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POSITION STATEMENT 94-1 ADMINISTRATION OF IV CONSCIOUS SEDATION BY THE REGISTERED NURSE



Publication of the Arkansas State Board of Nursing

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The mission of the Arkansas State Board of Nursing is to protect the public and act as their advocate by effectively regulating the practice of nursing.

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The *ASBN Update* circulation includes over 48,000 licensed nurses and student nurses in Arkansas.



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ARE YOU ON VACATION?

Summer is winding down. Many of you have been on vacation, but some are still planning that much needed summer respite. Vacations are an essential part of our lives and serve as a way to physically and mentally recharge our batteries. It is a time to relax and not pay attention to what is going on around us. We all need this from time to time, but it is important that we don't take a vacation from being aware of health care issues impacting nursing practice.

If you watch the news or read the local newspaper, it doesn't take long to know about the many issues transforming nursing and other health care professions. Only time will tell what the effect will be from President Obama's health care reform. One aspect of this plan will allow everyone to have access to health care services. However, with this benefit comes a big price – having enough available health care professionals to provide care to an additional 32 million Americans. The U.S. is already experiencing a shortage of physicians and advanced practice nurses. Where can we possibly find more primary care practitioners? One place to start is increasing the number of faculty in our educational programs so they can admit more students. As I write this article, Congress is looking at Title VIII funding for nursing education. More money is needed so nursing programs can expand student capacity in an effort to meet the projected need. In 2010, more than 67,000 qualified applicants were turned away from BSN and graduate programs primarily due to a lack of faculty.

Another factor that will make an impact on the nursing profession is the Institute of Medicine's (IOM) report, *The Future of Nursing: Leading Change, Advancing Health*. The report came out in October 2010 and included four key messages related to the transformation of the health care system:

- Nurses should practice to the full extent of their education and training.
- Nurses should achieve higher levels of education and training through an improved education system that promotes seamless academic progression.
- Nurses should be full partners, with physicians and other health care professionals, in redesigning health care in the United States.
- Effective workforce planning and policy making require better data collection and information infrastructure.

Releasing the IOM report in the midst of health care reform is truly a golden apple for the nursing profession. Nurses are the largest group of health care professionals in the system – more than 3 million strong. There is power with numbers, and this means that if we become involved and speak up, we can influence the changes taking place in health care. Change is coming whether we like it or not. Nurses must get involved with all the other key stakeholders and shape the changes into what is best for everyone involved.

This is a time when we can't take vacation from our profession. It is essential to be aware of all the issues and not just sit back to see what happens. Get involved and don't let changes just "happen to you."

A handwritten signature in black ink that reads "Sue A. Tedford". The signature is written in a cursive, flowing style.



GET HITCHED AND STAY LOOSE

Pinning, lighting the lamps, reciting the Nightingale Pledge and wearing your first white uniform are all part of long-awaited nursing graduations. Throughout the state, many nurses have completed their programs and are eagerly looking to the next hurdle—passing NCLEX!

Someone once said the three most appreciated attributes of a graduation speech are short, short and short. South Arkansas Community College was honored to have Claiborne Deming speak at the May commencement. Deming is past president and chief executive officer of Murphy Oil Corporation and yes, his speech was short—short, but very memorable. His address had a catchy Southern title, “Get Hitched and Stay Loose,” borrowing a line from a speech he heard his uncle make when Mr. Deming was a boy. It is with Deming’s permission that I paraphrase his remarks and advice for success.

- Be reliable—always do what you say you will do.
- Be resilient—expect to be knocked down.
- Never act on resentment—there will always be people who have more than you do—whether it is education, good looks, riches, hair, etc.
- Never take mind-altering or behavior-altering drugs—it never works out well.
- Have a good attitude.

In summary, “get hitched and stay loose.” In South Arkansas, people interpret that language as, “Find a set of values you can live with and marry yourself to them. As you live by those values, remain loose or accepting of others.” Thank you, Mr. Deming, for very sound advice.

Unfortunately, in the nursing profession, many do not take point No. 4 seriously: “Taking mind-altering or behavior-altering drugs never works out well.” The Board sees this sad story played out monthly in disciplinary hearings. It may be a new graduate who parties after pinning ceremony and shows up for his first job interview with a positive drug screen. It may be a new nurse who doesn’t know the Arkansas Nurse Practice Act applies to behavior on or off duty. The case may be the experienced nurse who takes her husband’s medication for a headache. Much too often, it is a nurse with a life-controlling abuse problem.

You most likely recited the Nightingale Pledge at your capping or pinning ceremony. Some nurses think the Pledge is outdated and should be revised and updated, amending the phrases referring to God and living our lives in purity. However, the ideal of “abstaining from whatever is deleterious” will never become passé. The State Board will always take our mission of protecting the public seriously. In seeing this mission is carried out, we will remain vigilant in disciplining impaired nurses and removing them from the work force in a timely manner.

As nurses, we must “get hitched” to a set of values and “stay loose” by remaining tolerant of our clients who have a different set of values from our own. We will, however, hold ourselves and our peers to the high standards of our profession and will devote ourselves to the welfare of those committed to our care.

Board Business

BOARD DATES

August 2-5

NCSBN Annual Meeting,
Indianapolis, IN

September 14

Hearings

September 15

Business Meeting

September 27

CE Workshop – NURSING
TODAY: Ethics, Leadership,
Social Networking and
More, University of Arkansas
Community College at
Batesville

October 12

Hearings

October 13

Hearings

November 9

Hearings

November 10

Hearings

November 17

CE Workshop – NURSING
TODAY: Ethics, Leadership,
Social Networking and
More, Baptist Health School
of Nursing, Little Rock

CONGRATULATIONS

Darlene Byrd, MNSc, APN, of Cabot, Arkansas, was recently inducted as a Fellow of the American Academy of Nurse Practitioners at the 26th Annual American Academy of Nurse Practitioners National Conference, which was held in Las Vegas in June 2011. The Fellows of the American Academy of Nurse Practitioners (FAANP) program was established by the American Academy of Nurse Practitioners to recognize nurse practitioner leaders who have made outstanding contributions to healthcare through nurse practitioner education, policy, clinical practice, or research. A limited number of nurse practitioners are selected for this highly coveted distinction each year. Byrd served two terms on the Arkansas State Board of Nursing. Congratulations Darlene!



Byrd served two terms on the Arkansas State Board of Nursing. Congratulations Darlene!

continuing education workshop

DIRECTORS OF NURSING INTRODUCTION TO THE STATE BOARD OF NURSING

8:00 - 8:30 a.m.

8:30 - 9:30 a.m.

9:30 - 10:30 a.m.

10:30 - 10:45 a.m.

10:45 - 11:45 a.m.

11:45 - 12:45 p.m.

12:45 - 1:30 p.m.

1:30 - 2:30 p.m.

2:30 - 2:45 p.m.

2:45 - 3:45 p.m.

3:45 - 4:00 p.m.

