Ohio Board of Nursing Fall 2013 • Volume 11 Issue 4

Official Publication of the Ohio Board of Nursing

Board Executive Director Receives the 2013 R. Louise McManus Award



UNIVERSITY OF AKRON DEAN, COLLEGE OF HEALTH PROFESSIONS

The **University of Akron**, one of the leading institutions in the University System of Ohio, has successfully launched its new **College of Health Professions** as part of the University's expanding focus on health care education, training, research, and service delivery. The College brings together a large School of Nursing with Schools of Speech-Language Pathology and Audiology, Social Work, and Nutrition/Dietetics as well as programs in Public Health and Child Life, with plans to add additional programs in related disciplines such as Sport Science and Wellness. The University now seeks a dynamic new leader as **Dean** for the College to sustain its excellence in teaching and drive its further development and growth in enrollment, disciplines and degrees as well as in clinical engagement and related research.

The new Dean will have the opportunity to develop and implement a vision for the future of the University of Akron's health education and research programs and its overall engagement with the health care field. Akron and northeast Ohio are one of the nation's epicenters for advanced health care and the transformation that is occurring in health service delivery. Through partnerships and collaboration, regional and national health systems such as the Cleveland Clinic, University Hospitals, Catholic Health Partners, and Community Health Systems are integrating with traditional University of Akron partners Summa Health System and Akron General Health System. These partnerships and others with Akron Children's Hospital, the Austen BioInnovation Institute in Akron, and Northeast Ohio Medical University are fueling an ever increasing and evolving demand for enlightened leadership and growth on the part of the College of Health Professions to educate and train the health care professionals required. The development of the innovative, highly collaborative, inter-professional model of education, research, and service delivery at the College positions the University and its health professions graduates to shape and succeed in this rapidly changing health care world.

The ideal candidate will have a terminal degree in one of the health professions and be eligible for appointment at the Professor level. She or he will be an experienced academic leader with a distinguished record of accomplishment in health education, service delivery and clinically oriented research. In particular, his or her achievements will demonstrate a commitment to inter-professional education and care delivery, innovative approaches to teaching including the use of technology, and the effective translation of research into clinical practice. The ideal candidate will have experience in successfully growing a major program, department, school, or college, including the recruitment and mentoring of expert clinical faculty as well as researchers. We seek a health care professional with a clear dedication to excellence in clinical care and education who is at the forefront of the transformation of health care delivery. We also seek an individual with strong interpersonal and communication skills who is highly collaborative and creative. Additional information is located on the University of Akron website at http://www.uakron.edu.

The University of Akron has retained Park Square Executive Search to assist them with this important recruitment. Nominations and applications should be directed to: 919751@parksquare.com. Review of applications by the search committee will begin on December 15, 2013, and continue until the position is filled.

Individuals from historically underrepresented groups are encouraged to apply. The University of Akron is an equal education and employment institution.

Applications, nominations or other materials submitted for this search may constitute a public record and therefore may be made available upon request in accordance with ORD 149.43.



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Please notify the Board of any change to your name or address. Thank You. See Page 20.

Ohio Nursing Momentum is the official journal of the Ohio Board of Nursing. Nursing Momentum's traditional journal & interactive digital companion serve over 280,000 nurses, administrators, faculty and nursing students, 4 times a year all across Ohio. Momentum is a timely, widely read and respected voice in Ohio nursing regulation.



Judith Church, DHA, MSN, RN President

How proud and excited the Board Members were to see Executive Director, Betsy Houchen, receive the most prestigious national award presented by the National Council of State Boards of Nursing (NCSBN). The R. Louise McManus Award was presented to Director Houchen at the 2013 NCSBN Annual Meeting. Individuals who receive the R. Louise McManus Award have made sustained and significant contributions through the highest commitment and dedication to the purposes of NCSBN. Criteria for selection include active leadership in NCSBN; substantial contributions to the improvement of nursing regulation; impact on public policy and development to enhance the health and well-being of individuals and the community; and contributions to the mission of NCSBN over a significant period of time.

Betsy has consistently demonstrated a commitment to public protection, regulatory excellence and the mission Betsy has consistently demonstrated a commitment to public protection, regulatory excellence and the mission of the Ohio Board of Nursing. She is described as "...a fair and honest regulator of the profession, and a significant contributor to important policy discussions regarding the future of nursing specifically and of healthcare more generally."

of the Ohio Board of Nursing. She is described as "...a fair and honest regulator of the profession, and a significant contributor to important policy discussions regarding the future of nursing specifically and of healthcare more generally."

A proactive and inventive voice in nursing regulation, she instituted a Patient Safety Initiative under which the Board incorporated Just Culture for the review of patient complaints, and works with nursing employers to increase employer reporting of patient safety data and employer practice remediation with nurses. The Initiative is moving toward a statewide patient safety database and is contributing data for the NCSBN national patient safety database.

In 2009, the Ohio Board of Nursing received the NCSBN Regulatory Achievement Award for the nursing board that demonstrates significant contributions in promoting public policy related to the safe and effective practice of nursing in the interest of public welfare.

Betsy is an 11-year veteran in nursing regulation at the Ohio Board of Nursing. She currently serves as a director-at-large of the NCSBN Board of Directors. Houchen served two previous terms as the Area II director on the NCSBN Board of Directors and as the board liaison to the Model Act and Rules Committee, the Commitment to Ongoing Regulatory Excellence Committee and the Distance Learning Education Committee.

The Board is extremely proud to congratulate Betsy on this prestigious award!. •

Jusich a. Church

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Chamberlain College of Nursing is accredited by The Higher Learning Commission (HLC) and is a member of the North Central Association of Colleges and Schools, neahlc org, HLC is one of the six regional agencies that accredit U.S. colleges and hunversities at the institutional level. The Bachelor of Science in Nursing degree program and the Master of Science in Nursing degree program and the Master of Science in Nursing degree program at the Master of Science in Nursing degree program at the Master of Science in Nursing (Accept Carbon College of Nursing LC) 2028;87:67911. The Associate Degree in Nursing program at the Columbus location is accredited with conditions by the Accreditation Commission of College of Nursing (LC). All rights reserved. **The Institute** of Medicine (IOM) report, "The Future of Nursing: Leading Change, Advancing Health," identifies data collection as a vital component for health care planning and policymaking. Governor Kasich and the Ohio legislature have established growing Ohio's workforce as a priority. The Board has taken an active role in

education; primary and secondary work setting, title, practice area; and employment status. For APRNs, there were additional questions that provide primary care data and information related to APRNs and prescribers. Certificate to Prescribe (CTP) holders were encouraged to register for OARRS (Ohio Automated Rx Reporting System).



Betsy J. Houchen, RN, MS, JD *Executive Director*



collecting workforce data to assist the workforce planning initiatives of government and private industry.

For the 2013 renewal cycle the Board was successful in reaching its goal to embed the complete set of data questions in the renewal process for RNs and APRNs. The data questions provide demographic information as well as data about The renewal and workforce data collection period ended August 31, 2013. We are pleased to report that workforce data was collected for 166,674 registered nurses, and an additional 984 CTP holders registered for OARRS. The percentage of CTP holders registered for OARRS increased from 41% to 56%.

The Board has prepared two nurs-

For the 2013 renewal cycle the Board was successful in reaching its goal to embed the complete set of data questions in the renewal process for RNs and APRNs. The data questions provide demographic information as well as data about education; primary and secondary work setting, title, practice area; and employment status.

> ing workforce data reports and the raw data is available to the public. The reports are available on the Board website at www.nursing.ohio. gov. We expect the data will be used for future planning an initiatives that will benefit nurses and future nurses in Ohio.

> Thank you for making the 2013 workforce data collection a great success. •

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Visit www.nursing.uc.edu/rn-to-bsn or talk to an advisor at 1-855-558-1889.

APRNS: SPECIALIZING IN WOUND CARE

Board staff have received questions concerning the role of an APRN in the specialty of wound care. The questions pertain to the education, certification and skills validation necessary for an APRN to engage in practices that include managing patients with wounds. Below are some of the more frequently asked questions and responses concerning APRNs specializing in wound care management and the performance of sharp wound debridement.

Question: The Board has published an Interpretive Guideline (IG) for Conservative Sharp Wound Debridement. Does this IG apply to APRNs and limit their practice to the type of debridement discussed in the IG?

Response: The published IG in question is provided for registered nurses (RN) and establishes guidelines to ensure that, if followed in their performance of conservative sharp wound debridement, RNs are practicing within their licensure scope set forth in Section 4723.01(B), Ohio Revised Code (ORC), and standards of practice in Chapter 4723-4, Ohio Administrative Code (OAC). The IG does not limit qualified APRNs from fully engaging in their respective scope of practice, which may include the management of patients with wounds, and the performance of sharp wound debridement. An APRN's education, certification and licensed authority to manage a patient's wound care exceed those of a registered nurse.

