavior and care;
 - (D) identifying developmental tasks associated with aging;
 - (E) identifying cultural factors that may influence behavior;
 - (F) describing the body responses, including sexuality, in the normal life cycle;
 - (G) describing the body responses to loss, dying, and death; and
 - (H) demonstrating knowledge of post mortem care; and
- (8) demonstrate behavior that maintains the rights of the client by
 - (A) providing privacy and maintenance of confidentiality;
 - (B) promoting the client's right to make personal choices to accommodate individual needs;
 - (C) helping the client to resolve grievances;
 - (D) helping the client get to, and participate in, family and other group activities;
 - (E) helping to care for and maintain the security of a client's personal possessions;
 - (F) providing care that protects the client from abuse, mistreatment, or neglect;
 - (G) reporting any instances of abuse, mistreatment, or neglect to the appropriate authorities;
 - (H) maintaining the client's environment and providing the level of care that will minimize the need for physical and chemical restraints;
 - (I) acting as an advocate if a client's rights appear to have been violated by reporting to the appropriate supervisory staff.

Authority: AS 08.68.100

AS 08.68.331

12 AAC 44.850. NURSE AIDE COMPETENCY EVALUATION. (a) To be approved by the board a certified nurse aide competency evaluation must include

(1) an examination covering the subjects specified in 12 AAC 44.845 and 12 AAC 44.847; the competency evaluation must offer the applicant a choice between a written examination and an oral examination;

(2) a practical examination demonstrating the applicant's clinical and practical nurse aide skills; and

(3) notification to the applicant of the applicant's performance on the competency evaluation, identifying those portions, if any, of the competency evaluation that the applicant did not pass.

(b) The board approves the National Nurse Aide Assessment Program (NNAAP), developed by and administered under the supervision of the National Council of State Boards of Nursing, Inc., as the competency evaluation required under (a) of this section. The competency evaluation will be administered by the board or by a person approved by the board.

(c) Except as provided in (d) of this section, an applicant who does not successfully complete the competency evaluation required under this section may retake that portion of the competency evaluation that the applicant did not pass, upon payment of the examination fee required under 12 AAC 02.282.

(d) An applicant who does not successfully complete the competency evaluation after three attempts must complete a remedial course of training as required by the board. The applicant must provide proof of having fulfilled the requirements of the remedial course of training before the board will approve the applicant to retake the competency evaluation.

Authority: AS 08.68.100

AS 08.68.331

12 AAC 44.852. NURSE AIDE SKILLS CHECKLIST. (a) A certified nurse aide training program must maintain a nurse aide skills checklist that records the performance of each student. The nurse aide skills checklist must include

(1) each of the skills listed in 12 AAC 44.845 and 12 AAC 44.847;

(2) the date each skill was practiced or demonstrated;

(3) the student's satisfactory or unsatisfactory performance of a skill each time it was practiced or demonstrated; and

(4) the name and signature of the instructor who supervised the student's performance of a skill.

(b) After a student has completed a certified nurse aide training program, the program provider shall provide a copy of the nurse aide skills checklist to the student.

Authority: AS 08.68.100

AS 08.68.331

12 AAC 44.855. CHANGES IN TRAINING PROGRAM. A change in curriculum or a substantive change in an approved certified nurse aide training program may not occur without board approval. The program provider must submit a description of the proposed change in curriculum or other substantive change to the board for review at least 60 days before the provider proposes to implement the changes. The board will base its approval on whether the proposed change meets the requirements of 12 AAC 44.335 – 12 AAC 44.347 and 12 AAC 44.352.

Authority: AS 08.68.100

AS 08.68.331

12 AAC 44.857. TRAINING PROGRAM REVIEW. (a) The board will approve a certified nurse aide training program for a two-year period. Within two years after the date of the initial approval of a certified nurse aide training program, the board will conduct an on-site review of the training program to determine continued compliance with the requirements of 12 AAC 44.835 - 12 AAC 44.847 and 12 AAC 44.852 - 12 AAC 44.860. If the board determines that the training program complies with those requirements, the board will extend its approval of that program for another two years.

(b) After the on-site review under (a) of this section, the board will notify the program provider whether the board has determined that deficiencies in the certified nurse aide training program exist because of noncompliance with 12 AAC 44.835 – 12 AAC 44.847 and 12 AAC 44.852 – 12 AAC 44.860. The program provider must provide the board with proof that those deficiencies have been corrected within 30 days after the notice of deficiency. If a program provider fails to provide proof to the board's satisfaction that the deficiencies have been corrected, and if the board determines that the seriousness of the uncorrected deficiencies supports a withdrawal of approval, the board will withdraw approval of the training program.

(c) During a year in which on-site review is not scheduled, the program provider shall complete a self-evaluation form provided by the board.

(d) The board will, in its discretion, conduct a review of a certified nurse aide training program if the board has reason to believe that the program does not meet the requirements of 12 AAC 44.835 - 12 AAC 44.847 or 12 AAC 44.852 - 12 AAC 44.860, and will, in its discretion, conduct unannounced visits to the program as part of the review.

Authority: AS 08.68.100

AS 08.68.331

AS 08.68.334

12 AAC 44.860. DISCONTINUATION OF A TRAINING PROGRAM. The program provider of a certified nurse aide training program that discontinues operation shall

- (1) notify the board in writing of the date the program provider intends to cease operation; and
- (2) submit to the board a written list of the names and dates of graduation of students who graduated from that training program within the last two years, and those who are expected to graduate before the program ceases operation.

Authority: AS 08.68.100 AS 08.68.331

12 AAC 44.862. WITHDRAWAL OF APPROVAL. (a) The board will withdraw approval of a certified nurse aide training program offered by or in a nursing facility described in 12 AAC 44.835(g), but will allow the operation of a training program under the conditions set out in 12 AAC 44.835(h).

(b) The board will withdraw approval of a certified nurse aide training program if the program provider refuses to permit unannounced visits by the board.

(c) The board will, in its discretion, withdraw approval of a certified nurse aide training program if the board determines that the program no longer meets the requirements of 12 AAC 44.835 - 12 AAC 44.847 and 12 AAC 44.852 - 12 AAC 44.860. If the board withdraws approval of the training program the board will notify the program provider in writing, indicating the reasons for the action.

(d) The provider of a certified nurse aide training program for which approval has been withdrawn may request a hearing under AS 44.62.330 – 44.62.630 (Administrative Procedure Act) to appeal the withdrawal of program approval.

Authority: AS 08.68.100 AS 08.68.331

12 AAC 44.865. REGISTRY OF CERTIFIED NURSE AIDES. (a) The board will maintain a registry of certified nurse aides. The information contained in the registry is available to the public upon request. Within 30 days after the board issues an individual a certification under 12 AAC 44.800 – 12 AAC 44.820, the board will place in the registry

- (1) the individual's full name;
- (2) information necessary to identify the individual; and
- (3) the date the board issued the individual the certification.

(b) Except as provided in (c) of this section, the board will remove from the registry the name of an individual holding a nurse aide certification that has been lapsed for more than two years.