SCHEDULE

Registration

Board of Nursing 101

APN Scope of Practice

Break

Cardless Licensure/Registry Information

Lunch (provided)

Scope of Practice

The Disciplinary Process: From Investigation
to Resolution

Break

Protect Yourself: Know Your Nurse Practice
Act and Other Laws

Questions/Evaluation/CE Certificates



September 8, 2011

Baptist Health School of Nursing

11900 Colonel Glenn Road

Little Rock

6.0 contact hours

This activity has been submitted to Arkansas Nurses Association for approval to award contact hours. Arkansas Nurses Association is accredited as an approver of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.

REGISTRATION FORM

Mail completed registration form and \$50.00 registration fee (in-state check or money order) to ASBN, 1123 South University, Suite 800, Little Rock, AR 72204.

NAME _____ LICENSE NUMBER _____

CITY _____ ZIP _____ PHONE _____

REGISTER ONLINE AT WWW.ARSBN.ORG

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 Christopher Donahue
 Imaging Coordinator



SPECIAL NOTICE

The Arkansas State Board of Nursing has designated this magazine as an official method to notify nurses residing in the state and licensed by the Board about information and legal developments. Please read this magazine and keep it for future reference as this magazine may be used in hearings as proof of notification of the ASBN Update's contents. Please contact LouAnn Walker at the Board office (501.686.2701) if you have questions about any of the articles in this magazine.

ASBN NOTICE OF INSUFFICIENT FUNDS

The following names appear on the ASBN records for checks returned to the ASBN due to insufficient funds. If practicing in Arkansas, they may be in violation of the Nurse Practice Act and could be subject to disciplinary action by the Board. Please contact Gail Bengal at 501.686.2716 if any are employed in your facility.

- | | |
|-----------------------|------------------|
| Rosa Marie Bradley | L16658 |
| Jessica Gonzalez | Exam Application |
| Tonya Humphrey | R55602 |
| Victoria Knighten | R81020 |
| Amber Sanders | R73529 |
| Nathan Shaheed | T01220 |
| Angela Shupert | L37543 |
| June Elizabeth Sivils | L30290 |
| Della Williams | L28175 |
| Sally F. Williams | L26287 |



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Most Compassionate Nurses in Arkansas

POSITION STATEMENT 94-1

ADMINISTRATION OF IV CONSCIOUS SEDATION BY THE REGISTERED NURSE

The Arkansas State Board of Nursing has determined that it is within the scope of practice of a registered professional nurse to administer pharmacologic agents via the intravenous route to produce conscious sedation. Optimal anesthesia care is best provided by qualified anesthesiologists and certified registered nurse anesthetists. However, the Board recognizes that the demand in the practice setting necessitates non-CRNA RNs providing IV conscious sedation.

Employing facilities should have policies and procedures to guide the registered nurse. The following guidelines have been adopted by the Arkansas State Board of Nursing.

GUIDELINES:

Position Statement on the Rule of the Registered Nurse (RN) in the Management of Patients Receiving IV Conscious Sedation for Short-Term Therapeutic, Diagnostic, or Surgical Procedures

A. Definition of IV Conscious Sedation
Intravenous conscious sedation is produced by the administration of pharmacologic agents. A patient under conscious sedation has a depressed level of consciousness, but retains the ability to independently and continuously maintain a patent airway and respond appropriately to physical stimulation and/or verbal command.

B. Management and Monitoring

It is within the scope of practice of a registered nurse to manage the care of patients receiving IV conscious sedation during therapeutic, diagnostic, or surgical



procedures provided the following criteria are met:

1. Administration of IV conscious sedation medications by non-anesthetist RNs is allowed by state laws and institutional policy, procedures, and protocol.
2. A qualified anesthesia provider or attending physician selects and orders the medications to achieve IV conscious sedation.
3. Guidelines for patient monitoring, drug administration and protocols for dealing with potential complications or emergency situations are available and have been developed in accordance with accepted standards of anesthesia practice.
4. The registered nurse managing the care of the patient receiving IV conscious sedation shall have no other responsibilities that would leave the patient unattended or compromise continuous monitoring.
5. The registered nurse managing the care of the patient receiving IV conscious sedation is able to:
 - a. Demonstrate the acquired knowledge of anatomy, physiology, pharmacology, cardiac arrhythmia recognition and complications related to IV conscious sedation and medications.
 - b. Assess total patient care requirements during IV conscious sedation and recovery. Physiologic measurements should include, but not be limited to, respiratory rate, oxygen saturation, blood pressure, cardiac rate and rhythm, and patient's level of

consciousness.

- c. Understand the principles of oxygen delivery, respiratory physiology, transport and uptake, and demonstrate the ability to use oxygen delivery devices.
 - d. Anticipate and recognize potential complications of IV conscious sedation in relation to the type of medication being administered.
 - e. Possess the requisite knowledge and skills to assess, diagnose and intervene in the event of complications or undesired outcomes and to institute nursing interventions in compliance with orders (including standing orders) or institutional protocols or guidelines.
 - f. Demonstrate skill in airway management resuscitation.
 - g. Demonstrate knowledge of the legal ramifications of administering IV conscious sedation and/or monitoring patients receiving IV conscious sedation, including the RN's responsibility and liability in the event of an untoward reaction or life-threatening complication.
6. The institution or practice setting has in place an education/competency validation mechanism that includes a process for evaluating and documenting the individuals' demonstration of the knowledge, skills, and abilities related to the management of patients receiving IV conscious sedation. Evaluation and documentation of competence occurs on a periodic basis according to institutional policy.

C. Additional Guidelines

1. Intravenous access must be continuously maintained in the patient receiving IV conscious sedation.
2. All patients receiving IV conscious

sedation will be continuously monitored throughout the procedure as well as the recovery phase by physiologic measurements including, but not limited to, respiratory rate, oxygen saturation, blood pressure, cardiac rate and rhythm, and patient's level of consciousness.

3. Supplemental oxygen will be immediately available to all patients receiving IV conscious sedation and administered per order (including standing orders).
4. An emergency cart with a defibrillator must be immediately accessible to every location where IV conscious sedation is administered. Suction and a positive pressure breathing device, oxygen, and appropriate airways must be in each room where IV conscious sedation is administered.
5. Provisions must be in place for back-up personnel who are experts in airway management, emergency intubation, and advanced cardiopulmonary resuscitation if complications arise.