Questions: Is there specific education and training that an APRN, who is certified in an, e.g., "Adult" population foci, needs to perform wound debridement?

Response: An APRN who chooses to specialize in the management of patients with wounds and the performance of sharp wound debridement would need to achieve specialized competency in wound care that is documented through an organized, formal education process, such as a fellowship or internship. The education would need to include verification of the APRN's clinical competency in the application of knowledge and skills necessary to safely engage in the practice.

The formal education would need to meet the "specialized practice requirements" contained in the National Council of State Boards of Nursing (NCSBN) 2008 APRN Consensus Model that are consistent with Section 4723.43, ORC, and recognized/ acceptable standards for the wound care specialty.

Question: How does the APRN Consensus Model address "specialized practice" of APRNs?

Response: APRN Consensus Model explains the structure of APRN type (CNM, CRNA, CNP and CNS) and the population foci within the licensed specialty that is dependent on the national certifying organization's examination content, e.g., Adult-geriatrics, Pediatrics. Regarding specialty practice, the Consensus Model explains that: ...specialties can provide depth in one's practice within the established population foci" and that the "[e]ducation and assessment strategies for specialty areas will be developed by the nursing profession, i.e., nursing organizations and special interest groups. Education for a specialty can occur concurrently with the APRN's formal education required for [certificate of authority] licensure or as post-graduate education. (p.6).

Therefore, an APRN who chooses to specialize in wound care would need to complete formal education in wound care and related skills obtained either during the APRN's graduate nursing education or through a professionally approved post-graduate education.

Question: Do APRNs need to obtain wound care certification through the American Board of Wound Management or the Wound Ostomy and Continence Nursing Certification Board?

Response: Both of these professional organizations have established certification requirements that meet the Consensus Model's specialty education requirements. An APRN with either of the two additional certifications will have met the requirements to specialize in wound care. Although the Board does not require specific professional organizations' certifications, an APRN who is seeking post-graduate specialty education should review the proposed education content and its organization and delivery, to ensure it documents the standard of practice for the specialty and includes any necessary skills validation as the Board may request documentation of the specialty education.

Question: Does my collaborating physician need to be a surgeon?

Response: Section 4723.431, ORC, requires a certified nursemidwife, clinical nurse specialist or certified nurse practitioner to enter into a standard care arrangement with one or more collaborating physicians or podiatrists. The collaborating physician must be actively engaged in direct clinical practice in this state and practicing in a specialty that is the same as or similar to the nurse's nursing specialty. An APRN practicing in a wound care specialty would need to collaborate with a physician who provides wound care management as part of his/her clinical practice.

For more information pertaining to specific criteria for wound care education programs and assessment strategies for APRNs who practice wound care management, please contact one of the wound care professional associations or certifying organizations.

For more information pertaining to the APRN Consensus Model please visit the NSCBN website at: www.ncsbn.org

For more information pertaining to determining individual APRN scope of practice please review the Decision-Making Guide for Determining Individual APRN scope of practice which can be accessed on the Board website: www.nursing.ohio.gov and clicking on the "APRN" link. •

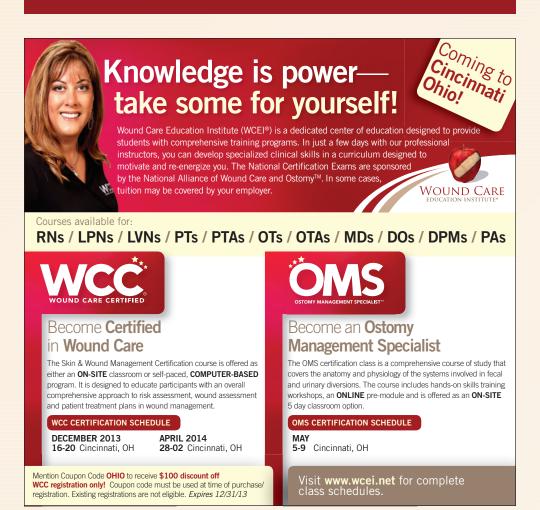
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GUIDELINES FOR PRESCRIBING OPIOIDS FOR THE TREATMENT OF CHRONIC, NON-TERMINAL PAIN

The appropriate treatment of pain is a priority in Ohio. The Governor's Cabinet Opiate Action Team (GCOAT), the Nursing Board, and a group of professional health care provider regulatory boards, associations, individual providers and other key stakeholders have focused their most recent efforts on educating health care professionals and patients.

The goal of this educational effort is to help reduce and eliminate the misuse and abuse of opioid drugs. The team has established a website www.opioidprescribing. ohio.gov that features the "Guidelines for Prescribing Opioids for the Treatment of Chronic, Non-Terminal Pain" adopted by the Medical, Nursing, Pharmacy and Dental Boards in May 2013, a one-hour continuing education video, and information and links to an improved OARRS reporting system keyed to this initiative.

The clinical guidelines are intended to supplement - not replace - the prescriber's clinical judgment. Using the recently adopted guidelines in coordination with OARRS reports is a best practice that offers insight into a patient's use of opioids and other controlled substances, while also alerting prescribers to possibilities of medication conflicts and signs of abuse, addiction or diversion.

OARRS reports have recently been enhanced to include a dosage calculator to assist prescribers in determining whether patients are at, near or over the daily 80 MED highlighted in the guidelines. These guidelines use 80 mg morphine equivalen-



Using the recently adopted guidelines in coordination with OARRS reports is a best practice that offers insight into a patient's use of opioids and other controlled substances, while also alerting prescribers to possibilities of medication conflicts and signs of abuse, addiction or diversion.

cy dosing (MED) as a "trigger threshold," as the odds of an overdose are significantly higher above that dose. The clinical guidelines recommend that at 80 mg MED or above the clinician "press pause" and re-evaluate how to optimize therapy and ensure patient safety. This pause also is a good time to consider potential adverse effects of long-term opioid therapy. The message is the same for other controlled substances and the prescription drug tramadol that have similar misuse and abuse potential. Please read and use the "Guidelines for Prescribing Opioids for the Treatment of Chronic, Non-terminal Pain" in your practice and sign up for OARRS so that it is available to you when you need it. Thank you for joining us in Ohio's efforts to reduce the abuse and misuse of opioid drugs and contributing to a "Healthy Ohio." Below are the guidelines:

Guidelines for Prescribing Opioids for the Treatment of Chronic, Non-Terminal Pain 80 mg of a Morphine Equivalent Daily Dose (MED) "Trigger Point"

These guidelines address the use of opioids for the treatment of chronic, non-terminal pain. "Chronic pain" means pain that has persisted after reasonable medical efforts have been made to relieve the pain or cure its cause and that has continued, either continuously or episodically, for longer than three continuous months. The guidelines are intended to help health care providers review and assess their approach in the prescribing of opioids. The guidelines are points of reference intended to supplement and not replace the individual prescriber's clinical judgment. The 80 mg MED is the maximum daily dose at which point the prescriber's actions are triggered; however, this 80 mg MED trigger point is not an endorsement by any regulatory body or medical professional to utilize that dose or greater.

Recent analysis by the Centers for Disease Control and Prevention (CDC) shows that "patients with mental health and substance use disorders are at increased risk for nonmedical use and overdose from prescription painkillers as well as being prescribed high doses of these drugs." Drug overdose deaths increased for the 11th consecutive year in 2010. Nearly 60% of the deaths *continued on page 12*

Health Care Facilities Surveyor (RN) The Ohio Department of Health, Division of Quality

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involved pharmaceuticals, and opioids were involved in nearly 75%. Researchers also found that drugs prescribed for mental health conditions were involved in over half. These findings appear consistent with research previously published in the Annals of *Internal Medicine* that concluded that "patients receiving higher doses of prescribed opioids are at an increased risk for overdose, which underscores the need for close supervision of these patients" (Dunn, et al., 2010).

Health care providers are not obligated to use opioids when a favorable risk-benefit balance cannot be documented. Providers should first consider non-pharmacologic and non-opioid therapies. Providers should exercise the same caution with tramadol as with opioids and must take into account the medication's potential for abuse, the possibility the patient will obtain the medication for a nontherapeutic use or distribute it to other persons, and the potential existence of an illicit market for the medication.

Providers must be vigilant to the wide range of potential adverse effects associated with long-term opioid therapy and misuse of extended-release formulations. That vigilance and detailed attention has to be present from the outset of prescribing and continue for the duration of treatment. Providers should avoid starting a patient on long-term opioid therapy when treating chronic pain. Providers should also avoid prescribing benzodiazepines with opioids as it may increase opioid toxicity, add to sleep apnea risk, and increase risk of overdose deaths and other potential adverse effects.