(c) Except as provided in (e) of this section, the board will retain in the registry information regarding a finding under AS 08.68.333 or AS 47.05.055 that a person has committed abuse, neglect, or misappropriation of property in connection with employment as a nurse aide. At the request of the individual found to have committed abuse, neglect, or misappropriation of property, the board will also retain in the registry a statement by that individual disputing the finding.

(d) An individual who wishes to have removed from the registry information regarding a finding that the individual has committed abuse, neglect, or misappropriation of property in connection with employment as a nurse aide must apply in writing to the board, specifying grounds that meet the requirements for removal under AS 08.68.333(e). After consideration of the individual's request, the board will decide whether to remove the information regarding the finding from the registry. If the request for removal is denied, the individual may request a hearing under AS 44.62.330 – AS 44.62.630 (Administrative Procedure Act) to appeal the denial.

(e) The board will remove from the registry information regarding a finding that an individual has committed abuse, neglect, or misappropriation of property in connection with employment as a nurse aide, if the board receives notice that the individual has died.

Authority: AS 08.68.100 AS 08.68.331 AS 08.68.333

12 AAC 44.870. UNPROFESSIONAL CONDUCT. (a) A certified nurse aide, who after a hearing under AS 44.62.330 – AS 44.62.630 (Administrative Procedure Act), is found to have committed an act or omission that is described in AS 08.68.334, or that constitutes unprofessional conduct under this section, is subject to the disciplinary penalties listed in AS 08.01.075.

(b) Unprofessional conduct includes conduct that could adversely affect the health and welfare of a client, including

- (1) failing to competently perform the duties of a certified nurse aide;
- (2) assuming the duties and responsibilities of a certified nurse aide, on repeated occasions, without sufficient preparation for those duties, or performing duties for which competency has not been maintained;
- (3) performing acts beyond the authorized scope or the level for which the person is certified;
- (4) failing to perform acts within the certified nurse aide's scope of competence that are necessary to prevent substantial risk of harm to a client;

(5) violating the confidentiality of client information; this paragraph does not apply to reports by a certified nurse aide to the office of the long term care ombudsman established under AS 44.21.231 or to reports by a certified nurse aide under AS 47.24.010 - AS 47.24.015;

(6) failing to respect a client's rights and dignity regardless of the client's social or economic status, the client's personal attributes, or nature of the client's health problems or disability;

(7) neglecting or abusing a client physically, emotionally, or verbally;

(8) using alcohol or other drugs to the extent that the use interferes with nurse aide functions;

(9) violating state or federal laws regulating drugs, including forging prescriptions or unlawfully distributing drugs;

(10) falsifying, altering, or destroying client or facility records;

(11) failing to communicate information regarding a client's status to appropriate individuals in an ongoing and timely manner;

(12) failing to keep accurate or complete records related to client care or action by the facility;

(13) failing to maintain current client records that accurately document management of client care;

(14) leaving a certified nurse aide assignment without notifying appropriate supervisory personnel;

(15) providing or selling information to be used by a person to procure or attempt to procure a certification through fraud or misrepresentation;

(16) permitting another person to use the certified nurse aide's certification for any purpose;

(17) failing to report to the appropriate occupational licensing board facts known to the certified nurse aide regarding incompetent, unprofessional, or illegal conduct by a practitioner of the healing arts, unless the certified nurse aide is aware that the conduct has already been reported and the practitioner is already participating in a treatment or educational program approved by that licensing board;

(18) engaging in sexual misconduct;

(19) discriminating on the basis of a client's race, religion, color, national origin, ancestry, or sex in the provision of certified nurse aide services;

(20) exploiting a client for financial gain;

(21) offering, giving, soliciting, or receiving fees for the referral of a client;

(22) knowingly misappropriating drugs, property, supplies, equipment, or other resources for personal or unauthorized use;

(23) untruthful or misleading advertising of certified nurse aide services;

(24) knowingly violating laws regulating health insurance;

(25) harassing, disruptive, or abusive behavior by a certified nurse aide directed at staff or a client, a client's relative, or a client's guardian;

(26) disruptive behavior by a certified nurse aide at the workplace that interferes with the provision of client care; and

(27) failing to cooperate with an official investigation by the board's representatives, including failing to timely provide requested information.

Authority: AS 08.01.075 AS 08.68.331 AS 08.68.334
AS 08.68.100

12 AAC 44.875. CONDITIONS OF PROBATION. (a) If the board imposes probation on a certified nurse aide, the board will require, as a condition of probation, that the certified nurse aide do one or more of the following:

(1) obey all federal and state laws and regulations pertaining to the practice of a certified nurse aide;

(2) fully comply with orders from the board regarding probation;

(3) notify the board in writing of the dates of departure from and return to the state, if the certified nurse aide leaves the state to practice outside the state;

(4) report in person to the board, according to the conditions of probation;

(5) submit written reports to the board according to the conditions of probation;

(6) be employed as a certified nurse aide only in a setting in which on-site supervision is available, as specified by the board.

(b) If the board imposes probation on a certified nurse aide for the habitual abuse of alcohol or drugs, the board will, in its discretion and as a condition of probation, require that the certified nurse aide do one or more of the following, in addition to a condition imposed under (a) of this section:

(1) submit to physical and mental health examinations as the board determines necessary to evaluate the probationer's ability to competently perform the duties of a certified nurse aide;

(2) as determined by the board, participate in a program of rehabilitative counseling such as

(A) an impaired health care provider treatment program that provides progress reports from the treatment program when requested by the board; or

(B) a 12-step program, such as alcoholics anonymous or narcotics anonymous;

(3) abstain from the personal use of alcohol or drugs in any form, except as lawfully prescribed by a licensed practitioner;

(4) at the request of the board, submit physical specimens to be tested for the presence of alcohol or drugs.

Authority: AS 08.01.075 AS 08.68.331 AS 08.68.334
AS 08.68.100

12 AAC 44.880. REINSTATEMENT OF REVOKED CERTIFICATION. (a) If the board revokes or suspends an individual’s certification as a nurse aide, at least one year after revocation or suspension of that certification, the nurse aide may apply to the board in writing for reinstatement of the certification. The board will, in its discretion, reinstate a certification if the board determines that the nurse aide has established that the nurse aide is competent to resume nurse aide duties with skill and safety, considering the reasons for the revocation or suspension.

(b) The board will, in its discretion, require a nurse aide seeking reinstatement to work in a supervised relationship, approved by the board, for a probationary period of time, as a condition of reinstatement. If directed by the board, the nurse aide must provide a written evaluation from the supervisor regarding the nurse aide’s performance. The board will, in its discretion, use the evaluation to determine whether to reinstate the nurse aide’s certification.

Authority: AS 08.68.100 AS 08.68.331 AS 08.68.334

12 AAC 44.885. IDENTIFICATION OF NURSE AIDES. (a) An individual with certification as a nurse aide under AS 08.68.331 – AS 08.68.336 and 12 AAC 44.800 – 12 AAC 44.895, when working as certified nurse aide, shall conspicuously display on the individual’s uniform or clothing a name tag or identification badge identifying the individual as a certified nurse aide.

(b) An individual training to be a certified nurse aide, when working as a student, shall conspicuously display on the individual’s uniform or clothing a nameplate that identifies that individual as a nurse aide trainee.