Endorsed by:

American Association of Critical-Care Nurses
American Association of Neuroscience Nurses
American Association of Nurse Anesthetists
American Association of Spinal Cord Injury Nurses
American Association of Occupational Health Nurses
American Nephrology Nurses Association
American Nurses Association
American Radiological Nurses Association
American Society of Pain Management Nurses
American Society of Plastic and Reconstructive Surgical Nurses
American Society of Post Anesthesia

Nurses

American Urological Association, Allied
Association of Operating Room Nurses
Association of Pediatric Oncology Nurses
Association of Rehabilitation Nurses
Dermatology Nurses Association
NAACOG, the Organization for Obstetric, Gynecologic, and Neonatal Nurses
National Association of Orthopedic Nurses
National Flight Nurses Association
National Student Nurses Association
Nurse Consultants Association, Inc.
Nurses Organization of Veterans Affairs
Nursing Pain Association

Attachment to Position Statement 94-1
Adopted November 1994
Revised September 2009



A ROSE IS A ROSE IS A ROSE

“A rose is a rose is a rose” is from a poem written by Gertrude Stein. The saying is interpreted as meaning it is what it is; how we identify something. By using the name of a thing, you not only see the image associated with the name, but the emotions associated with that image arouse something inside of us – pleasurable or not so much. New graduates, with the majority of them graduating from nursing programs in May, go from nursing student to exam candidate to licensee and (hopefully) orientee!

As I’m writing this article in June, I observed that June is national safety month, potty training awareness month, corn and cucumber month, and national candy month! We also celebrate Nursing Assistants Week June 10 to 17. It is also the month many nursing graduates prepare to take the NCLEX® exam. After all that time in nursing school, this is the exam most of us dreaded and feared (there were always those few who just knew they were going to pass – right?)

Why is the NCLEX different from any other exam we take? It is OUR licensure exam. LICENSURE is the portal to becoming a nurse. The NCLEX® (National Council Licensure Examination) is the licensure examination for the licensing of nurses in the United States. NCLEX examinations are developed and owned by the National Council of State Boards of Nursing, Inc.

The NCLEX is not about memorization but rather understanding the concept that drives critical thinking. Licensure is how the Board of Nursing protects the public. Once candidates pass the exam, they become licensees for purpose of the Board and hopefully, orientees for their new nursing positions. Most importantly, you are identified as NURSES to the public.

When a candidate becomes a licensee, with it comes the responsibility

to be aware of the nursing laws that we practice by. This is the *Nurse Practice Act* and *Rules*. It is probably the most important law a nurse should know. It spells out the conditions a nurse must follow to comply with the law such as continuing education hours, license renewal requirements, and grounds for discipline.

The Arkansas *Nurse Practice Act* protects the title “NURSE.” Per A.C.A. § 17-87-104 “the following titles, names, or initials, are only allowed to be used if the person is properly licensed under this chapter:

- (i) Nurse;
- (ii) Registered nurse or R.N.;
- (iii) Advanced practice nurse or A.P.N., or any of the following:
 - (a) Advanced registered nurse practitioner, A.R.N.P., or A.N.P.;
 - (b) Nurse anesthetist, certified nurse anesthetist, certified registered nurse anesthetist, or C.R.N.A.;
 - (c) Nurse midwife, certified nurse midwife, licensed nurse midwife, C.N.M., or L.N.M.; or
 - (d) Clinical nurse specialist or C.N.S.;
- (iv) Registered nurse practitioner, N.P., or R.N.P.;
- (v) Licensed practical nurse, practical nurse, or L.P.N.;
- (vi) Licensed psychiatric technician nurse, psychiatric technician

- nurse, L.P.T.N., or P.T.N.; or
- (vii) Any other name, title, or initials that would cause a reasonable person to believe the user is licensed under this chapter.

As a nurse, you become the face of the institution you work for. The behavior you display when you treat not only your patients, but also your co-workers, is how others observing your practice will remember you. As a nurse, you are also the face of a profession. With health care reform and economic stress, hospitals and clinics are turning to lesser-educated, less expensive alternatives to nurses. In my own provider’s practice, he refers to all his personnel as “nurses.” However, they are not all nurses. Some are med-techs. I know the difference, but my family would not. It is imperative that, as a nurse, we educate our consumers as to the quality of care a nurse provides.

NURSE. Whom do you think of first? Florence Nightingale? The person who was with you in labor and there when you delivered your baby? The person who took the time to explain the procedure your family member was about to undergo? The person who comforted you when you were afraid and uncertain?

What impression will you bring to the profession? What will your legacy be?



National Park Community College Nursing Education in Arkansas' Spa City.

Hot Springs is well-known as one of Arkansas' most beautiful cities. Located in the Diamond Lakes Region of the picturesque Ouachita Mountain Range, its attractions, in addition to its near central location in the state, include the famous thermal, 147 degree, "hot springs" on historic Bathhouse Row in the National Park, classic old hotels and Victorian architecture, its many hiking trails, horse racing at Oaklawn Park, five nearby lakes suitable for all sorts of water sports, wonderful mountain views, beautiful botanical gardens, museums, an amusement and water park, a number of outstanding golf courses, and a thriving local art community.

It's a great place to visit and a wonderful hometown offering big city amenities with a small town atmosphere (approximately 40,000 population.) As a person interested in nursing education you may be surprised to find an excellent nursing education facility like National Park Community College in an historic city whose image is promoted mainly as a resort, tourist, and retirement community. You shouldn't be! Medical science is one of the major focuses of the local economy in Hot Springs, Arkansas, along with tourism, manufacturing, and retirement living.

National Park Community College is the fourth largest community college in Arkansas with an average of over 3,500 credit students per semester enrolled in courses blending liberal arts with occupational education that prepares students for the workforce or for transfer to a four-year institution. In addition, non-credit and continuing education students number over 2,000 per year in NPCC's Community Services/ Continuing Education program. Hot Springs is justifiably proud to have this gem of a community college in their



RN students Jason Fryar, Cynthia Hill and Jennifer Hull collaborate on simulation activity

town! In fact it is promoted as another of the town's many attractions for visitors and prospective new residents!

In the fall of 2009, following a successful capital campaign, the NPCC Nursing Division along with the Division of Health Sciences relocated to the state-of-the-art Frederick M. Dierks Center. Linda Castaldi, Division Chairperson of Nursing, reported that 98% of the college faculty and staff donated to the campaign, a demonstration



Back Row: PN students Nancy Sierra, Sasha Sierra, RN students Jennifer Hull, Virginia Laliberte, Cynthia Hill and CNA student Ginger Thurston **Front row:** RN student Jason Fryar, CNA student Donna Roling and RN student Veronica Canea in front of the new state of the art Frederick M. Dierks Nursing and Health Science building on the NPCC campus

of their commitment to the College mission "Learning is our focus, student success is our goal." The move to this new building allowed all of the health care programs, especially the nursing programs, to share space and resources. Tamara Abernathy, PN Program Director said, "We are thrilled to be together in one space. It was a goal that we didn't anticipate achieving so soon."

The Division of Nursing offers certificate and associate degree programs for employment in the health care field as well as an



*Linda Castaldi, MNsc., RN, Division
Chairperson since 1998*

opportunity for continuing advancement. These programs include a Certificate of Proficiency in Nursing Assistance; a Practical Nursing Certificate (LPN), either a 12-month full-time, or 24-month part-time evening offering; an Associate of Science degree in Nursing (RN), either in a day or evening offering; and a Certificate or Associate of Applied Science in Pharmacy Technology. All programs have selective admissions with the deadline to apply in early spring. Initial classes begin in the summer or fall of each year with the exception of the nursing assistant program where students may begin in fall or spring. Meetings to learn more about the nursing programs are held on the first Monday and third Wednesday throughout the fall semester.