Providers can further minimize the potential for prescription drug abuse/ misuse and help reduce the number of unintentional overdose deaths associated with pain medications by recognizing times to "press pause" in response to certain "trigger points." This pause allows providers to reassess their compliance with accepted and prevailing standards of care. The 80 mg Morphine Equivalent Daily Dose (MED) "trigger point" is one such time.

Providers treating chronic, non-terminal pain patients who have received opioids equal to or greater than 80 mg MED for longer than three continuous months should strongly consider doing the following to optimize therapy and help ensure patient safety:

- Reestablish informed consent, including providing the patient with written information on the potential adverse effects of long-term opioid therapy.
- Review the patient's functional status and documentation, including the 4A's of chronic pain treatment

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Activities of daily living, Adverse effects, Analgesia, and Aberrant behavior.

- Review the patient's progress toward treatment objectives for the duration of treatment.
- Utilize OARRS as an additional check on patient compliance.
- Consider a patient pain treatment agreement that may include: more frequent office visits, different treatment options, drug screens, use of one pharmacy, use of one provider for the prescription of pain medications, and consequences for non-compliance with terms of the agreement.
- Reconsider having the patient evaluated by one or more other providers who specialize in the treatment of the area, system, or organ of the body perceived as the source of the pain.

The 80 MED "trigger point" is an opportunity to review the plan of treatment, the patient's response to treatment, and any modification to the plan of treatment that is necessary to achieve a favorable risk-benefit balance for the patient's care. If opioid therapy is continued, further reassessment will be guided by clinical judgment and decision-making consistent with accepted and prevailing standards of care. The "trigger point" also provides an opportunity to further assess addiction risk or mental health concerns, possibly using Screening, Brief Intervention, and Referral to Treatment (SBIRT) tools, including referral to an addiction medicine specialist when appropriate.

For providers treating acute exacerbation of chronic, non-terminal pain, clinical judgment may not trigger the need for using the full array of reassessment tools.

Providers treating patients with acute care conditions in the emergency department or urgent care center should refer to the <u>Ohio Emergency</u> and Acute Care Facility Opioids and Other Controlled Substances Prescribing Guidelines.

APPROVED:

- State Medical Board of Ohio: May 9, 2013
- Ohio Board of Nursing: May 16, 2013
- Ohio Dental Board: May 14, 2013
- Board of Pharmacy: April 9, 2013 •

SAVE THE DATES!

The Board is pleased to bring the **NCLEX Conference**, presented by the National Council of State Boards of Nursing, to Ohio on **April 23 and April 24, 2014** in Columbus at the Vern Riffe Center. The same Conference will be offered on each day so more individuals can attend.

The Board is now offering its **Nursing Education Program Administrator Workshop** twice a year to enable more program administrators and faculty an opportunity to attend. The Workshop will be held in Columbus at the Vern Riffe Center on **June 13**, **2014 and November 6, 2014**. Registration and details will be posted on the Board web site later this year.



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Joint Regulatory Statement on the Prescription of Naloxone to High-Risk Individuals

The Nursing, Medical, and Pharmacy Boards issued the Joint Regulatory Statement on the Prescription of Naloxone to High-Risk Individuals endorsing the prescription of naloxone (Narcan[™]) to those who are at high-risk for opioid drug overdose.

The purpose of the statement is to promote wider utilization of naloxone for high-risk individuals by educating prescribers on the proper use of naloxone. Naloxone is a medication primarily used to prevent or reverse the effects of opioids, including respiratory depression, sedation and hypotension. When administered during an overdose, naloxone blocks the effects of opioids on the brain to restore effective breathing.

JOINT REGULATORY STATEMENT Prescription of Naloxone to High-Risk Individuals April 2013

This statement provides information concerning the prescription of Naloxone to individuals at high-risk of an opioid overdose. This statement is only intended to provide an overview. Prior to prescribing naloxone, prescribers should seek detailed information regarding risk factors for opioid overdose, the use of naloxone, and the laws and rules regulating prescribers in Ohio, i.e., physicians, physician assistants and advanced practice registered nurses with a certificate to prescribe.

This statement should not be construed as legal or health care advice, but as information intended to increase the awareness and knowledge of authorized prescribers, pharmacists and the public about the use of naloxone to prevent or reverse the effects of opioids. Prescribers should seek legal counsel if clarification or legal advice is needed.

Background Preventing Drug Overdoses

From 1999 to 2010, Ohio's death rate due to unintentional drug overdoses

Due to the alarming increase in drug overdose deaths, state agencies, private entities, and Ohio's professional licensing boards are working toward ways to enhance professional awareness and education regarding the prescription and use of naloxone.

increased 372 percent. Due to the alarming increase in drug overdose deaths, the Governor's Cabinet Opiate Action Team, the Prescription Drug Abuse Action Group (PDAAG), Project DAWN (Deaths Avoided with Naloxone) and Ohio's professional licensing boards are working toward ways to enhance professional awareness and educate licensees regarding additional ways we can all contribute to saving lives, especially when faced with meeting the formidable challenge of treating opiate abuse and addiction. This statement is intended to raise awareness about the benefits of naloxone (NarcanTM) for individuals at high-risk of opioid overdose.

Naloxone is a medication primarily used to prevent or reverse the effects of opioids, including respiratory depression, sedation and hypotension. When administered during an overdose, naloxone blocks the effects of opioids on the brain to restore effective breathing. In the presence of physical dependence on opioids, naloxone will induce withdrawal symptoms. Emergency medical professionals have safely used naloxone with patients for over 40 years. Naloxone is not known to produce tolerance or cause physical or psychological dependence in patients. A contraindication for naloxone use is in patients who are known to be hypersensitive to the medication.

Prescribing Considerations Prescribing Naloxone

Naloxone can be legally prescribed by a physician, physician assistant, or advanced practice registered nurse who is an Ohio authorized prescriber for patients who present a high-risk for opioid overdose, after the patient is evaluated by the prescriber who determines the patient would benefit from the prescription for naloxone. When prescribed, indications for and methods of administration should be explained to patients, along with any potential risks.

Personally Furnishing Naloxone to a Patient

"Personally furnish" means the distribution of drugs by a prescriber to the prescriber's patients for use outside the prescriber's practice setting. In Ohio, only physicians are authorized to personally furnish naloxone. Physician assistants and advanced practice registered nurses are not authorized to personally furnish naloxone.

Providing Naloxone to a Third-Party

Authorized prescribers may not prescribe or personally furnish naloxone to an individual for the purpose of encouraging the individual to distribute or administer the medication to others.

Risk Factors, Education, and Naloxone Prescription Programs Risk factors for Opioid Overdose

Patients with the risk factors below may be in danger of an opicontinued on page 16

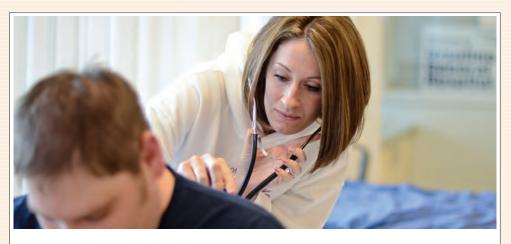
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oid overdose. These risk factors may be indicators for prescribing or personally furnishing naloxone. The factors include, but are not limited to:

- Recent medical care for opioid poisoning/intoxication/overdose
- Participant in a medical regime designed to provide Medication-Assistance Treatment for opioid addiction
- Suspected or confirmed history of heroin or nonmedical opioid use
- High-dose opioid prescription (≥80 mg/ day morphine equivalence)
- Any Methadone prescription for opioidnaive patient
- Recent release from jail or prison with a history of opioid abuse
- Recent release from mandatory abstinence program or drug detoxification program
- Enrollment in Methadone or buprenorphine detoxification or maintenance

program (for either addiction or pain management)

- Any opioid prescription and known or suspected:
 - Smoking, COPD, emphysema, asthma, sleep apnea, or other respiratory disease
 - \Box Renal or hepatic disease
 - □ Alcohol use
 - Concurrent benzodiazepine use or any concurrent sedating medication use
 - □ Concurrent antidepressant prescription
 - Remoteness from or difficulty accessing medical care
- Voluntary patient request for naloxone, or any other factor that makes the patient at high-risk for opioid overdose.

Education

Individuals receiving naloxone should be advised of the following:

- Overdose prevention techniques
- Recognizing signs and symptoms of overdose
- Calling 911
- Airway and breathing assessment/ Rescue breathing/Recovery position
- Naloxone storage, carrying, and administration in an emergency situation
- Reporting of overdose and refill procedures
- Post-overdose follow-up care

Naloxone Prescription Programs

Naloxone Prescription Programs (NPPs), which provide overdose training and take-home doses of intranasal naloxone to high-risk patients, can be effective at saving lives. According to a recent report by the Centers for Disease Control and Prevention, since 1996, 53,032 individuals have been trained by NPPs resulting in 10,171 overdose reversals using naloxone. In addition to providing naloxone for administration in cases when medical help is not immediately available, NPPs provide training in recognizing the signs and symptoms of an overdose, instruction on how to perform rescue breathing and the importance of calling 911.