Authority: AS 08.68.100 AS 08.68.331

12 AAC 44.890. DELEGATION TO DEPARTMENT. In 12 AAC 44.800 – 12 AAC 44.895, to the extent consistent with AS 08.68.331, references to “the board” include the board’s designee, the Department of Commerce, Community, and Economic Development.

Authority: AS 08.68.100 AS 08.68.331

12 AAC 44.895 DEFINITIONS. As used in AAC 44.800 – 12 AAC 44.895,

- (1) *repealed 11/10/2002*;
- (2) “clinical” means based on actual observation and treatment of clients;
- (3) “contact hour” means a minimum of 50 minutes of actual organized instruction; academic credit converts to contact hours as follow:
 - (A) one quarter academic credit equals 10 contact hours;
 - (B) one semester academic credit equals 15 contact hours.
- (4) “continuing education” means a systematic educational experience that contributes directly to the skills and knowledge needed to satisfactorily perform the duties of a certified nurse aide, and that is obtained in a program that offers academic credit or contact hours beyond the basic nurse aide training program;
- (5) “department” means the Department of Commerce, Community, and Economic Development;
- (6) *repealed 11/10/2002*;
- (7) “exploiting a client for financial gain” means the illegal or improper use of a client’s resources for the profit or gain of a person other than the client; “exploiting a client for financial gain” includes borrowing a client’s money, spending a client’s money without the client’s consent, or, if the client is unable to consent, spending a client’s money for items or services which the client cannot appreciate or from which the client cannot benefit;
- (8) “facility-based” means a training program offered both in and by a nursing facility;
- (9) “home health agency” means a facility that the Department of Health and Social Services has licensed as a home health agency under 7 AAC 12;
- (10) “nursing facility” includes a nursing home licensed under AS 18.20; a Medicare- or Medicaid-certified skilled, intermediate, or long term care facility; and an assisted living home licensed under AS 47.33;
- (11) “physical and mental health care providers” include registered nurses, licensed practical nurses, pharmacists, dietitians, social workers, sanitarians, fire safety experts, nursing home administrators, gerontologists, psychologists, physical and occupational therapists, activities specialists, speech therapists, hearing therapists, and experts in client rights;
- (12) “primary instructor” means the individual who will provide the majority of the required hours of instruction to the students;
- (13) “practitioner of the healing arts” has the meaning given in AS 47.17.290, as amended as of October 9, 1998, adopted by reference;
- (14) *repealed 11/10/2002*;
- (15) “state survey and certification agency” means the division of medical assistance, Department of Health and Social Services;

(16) “supervised practical training” means training in which the student demonstrates knowledge while performing tasks on an individual under the direct supervision of a registered nurse or licensed practical nurse;

(17) “supplemental personnel” includes physical and mental health care providers and experts in areas directly related to the safety, comfort, and quality of life of the elderly and chronically ill;

(18) “unencumbered” means, with reference to a license, certification, or registration,

(A) not suspended, revoked, on probation, or otherwise restricted by the issuing authority; and

(B) for which the holder of the license, certification, or registration is not presently under investigation by the issuing authority for disciplinary violations;

(19) “certification” means a credential

(A) issued by the board to an individual who meets the requirements of 12 AAC 44.800, 12 AAC 44.805, or 12 AAC 44.814; and

(B) authorizing the individual to use the title “certified nurse aide” or the abbreviation “C.N.A.”.

Authority: AS 08.68.100 AS 08.68.331 AS 08.68.332

ARTICLE 9. GENERAL PROVISIONS.

Section

- 900. (Repealed)**
- 905. (Relocated)**
- 910. (Relocated)**
- 920. (Relocated)**
- 930. Change of name**
- 940. (Relocated)**
- 945. Administration of a non-herbal nutritional supplement**
- 950. Standards for delegation of nursing duties to other persons**
- 955. Delegation of routine nursing duties**
- 960. Delegation of specialized nursing duties**
- 965. Delegation of the administration of medication**
- 970. Nursing duties that may not be delegated**
- 975. Exclusions**
- 980. Executive secretary**
- 990. Definitions**

Editor’s note: As of Register 103, 12 AAC 44.905, 12 AAC 44.910, and 12 AAC 44.920, which had appeared in the General Provisions article, were renumbered as 12 AAC 44.770, 12 AAC 44.780, and 12 AAC 44.785, respectively, and relocated in a new Article 7, titled “Disciplinary Guidelines.”

12 AAC 44.900. LICENSE RENEWAL AND REINSTATEMENT OF A LAPSED LICENSE. *Repealed 11/2/2001.*

12 AAC 44.905. UNPROFESSIONAL CONDUCT. *Relocated.*

12 AAC 44.910. REINSTATEMENT OF A SUSPENDED LICENSE AND/OR AUTHORIZATION. *Relocated.*

12 AAC 44.920. REINSTATEMENT OF A REVOKED LICENSE AND/OR AUTHORIZATION. *Relocated.*

12 AAC 44.930. CHANGE OF NAME. A licensee authorized to practice under this chapter shall notify the board of a change of mailing address or name within 60 days after the change. A report of a change of name must be made in writing and must be accompanied by one of the following to verify the change of name:

- (1) a completed affidavit supplied by the board;
- (2) a certified copy of a marriage certificate;
- (3) a certified copy of a divorce decree; or
- (4) a certified copy of a court ruling.

Authority: AS 08.68.100

12 AAC 44.940. *Relocated 4/2/86.*

12 AAC 44.945. ADMINISTRATION OF A NON-HERBAL NUTRITIONAL SUPPLEMENT. (a) A nurse licensed under AS 08.68 may administer a non-herbal nutritional supplement to a patient if

- (1) the patient's health care provider has ordered that the non-herbal nutritional supplement be administered to the patient;
 - (2) the patient or the patient's representative has requested that the nurse administer the non-herbal nutritional supplement to the patient;
 - (3) the nurse administering the non-herbal nutritional supplement knows the actions, possible side effects, and possible interactions of the non-herbal nutritional supplement with food, medications, or other substances;
 - (4) the use of the non-herbal nutritional supplement is included as part of the nursing care plan for the patient;
 - (5) the non-herbal nutritional supplement was commercially manufactured and the container of the non-herbal nutritional supplement provided for administration to the patient was provided unopened with the manufacturer's seal intact; and
 - (6) a pharmacist has reviewed all medications taken by the patient and the non-herbal nutritional supplement ordered by the patient's health care provider for possible adverse effects or interactions with food, medications, or other substances.
- (b) The administration of a non-herbal nutritional supplement may not be delegated by a nurse under 12 AAC 44.950 - 12 AAC 44.965.
- (c) A nurse licensed under AS 08.68 may not administer to a patient a nutritional supplement that
- (1) contains one or more herbs; or
 - (2) was compounded for the patient rather than commercially manufactured.
- (d) This section does not apply to United States Food and Drug Administration (FDA) approved vitamins and minerals. A nurse licensed under AS 08.68 may administer FDA-approved vitamins and minerals to a patient in the manufacturer's recommended dosage or as ordered by the patient's health care provider.
- (e) As used in this section,
- (1) "administer" means to provide a nutritional supplement to a patient for ingestion by the patient;
 - (2) "compounded" means the preparation, mixing, assembling, packaging, or labeling of a nutritional supplement;
 - (3) "health care provider" includes a licensed
 - (A) advanced nurse practitioner;
 - (B) doctor of medicine;
 - (C) doctor of osteopathy;
 - (D) physician assistant; and
 - (E) dentist;
 - (4) "herb" means a plant grown for its health or medicinal properties; "herb" includes plant parts and extracts;
 - (5) "non-herbal nutritional supplement" has the meaning given for a "dietary supplement" in 21 U.S.C. sec. 321(ff) (sec. 3(a) of the Dietary Supplement Health and Education Act of 1994) as revised as of March 1, 2007, adopted by reference, except that it does not include a dietary supplement that contains one or more herbs;
 - (6) "nutritional supplement" has the meaning given for a "dietary supplement" in 21 U.S.C. sec. 321(ff), (sec. 3(a) of the Dietary Supplement Health and Education Act of 1994) revised as of March 1, 2007, adopted by reference.