Certificate and degree programs offered by the Health Sciences Division include: Basic Emergency Medical Technology (Certificate of Proficiency), Emergency Medical Services/Paramedic (A.A.S.), Health Information Technology (A.A.S.), Phlebotomy (Technical Certificate), Professional Medical Coding (Technical Certificate), Professional Medical Transcription (Technical Certificate), Radiography (A.A.S.), Recreational Leadership Program (A.A.S.), and Respiratory Therapy (A.A.S.). All health science programs are nationally accredited by the appropriate agencies and graduates demonstrate higher than average success on national/state required exams. An introduc-

Students gather around the nursing/teaching station for a demonstration in Nursing Lab.



tory course of study in Surgical Technology is also available at NPCC. The course does not lead to national certification, but is designed for entry level workforce training.

Coursework for all programs consists of classroom, campus laboratory, and clinical experiences in cooperating hospitals, long term care facilities, and health care agencies in Hot Springs and the surrounding area. The Frederick M. Dierks Center, along with the addition of updated lab equipment, allows for the nursing curriculum to increase the use of simulation in the nursing on-campus laboratories. One of the goals for simulation is to mirror the health care environment, allowing the faculty to design specific learning activities that will reinforce knowledge, skills, and attitudes important in the work world of today. In the Spring of 2011, the nursing programs, in collaboration with all of the programs in health sciences, joined together for an interdisciplinary simulation. Goals for this activity included an appreciation of the role of health care providers, practical experience with communication between the disciplines, and practice of skills specific to each discipline. This simulation had four different scenarios which allowed the various disciplines to work together to provide care. One example has "the patient" being brought in to the nursing lab "ER" by the paramedic students with beginning care provided by the RN and LPN students. This patient has lab drawn by the medical lab technician student and x-rays performed by the radiology students. Another example has "the patient" in the medical-care unit experiencing cardiac and respiratory problems requiring the RN and



Students representing all programs overlook the gathering space in the Dierks building

PN students providing care to collaborate with the respiratory therapy staff, call the physician, and transfer the patient to the ICU. This allows for use of the enhanced patient simulator who, in this case, required major cardiac intervention. Student evaluations for this learning activity were very positive with a request to continue or increase the opportunity.

Beginning in Fall 2011, the Division of Nursing will pilot the use of the electronic medical record (EMR) in the class and simulation laboratory activities. Janice Ivers, AD Nursing Program Director, said that this software package will allow students to view, practice, and grow in their skills related to this healthcare technology and increase their "workforce readiness." During the first two weeks of their first nursing course, students

will not only learn how to take vital signs (temperature, pulse, respiration, blood pressure, and pain), but will also learn how to document these in the EMR.

The RN and PN nursing programs are approved by the Arkansas State Board of Nursing. The associate degree program is accredited by the National League for Nursing Accrediting Commission (NLNAC). The

nursing assistant program is approved by the Arkansas Office of Long Term Care. The Pharmacy Technician is a new program and will be offered for the first time in the fall of 2011. Following the graduation of the first class, NPCC will seek accreditation by the American Society of Health-System Pharmacist.

Linda Castaldi stressed that the Nursing Programs strive for excellence and seek to ensure that the program meets current workforce demands. In the past year, the curriculum was revised to facilitate the transfer of students for a Bachelor's degree in nursing. NPCC offers RN to BSN options through their cooperation with Arkansas Tech University. The program is designed to be completed in one calendar year. Spring entry begins in January and summer entry begins in June. A BSN can be completed anywhere and anytime with access to a computer.

Five online nursing courses, two approved electives (online or classroom), and two online courses with practicum/clinical components must be completed in the student's home community. The first online course is designed to give the students the computer and online tools to successfully complete the program. Once accepted, the RN-BSN student is required to attend orientation day on campus the week before the first semester begins.

Whether furthering your nursing career or just beginning an education in nursing, National Park Community College in Hot Springs can be the perfect place to live and study.

For more complete information go to www.npcc.edu or call (501) 760-4222. Visit the campus at 101 College Drive, Hot Springs National Park, Arkansas.

Dennis Z. Kuo, MD, MHS, general pediatrician, health services researcher and assistant professor of pediatrics, University of Arkansas for Medical Sciences and **J. Gary Wheeler, MD, MPS**, associate medical director for quality, Arkansas Foundation for Medical Care and professor of pediatrics, University of Arkansas for Medical Sciences

USING REMINDER/RECALL TO IMPROVE IMMUNIZATION RATES IN ARKANSAS

Immunizations are one of the top 10 public health achievements of the 20th century identified by the Centers for Disease Control (CDC) and one of the most cost-effective. Healthy People (HP) 2010 sets 80 percent as the goal for overall immunization rates and 90 percent for individual vaccines. However, according to the 2010 National Immunization Survey, in 2008-09 just 66 percent of 2-year-old children in Arkansas completed their routinely recommended childhood vaccinations, with individual vaccine rates ranging between 73 percent and 91 percent. Additionally, immunization rates fall below the HP 2010 goals for racial/ethnic minorities, people with limited education, the impoverished and the uninsured, preschoolers, and residents of inner-city urban, rural and border areas.

The logistical challenges to immunizations are numerous. For instance, the number of childhood diseases protected against by routine immunizations has risen from seven in 1985 to 16 in 2010, comprising up to 52 vaccine doses.¹ Combination vaccines do reduce the number of actual injections, but the time and logistical demands on the office staff have risen considerably. Vaccines are often given at well-child visits; yet many children in Arkansas do not receive timely well-child visits. In 2009, according to the Centers for Medicare & Medicaid Services (CMS), just 38 percent of eligible children (up to age 21) received a Medicaid-required Early and Periodic Screening, Diagnosis and Treatment (EPSDT) screen.

Studies support the role of the physician as an enhancing force in increasing rates of vaccination.² The U.S. Task Force on Community Prevention Services, the CDC, the National Vaccine Advisory Committee and

For the highest possible rates to occur, it is necessary for physicians, health care providers and the health insurance industry to adopt systematic initiatives that embrace preventive health within the social context of our patients.

the AAP recommend providers implement reminder/recall (RR) systems to improve childhood vaccination coverage rates. All methods of patient RR increase immunization rates by 5 percent to 20 percent, with telephone reminders being more effective than mailed reminders and multiple reminders being more effective than single reminders.³ However, less than 15 percent to 20 percent of private providers use RR.⁴ Cited barriers to the adoption of RR messages include lack of time to learn the system, lack of staff and funding, and incomplete records due to multiple vaccine providers. The latter is a problem readily addressed by immunization registries such as the Arkansas Immunization Network for Children (INC). Once a child is entered into the system at birth, registered users (including physician offices, schools and childcare facilities) can access the child's age and vaccine status, including both recommended and overdue vaccination dates. There are few private practice providers using the INC to recall patients. The ADH recently successfully tested the recall system to send booster reminders to parents during the recent H1N1 outbreak.