Summary

Due to the alarming increase in drug overdose deaths, state agencies, private entities, and Ohio's professional licensing boards are working toward ways to enhance professional awareness and education regarding the prescription and use of naloxone. This statement is an overview intended to raise awareness about the benefits of naloxone for individuals at high-risk of opioid overdose. We encourage licensees to learn more about NPPs, such as Project DAWN, and the use of the prescription of naloxone for persons at high-risk of an opioid drug overdose. For additional information please refer to http://www.healthyohioprogram.org/vipp/ drug/ProjectDAWN.aspx. •

LaTonia Denise Wright, RN, BSN, JD Attorney at Law in OH, KY & IN Registered Nurse in Ohio Law Practice Limited to Representing, Counseling and Advising Nurses before the State Nursing Boards in Ohio, Kentucky & Indiana.

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THE VALUE OF A BSN

There is a push in healthcare organizations for staff nurses to have a BSN. Many have declared a hiring moratorium on nurses with an ASN and will only hire BSN educated nurses with the belief that the ASN is just not enough education in today's complex and technological healthcare advancement opportunities and increase in wages. Hospitals have asserted a preference in hiring for the BSN over the ASN. Hospitals who have achieved the designation of Magnet status are required to have 80% of their nursing staff with the BSN by 2020, and hospitals who are seeking this coveted

MercyCollege

they learn about the online learning management platform, student support services, and best practice for succeeding in an online environment. A recent graduate of Mercy College's



environment. There are many questions about nursing education and the public in general does not understand the many differences, after all a nurse is a nurse right? No, that is not right and there are many differences between the two levels of nursing degrees. The ASN educated nurse invests two years into education, they take the same licensure exam (NCLEX) as the BSN educated nurse who invests four years into education and apply for the same jobs, same wages as the BSN. So where is the difference and the benefit of a BSN? The difference is found in hiring preference,

"The program was tough and working and going to school was challenging, but I would do it again in a heartbeat. I loved how accessible the program was, thanks to the online courses."

designation of Magnet must have a plan in place to increase the number of BSN staff to the required 80% by 2020.

The BSN Completion Program at Mercy College is designed for individuals who have an associate degree or diploma in nursing and want to earn the BSN in a flexible online environment. Going back to school can be both stressful and exciting for anyone, even those who more recently obtained their degree. At Mercy College it is important to ensure students have a positive educational experience. With that in mind, students attend an online course called Residency for Distance Learning, where

online learning program stated, "The program was tough and working and going to school was challenging, but I would do it again in a heartbeat. I loved how accessible the program was, thanks to the online courses." The student said she felt incredibly well prepared with both the knowledge and skills required in the nursing field while also receiving a good ethical and moral base at Mercy College. If you would like further information about the Mercy College BSN Completion program please go to mercycollege.edu/ rn-bsn or contact Valerie Pauli, MSN, RN, BSN Program Chair at (419) 251-1459.

ADVISORY GROUPS AND COMMITTEES

All meetings of the advisory groups begin at 10:00 a.m. (unless otherwise noted) and are held in the Board office. If you wish to attend one of these meetings, please contact the Board office at 614-466-6940 to determine any change in the location, date or times. Advisory Group on Continuing Education — Chair: Janet Arwood TBD

Advisory Group on Dialysis — Chair: Maryam Lyon February 18, 2014; June 24, 2014; October 21, 2014

Advisory Group on Nursing Education — Chair: Lisa Klenke February 13, 2014; June 12, 2014; October 9, 2014

Committee on Prescriptive Governance — *Chair: Erin Keels* January 13, 2014; May 12, 2014; September 22, 2014

Current Members Ohio Board of Nursing City Term Expires

Judith Church, RN, <i>Pr</i> Miamisburg	<i>resident</i> 2016
J. Jane McFee, LPN, Perrysburg	<i>Vice President</i> 2013
Janet Arwood, LPN Hilliard	2013
Rhonda Barkheimer, <i>Supervising Member for Disc</i> Canton	
Nancy Fellows, RN Willoughby Hills	2016
Lisa Klenke, RN Coldwater	2015
Maryam Lyon, RN Sidney	2013
Susan Morano, RN Lorain	2014
Tracy Ruegg, RN Powell	2013
Roberta Stokes, RN Chagrin Falls	2013
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www.marshall.edu/cohp

NAME/ADDRESS CHANGES

How do I change my name with the Board?

You must submit a certified document of a name change (i.e. marriage certificate/abstract, divorce decree/dissolution, name change document) within thirty days of the change. Certified documents can be obtained from the court where the original record was filed. Photocopies or notarized copies are **not** acceptable for a name change. Submit your certified document with a "Name/ Address Change Form" or with a brief letter which includes your Ohio license/ certificate number, your previous name, your new name as you want it to appear on Board records, your current address, county and telephone number. A Name/ Address Change Form is available on the Board's website at www.nursing.ohio.

gov at the "Change Your Name/Address" link. Any name change documents must be mailed to the Board. The Board will return your certified document. There is no fee for a name change.

How do I change my address with the Board?

Address changes must be submitted in writing within thirty days of the change. Submit your address change with a "Name/Address Change Form" or with a brief letter, which includes your name, Ohio license/certificate number, address, county and telephone number. A Name/Address Change Form is available on the Board's website at *www. nursing.ohio.gov* at the "Change Your Name/Address" link. If you wish to verify that your address has been changed, call the Board at (614) 466-3947 for verbal verification. There is no fee for an address change.

Please submit to the attention of the appropriate department: Mail: Ohio Board of Nursing 17 South High Street, Suite 400 Columbus, Ohio 43215-7410 Fax: (614) 466-0388

RN or LPN -

Attention: Renewal Unit or renewal@nursing.ohio.gov Dialysis Technician – Attention: DT or dialysis@nursing.ohio.gov Community Health Worker – Attention: CHW or chw@nursing.ohio.gov Medication Aide – Attention: MA-C or medicationaides@nursing.ohio.gov

ADVANCED PRACTICE REGISTERED NURSE NATIONAL RECERTIFICATION

If you are an advanced practice registered nurse,* your certificate of authority (COA) is current and valid only if you meet all requirements of the Board, which includes maintaining certification by the applicable national certifying organization (please refer to the Board's website at *www.nursing.ohio.gov* for a list of Board approved national organizations). The Board requires primary source verification for advanced practice registered nurse national recertification. For this to occur, you must request that your national certifying organization notify the Board directly of national recertification within thirty days of your recertification. The Board will not accept documentation of recertification from a COA holder.

*An exception to this requirement applies to CNSs certified by the Board on or before December 31, 2000. •

OHIO AUTOMATED RX REPORTING SYSTEM (OARRS)

APRNs are reminded that Board Rule 4723-9-12, Ohio Administrative Code, sets forth certain situations which require review of OARRS prior to prescribing or personally furnishing a controlled substance or tramadol to a patient. For information regarding OARRS, access the following link: *https://www.ohiopmp. gov/portal/Brochure.pdf*.

REACTIVATION AND REINSTATEMENT OF A NURSING LICENSE

An inactive or lapsed license/certificate may be reactivated at anytime by completing a reactivation/reinstatement application. This includes completing the required paperwork, paying a fee (if applicable), and providing proof of continuing education contact hours. In addition, if a license has been inactive or lapsed for five years or more from the date of application for reactivation/reinstatement, the applicant must complete a civilian (BCI) and federal (FBI) criminal records check. Contact the Renewal Unit at (614) 995-5420 or renewal@nursing.ohio.gov to request a reactivation/ reinstatement application.

DIALYSIS TECHNICIANS

The law eliminated the procedure for the issuance of temporary certificates, which included a temporary certificate 1, temporary certificate 2, and temporary certificate 3. The new procedure requires the issuance of a dialysis technician intern certificate. The intern certificate can be issued if the applicant has not taken the certification examination, but has completed a training program approved by the Board. The intern certificate is valid for a period of time that is 18 months from the date an applicant completed a training program minus any time the applicant was enrolled in any training program(s). The intern certificate cannot be renewed. Other certification requirements include submission of civilian (BCI) and federal (FBI) criminal records checks. An intern certificate holder must pass an examination from a testing organization approved by the Board (BONENT or NNCO) in order to receive an Ohio Certified Dialysis Certificate.

Dialysis technicians from out-ofstate can obtain an Ohio Certified DialThe intern certificate is valid for a period of time that is 18 months from the date an applicant completed a training program minus any time the applicant was enrolled in any training program(s).

ysis Certificate if they submit evidence that they passed an examination from a testing organization approved by the Board (BONENT or NNCO), complete two contact hours of continuing education on Ohio law and rules, and submit evidence that they have performed dialysis care for at least 12 months immediately prior to the application. Other certification requirements include submission of civilian (BCI) and federal (FBI) criminal records checks.