Authority: AS 08.68.100

12 AAC 44.950. STANDARDS FOR DELEGATION OF NURSING DUTIES TO OTHER PERSONS. (a)

A nurse licensed under AS 08.68 may delegate the performance of nursing duties to other persons, including unlicensed assistive personnel, if the following conditions are met:

- (1) the nursing duty to be delegated must be within the scope of practice of the delegating nurse;
- (2) a registered nurse must assess the patient's medical condition and needs to determine if a nursing duty for that patient may be safely delegated to another person;
- (3) the patient's medical condition must be stable and predictable;
- (4) the person to whom the nursing duty is to be delegated has received the training needed to safely perform the delegated duty, and this training has been documented;
- (5) the nurse determines that the person to whom a nursing duty is to be delegated is competent to perform the delegated duty correctly and safely and accepts the delegation of the duty and the accountability for carrying out the duty correctly;
- (6) performance of the delegated nursing duty would not require the person to whom it was delegated to exercise professional nursing judgment or knowledge or complex nursing skills;
- (7) the nurse provides to the person, with a copy maintained on record, written instructions that include
 - (A) a clear description of the procedure to follow to perform each task in the delegated duty;
 - (B) the predicted outcomes of the delegated nursing task;
 - (C) how the person is to observe and report side effects, complications, or unexpected outcomes in the patient, and the actions appropriate to respond to any of these; and
 - (D) the procedure to document the performance of the nursing duty in the patient's record.

(b) A nurse who has delegated a nursing duty to another person shall provide appropriate direction and supervision of the person, including the evaluation of patient outcomes. Another nurse may assume delegating responsibilities from the delegating nurse if the substitute nurse has assessed the patient, the skills of the person to whom the delegation was made, and the plan of care. Either the original delegating nurse or the substitute nurse shall remain readily available for consultation by the person, either in person or by telecommunication.

(c) The delegation of a nursing duty to another person under this section is specific to that person and for that patient, and does not authorize any other person to perform the delegated duty.

(d) The nurse who delegated the nursing duty to another person remains responsible for the quality of the nursing care provided to the patient.

Authority: AS 08.68.100 AS 08.68.405 AS 08.68.410
AS 08.68.340

12 AAC 44.955. DELEGATION OF ROUTINE NURSING DUTIES. (a) Routine nursing duties may be delegated to another person under the standards set out in 12 AAC 44.950. Routine nursing duties are those that

(1) occur frequently in the daily care of a patient or group of patients;
(2) do not require the person to whom the duty is delegated to exercise professional nursing knowledge or judgment;

(3) do not require the exercise of complex nursing skills;
(4) have a standard procedure and predictable results; and
(5) present minimal potential risk to the patient.

(b) Routine nursing duties that may be delegated include

(1) monitoring bodily functions;
(2) taking and recording vital signs;
(3) transporting patients;
(4) non-invasive collection and testing of physical specimens;
(5) measuring and recording fluid and food intake and output; and
(6) personal care tasks such as bathing, oral hygiene, dressing, toileting, assisting with eating, hydrating, and skin care.

Authority: AS 08.68.100 AS 08.68.405 AS 08.68.410

12 AAC 44.960. DELEGATION OF SPECIALIZED NURSING DUTIES. (a) Specializing nursing duties are those duties that do not require professional nursing education to correctly perform, but require more training and skill than routine nursing duties. Specialized nursing duties may be delegated to another person under the standards set out in 12 AAC 44.950.

(b) Specialized nursing tasks that may be delegated include

(1) changing simple, nonsterile dressings using aseptic technique when no wound debridement or packing is involved;

(2) assisting patients with self-medication;
(3) obtaining blood glucose levels;
(4) suctioning of the oral pharynx;
(5) providing tracheostomy care in established, stable patients;
(6) removal of internal or external urinary catheters;
(7) adding fluid to established gastrostomy tube feedings and changing established tube feeding bags; and
(8) placing electrodes and leads for electrocardiogram, cardiac monitoring, and telemetry.

(c) A nurse who delegates a nursing duty to another person under this section shall develop a nursing delegation plan that describes the frequency and methods of evaluation of the performance of the delegated duty by the other person. The delegating nurse shall evaluate a continuing delegation as appropriate, but must perform an evaluation on-site at least once every 90 days after the delegation was made. The delegating nurse shall keep a record of the evaluations conducted.

Authority: AS 08.68.100 AS 08.68.405 AS 08.68.410

12 AAC 44.965. DELEGATION OF THE ADMINISTRATION OF MEDICATION. (a) The administration of medication is a specialized nursing task that may be delegated under the standards set out in 12 AAC 44.950, 12 AAC 44.960, and this section.

(b) Administration of medication may be delegated only to a

(1) “home and community-based services provider” as defined in 7 AAC 43.1110(8); or
(2) “residential supported living services provider” as defined in 7 AAC 43.1110(15).

(c) The person to whom the administration of medication is to be delegated must successfully complete a training course in administration of medication approved by the board.

(d) To delegate to another person the administration of routinely-scheduled oral, topical, nasal, vaginal, or rectal medications to a patient the written instructions provided to the person under 12 AAC 44.950(a)(7) must also include

(1) directions for the storage and administration of medication, including the brand and generic name of the medication, the dosage amount and proper measurement, timing of the administration, recording the administration, the expected outcome of administration, and any contraindications to administration;

(2) possible interactions of medications;

(3) how to observe and report side effects, complications, errors, missed doses, or unexpected outcomes of the medications and appropriate response to such developments; and

(4) if the delegating nurse is not available on-site, the action that the person must take when medications are changed by order of a health care provider, including how to notify the delegating nurse of the change, how the delegating nurse will receive verification from the health care provider of the medication change, and how the nurse is to notify the other person if the administration of the change of medication is delegated.

(e) The administration of PRN medication, other than controlled substances, may be delegated under this section if a nurse is not available on-site. Before the administration of PRN medications may be delegated, the nurse shall first assess the patient to determine whether on-site patient assessment will be required before the ongoing administration of each dose of PRN medication. The written instructions provided to the person under 12 AAC 44.950(a)(7) must meet the requirements of (d) of this section, and must also include

(1) when to administer the PRN medication to the patient;

(2) the procedure to follow for the administration of the PRN medication, including dosage amount, frequency, and duration; and

(3) the circumstances under which the person should contact the delegating nurse.