Efforts to improve RR as part of vaccination practice in Arkansas are now underway. Arkansas Children's Hospital is beginning to use RR activities to target children between 1 and 2 years old who have the highest rates of under-vaccination. The Arkansas Foundation for Medical Care, in collaboration with the

ADH, has received funding from the CDC to study recall procedures that will increase vaccination rates for children under 2 years old. The research design will compare office-based recall procedures to a centralized recall center and use multiple communication methods (e.g. telephone, cell phone, texts and Facebook).

As health information technology is used by more Arkansas physicians, incorporating INC data can lead to more vaccinated Arkansans. For the highest possible rates to occur, it is necessary for physicians, health care providers and the health insurance industry to adopt systematic initiatives that embrace preventive health within the social context of our patients.

References :

1. Lindley MC, Shen AK, Orenstein WA, Rodewald LE, Birkhead GS. Financing the delivery of vaccines to children and adolescents: Challenges to the current system. *Pediatrics*. 2010;124:S548-57.
2. Lin CJ, Nowalk MP, Zimmerman RK, et al. Beliefs and attitudes about influenza immunization among parents of children with chronic medical conditions over a two-year period. *J Urban Health*. 2006; 83(5):874-883.
3. Szilagyi PG, Bordley C, Vann JC, et al. Effect of patient reminder/recall interventions on immunization rates: A review. *JAMA* 2000; 284:1820-1827.
4. Tierney CD, Yusuf H, McMahon SR, et al. Adoption of reminder and recall messages for immunizations by pediatricians and public health clinics. *Pediatrics*. 2003; 112: 1076-1082.



SIMULATION EXCITEMENT!

The possibilities of simulation in nursing practice and nursing education have reached a level of excitement throughout the nation. Schools are using highly technological mannequins to simulate real life medical scenarios in order to teach students how to handle situations in a non-threatening environment. Hospitals are using the

During their nursing education, students will be divided into three groups. Each group will be offered a set percentage of simulation experience. The study will examine the groups and their outcomes on clinical judgment and retention.

The Arkansas State Board of Nursing (ASBN) will watch the NCSBN study very closely to see how much time in

the simulation lab positively affects clinical competency outcomes following graduation. Currently, the ASBN Standards for Nursing Education Programs does not identify a minimum or maximum amount of simulation time a program can incorporate into its curriculum. As nursing programs continue to struggle with the ability to locate clinical sites, this study will provide us with a guideline for future recommendation on alternative clinical experiences.

If you want to learn more about the NCSBN Simulation Study go to the following websites:

<http://www.ncsbn.org>

http://www.youtube.com/watch?v=Ht2_00-bllQ&feature=related

So why is there simulation excitement? The National Council of State Boards of Nursing (NCSBN) is launching a longitudinal study of simulation in pre-licensure nursing programs around the country in Fall 2011. This research will explore the role and outcome of simulation in clinical nursing education in pre-licensure programs. Ten nursing programs throughout the United States have been chosen to participate in this landmark study.

same type of simulation activities for clinical competencies to assure nurses and other health care team members can function competently in high risk situations. The use of simulation, in both clinical and educational settings, allows nurses to gain knowledge and confidence with the hopes of better retention and improved patient outcomes.

So why is there simulation excitement? The National Council of State Boards of Nursing (NCSBN) is launching a longitudinal study of simulation in pre-licensure nursing programs around the country in Fall 2011. This research will explore the role and outcome of simulation in clinical nursing education in pre-licensure programs. Ten nursing programs throughout the United States have been chosen to participate in this landmark study. Students will be followed throughout their nursing education and will continue to be followed up to one year into their practice as a new graduate.



PROCESSING FEES MAY NOT APPLY

There has been some confusion about the processing fees charged for applications. A **PROCESSING FEE** will only be charged in addition to any fee you are paying if you:

- pay by credit card on a paper application

These fees **DO NOT APPLY** if you:

- pay online with a credit card
- pay by personal check
- pay by cashier's check
- pay by money order

the incorrect payment amount may delay the processing of your request. Since things change from time to time, it is always a good idea to carefully read the instructions and your application before you submit it

to the Board. As always, using our online function is the easiest and fastest way to have your information processed. (Plus it is less expensive than using your credit card on a paper application.)



Please be aware this fee will be charged to your card if you submit a paper form and complete the section to pay by credit card. The Board does not receive the fee. The fee is charged by the company that hosts our credit card processing functions.

Please do not include this fee when paying by check or money order. Sending

Continuing Education Workshop

NURSING TODAY: Ethics, Leadership, Social Networking and More

Schedule

8:00 a.m.	Registration
8:30 a.m.	ASBN 101
9:00 a.m.	What's So Social About Social Networking?
10:00 a.m.	Break
10:15 a.m.	Extreme Makeover of Your Leadership Abilities
11:00 a.m.	The Disciplinary Process: From Investigation to Resolution
12:00 p.m.	Lunch
12:45 p.m.	Nurses Beware: Ethical Issues
1:30 p.m.	Protecting Your Privilege to Practice
2:30 p.m.	Break
2:45 p.m.	NCLEX®

REGISTRATION FEE: \$45.00 (includes lunch)
Pre-registration required. Fees are non-refundable.



2011 Dates and Locations

February 17	Baptist Health School of Nursing 11900 Colonel Glenn Road, Little Rock
March 10	Sparks Regional Medical Center 1001 Towson Avenue, Fort Smith
September 27	University of Arkansas Community College at Batesville 2005 White Drive, Batesville
November 17	Baptist Health School of Nursing 11900 Colonel Glenn Road, Little Rock

This continuing education sponsored by the Arkansas State Board of Nursing is awarded 6.0 contact hours. Participants who leave immediately prior to the NCLEX presentation will receive 5.0 contact hours. E-mail info@arsbn.org if you have questions.

This continuing education activity was approved by Arkansas Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation. Provider Code 09-31-EA

Register online at www.arsbn.org

REGISTRATION FORM

Mail completed registration form and \$45.00 registration fee (in-state check or money order) to ASBN, 1123 South University, Suite 800, Little Rock, AR 72204. Registration must be received one week prior to workshop.

Check date you plan to attend: September 27 November 17

NAME _____ LICENSE NUMBER _____

CITY _____ ZIP _____ PHONE _____

F A Q S

Q **May student nurses who work in a facility outside of their school-directed clinical setting perform procedures that they have been “checked off” on by their clinical instructor?**

A Student nurses working as unlicensed personnel in facilities outside their school-directed clinical setting may only perform procedures as specified in the ASBN *Rules*, Chapter 5, Delegation. These are the same rules that apply to delegation to any unlicensed person working in a health care setting. Nurses may have disciplinary action taken against their licenses for inappropriate delegation.