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BOARD DISCIPLINARY ACTION

If you review the listings contained in the Board Disciplinary Action section of this publication, you may believe that many nurses are subject to discipline by the Board. The truth is actually quite different. As of June 30, 2012, there were 238,649 ¹active licenses as a registered nurse and licensed practice nurse in the State of Ohio. Yet, during State Fiscal Year (SFY) 2012 (July 1, 2011 to June 30, 2012), the Board only issued formal discipline 871 times. This means that .0036% of licensed nurses

POST-DISCIPLINARY CASES

ТҮРЕ	PERCENTAGE
CRIMINAL	47%
ALCOHOL AND DRUG	28%
PRACTICE	22%
OTHER	3%

ACTIVE LICENSES AND CERTIFICATES AS OF JUNE 30, 2012

ТҮРЕ	NUMBER
REGISTERED NURSES (RNs)	178,462
LICENSED PRACTICAL NURSES (LPNs)	60,187
TOTAL	238,649

While the Board maintains a robust system for receiving, investigating, and adjudicating complaints against nurses, a thorough review of the facts and circumstances of each complaint rarely results in a finding that a nurse's actions required formal Board discipline.

in Ohio, less than one-half of 1%, received formal discipline during the entire SFY 2012.

The types of actions that result in Board discipline of nurses have remained constant over the last several years. Of those cases that the Board monitored post-discipline² approximately 75% were related to Drugs/Alcohol or criminal offenses. In

many of the criminal cases, drugs and alcohol are either the cause of the criminal action, or a significant contributing factor in the offense. The underlying conduct may occur while working as a nurse, and if so, the Board discipline is very likely to be more severe, but discipline does result from the use of drugs and criminal convictions that occur outside of work.

Practice violations, involving a failure to meet the minimum standards for patient care set forth in the Nurse Practice Act, make up only 22% of post-disciplinary cases. To place this number in context, remember this is 22% of the small number of nurses (.0036%), who receive Board discipline during a given year. Thus, nurses in Ohio very rarely commit practice violations that are severe enough to warrant Board discipline.

While the Board maintains a robust system for receiving, investigating, and adjudicating complaints against nurses, a thorough review of the facts and circumstances of each complaint rarely results in a finding that a nurse's actions required formal Board discipline. Therefore, while this publication's list of disciplinary cases may suggest frequent Board disciplinary action, in reality these cases are very rare when considering the total number of licensed nurses in Ohio.

REFERENCES:

- ¹The 238,649 number includes RNs and LPNs, but does not include certifications such as APRNs, dialysis technicians, medication aides or community health workers.
- ²Post-discipline cases are those in which the individual is subject to terms and conditions monitored by the Board according to orders or consent agreements.

BOARD DISCIPLINARY ACTIONS

- **Permanent Revocation** = Prohibited from ever practicing nursing or dialysis care, or working as a certified community health worker or certified medication aide.
- **Indefinite Suspension** = Indefinitely prohibited from practicing for a specified minimum period of time. The Board will reinstate only if all conditions for reinstatement, set at the time the action was taken, are met.
- Automatic Suspension = Suspension for a violation of a consent agreement or Board order or suspension required by law for commission of a specified felony.
- Immediate Suspension = Suspension required by law for a felony drug abuse offense.
- Indefinite suspension with a stay = On "probation." May practice if the license status is active but will be monitored by the Board under conditions and restrictions.
- **Restrictions** = Limits such as prohibition from passing narcotics or working in certain areas of practice.
- **Reprimand** = Least amount of discipline. Acknowledgment that what the nurse, dialysis technician or community health worker did was wrong. Does not prohibit practice.
- **Voluntary surrender** = May not ever practice again. Permanent action following a formal agreement by the nurse, dialysis technician, medication aide or community health worker to give up the license or certificate.
- **Fines** = A fine of up to \$500 imposed for each violation.

Below are the Board's actions taken during the last Board meeting. The actions are an accurate representation of information maintained by Ohio Board of Nursing at the time of posting. Because the name of a licensee may be the same as another, please do not assume from the name alone that a particular individual has had disciplinary action. Employers and potential employers should also verify the license status on the Board's Web site at www.nursing.ohio.gov. If you have any questions regarding these disciplinary actions, please contact the Compliance Unit at 614-466-8500.

July 2013 Monitoring Actions

Name	License #	Type of Action Taken
Brown, Jaimie	R.N. 280013	Released from Suspension/Probation
Bryant, Janet	R.N. 213986, P.N. 065848	Released from Suspension/Probation
Burch, Craig	R.N. 216747	Released from Suspension/Probation
Curtis, Ellen	R.N. 165382	Released from Suspension/Probation
Durbin, Christina	R.N. 255669	Reinstated per Terms and Conditions of Adjudication Order
German, Timothy	R.N. 205719	Released from Suspension/Probation - Permanent Practice & Narcotic Restrictions Remain
Gorby, Barbara	R.N. 262415, NA 02097	Released from Suspension/Probation - Permanent Practice Restrictions Remain
Grandison, Lois	R.N. 171181	Approved to Seek Nursing Employment
Hunter, Robin	P.N. 078779	Approved to Accept Specific Employment
Johnson, Randy	R.N. 279535	Released from Suspension/Probation - Permanent Practice & Narcotic Restrictions Remain
Justus, Lora	R.N. 296181	Released from Suspension/Probation - Temporary Practice Restrictions Remain
Lawson, Bambi	R.N. 280517	Approved to Accept Specific Employment
Loeffler, Christina	R.N. 298049	Released from Suspension/Probation - Permanent Practice Restrictions Remain
Logan, Courtney	R.N. 328430	Released from Suspension/Probation - Permanent Practice Restrictions Remain
Mattoni, Cynthia	R.N. 270359, NP 10788, RX 10788	Released from Suspension/Probation
Michell, Leslie	R.N. 353449, P.N. 120937	Released from Suspension/Probation - Permanent & Temporary Practice Restrictions Remain
Milledge, Daron	R.N. 351227	Released from Suspension/Probation
Perry, Chad	R.N. 315589	Approved to Attend Village Chapel Community Life Group for Weekly Meeting Attendance Requirement
Quarles, Casey	P.N. 136328	Released from Suspension/Probation
Sampson, Adrianna	R.N. 346600	Released from Suspension/Probation
Spinks, Amanda	R.N. 346310	Released from Suspension/Probation
Tomaro, Mirella	P.N. 112188	Approved to Seek Nursing Employment
Tombragel, Jodi	R.N. 262522	Approved to Accept Specific Employment
Williams, Susan	R.N. 293485	Released from Temporary Narcotic Restriction
Wilms, Jennifer	R.N. 228818	Approved for Release from Employment Condition Restricting Employment to Southwest General Hospital
Wright, Liguori	P.N. 086671	Released from Suspension/Probation - Permanent Practice Restrictions Remain

July 2013 Disciplinary Actions

Name	License #	Type of Action Taken
Abat, Eric	R.N. 254296	Automatic Suspension/Action Pending
Abernathy II, Paul	P.N. 110527	Notice of Opportunity for Hearing/Action Pending
Ackerley, Miranda	P.N. 128915	Notice of Opportunity for Hearing/Action Pending
Agnew, Harriet	R.N. 392800	Reprimand w/Fine & CE
Alden, Lisa	R.N. Endorse	Voluntary Non-Permanent Withdrawal of Endorsement Application
Allen-Carter, Myra	P.N. 132456	Stayed Suspension w/temporary practice restrictions
Amaha, Delila	R.N. 394904	Stayed Suspension w/temporary practice restrictions
Barfell, Jayme	R.N. 313739, P.N. 107990	Indefinite Suspension w/permanent practice & temporary narcotic restrictions
Barlage, Cindy	R.N. 231325, NP 10234, RX 10234	Automatic Suspension/Action Pending
Barrett, Sara	R.N. 394683	Stayed Suspension w/permanent practice restrictions
Beanblossom, Rebecca	R.N. 394684	Stayed Suspension w/temporary practice restrictions
Beasley, Carla	P.N. 109255	Notice of Opportunity for Hearing/Action Pending