Authority: AS 08.68.100 AS 08.68.405 AS 08.68.410

12 AAC 44.970. NURSING DUTIES THAT MAY NOT BE DELEGATED. Nursing duties that require the exercise of professional nursing knowledge or judgment or complex nursing skills may not be delegated. Nursing duties that may not be delegated include

(1) the comprehensive assessment of the patient by a registered nurse, and referral and follow-up;

(2) the focused assessment of the patient by a licensed practical nurse;

(3) formulation of the plan of nursing care and evaluation of the patient's response to the care provided;

(4) health education and health counseling of the patient and the patient's family or significant others in promoting the patient's health;

(5) receiving or transmitting verbal, telephone, or written orders from the patient's health care provider;

(6) the initiation, administration, and monitoring of intravenous therapy, including blood or blood products;

(7) providing and assessing sterile wound or decubitus ulcer care;

(8) managing and monitoring home dialysis therapy;

(9) oral tracheal suction;

(10) medication management for unstable medical conditions requiring ongoing assessment and adjustment of dosage or timing of administration;

(11) placement and administration of nasogastric tubes and fluids;

(12) initial assessment and management of newly-placed gastrostomy tubes and the patient's nutrition; and

(13) administration of injectable medications;

(14) administration of a non-herbal nutritional supplement.

Authority: AS 08.68.100 AS 08.68.405 AS 08.68.410

12 AAC 44.975. EXCLUSIONS. The provisions of 12 AAC 44.950 – 12 AAC 44.970 apply only to the delegation of nursing duties by a nurse licensed under AS 08.68; they do not apply when nursing duties have not been delegated, including when a person is acting

(1) within the scope of the person's own license;

(2) under other legal authority; or

(3) under the supervision of another licensed health care provider.

Authority: AS 08.68.100 AS 08.68.405 AS 08.68.410

12 AAC 44.980. EXECUTIVE SECRETARY. (a) The duties and responsibilities of the executive secretary include

(1) operational knowledge of the job assignments of all board staff;

(2) the efficient function of the board office, including timely review and issuance of licenses;

(3) direct assistance in staff functions during times of increased workload;

(4) the referral to the division's investigative staff of applications that contain an affirmative answer to questions about the applicant's disciplinary history, professional conduct, or personal history; and

(5) consultation with the board chair before final approval of a license, permit, registration, or authorization sought in an application that contains an affirmative answer to questions about the applicant's disciplinary history, professional conduct, or personal history.

(b) The executive secretary of the board may use the working title "executive administrator."

Authority: AS 08.68.100

AS 08.68.111

12 AAC 44.990. DEFINITIONS. As used in this chapter, unless the context otherwise requires,

(1) *repealed 1991*;

(2) "associate degree program" includes general academic and nursing courses, is conducted within a community or junior college; and prepares a person for an associate degree in nursing;

(3) "baccalaureate program" is a program conducted in a senior college or university and which is in an academic department, division, school or college of the senior college or university, which prepares persons for a baccalaureate degree in nursing;

(4) "board" means Alaska Board of Nursing;

(5) "cooperating agencies" means any facility which provides clinical experience for the education of students in a nursing education program;

(6) *repealed 1984*;

(7) "contact hour" means a 50-minute classroom instructional session or three laboratory or clinical practice hours;

(8) "preceptorship" is that portion of the ANP course of study consisting of clinical experiences under the auspices of a qualified preceptor for the purpose of correlating theory to practical application of the expanding role of the nurse; the setting must provide an environment which permits observation and active participation in the delivery of health care;

(9) "qualified preceptor" is an advanced nurse practitioner currently authorized to practice as an ANP in the state or a currently licensed, practicing physician or a physician specifically exempted by AS 08.64.370(1) and approved by the board; the functions of the preceptor include supervision, teaching, and evaluation of a student's performance in the clinical setting;

(10) "school" or "program" means a division in a college or university which is responsible for preparing persons for practice of professional or practical nursing;

(11) "to perform an expanded role in the delivery of health care" means that the person is qualified, by virtue of specialized training and experience, to provide health care to the consumer through the identification, management, or referral of the consumer's health problems, and that the person is qualified to maintain the consumer's health by means of preventive and promotive health care actions;

(12) "anesthesia service" means a qualified person or group of people given responsibility by the employing agency for administration of anesthetics and related maintenance of safety controls;

(13) "ANP" means advanced nurse practitioner as defined in AS 08.68.410(1);

(14) "department" means the Department of Commerce, Community, and Economic Development;

(15) "similar position that performs nurse aide duties" means a position that performs duties related to direct patient care; "similar position that performs nurse aide duties" includes unlicensed positions, including personal care attendants, resident aides, and patient care technicians;

(16) "criminal justice information" has the meaning given in AS 12.62.900;

(17) "client" means an individual who receives care from a licensee;

(18) "controlled substance" has the meaning given that term in AS 11.71.900, as revised as of September 19, 2002, adopted by reference;

(19) "drug" has the meaning that term is given in AS 11.71.900, as revised as of September 19, 2002, adopted by reference;

(20) "sexual contact" has the meaning given that term in AS 11.81.900, as revised as of September 19, 2002, adopted by reference;

(21) "sexual impropriety" means behavior, a gesture, or an expression that is seductive, sexually suggestive, or sexually demeaning to a client; "sexual impropriety" includes

(A) encouraging the client to masturbate in the presence of the licensee or masturbation by the licensee while the client is present;

(B) offering to provide controlled substances or other drugs to the client in exchange for sexual contact;

(C) disrobing or draping practice that is seductive, sexually suggestive, or sexually demeaning to a client, such as deliberately watching a client dress or undress or failing to provide privacy for disrobing; in this subparagraph, "deliberately watching a client dress or undress" does not include observing a client who may need assistance in dressing or undressing due to physical limitations or medical conditions;

(D) making a comment about or to the client that is seductive, sexually suggestive, or sexually demeaning to a client, including

(i) sexual comment about a client's body or underclothing;

(ii) sexualized or sexually-demeaning comment to a client;

(iii) demeaning or degrading comments to the client about the client's sexual orientation, regardless of whether the client is homosexual, heterosexual, or bisexual;

(iv) requesting details of sexual history or sexual likes or dislikes of the client if the details are not clinically indicated for the type of examination or consultation within the scope of practice of the licensee;

(E) initiation by the licensee of conversation with a client regarding the sexual problems, preferences, or fantasies of the licensee;

(F) using the medical or professional relationship with the client to solicit sexual contact or a romantic relationship with the client or another;

(G) kissing a client in a romantic or sexual manner.

