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CHAPTER FOUR ADVANCED PRACTICE NURSE

SECTION I SCOPE OF PRACTICE

The advanced practice nurse shall practice in a manner consistent with the definition of the practice of advanced practice nursing set forth in Arkansas Code Annotated §17-87-102(4).(A)(B)(C)(D), and in accordance with the scope of practice ~~defined~~ existing by the appropriate national certifying body and the standards set forth in these rules. The Board specifically approves and incorporates into these rules the scope of practice established and existing from time to time by those national certifying bodies which the Board has approved for APNs. The advanced practice nurse (APN) may provide health care for which the APN is educationally prepared and for which competence has been attained and maintained.

SECTION II QUALIFICATIONS FOR LICENSURE

Advanced practice nurse (APN) licensure shall be designated in one of the four roles below and at least one population focus; Family/Individual Across the Lifespan, Adult-Gerontology, Neonatal, Pediatrics, Women's Health/Gender-related, or Psychiatric/Mental Health (effective 2015). A current, unencumbered registered nurse license to practice in Arkansas is required for all categories of advanced practice licensure. Effective January 1, 2003, all applicants for advanced practice licensure by examination shall have completed a graduate or post-graduate level advanced practice nursing education program. Applicants for advanced practice licensure by endorsement shall have met the educational and certification requirements set forth in *Arkansas State Board of Nursing Rules* at the time of their initial licensure as an advanced practice nurse in another jurisdiction. APN roles and their respective qualifications are:

A. ADVANCED NURSE PRACTITIONER (ANP)

1. Successful completion of ~~an organized~~ a nationally accredited graduate or post-graduate ~~program of nursing~~ APN education program that prepares nurses for the advanced practice role of advanced nurse practitioner; and
2. ~~Current certification as a nurse practitioner by a nationally recognized certifying body which meets the requirements of Section VII of this Chapter.~~ Hold current certification by a national certifying body recognized by the Board of Nursing in the APN role and population foci appropriate for educational preparation.

B. CERTIFIED REGISTERED NURSE ANESTHETIST (CRNA)

1. Successful completion, ~~beyond generic nursing preparation, of a formal educational program that meets the standards of the Council on Accreditation of Nurse Anesthesia Educational Programs or another nationally recognized accrediting body that has as its objective preparation of nurses~~ of a nationally accredited graduate or post-graduate APN education program that prepares nurses to perform as nurse anesthetists; and
2. ~~Current certification from the Council on Certification of Nurse Anesthetists, Council on Recertification of Nurse Anesthetists, or another nationally recognized certifying body which meets the requirements of Section VII of this Chapter.~~ Hold current certification by a national certifying body recognized by the Board of Nursing in the APN role and population foci appropriate for educational preparation.

C. CERTIFIED NURSE MIDWIFE (CNM)

1. Successful completion of ~~an organized~~ a nationally accredited graduate or post-graduate ~~program of nursing~~ APN education program that prepares nurses for the advanced practice role of nurse midwife; and
2. ~~Current certification as a nurse midwife from the American College of Nurse Midwives, or another nationally recognized certifying body which meets the requirements of Section VII of this Chapter.~~ Hold current certification by a national certifying body recognized by the Board of Nursing in the APN role and population foci appropriate for educational preparation; and
3. Written agreement with a consulting physician if providing intrapartum care.

D. CLINICAL NURSE SPECIALIST (CNS)

1. ~~Graduate degree evidencing successful completion of a nursing educational program;~~ Successful completion of a nationally accredited graduate or post-graduate APN education program that prepares nurses for the advanced practice role of clinical nurse specialist which shall include supervised clinical practice and classroom instruction in a nursing clinical practice specialty; and
2. ~~Current certification in a specialty role as a clinical nurse specialist from a nationally recognized certifying body which meets the requirements of Section VII of this Chapter.~~ Hold current certification by a national certifying body recognized by the Board of Nursing in the APN role and population foci appropriate for educational preparation.

SECTION III
LICENSURE

A. ELIGIBILITY

The applicant shall meet the licensure requirements of the Board.

B. APPLICATION FOR LICENSURE BY EXAMINATION

In addition to a current registered nurse license to practice in Arkansas, the information submitted to the Board shall include:

1. A completed Board application form;
2. An official transcript or document from a nursing education program accredited by a nursing accrediting body that is recognized by the U.S. Secretary of Education and/or Council for Higher Education Accreditation (CHEA), as acceptable by the Board and meets the qualifications of Section II of this Chapter in the category of advanced practice nursing for which the applicant is seeking licensure. The transcript or document shall verify the date of graduation, the degree or certificate conferred, clinical hours completed, and the role and population focus of the education program;
2. Evidence of state and federal criminal background checks conducted by the Arkansas State Police and the Federal Bureau of Investigation completed no earlier than twelve (12) months prior to the application for advanced practice licensure;
4. A statement directly from the Board approved national certifying body evidencing current certification in good standing; and
5. Payment of the nonrefundable fee.