continued from page 23		
Name	License #	Type of Action Taken
Beckler, Amy	R.N. 145440	Indefinite Suspension w/permanent practice & temporary narcotic restrictions
Bennett, Eric	P.N. 107667	Notice of Opportunity for Hearing/Action Pending
Bissell, Misty	R.N. 275767	Stayed Suspension w/permanent practice restrictions
Blanton, Desiree	P.N. NCLEX	Indefinitely Denied NCLEX Application
Blevins, Brian	R.N. 390127	Reprimand & CE
Borba, Jennifer	R.N. 291419	Indefinite Suspension
Bowersox, Elaine	R.N. 252827	Stayed Suspension w/temporary practice restrictions
Bowman, Jessica	P.N. 117743	PERMANENTLY REVOKED
Boyer, Shannon	R.N. 233622	Notice of Opportunity for Hearing/Action Pending
Branham, Jessica Brown, Danitra	P.N. 153547 P.N. 135501	Reprimand, CE & Evaluation Notice of Opportunity for Hearing/Action Pending
Bufwack, Robin	R.N. 347207	Indefinite Suspension w/permanent practice & temporary narcotic restrictions
Bunge, Kristen	R.N. 311610	Indefinite Suspension
Burgess, Patricia	R.N. 261520	Immediate Suspension/Action Pending
Burnette, Jennifer	P.N. 125320	Stayed Suspension w/temporary practice restrictions
Burns, Ashley	P.N. 138218	Notice of Opportunity for Hearing/Action Pending
Cain, Katrina	P.N. 137330	Indefinite Suspension
Cardwell, Philip	R.N. 268808	PERMANENTLY REVOKED
Carlisle, Deborah	P.N. 106546	Notice of Opportunity for Hearing/Action Pending
Carlson, Bryan	R.N. 327277	Indefinite Suspension w/permanent practice & temporary narcotic restrictions
Carpenter, Sarah	P.N. 111523	Notice of Opportunity for Hearing/Action Pending
Carrier, Amy	R.N. NCLEX	Reprimand & CE
Cellura, Rita	P.N. 098234	Notice of Opportunity for Hearing/Action Pending
Chappelear, Amber	P.N. 111475	Notice of Opportunity for Hearing/Action Pending
Clark, Jeanette	R.N. 346226 R.N. 293435	Notice of Opportunity for Hearing/Action Pending
Congeni, Karen Cousino, Jaqulyn	P.N. 138122	Notice of Opportunity for Hearing/Action Pending Reprimand w/CE
Cox, Sandra	P.N. 088247	Reprimand w/CE
Crine, Christine	R.N. 327156	Addendum to the Consent Agreement w/Indefinite Suspension
Cross-Bazzoli, Laurie	P.N. 060298	Reprimand w/Fine & CE
Crouch, Julie	P.N. 126779	PERMANENTLY REVOKED
Cunningham, Kenyana	P.N. 134264	Stayed Suspension w/temporary and permanent practice restrictions
Dahmer, Brian	R.N. Endorse	Voluntary Permanent Withdrawal of Endorsement Application
Dalgleish, Kelly	R.N. 167754	Addendum to the Consent Agreement w/Indefinite Suspension
Daniels, Laura	R.N. 353182	Automatic Suspension/Action Pending
Davidson, Clark	R.N. 250655	Indefinite Suspension w/permanent practice & temporary narcotic restrictions
Delaney, Mary Kay	P.N. 120306	Indefinite Suspension
Dixon, Janet Doll, Regina	R.N. 153842, NS 02664, RX 02664 R.N. 275515	Reprimand w/Fine & CE Reprimand w/Fine & CE
Domzalski, Audrey	R.N. 360992	Immediate Suspension/Action Pending
Doss, Elizabeth	R.N. 208051	Reprimand w/Fine & CE
Dotson, Latrina	P.N. 123838	Indefinite Suspension with temporary practice restrictions
Doyle, Ashley	P.N. 126626	Immediate Suspension/Action Pending
Dunn, Steven	R.N. 259720	Indefinite Suspension w/permanent practice & narcotic restrictions
Durham, Tanya	P.N. 140912	Automatic Suspension/Action Pending
Dutcher, Teresa	P.N. 106977	PERMANENTLY REVOKED
Duvall, Cheryl	R.N. 270526	PERMANENTLY REVOKED
Endicott, Jamie	R.N. 322111	Indefinite Suspension w/permanent practice & narcotic restrictions
Fazio, Lisa	R.N. 322629	Notice of Opportunity for Hearing/Action Pending
Fields, Enid	P.N. 119793	Reprimand w/Fine & CE
Fitzwater, Tina Floyd, Shonda	R.N. 275577 R.N. 310635	Stayed Suspension w/temporary practice restrictions Stayed Suspension w/permanent practice & temporary narcotic restrictions
Floyd, Shonda Foote, Marvionne	R.N. 310635 R.N. 321892	Stayed Suspension w/permanent practice & temporary narcotic restrictions
Ford, Leonard	P.N. applicant	Voluntary Non-Permanent Withdrawal of NCLEX Application
Franklin, Amy	R.N. 307806	Summary Suspension/Action Pending
Frazier, Amy	P.N. 104527	Indefinite Suspension w/temporary practice restrictions
Frazier, Stephanie	P.N. 125282	Indefinite Suspension w/permanent practice & temporary narcotic restrictions
Fricke Jr., Joseph	R.N. applicant	Voluntary Non-Permanent Withdrawal of NCLEX Application
Galaviz, Jessica	R.N. 246757	PERMANENTLY REVOKED
Gandy, Thomas	R.N. 279730	Notice of Opportunity for Hearing/Action Pending
Gardner, Gail	R.N. 286838	PERMANENTLY REVOKED
Garrett, Laura Gash, Erica	R.N. 260879 R.N. 380636	Reprimand w/Fine & CE PERMANENTLY REVOKED
Gast, Gregory	R.N. 208593, NS 09399, RX 09399	Notice of Opportunity for Hearing/Action Pending
Gates, Kimberly	P.N. 132053	Stayed Suspension w/temporary practice restrictions
Gerger, Nancy	R.N. 146294	Indefinite Suspension w/permanent practice & temporary narcotic restrictions
Gibson,Danelle	P.N. 131884	Notice of Opportunity for Hearing/Action Pending
Gifford, Cheri	R.N. 296226	Indefinite Suspension w/permanent practice & temporary narcotic restrictions
Gillihan, Sara	R.N. 341928	Immediate Suspension/Action Pending
Glynn, Theresa	P.N. 093609	Reprimand w/Fine & CE
Goodrick, Kelly	P.N. 113787	Notice of Opportunity for Hearing/Action Pending
Gormely, Katherine	R.N. 303445	PERMANENTLY REVOKED
Gott, Jennifer	R.N. 380529, P.N. 120999	Reprimand w/Fine & CE
Gray, Brittany	R.N. 352574	Notice of Opportunity for Hearing/Action Pending
Greene, Angela	R.N. 394685, P.N. 110879	Addendum to the Consent Agreement
Greenfield, Melissa Griffin, Jennifer	P.N. 096718 R.N. 286323	Indefinite Suspension w/permanent practice & temporary narcotic restrictions Stayed Suspension w/temporary practice restrictions
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Name	License #	Type of Action Taken
Groover, Sharri	R.N. 273686	Reprimand w/Fine & CE
Gross, Kristen	R.N. 342504	Immediate Suspension/Action Pending
Gruver, Jennifer	R.N. 267385	Indefinite Suspension w/permanent practice & temporary narcotic restrictions
Guardi, Krista	R.N. 304647	Indefinite Suspension w/permanent practice restrictions
Guardo, Melissa	R.N. 315246	Notice of Opportunity for Hearing/Action Pending
Hailey, Adrianne	R.N. 251446	Notice of Opportunity for Hearing/Action Pending
Hampton, Alison	P.N. 153558	Stayed Suspension w/permanent practice & temporary narcotic restrictions
Hartley, Jessica	P.N. 116558	Indefinite Suspension w/temporary practice restrictions
Hartley, Kevin	R.N. 394686	Stayed Suspension w/temporary practice restrictions
Haynes, Jasmine	P.N. 146607	Indefinite Suspension w/permanent practice & temporary narcotic restrictions
Heath, Amy	R.N. 248574	Notice of Opportunity for Hearing/Action Pending
Hejny, Elizabeth	R.N. 260409	PERMANENTLY REVOKED
Hervet, Stacy	P.N. 099201	Immediate Suspension/Action Pending
Hiatt, Teresa	P.N. Endorse	Notice of Opportunity for Hearing/Action Pending
Hinkle, Sean	R.N. 354252	Indefinite Suspension w/permanent practice & narcotic restrictions
Hoagland, Brenda	R.N. 163020	Notice of Opportunity for Hearing/Action Pending
Hoffman, Jacqueline	R.N. 334186	Indefinite Suspension w/permanent practice & temporary narcotic restrictions
Holland, Angelia	P.N. 153561	Reprimand & CE
Honey, Susan	R.N. 293804, P.N. 076603	Stayed Suspension w/temporary practice restrictions
Hopkins, Kathryn	R.N. 257422	Reprimand w/Fine & CE
Horton III, Ronald	P.N. 131525	Notice of Opportunity for Hearing/Action Pending
Hudson, Kimberly	P.N. 134111	Stayed Suspension w/temporary practice restrictions
Hunt, Holly	P.N. 140635	Reprimand w/Fine & CE
lacovacci, Jami	P.N. 105332	Reprimand w/Fine & CE
Isaacson, Barbara	R.N. 306841	Immediate Suspension/Action Pending
Jannuzzi, Cynthia	P.N. 092451	Reprimand w/Fine & CE
Jarvis, Brenda	R.N. 228733	PERMANENTLY REVOKED
Jodziewicz, Ronald	R.N. 228727	Notice of Opportunity for Hearing/Action Pending
Johnson, Julia	R.N. 274919	Notice of Opportunity for Hearing/Action Pending
Jones, Paul	P.N. 096534	Notice of Opportunity for Hearing/Action Pending
Jorsch, Melissa	R.N. 368761	Reprimand w/Fine & CE
Kaneski, Jill	P.N. 062272	Notice of Opportunity for Hearing/Action Pending
Keirsey, Melinda	P.N. 122349	Immediate Suspension/Action Pending
Kerchief, Kelly	R.N. 308234	PERMANENTLY REVOKED
Ketcham, Tricia	P.N. 153560	Reprimand & CE
King, Sandra	D.T. 01938, R.N. 394687	Stayed Suspension w/permanent practice restrictions
Kinsey, Barbara	R.N. 388574, P.N. 112223	Addendum to the Consent Agreement
Kocin, Kristine	R.N. 286555	Reprimand w/Fine & CE