(22) "sexual misconduct" means regardless of client's consent or lack of consent,

(A) sexual penetration or attempted sexual penetration with a client;

(B) sexual contact or attempted sexual contact with a client; and

(C) sexual impropriety;

(23) "sexual penetration" has the meaning given that term in AS 11.81.900, as revised as of September 19, 2002, adopted by reference;

(24) "administration of medication" means the direct application of a medication to the body of a patient by injection, inhalation, ingestion, or other means;

(25) "comprehensive assessment of the patient by a registered nurse" means the initial and ongoing collection of information about the patient to anticipate and recognize changes in the patient's medical conditions or health status, synthesize the biological, psychological, and social aspects of the patient's medical condition, evaluate the impact of health care, make decisions regarding changes in care, plan nursing interventions, evaluate the need for different interventions, and communicate and consult with the other health care providers regarding the patient's medical treatment;

(26) "delegate the performance of nursing duties" means the assignment by a nurse licensed under AS 08.68 of a specific nursing duty within the nurse's scope of practice for a specific patient to another person as authorized under AS 08.68.405 and 12 AAC 44.950 – 12 AAC 44.970;

(27) "focused assessment" of a patient by a licensed practical nurse means an appraisal of the patient's medical status and condition, contributing to ongoing data collection, and deciding who needs to be informed of the information and when to inform;

(28) "on-site" means being physically present at the location where nursing duties are to be performed under a delegation from a nurse to another person;

(29) "PRN medication" means medication to be taken as needed by the patient;

(30) "stable and predictable" means that the patient's medical condition is known, through the nurse's assessment, to be consistent and nonfluctuating; "stable and predictable" includes a terminally ill patient with a predictable deteriorating condition;

(31) "division" means the division assigned occupational licensing functions in the department.

Authority: AS 08.68.100

AS 08.68.275

AS 08.68.405

**APPENDIX A
POSITION STATEMENT
ALASKA BOARD OF NURSING
SCOPE OF PRACTICE FOR LICENSED PRACTICAL NURSES**

**Readopted without change September 2004
(Adopted August 1991)**

Authority

The Alaska Board of Nursing has statutory authority pursuant to AS 08.68.100 to issue opinions and to develop and publish standards of practice for the nurses regulated by the Board.

The Board of Nursing remains committed to consumer rights to safe services and will continue to monitor safe and appropriate utilization of Registered Nurses (RNs) and Licensed Practical Nurses (LPNs) in the absence of specific legislation or regulations restricting LPNs from assuming responsibilities for additional acts.

The board notes that AS 08.68.265 provides that "A practical nurse shall work under the supervision of a licensed registered nurse, a licensed physician, or a licensed dentist." AS 08.68.270(7) and AS 08.68.275 also make "unprofessional conduct" grounds for disciplining a nurse, or revoking or suspending licenses. "Unprofessional conduct" is defined in the board's regulation 12 AAC 44.770 to include:

- (1) failing to use sufficient knowledge, skills or nursing judgment in the practice of nursing as defined by the level of licensure;
- (2) assuming duties and responsibilities, on repeated occasions, without sufficient preparation or for which competency has not been maintained;
- (3) knowingly delegating a nursing care function, task, or responsibility to another who is not licensed under AS 08.68 to perform that function, task, or responsibility, when the delegation is contrary to AS 08.68 or 12 AAC 44 or involves a substantial risk or harm to a client;
- (4) failing to exercise adequate supervision over persons who are authorized to practice only under the supervision of the licensed professional;
- (5) failing to perform acts within the nurse's scope of competence which are necessary to prevent substantial risk or harm to a client;
- (6) violating the confidentiality of information or knowledge concerning a client;
- (7) physically or verbally abusing a client;
- (8) using alcohol or other drugs to the extent that the use interferes with nursing functions;
- (9) violating state or federal laws regulating drugs, including but not limited to forging prescriptions or unlawfully distributing drugs or narcotics;
- (10) failing to maintain a record for each client which accurately reflects the nursing problems and interventions for the client, or falsifying a client's records or intentionally making an incorrect entry in a client's chart;
- (11) leaving a nursing assignment without properly notifying appropriate personnel;
- (12) permitting another person to use his or her nursing license or permit for any purpose;
- (13) failing to report, through proper channels, facts known to the nurse regarding incompetent, unprofessional, or illegal practice of a health care provider unless it has already been reported and the provider is already participating in a treatment or educational program approved by the appropriate board;
- (14) engaging in fraud, misrepresentation, or deceit in writing the licensing examination;
- (15) for any person not authorized to practice acts of medical diagnosis or medical therapeutics as an advanced nurse practitioner, to use the title nurse practitioner or advanced nurse practitioner, or the abbreviation NP or ANP or any other words, letters, signs, or figures to indicate that the person is an advanced nurse practitioner;
- (16) for an advanced nurse practitioner to perform duties other than those specified in 12 AAC 44.430;
- (17) for any person not authorized to practice as a registered nurse anesthetist to use the title registered nurse anesthetist, nurse anesthetist or certified registered nurse anesthetist or the abbreviation CRNA or any other words, letters, signs, or figures to indicate that the person is a registered nurse anesthetist;
- (18) for a registered nurse anesthetist to perform duties outside the scope of practice described in 12 AAC 44.510.
- (19) discrimination on the basis of race, religious creed, color, national origin, ancestry or sex in the provision of nursing services;
- (20) signing a record as a witness attesting to the wastage of controlled substances which the nurse did not actually witness;
- (21) exploiting the patient for financial gain or offering, giving, soliciting or receiving fees for referral of a patient or client;
- (22) intentionally misappropriating medications, property, supplies, equipment or other resources of the client or agency for personal or unauthorized use;
- (23) removal of a patient's life support system without appropriate medical or legal authorization;

- (24) untruthful or misleading advertising of nursing services;
- (25) knowingly violating laws regulating health insurance including those laws established in AS 21.36.360;
- (26) engaging in activities that constitute the unlicensed practice of pharmacy; and
- (27) for an advanced nurse practitioner with prescriptive and dispensing authority to dispense a prescription outside of the advanced nurse practitioner's scope of practice.

In interpreting and applying these statutes and regulations, the board has held and will continue to hold each Registered Nurse responsible for the totality of nursing care. This responsibility and accountability includes nursing activities which are delegated to and carried out by the Licensed Practical Nurse and all others who work under the direction of the RN. The board has held and will continue to hold each Licensed Practical Nurse responsible for accepting only those task assignments for which the nurse has been fully prepared. The LPN task assignments must be carried out under the supervision of a Registered Nurse, Physician or Dentist. Both RNs and LPNs should recognize the level and depth of knowledge and decision making that various nursing activities demand. This accountability and responsibility of the level of licensure granted by the board exists regardless of directives, policies, protocols or staffing patterns implemented by employing agencies.

The following definitions are germane to any discussion of LPN scope of practice and are used throughout this paper:

Delegation means the transfer of authority to perform selected nursing functions in a specific situation to a competent individual.

Supervision means provision of guidance by a qualified nurse for the accomplishment of a nursing function with initial direction and periodic inspection of the activity.

Background

The impact of limited registered nurse resources has continued to be a concern to Alaska nursing employers as well as the Board of Nursing. The health and safety of the public requires that nursing resources be used as efficiently as possible to provide the safest level of nursing service. Because the acuity of care being provided by licensed nurses in all types of settings has increased substantially in recent years, the responsibilities of registered nurses and, consequently of practical nurses, have also increased. Thus, nursing employers have been required to make difficult decisions about how to meet the increased demand for quality nursing care.