Q **What would the risk be to a nurse who works in a physician’s office where medical assistants perform invasive procedures and administer medications?**

A The Delegation Chapter of the ASBN *Rules* lists tasks that can be delegated without prior assessment, tasks that shall not be delegated and describes circumstances under which other tasks can be delegated if the five rights are met. Medication administration by any route is in the list of tasks that shall not be delegated to any unlicensed persons. Nurses who delegate to unlicensed personnel the performance of tasks other than as described in Chapter 5 are subject to disciplinary action for unprofessional conduct.

Q **What does the Board consider to be patient abandonment?**

A Inquiries have been received by the Board regarding which actions by a nurse constitute patient abandonment and thus may lead to discipline against a nurse’s license.

For patient abandonment to occur, the nurse must have:

- Accepted the patient assignment, thus establishing a nurse-patient relationship.
- Severed that nurse-patient relationship without giving reasonable notice to the appropriate person (e.g., supervisor, patient) so that arrangements could be made for continuation of nursing care by others.

Once the nurse has accepted responsibility for the nursing care of a patient, severing the nurse-patient relationship without giving reasonable notice to the appropriate person may lead to discipline for unprofessional conduct pursuant to ASBN *Rules* Chapter 7, Section XV.A.6.i.

Refusal to accept an assignment is not considered patient abandonment nor is refusal to work additional hours or shifts. It should be noted that the Board has no jurisdiction over employment and contract issues. While nurses who refuse to accept certain patient assignments may not be violating the *Nurse Practice Act*, the nurse must be willing to accept the consequences of such a decision on the employer/employee relationship.

Q **My license is on inactive status. How many continuing education contact hours do I need?**

A You are not required to have continuing education if your nursing license is inactive. (ASBN *Rules*, Chapter 2, Section VII.C.2.)

Q **I attended a weeklong educational conference and received 30 continuing education contact hours. Can I use those hours to count for the next two license renewal periods?**

A Continuing education contact hours beyond the required contact hours cannot be “carried over” to the next renewal period. (ASBN *Rules*, Chapter 2, Section VII.C.5.)

The full statutory citations for disciplinary actions can be found at www.arsbn.org under *Nurse Practice Act*, Sub Chapter 3, §17-87-309. Frequent violations are ACA §17-87-309 (a)(1) "Is guilty of fraud or deceit in procuring or attempting to procure a license to practice nursing or engaged in the practice of nursing without a valid license;" (a)(2) "Is guilty of a crime or gross immorality;" (a)(4) "Is habitually intemperate or is addicted to the use of habit-forming drugs;" (a)(6) "Is guilty of unprofessional conduct;" and (a)(9) "Has willfully or repeatedly violated any of the provisions of this chapter." Other orders by the Board include civil penal-

ties (CP), specific education courses (ED), and research papers (RP). Probation periods vary and may include an impaired-nurse contract with an employer and/or drug monitoring and treatment programs.

Each individual nurse is responsible for reporting any actual or suspected violations of the *Nurse Practice Act*. To submit a report use the online complaint form at www.arsbn.org, or to receive additional information, contact the Nursing Practice Section at 501.686.2700 or Arkansas State Board of Nursing, 1123 South University, Suite 800, Little Rock, Arkansas 72204.

PROBATION

Anglin, Misty Michelle
L46206, Hattiesville
A.C.A. §17-87-309(a)(6)
Probation - 1 year
Civil Penalty - \$1,000.00

Ault, Amanda Michelle
L46064, Malvern
A.C.A. §17-87-309(a)(2), (4) & (6)
Probation - 1 year

Bailey, Debra Elene G. Cain
R76706 (expired), L39756 (expired),
Taos, NM
A.C.A. §17-87-309(a)(4)&(6)
Probation - 2 years
Civil Penalty - \$1,000.00

Beckley, Thomas Chad
R88496, Rogers
A.C.A. §17-87-309(a)(2), (4) & (6)
Probation - 1 year

Burgess, Eve Ellen Thurman McCracken
R50470, Mayflower
Probation Non-Compliance
Probation - 2 years, in addition to
prev term
Civil Penalty - \$1,000.00 plus prev
bal

Cartwright, Candice Marie
R88499, L47612, Little Rock
A.C.A. §17-87-309(a)(2)
Probation - 1 year

Douglas, Robbie Todd Goodwin Pickle
P00678, R17825, Clinton
A.C.A. §17-87-309(a)(1) & (6)
Probation - 1 year
Civil Penalty - \$560.00

Fryer, Melinda Michelle
L38899, Lonoke
A.C.A. §17-87-309(a)(4) & (6)
Probation - 3 years
Civil Penalty - \$900.00 plus prev bal

Gilliland, Merrilee Tarpley Moreno
L33011, Malvern
A.C.A. §17-87-309(a)(2) & (6)
Probation - 3 years
Civil Penalty - \$2,000.00

Greer, Sheila Dianne Hammond
R20596, Magnolia
A.C.A. §17-87-309(a)(4) & (6)
Probation - 2 years
Civil Penalty - \$1,600.00

Hood, Robin Darin
L43701, Conway
A.C.A. §17-87-309(a)(6)
Probation - 1 year
Civil Penalty - \$600.00

Hum, Patrick Joseph
R85566, Conway
A.C.A. §17-87-309(a)(4)&(6)
Probation - 2 years
Civil Penalty - \$2000.00

Kirkpatrick, Christine Anna Munro
R53783, Bigelow
A.C.A. §17-87-309(a)(6)
Probation - 2 years
Civil Penalty - \$1,000.00

Laird, Adam Brant
R67250, Fort Smith
A.C.A. §17-87-309(a)(6)
Probation - 2 years
Civil Penalty - \$2,000.00

Lane, Judith Kay Harp
A01029, R23207, P00450, PAC 1126,
Rogers
A.C.A. §17-87-309(a)(2) & (6)
Probation - 1 year

Lawson, Glenda Gay Davis
P01424 (exp), S01085 (exp), R32748
(exp), Arlington, TX
Probation Non-Compliance
Suspension - 1 yr, followed by
Probation - 2 1/2 yrs
Civil Penalty - \$1,800.00

Mackey, Harriet Lee Shelman Helton
R51552, L12857 (exp), Malvern
A.C.A. §17-87-309(a)(4) & (6)
Probation - 1 year
Civil Penalty - \$500.00

McKeever, Toni Diane
R42190, Alexander
A.C.A. §17-87-309(a)(2), (4) & (6)
Probation - 3 years
Civil Penalty - \$2,000.00

Ramsey, Melanie Ann Greenlee
R83186, L41957 (exp), Malvern
A.C.A. §17-87-309(a)(6)
Probation - 1 year

Thomas, Melba Deon Hubbard Ross
L40463, Prairie Grove
A.C.A. §17-87-309(a)(4)&(6)
Probation - 1 year
Civil Penalty - \$500.00

Tindel, Kelly Elizabeth
L47998, Harrison
A.C.A. §17-87-309(a)(6)
Probation - 1 year