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Name	License #	Type of Action Taken
Kohut, Heather	P.N. 123068	Indefinite Suspension
Kotkovskaya, Larisa	R.N. 327532	Automatic Suspension/Action Pending
Kuyers, Kelly	R.N. 270771	Stayed Suspension w/temporary practice restrictions
Lamuth-Gregory,	R.N. 348944	Indefinite Suspension w/permanent practice & temporary narcotic restrictions
Marguerite	11.14. 040344	indefinite ouspension w/permanent practice a temporary national restrictions
Lavender, Larry	R.N. 376326	Indefinite Suspension w/permanent practice & narcotic restrictions
Lavender, Larry	NA 12937	Indefinite Suspension w/temporary & permanent practice & narcotic restrictions
Lebreton, Karla	R.N. 368362	Immediate Suspension/Action Pending
Lee, Kari	P.N. 111279	Notice of Opportunity for Hearing/Action Pending
	P.N. 105944	
Lee, Keith		Notice of Opportunity for Hearing/Action Pending
Letterly, Elizabeth	R.N. 338603	Notice of Opportunity for Hearing/Action Pending
Levison, Tania	P.N. 153564	Stayed Suspension w/temporary practice restrictions
Lewis, Kelly	P.N. 094312	Notice of Opportunity for Hearing/Action Pending
Linehan, Matthew	R.N. 356011	Notice of Opportunity for Hearing/Action Pending
Lively, Tiffiny	P.N. 130148	Reprimand w/ Permanent Practice Restrictions in addition to terms of September 2012 Order
Lombardo, Pamela	R.N. 339858	Indefinite Suspension w/permanent practice & temporary narcotic restrictions
Lunney, Melody	R.N. 332867	Stayed Suspension w/permanent practice & temporary narcotic restrictions
Lupo, Jennifer	R.N. 227736	Indefinite Suspension w/permanent practice & narcotic restrictions
Marshall, Angela	P.N. 153567	Stayed Suspension w/temporary practice restrictions
Martin, Holly	R.N. 386038, D.T. 01078	Automatic Suspension/Action Pending
Martin, Jennifer	R.N. 359844	Automatic Suspension/Action Pending
Marvin, Mary	R.N. 264396	Stayed Suspension w/temporary practice restrictions
-	R.N. 265502	
Masselli, Vivian		Indefinite Suspension w/permanent practice & narcotic restrictions
Matt, Alexandra	P.N. 142875	Indefinite Suspension w/permanent practice restrictions
Matthers, Lavel	P.N. 102875	Indefinite Suspension w/temporary narcotic and practice restrictions
McAvinew, Jodi	R.N. 350188	Addendum to the Consent Agreement
McCord, Holly	R.N. 367877	Stayed Suspension w/temporary practice & narcotic restrictions
McDermott, Cari	R.N. 207170	Indefinite Suspension w/ permanent narcotic and temporary practice restrictions
McGee, Bobbie	P.N. 100506	Indefinite Suspension w/permanent practice & temporary narcotic restrictions
McKillips, Dena	R.N. 254455	PERMANENTLY REVOKED
McKinney, Janella	P.N. 104585	Notice of Opportunity for Hearing/Action Pending
Mendenhall, Kari	R.N. 322321	Indefinite Suspension w/permanent practice & temporary narcotic restrictions
Mensah, Stacy	P.N. 144423, R.N. NCLEX	Notice of Opportunity for Hearing/Action Pending
Michael, Amanda	P.N. 153548	Reprimand w/Fine & CE
	R.N. 282869	
Michael, Kelly Middleton, David		Reprimand w/Fine & CE
Middleton, David	R.N. 353638	Indefinite Suspension w/permanent practice & temporary narcotic restrictions
Middleton, Diane	R.N. 272117	Addendum to the Consent Agreement
Miller, Carrie	R.N. 250301	Indefinite Suspension w/permanent practice restrictions
Miller, Heidi	R.N. 268835	Indefinite Suspension
Montell, Harry	P.N. 138127	Immediate Suspension/Action Pending
Monty, Robert	R.N. 203574	Notice of Opportunity for Hearing/Action Pending
Morales, Amanda	R.N. 269011	Addendum to the Consent Agreement
Moser, Carol	P.N. 094455	Reprimand w/Fine & CE
Nelloms-Muhammad, Irish	P.N. 152408	Reprimand w/Fine & CE
Nemec, Edythe	P.N. 111422	Notice of Opportunity for Hearing/Action Pending
Neuman, Megan	R.N. 368072	Immediate Suspension/Action Pending
Newkirk, Pamela	R.N. 221808	Stayed Suspension w/permanent practice & narcotic restrictions
		Reprimand w/Fine & CE
Noblet, Susan	R.N. 342369, P.N. 109533	
O'Husky, Patricia	R.N. 285785	Immediate Suspension/Action Pending
Oliver, Barbara	P.N. 058181	PERMANENTLY REVOKED
Ortega, Ronald	P.N. 088774	Indefinite Suspension w/temporary narcotic and practice restrictions
Ostrander, Cheri	R.N. 289851, P.N. 104197	Stayed Suspension w/temporary practice restrictions
Parente, Mary	P.N. 109425	Reprimand w/Fine & CE
Parrett, Sandy	R.N. 363203, P.N. 110310	Stayed Suspension w/temporary practice restrictions
Peoples, Lisa	R.N. 307465	Stayed Suspension w/temporary practice restrictions
Perkins, Curtis	P.N. 084057	Notice of Opportunity for Hearing/Action Pending
Perry, Katrina	P.N. 123644, R.N. NCLEX	Notice of Opportunity for Hearing/Action Pending
Petit, Sherry	R.N. 277389	Notice of Opportunity for Hearing/Action Pending
Phelps, Kimberly	R.N. 292971	Notice of Opportunity for Hearing/Action Pending
Pietraszewski, Martin	R.N. Endorse	Notice of Opportunity for Hearing/Action Pending
Pinkelton, Juanita	P.N. Endorse	Permanently Denied PN Endorsement Application
		, ,,
Porter, Myra	R.N. 218745	Notice of Opportunity for Hearing/Action Pending
Prelipp, Dorothy	P.N. 075147	Reprimand w/Fine & CE
Preston, Michael	R.N. 355078, P.N. 102426	Indefinite Suspension w/temporary practice restrictions
Rachek, Lisa	P.N. 134064	PERMANENTLY REVOKED
Randleman, Christina	P.N. 132296	Immediate Suspension/Action Pending
Reda, Ashly	P.N. NCLEX	Indefinitely Denied NCLEX Application
Reda, Ashly	TC 1 03786	Indefinite Suspension w/temporary practice restrictions
Redifer, Shannon	P.N. 101388	Reprimand w/Fine & CE
Redrick, Angela	P.N. 139115	Notice of Opportunity for Hearing/Action Pending
Reinhard, Paul	R.N. 240848	Indefinite Suspension
Rhodes, Rebecca	R.N. 365791	Notice of Opportunity for Hearing/Action Pending
Rice, Melissa	R.N. 324180	Indefinite Suspension w/permanent practice restrictions
Richmond, Christopher	R.N. 395036	Reprimand w/ Evaluation
Rigg, Megan	R.N. 363695	Stayed Suspension w/temporary practice restrictions
Dizor Channon	P.N. 153563	Reprimand, CE & Evaluation
Rizor, Shannon Roberts, Shawna	R.N. 383110, P.N. 099144	Reprimand w/Fine & CE