Information from the NCSBN and from nursing boards in other jurisdictions, makes it clear the role of the practical nurse in the delivery of health care services has expanded beyond that identified for the LPN beginning practice. It is the duty of the Board of Nursing, to define the role of the practical nurse in the delivery of health care services. These standards of practice are intended to promote the public health and safety by ensuring nursing care services are available and are provided by qualified care givers.

Competency Based Practice Criteria

The scope of practice for practical nurses can be divided into two levels of practice. The first level is that defined for the entry level nurse beginning practice. The NCSBN defines entry level as the first six months of practice after completion of a program. An appropriate reference for this level of practice is the detailed test plan statements used for the National Council Licensure Exam for Practical Nurses. The NCLEX-PN is used in Alaska and the rest of the United States to document that practical nurses entering practice are minimally competent with the necessary knowledge, skills and abilities to perform safely.

The second level of practice defines advanced practice for practical nurses which entails knowledge and skills obtained through additional formal education, continuing education or on the job training.

Critical elements are necessary for the experienced LPN to safely expand the scope of practice;

1. Education beyond that required for licensure which is documented and includes a curriculum based on behavioral objectives and an assessment of learning including demonstration of clinical skills;
2. Policies and procedures established by the employer which allow the practice being done by the LPN and which give guidance regarding the conditions under which the procedure or service is accomplished;
3. Supervision of the LPNs performance by the registered nurse, physician or dentist. While directly observed supervision is necessary when a practical nurse undertakes additional responsibilities initially, once the LPN has been determined competent, directly observed supervision may not be necessary.

4. There is provision for assuring the continuing competence of the experienced LPN to perform the expanded role activity.

The **Licensed Practical Nurse** is legally responsible and accountable for individual practice. Each nurse is accountable for accepting delegation of acts and for one's own actions in carrying out the act. The nurse may incur liability if the nurse deviates from safe practice.

The **Registered Nurse** is legally responsible and accountable for assessing the patient care situation and for the decision to delegate. The RN is expected to monitor the care provided and evaluate the outcome of care as the supervisory person. The RN remains accountable for the acts which are delegated and may incur liability if found to be negligent in the process of delegating and supervising.

Guidelines for Delegation

The Registered Nurse assesses the client care situation which encompasses the stability of the clinical environment and the clinical acuity of the client which includes the overall complexity of the client's health care problems. This assessment will help determine what can be delegated and the amount of supervision which would be required.

It is imperative that RNs and employers of LPNs recognize the wide variations in the abilities of individual LPNs to accept expanded role responsibilities. Thus, the decision to delegate expanded responsibilities must be based on an assessment of the delegatee's abilities.

Often patient care situations encompass a variety of components. Nursing care embraces a variety of clinical situations, components and nursing responsibilities. Some components and responsibilities are simple and easily standardized as procedures and protocols. Those procedures are carried out in the same manner each time they are performed and demand skill proficiency and efficiency. Such situations fit the decision making model depicted in Figure I on the following page and can be exemplified by such a task as hanging a premixed medicated intravenous solution. That task would require the nurse to 1) check to be certain that the correct solution was being administered to the correct client; 2) hang the solution using proper aseptic technique; 3) infuse the solution at the prescribed rate; and 4) observe the client for adverse effects. Activities that fit the decision making model depicted in Figure 1 are appropriate areas for expanded practice by experienced LPNs.

Other aspects of care are complex, and highly variable, requiring skill proficiency and also a high degree of critical judgment and decision making if they are to be performed consistently with safety. Such activities more closely fit the "decision-tree" model depicted in Figure 2. The hanging of a dopamine drip exemplifies an activity that falls into the complex decision making model; in that situation, the nurse would be required to 1) calculate the dilution; 2) mix the solution and medication properly; 3) administer the correct medicated solution to the correct client; 4) regulate the flow rate of the solution in relation to the client's blood pressure and pulse (rate and quality); 5) observe the client for therapeutic and adverse responses and make appropriate adjustments.

In general, highly complex and variable situations are most appropriately placed within the RN scope of practice and outside the scope of even experienced, practical nurses.

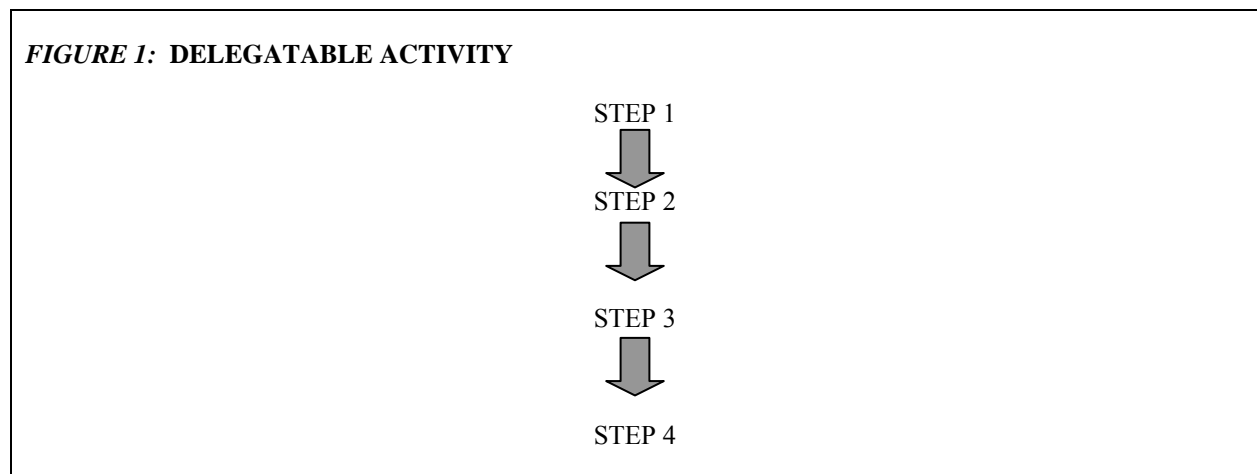
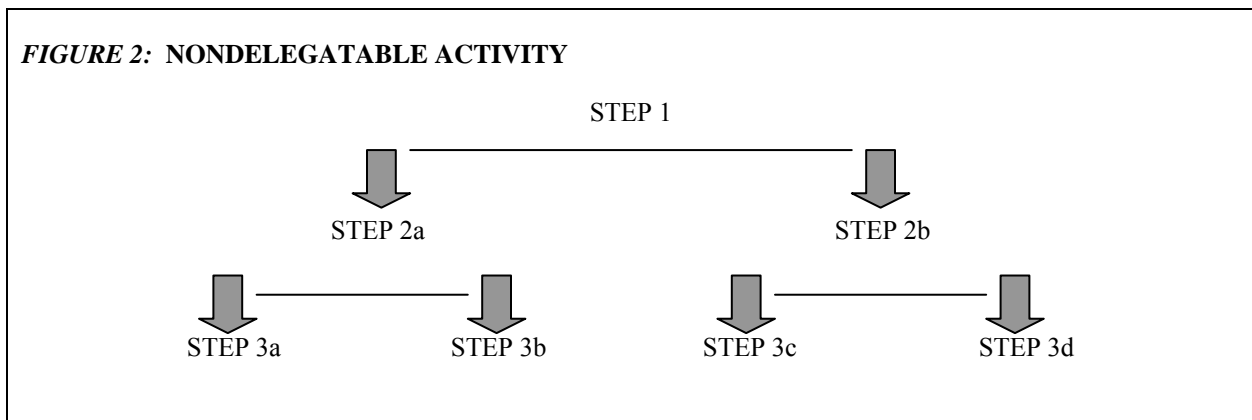


FIGURE 2: NONDELEGATABLE ACTIVITY



Using these models the following activities emerge as being appropriately delegated to experienced LPNs who have completed additional educational experiences:

- management of chronic dialysis care in the health care facility setting
- vaginal examinations of noncomplicated active labor patients
- management of chronic stable patients on ventilators
- reinsertion and changing gastrostomy and cystostomy tubes through healed stomas or buttons
- remove staples and sutures from healed wounds

Using the same model, the following examples would be activities that are not appropriately delegated to experienced LPNs.