SUSPENSION

Clark, Kathleen Ann
L24013, Springdale
Letter of Reprimand Non-Compliance
Suspension - until terms of LOR met

Darden, Janda Bere Walton Ezell Traylor
L39644, El Dorado
Probation Non-Compliance
Suspension - 5 years, followed by
Probation - 2 years
Civil Penalty - \$4,000.00

Gray, Mary Katherine Stuckey
R77808, North Little Rock
A.C.A. §17-87-309(a)(4)&(6)
Suspension - 2 years, followed by
Probation - 3 years
Civil Penalty - \$2,500.00

Kimble, Tammy Lynn
R63962, Forrest City
A.C.A. §17-87-309(a)(4)&(6)
Suspension - 2 years, followed by
Probation - 3 years
Civil Penalty - \$2,500.00

Reimer, Ronald Wayne
R67406, Phoenix, AZ
A.C.A. §17-87-309(a)(4)&(6)
Suspension - until appears before
Board

Reynolds, Kathleen Dawn
R82052 (expired), Little Rock
A.C.A. §17-87-309(a)(2),(4)&(6)
Suspension - indefinite

Robinson, Elizabeth Jordan Sutton
A03403, R79903, PAC 3307,
Paragould
A.C.A. §17-87-309(a)(1)&(6)
Suspension - indefinite

VOLUNTARY SURRENDER

Branson, April Rena
L49662, Garfield
June 9, 2011

Burmester, Timothy Richard
A03302, R72751, PAC 3177,
Sallisaw, OK
June 7, 2011

Collins, Justin Ray
R77137, Greenwood
June 3, 2011

Colvin, Carrie Dawn Berry
R50566, Cabot
June 1, 2011

Douglas, Latina Evonne Rogers
L32557, Lavaca
June 3, 2011

Garrett, Kristy Diane Youngblood Long
R71284, L38144 (expired), Benton
June 16, 2011

Phillips, Tonya Angeline Dingman
Phillips Taylor
R69691, Jacksonport
June 10, 2011

Plumlee, Desiree Plumlee Smith
R71715, Lowell
June 16, 2011

Van Dyke, Anna Jeanette Brooks Brooks-Williams
R63857, Gallatin, TN
June 3, 2011

PROBATIONARY STATUS REMOVED

Irvan, Deborah Lee Lawson
R54256, L31298 (exp), Horatio
Reinstatement to Probation - 2 yrs
June 16, 2011

Peppers, Robin Elaine Russell
R31172, Mayflower
Reinstatement to Probation - 2 yrs
June 16, 2011

Schalchlin, Annette L. Weisner
L42582, Alexander
Reinstatement to Probation - 1 yr
May 26, 2011

REINSTATEMENTS

Ballard, Jimmy Eldridge
A02954, R71545, PAC 2977, Osceola
Prescriptive Authority Reinstated
June 8, 2011

REPRIMAND

Stowe, Kimberly Kay Chrisman
L15798, Little Rock
A.C.A. §17-87-104(C) & §17-87-309(1)
Civil Penalty - \$540.00

REVOCACTION

Burton, William John
L41381, Monticello
A.C.A. §17-87-309(a)(2) & §17-87-312(e)(32)
June 8, 2011

Hinkle, Mark Andrew
R49649, Cape Girardeau, MO
A.C.A. §17-87-309(a)(1),(2),(3)&(7)
June 8, 2011

Rhode, Tracey Mack
R55813 (expired), L33859 (expired),
Bryant
A.C.A. §17-87-309(a)(2),(6)&(7)
June 8, 2011

PROBATIONARY STATUS REMOVED

Brown, Leslie Nicole
L50176, Bono
June 17, 2011

Carey, Susan Paige Puckett
R63045, Fayetteville
June 17, 2011

Choate, Tiffany Leann Choate Lewis
L42412, Russellville
June 17, 2011

Nicholson, Billie Dianna
L50247, Trumann
June 17, 2011

APPEAL DENIED

Freyaldenhoven, Teresa Delene Gifford
Burlie
L39498, Morrilton
June 8, 2011

WAIVER DENIED

Burson, Trisha Lynelle
PN Applicant, El Dorado
June 8, 2011

WAIVER GRANTED

Bibby, Ronald Dewain
PN Applicant, El Dorado
June 9, 2011

Deen, David Lanier
RN Applicant, Fayetteville
June 8, 2011

Horton, Tamara Linn
PN Endorsement Applicant
June 9, 2011

Jones, Rachel Elizabeth
PN Applicant, Conway
June 8, 2011

Lawson, Lacy Morgan Knight
PN Applicant, Sherwood
June 8, 2011

Rogers, Terina Jane
PN Applicant, Alma
June 8, 2011

Disciplinary Actions

JULY 2011

PROBATION

Callis, Brent Alan
L51684, Bella Vista
A.C.A. §17-87-309(a)(2)
Probation - 1 ½ years

Denson, Rhonda Jeyne Stewart
Stephenson
R35418, Sherwood
A.C.A. §17-87-309(a)(4)
Probation - 1 year
Civil Penalty - \$800.00

Gillenwater, Shelaine Faithe
L48628, Glenwood
Probation Non-Compliance
Probation - additional 2 years
Civil Penalty - \$1,000.00

Gilmore, Ann Elizabeth
L44703, Conway
A.C.A. §17-87-309(a)(4)&(6)
Probation - 2 years
Civil Penalty - \$800.00

Harrison, Kelly Kay Eifert Parker
C02640, R63297, Ft. Smith
A.C.A. §17-87-104(G) & §17-87-310
Civil Penalty - \$870.00

Hatchett, Nina Joline Garrett Callahan
L42453 (exp), Siloam Springs
Probation Non-Compliance
Probation - 2 years
Civil Penalty - \$1,000.00 plus prev bal

Hodge, Melissa Dannette
R78601, Benton
A.C.A. §17-87-309(a)(4)&(6)
Probation - 2 years
Civil Penalty - \$1,000.00

Jessup, Cynthia Lisa Robertson
Overholser
R66656, L28075 (exp), Wynne
A.C.A. §17-87-309(a)(6)
Probation - 1 year
Civil Penalty - \$1,500.00

Longstreth, Tracey Ellen Yarbrough
Givens
R66936, Maumelle
A.C.A. §17-87-309(a)(6)
Probation - 1 year
Civil Penalty - \$500.00

Martin, Candace Carol McFarland
Branham
L30705, Barling
A.C.A. §17-87-309(a)(6)
Probation - 1 year
Civil Penalty - \$350.00

Money, Sharon Kay Traylor
R15442, Fayetteville
A.C.A. §17-87-309(a)(2)(4)&(6)
Probation - 1 year
Civil Penalty - \$500.00

Pena, Durinda Kay Cochran
A02908, R34609, PAC 2816, Eureka Springs
Probation Non-Compliance
Probation - 1 year, PAC suspended during period of probation