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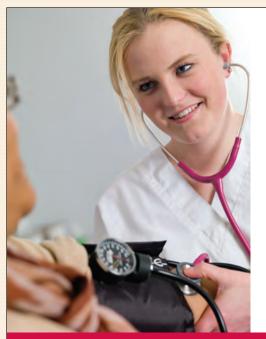
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Robinson, Bridget	P.N. 115469	Notice of Opportunity for Hearing/Action Pending
Rochford, Jeffrey	R.N. 309061	Notice of Opportunity for Hearing/Action Pending
Rogers, Jeanette	R.N. 383480	Indefinite Suspension w/temporary practice restrictions
Rogers, Lashonda	P.N. 153566	Stayed Suspension w/temporary practice restrictions
Rohrig, Jeanne	R.N. 356042	Notice of Opportunity for Hearing/Action Pending
Ruffin, Lapetha	P.N. 099459	PERMANENTLY REVOKED
Ruiz, Sarah	R.N. 349123, P.N. 117169	Notice of Opportunity for Hearing/Action Pending
Ruiz, Sarah	R.N. 349123, P.N. 117169	Immediate Suspension/Action Pending
Russelo, Richard	R.N. 199818	Reprimand w/Fine & CE
Sanford, Linda	P.N. 121105	Notice of Opportunity for Hearing/Action Pending
Sarantou, Anthony	P.N. 096243	Indefinite Suspension
Schrantz, Susan	R.N. 170742	Automatic Suspension/Action Pending
Schwaben, Kathy	R.N. 269162	PERMANENTLY REVOKED
Seek, Christine	P.N. 130997	Indefinite Suspension w/permanent practice restrictions
Selph, Dihonia	R.N. 357272, P.N. 114538	Stayed Suspension w/permanent practice restrictions
Sem, Seim	P.N. 143661	Stayed Suspension w/temporary practice restrictions
Shearer, Michael	R.N. 364062	Immediate Suspension/Action Pending
Shirey, Amanda	P.N. 153562	Stayed Suspension w/temporary practice restrictions
Shively, Lori	R.N. 234575	Notice of Opportunity for Hearing/Action Pending
Shoup, Tammy	P.N. 120881	Notice of Opportunity for Hearing/Action Pending
Shumaker, Zachariah	R.N. 378494	Notice of Opportunity for Hearing/Action Pending
Silhavy, Lisa	R.N. 280775, P.N. 096854	Immediate Suspension/Action Pending
Silvers, Sarah	R.N. 378103	Stayed Suspension w/temporary practice restrictions
Simkins, Deanna	P.N. 107929, R.N. 394688	Stayed Suspension w/temporary practice restrictions
Sindelar, Shawn	R.N. 371675	Immediate Suspension/Action Pending
Singer, Lynda	R.N. 205678, NP 06315, RX 06315	Notice of Opportunity for Hearing/Action Pending
Skaggs, Gretchen	R.N. 349012	Notice of Opportunity for Hearing/Action Pending
Skeese, Susan	R.N. 216255	Indefinite Suspension
Smiley, Michael	P.N. NCLEX	Stayed Suspension w/temporary practice restrictions
Smith, Martha	P.N. 094964	Notice of Opportunity for Hearing/Action Pending
Smith, Deborah	P.N. 153565	Reprimand w/Evaluation
Snedden, Jennifer	R.N. 357910	Reprimand w/Fine & CE
Snell, Charles	R.N. 283175	Notice of Opportunity for Hearing/Action Pending
Sorrell, Pamela	P.N. applicant	Voluntary Permanent Withdrawal of NCLEX Application
Sprague, Troy	R.N. 351953	Reprimand w/Fine & CE
Stayrook, Renae	R.N. 132498	Automatic Suspension/Action Pending

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Steck, Tracy	P.N. 129809	Automatic Suspension/Action Pending
Steele, Leslie	R.N. 369535	Immediate Suspension/Action Pending
Steigert, Andrew	R.N. 314079	Notice of Opportunity for Hearing/Action Pending
Stephenson, Kimberlee	R.N. 277061	Indefinite Suspension w/temporary practice restrictions
Stinard, Lori	R.N. 323946	Notice of Opportunity for Hearing/Action Pending
Stone, Tammy	P.N. 105737	PERMANENTLY REVOKED
Stoneburner, Reed	R.N. 240800	Indefinite Suspension w/temporary practice restrictions
Stovall, Monica	P.N. 123168	Stayed Suspension w/temporary practice restrictions
Strayer, Kristie	R.N. 280466, NS applicant	Reprimand w/Fine & CE
Struna, Kathryn	R.N. 240855	Indefinite Suspension w/permanent practice & narcotic restrictions
Taylor, Elyn	R.N. 352186	Indefinite Suspension w/permanent practice & temporary narcotic restrictions
Taylor, Misty	R.N. 335528, P.N. 107330	Reprimand w/Fine & CE
Testa, David	R.N. 254128	Stayed Suspension w/permanent practice & temporary narcotic restrictions
Thomas, Julie	R.N. 273572	Immediate Suspension/Action Pending
Thomas, Mary	R.N. 311039	Notice of Opportunity for Hearing/Action Pending
Thomason, Sandra	R.N. 375998	Immediate Suspension/Action Pending
Thompson, Destiny	P.N. 112863	Reprimand w/Fine & CE
Thornton, Donna	R.N. 239430	PERMANENTLY REVOKED
Tilley, Matthew	R.N. 376559, P.N. 097047	Stayed Suspension w/temporary practice restrictions
Todhunter, Robin	R.N. 180376	Voluntary Retirement of License
Tonus, Anthony	R.N. 304216	Notice of Opportunity for Hearing/Action Pending
Toth, Stacy	P.N. 101646	Indefinite Suspension w/temporary practice restrictions
Tramontozzi, Joseph	P.N. 122541	Temporary Suspension/Action Pending
Tuttle, Jessica	P.N. 107760	Reprimand w/Fine & CE
Tyzzer, Lauretta	R.N. 349835	Stayed Suspension w/temporary practice restrictions
Vacha, Michelle	P.N. 133436	PERMANENTLY REVOKED
Van Hook, Mark	R.N. 307927	Stayed Suspension w/temporary practice restrictions
VanGundy, Amy	R.N. 355861, P.N. 134118	Stayed Suspension w/temporary practice restrictions
Vargo, William	R.N. 289290	Automatic Suspension/Action Pending
Wagner, Tyler	R.N. 353969	Indefinite Suspension
Walker, Gale	R.N. 231742, NS 05258	Addendum to Consent Agreement w/Indefinite Suspension
Warnick, Margaret	P.N. 077535	Reprimand w/Fine & CE
Watson, Russell	R.N. 227457	Automatic Suspension/Action Pending
Weigel, Jeanette	P.N. 072817	Indefinite Suspension
Weiner, Crystal	P.N. 138727	Indefinite Suspension w/permanent practice restrictions
Welling, Jill	R.N. 371258	Indefinite Suspension w/permanent practice & temporary narcotic restrictions
Wennerstrom, Janice	R.N. 334041	Indefinite Suspension w/permanent practice & temporary narcotic restrictions
West, Geoffrey	R.N. 324004	PERMANENTLY REVOKED



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Name	License #
Wetzel, Jennifer	R.N. 348451
Whitenack, Benjamin	P.N. 128909
Williams, Linda	R.N. 296487
Wilson, Chanel	R.N. 379697, P.N. 118035
Wilson, Kennis "Kelly"	P.N. 084984
Wilson, Tywana	R.N. 184646
Wilt, Jo	R.N. 243707
Wimberly, Taquita	P.N. 118366
Windham, Tyshawna	R.N. 324343
Wise, DeWanda	P.N. 119337, R.N. NCLEX
Wismer, Frances	R.N. 316808
Workman, Penny	R.N. 247668
Wright, Julie	P.N. 115799
Wright, Frederick	P.N. 115955
Yelley, Robert	R.N. 205279
York, Anne	R.N. 250085
Young, Marilyn	P.N. 093764
Young, Raquel	P.N. 116576
Zimmerman, Beverly	R.N. 205235
Zucco, Rachel	R.N. 347008

Type of Action Taken PERMANENTLY REVOKED Automatic Suspension/Action Pending Notice of Opportunity for Hearing/Action Pending Notice of Opportunity for Hearing/Action Pending Indefinite Suspension w/temporary practice restrictions Indefinite Suspension w/permanent practice & temporary narcotic restrictions Stayed Suspension w/temporary practice restrictions Reprimand w/Fine & CE Indefinite Suspension w/temporary practice restrictions Notice of Opportunity for Hearing/Action Pending Notice of Opportunity for Hearing/Action Pending Stayed Suspension w/permanent practice & narcotic restrictions Indefinite Suspension w/temporary practice restrictions PERMANENTLY REVOKED Notice of Opportunity for Hearing/Action Pending Indefinite Suspension w/permanent practice & narcotic restrictions Reprimand w/Fine & CE Reprimand w/Fine & CE Reprimand w/Fine & CE PERMANENTLY REVOKED

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