- expanded role responsibilities outside of a health care facility
- performance of a full physical assessment
- collection of a complete medical history
- performance of advanced cardiac life support skills
- leading or directing group psychotherapy sessions
- arterial punctures
- management of arterial lines

It should be noted that the above list is not exhaustive and is provided only as an example of model implementation.

The same approach can be used to analyze the possible range of activities that nurses may be required to perform in the clinical setting to develop differentiated practice guidelines for beginning and experienced LPNs and RNs. An example of such an activity differentiation is presented below:

Example of Differentiated Practice Guidelines for Intravenous Therapy

Beginning LPN Practice	Experienced LPN Practice	RN Only
Monitor rate of infusion	Initiate peripheral IV therapy	Administer IV fluids and medications to neonates
Discontinue IV therapy	Hang premixed solutions including piggyback medications	Mix IV solutions Administer IV push medications Administer blood products
Monitor flow rate of TPN solutions	On going administration of TPN Solutions including lipids, via peripheral lines	Initiate administration of TPN solutions in peripheral and central lines Ongoing administration of TPN solutions in central lines

Monitor client
to analgesia

Change premixed PCA
cartridges

Change rate and dose of response
PCA pumps

Summary

It is clear there is a potential difference in the scope of practice of beginning and experienced LPNs. However, expansion of the scope of practice of experienced LPNs must be based on a conscious decision making process that includes the development of policies and procedures for performance of specific activities, the provision of structured educational programs and supervised clinical practice, and an evaluation of the clinical competence of the individual LPN. Further, practice expansion is not automatically transferable to a new employment situation. Finally, it is critical that LPNs who practice in an expanded role recognize their personal accountability for acts they perform and that supervising RNs recognize their responsibility for providing direction and supervision.

References:

Arizona Board of Nursing Proposed Rules, April, 1991

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Statement on the Nursing Activities of Unlicensed Persons, National Council State Boards of Nursing, August 1987

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APPENDIX B

**REPEALED
AND INCORPORATED
INTO APPENDIX A
AUGUST 1991.**

**APPENDIX C
POSITION STATEMENT
ALASKA BOARD OF NURSING**

**REGISTERED NURSE AND ADVANCED NURSE
PRACTITIONER SCOPES OF PRACTICE**

Readopted September 2005
(Adopted May 1983)

The profession of nursing is a dynamic discipline. Practice potentials change and develop in response to health care needs of society, technical advancements and the expansion of scientific knowledge. All licensed nurses share a common base of responsibility and accountability defined as the practice of registered nursing (AS 08.68.410(9)). However, competency based practice scopes of individual nurses may vary according to the level of basic preparation, practice experiences as an RN and professional development activities.

Advanced and specialty scopes of practice within nursing are also diverse. The profession of nursing generally recognizes the development of specialty and advanced practice levels taking place post RN (ANA, Nursing, A Social Policy Statement, 2003, pg. 9). Formal programs of study are designed to extend and expand upon basic registered nurse preparation. Such courses of study extend and expand the knowledge base of practice and provide for supervised practice in applying new knowledge in new ways. New practice scopes are defined by the program's educational objectives.

The parameters of the practice scopes are defined by basic educational preparation and advanced or specialty education. Within this scope of practice, all nurses can remain current and increase their expertise and skill in a variety of ways, e.g., practice experience, in-service education, and continuing education. Practice responsibility, accountability and relative levels of independence are also expanded in this way.

It is the professional responsibility of each nurse to define one's own career goals. Consistent with professional standards and regulations, each nurse has a responsibility to define and document an appropriate scope of nursing practice.

The purpose of this position paper is to identify basic guidelines which may help nurses define and evaluate responsibilities and functions in relation to various levels and scopes of nursing practice. The Board of Nursing does not intend to limit developing potentials of nursing practice by listing specific tasks, functions or responsibilities associated with all levels and scopes of practice. When legal questions are raised, the board will evaluate documentation that relates to the intent of formal programs of study and acceptance of practices by the nursing profession.

Documentation of professional acceptance may include credentials by a National Certifying Body officially recognized by the board.

Guidelines

1. Basic educational programs that prepare nurses for licensure define the educational intent for general practice scopes. Changing curriculum may expand the scopes of new graduates over time. Practicing RN's may choose to keep pace with these changes through formalized course work in continuing education or at academic levels. These educational experiences should be designed to evaluate and document appropriate extensions of knowledge and practice.
2. Within the formal boundaries of the basic nursing programs, all nurses may be expected to remain current. Individual nurses may also increase their level of expertise, responsibility and skill at varying rates and with various practice foci.
3. Advanced and specialty practices that expand beyond the defined boundaries of basic education programs must be supported by formalized courses of study post RN. Expanded scopes of responsibilities may be defined by such course work (AS 08.68.410(1)). This course work must include theory and supervised practice.
4. Selected medical acts (i.e., medical diagnosis, medical therapeutics or corrective measures) may be incorporated into some advanced and specialty nursing practice scopes. These nurses must apply for an authorization to practice as an "Advanced Nurse Practitioner" (ANP as defined in AS 08.68.410(1)), and 12 AAC 44.400 through 12 AAC 44.490.

5. Registered nurses not authorized to practice as “ANPs” may initiate selected and necessary medical procedures in emergency situations when appropriate personnel are not available. Such practice should not become “routine” practice. A repetitive or escalating pattern over time of “emergency” practice occurrences demands corrective action.
6. All nurses carry out specified medical directives. These functions are directly dependent upon the delegating authority of a professional health care provider who is credentialed to offer such services. The “order” or directive in these instances must be sufficiently specific and/or detailed that independent medical decisions and judgments are not demanded in carrying out the regimen.
7. The nursing decision to carry out unusual or unfamiliar nursing acts or delegated medical acts should always include consideration of:
 - A. Degree of immediate risk to the patient if the action is not carried out when appropriate professional personnel are absent.
 - B. The overall complexity of the patient’s medical problem.
 - C. The degree of invasiveness of the act.
 - D. The reversibility of the action.
 - E. Prompt access to medical support.
 - F. The nurse’s ability to prove by documentation and appropriate knowledge and skill base.