C. APPLICATION FOR LICENSURE BY ENDORSEMENT

1. The Board may issue a license by endorsement to an APN licensed under the laws of another state if, in the opinion of the Board, the applicant meets the qualifications for licensure in this state.
2. In addition to the requirements set forth in Section II and III.A. and B. of this Chapter, the information submitted to the Board shall include documentation of current unencumbered advanced practice licensure/authority to practice in another jurisdiction.
3. An individual applying for licensure by endorsement who has been out of practice for more than two (2) years shall provide evidence of passing an APN nursing refresher course approved by the board or an extensive orientation in the appropriate advanced practice role and population focus which includes a supervised clinical component by a qualified preceptor who meets the following requirements:
 - a. Holds an active unencumbered APN or physician license.
 - b. Is in current practice in the advanced role and population focus and
 - c. Functions as a supervisor and teacher and evaluates the individual's performance in the clinical setting.

D. APPLICATION FOR AN INTERNATIONALLY EDUCATED APN (educated outside the United States)

An internationally educated applicant for licensure in this state as an APN shall:

1. Graduate from a graduate level APN program equivalent to an APN educational program in the United States accepted by the board.
2. Submit an official transcript directly from the international nursing education program and verified through a qualified credentials evaluation process for the license being sought.
3. Meet all other licensure criteria required of applicants educated in the United States, including English proficiency.

E. TEMPORARY PERMITS

1. Upon application and payment of the required fee, the Board shall issue a temporary permit to practice in an advanced practice nursing category to a qualified applicant who has no violations as listed in ACA §17-87-312 on the Arkansas State Police criminal background check and:
 - a. Meets the educational requirements set forth in Section II of this Chapter and has been accepted by the appropriate certification body to sit for the first national certification exam he or she is eligible to take; or
 - b. Has a current advanced practice license or the equivalent from another jurisdiction and has current Board approved certification in the appropriate advanced practice nursing education category.
2. The temporary permit shall immediately become invalid upon receipt of information obtained from the federal criminal background check indicating any offense listed in ACA §17-87-312 or upon notification to the applicant or ASBN of failure of the certification examination.
3. The temporary permit is not renewable and does not apply to prescriptive authority.
3. In no event shall the permit be valid in excess of six (6) months.

F. RENEWALS

1. The date for renewal of licensure to practice as an advanced practice nurse shall coincide with renewal of the applicant's registered nurse license.
2. An applicant for renewal of an advanced practice nurse license shall submit to the Board:
 - a. A completed Board renewal application form;
 - b. Documentation of current national certification in the appropriate APN specialty through an maintenance program of a Board approved certifying body;
 - c. Documentation of current compact state RN licensure if primary state of residence has enacted the Interstate Nurse Licensure Compact; and
 - d. Payment of the nonrefundable renewal fee.
3. Advanced practice nurses with prescriptive authority shall submit evidence of a current collaborative practice agreement as a prerequisite to license renewal.
4. If disciplinary proceedings have been initiated against an individual with a lapsed, inactive, or retired license, the license shall not be renewed until the proceedings have been completed.
5. Continuing education submitted to the certifying body to meet the qualifications for recertification shall be accepted as meeting the statutory requirement for continuing education.
6. Upon request, an APN shall submit documentation to the Board of continuing education.
7. Effective January 1, 2010, APNs with prescriptive authority shall complete five (5) contact hours of pharmacotherapeutics continuing education in the APN's area of certification each biennium prior to license renewal.

G. LAPSED APN LICENSE

The license is lapsed if not renewed or placed in an inactive status by the expiration date.

1. The license is lapsed if the RN license or privilege to practice in Arkansas is not ~~renewed by the expiration date~~ current.
2. The license is lapsed when the national certification upon which licensure was granted expires.
3. Failure to receive the renewal notice shall not relieve the licensee of the responsibility for renewing the license by the expiration date.
4. Any licensee whose license has lapsed shall submit to the Board:
 - a. A completed Board renewal application form;
 - b. Documentation of current national certification; and
 - c. The renewal fee and the reinstatement fee/late penalty.
5. Fees submitted to the Board are nonrefundable.
6. Any person engaged in advanced practice nursing during the time his or her license has lapsed shall be considered an illegal practitioner and shall be subject to the penalties provided for violation of the *Nurse Practice Act*.