Pickle, Ashley Lin
L51683, Cherokee Village
A.C.A. §17-87-309(a)(4)
Probation - 1 year

Pruitt, Scotty J
R72459, L38509 (exp), Okean
Probation Non-Compliance
Probation - 1 year

Reynolds, Laura Beth
R80021, Fayetteville
A.C.A. §17-87-309(a)(6)
Probation - 1 year
Civil Penalty - \$500.00

Sliger, Julie Sue Nooner
L41906 (expired), Hot Springs
A.C.A. §17-87-309(a)(2),(4)&(6)
Probation - 2 years
Civil Penalty - \$500.00 plus prev balance

Stafford, Tracie Lane
R82687, L41571 (expired), Horatio
A.C.A. §17-87-309(a)(4)&(6)
Probation - 2 years
Civil Penalty - \$1,000.00

Werner, Tonya Paige
R85398, Little Rock
A.C.A. §17-87-309(a)(4)&(6)
Probation - 2 years

SUSPENSION

Abney, Terica Kay
R64479, Fayetteville
Probation Non-Compliance
Suspension - 1 year, followed by Probation - 2 years
Civil Penalty - \$1,500.00

Baker, Jennifer Lauren Kimpel
R76917, Benton
A.C.A. §17-87-309(a)(2),(4),(6)&(9)
Suspension - Indefinite

Brown, Leah Dawn
L47353 (exp), Altus
Probation Non-Compliance
Suspension - 1 year, followed by Probation - 2 years
Civil Penalty - \$1,500.00

Cosey, Taya Leann Boughfman
R70538, Fayetteville
Probation Non-Compliance
Suspension - 1 year, followed by Probation - 2 years
Civil Penalty - \$500.00, plus prev bal

Esau, Nathaniel Robert
L43424, Cabot
Probation Non-Compliance
Suspension - 1 year, followed by Probation - 2 years
Civil Penalty - \$1,500.00, plus prev bal

Goodnight, Stacie Lynn Kelnhofer
L33798, Star City
Probation Non-Compliance
Suspension - 1 year, followed by Probation - 2 years
Civil Penalty - \$1,500.00

Hudgins, Lisa Marie Morgan
L38862 (exp), Pea Ridge
A.C.A. §17-87-309(a)(4)&(6)
Suspension - 3 years, followed by Probation - 2 years
Civil Penalty - \$3,612.50

Jenkins, Carrie Lynn Ray Muirhead
L43842, Crossett
Probation Non-Compliance
Suspension - 1 year, followed by Probation - 2 years
Civil Penalty - \$2,000.00, plus prev bal

Jennings, Jessica Matosha Thomas
R70012, El Paso, TX
Probation Non-Compliance
Suspension - 1 year, followed by Probation - 4 years
Civil Penalty - \$2,500.00, plus prev bal

Johnson, Jennifer Marie Dunn Owens
R78173, L38683 (exp), Pine Bluff
A.C.A. §17-87-309(a)(4)&(6)
Suspension - 2 years, followed by Probation - 3 years
Civil Penalty - \$2,975.00

Pierce, Julie Carol Shores
R67125, Hot Springs
Probation Non-Compliance
Suspension - 6 months, followed by Probation - 2 years
Civil Penalty - \$1,000.00

Raines, Bonnie Sue
L49581, Perryville
Letter of Reprimand Non-Compliance
Suspension - 6 months, followed by Probation - 1 year
Civil Penalty - \$500.00

Reynolds, Kathleen Dawn
R82052, Little Rock
Probation Non-Compliance
Suspension - 1 year, followed by Probation - 1 ½ years
Civil Penalty - \$500, plus prev bal

Snow, James Wasson Tobias
L48270, Mountain Home
Probation Non-Compliance
Suspension - 2 years, followed by Probation - 2 years
Civil Penalty - \$2,000.00

Tankersley, Lisa Ann Harderson Turpin
L27465, Russellville
Letter of Reprimand Non-Compliance
Suspension - 1 year, followed by Probation - 2 years
Civil Penalty - \$1,500.00

Taylor, Ashley Nicole
L45773, Little Rock
A.C.A. §17-87-312(e)(24),(g)(1)&(2) §17-87-309(a)(2),(6)&(9)
Suspension - 1 year, followed by Probation - 2 years
Civil Penalty - \$1,500.00

VOLUNTARY SURRENDER

Bales, Duane Allen
L44746, Little Rock
July 5, 2011

Cobb, Tonya Lynne
R84888, Joplin, MO
July 8, 2011

Hill, Tammy Sue Davis
L36243, Forrest City
June 23, 2011

Hufstедler, Vicky Deniece
R87599, L49702, Imboden
July 5, 2011

Pierce, Shawn Dalrymple
L35430, Hot Springs
July 13, 2011

Pruitt, Amy Marie
L45186, Horseshoe bend
July 12, 2011

Wilson, Tamara Lennette Pounders
L47192, Lepanto
July 7, 2011

Wood, Briana Nicole
L44168, Crossett
July 1, 2011

Woods, Nancy Ellen Loschi
L25865, Little Rock
June 20, 2011

Yates, Jennifer Linn
L48864, Sheridan
July 11, 2011

REPRIMAND

Barnes, Venaye Pedger
L31103, Alexander
April 29, 2011

Carter, Stephanie Renee
R88014, Roland
March 30, 2011

Cunningham, Lakresha Doretha
L38261, Sherwood
April 29, 2011

Furniss-Roberts, Julia Laverne Oxner
R36040, A03077, PAC 3004, Rogers
April 27, 2011

Hines, Lissa Renee
L51176, Conway
March 30, 2011

Montgomery, Patricia Jean Ware
L14262, Diaz
May 9, 2011

Ogdon, Leann
L45295, Roland, OK
June 1, 2011

Sade, Marie Janine
A03528, PAC 3383, Forsyth, MO
March 25, 2011

Sayers, Debra Jean
R88123, Garfield
March 30, 2011

Turner, Randy Keith
R31942, Jonesboro
March 30, 2011

REVOICATION

Lyons, Donna Rae Lyons Martin
Craven Hall Craven
R35351, L22556 (exp), Cabot
July 13, 2011

PROBATIONARY STATUS REMOVED

Carter, Vickie Lynn Setzler McCarley
R56180, L31439 (exp)
June 20, 2011

Gaston, Lance Gregory
L50248, Conway
June 20, 2011

Ward, Tamara Timbs
R16546, Hot Springs
June 20, 2011

WAIVER GRANTED

Jackson, Cynthia Elaine Turner
R25892, Batesville
July 13, 2011

Reece, Daphne Menyion
R88942, Rex, GA
July 14, 2011

Taylor, Ashley Nicole
L45773, Little Rock
July 14, 2011

THANK YOU to our Clients:

For allowing our nursing team to work with you when the need arises, and treating us like your staff family!! We gratefully appreciate you!

Arkansas State Board of Nursing
University Tower Building
1123 S. University, Suite 800
Little Rock, AR 72204

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