H. REINSTATEMENT OF APN LICENSE

1. An individual who applies for licensure reinstatement who has been out of practice for more than five two (2) years shall provide evidence of passing an APN nursing refresher course approved by the

board or an extensive orientation in the appropriate advanced practice role and population focus which includes a supervised clinical component by a qualified preceptor who meets the following requirements:

- a. Holds an active unencumbered APN or physician license
 - b. Is in current practice in the advanced role and population focus
 - c. Functions as a supervisor and teacher and evaluates the individual's performance in the clinical setting
2. For those licensees applying for licensure reinstatement following disciplinary action, compliance with all board licensure requirements as well as any specified requirements set forth in the board's discipline order is required.

I. INACTIVE STATUS

1. Any licensee in good standing who desires his or her advanced practice license to be placed on inactive status may submit a request in writing to the Board.
2. The APN license shall immediately be placed on inactive status when the registered nurse license is placed on inactive or retired status.
3. The current license shall be placed on inactive status upon receipt of the written request.
4. While the license is inactive, the licensee shall not engage in advanced practice nursing nor be subject to the payment of renewal fees.
5. If the nurse desires to resume practice in this state, he or she shall request a renewal application, which shall be completed and submitted with a renewal fee and the reinstatement fee. Fees are nonrefundable.
6. All certification and continuing education requirements for renewal shall apply.

J. RETIRED ADVANCED PRACTICE NURSE

1. Any advanced practice nurse in good standing whose registered nurse license has been placed on retired status may request that their APN license be placed on retired status.
2. The APN shall submit a request in writing, ~~surrender the current license~~, and pay the required fee. ~~and T~~the current license shall be placed on inactive status and a retired APN license issued.
3. An APN retired license shall be renewed biennially following submission of a renewal application and fee.
4. Fees are non-refundable.
5. While retired, the APN shall not practice nursing, however, an advanced practice nurse with a retired license may use the title "Advanced Practice Nurse" or the abbreviation "APN."
6. When the licensee desires to resume practice, he or she shall request a renewal application, which shall be completed and submitted with a reinstatement fee and the active renewal fee. The licensee must also meet those requirements outlined in Section III.E.
7. If the retired APN license is allowed to lapse, the licensee shall not hold himself or herself out as an APN and shall pay a reinstatement fee in addition to the fee required for renewal of the retired APN license.

K. ADDITIONAL CERTIFICATIONS

1. An APN who has completed post-masters education for an additional nursing specialty shall:
 - a. Submit a request for permission to practice in the new certification area;
 - b. Submit a copy of authorization to sit for the first available certification exam from the Board approved certifying body;
 - c. Immediately cease practicing in the specialty upon notification of failure of the exam;
 - d. Submit results of the certification in the additional specialty directly from the certifying body;
 - e. Submit an official transcript or document from a nursing education program that meets the qualifications in Section II of this Chapter verifying the date and degree or certificate conferred.
2. An APN who has prescriptive authority shall:
 - a. Prescribe only for patients covered by the original specialty while waiting additional specialty results.
 - b. Submit a collaborative practice agreement which includes the additional certification.

SECTION IV
DUPLICATE LICENSE

- A. A duplicate license or certificate shall be issued when the licensee submits a notarized statement to the Board that the document is lost, stolen, or destroyed, and pays the required fee.
- B. ~~The license will be marked "duplicate".~~

SECTION V
NAME OR ADDRESS CHANGE

- A. A licensee whose name is legally changed shall be issued a replacement license following submission of the current license, along with an affidavit, copy of marriage license or court action, and the required fee.
- B. A licensee whose address changes from the address ~~appearing on the current license~~ on file with the Board shall immediately notify the Board in writing of the change.

SECTION VI
STANDARDS OF NURSING PRACTICE

A. PURPOSE

- 1. To establish standards essential for safe practice by the advanced practice nurse.
- 2. To serve as a guide for evaluation of advanced nursing practice.

B. STANDARDS FOR ALL CATEGORIES OF ADVANCED PRACTICE NURSING

- 1. The advanced practice nurse shall assess clients at an advanced level, identify health status including abnormal conditions, establish a diagnosis, develop and implement treatment plans and evaluate client outcomes.
- 2. The advanced practice nurse shall use advanced knowledge and skills in teaching and guiding clients and other health team members.
- 3. The advanced practice nurse shall use critical thinking and decision making at an advanced level, commensurate with the autonomy, authority, and responsibility of his/her practice category.
- 4. The advanced practice nurse shall have knowledge of the statutes and rules governing advanced nursing practice, and function within the legal boundaries of the appropriate advanced practice nursing category.
- 5. The advanced practice nurse shall recognize the APN 's limits of knowledge and experience, planning for situations beyond expertise, and collaborating with or referring clients to other health care providers as appropriate.
- 6. The advanced practice nurse shall retain professional accountability for advanced practice nursing care when delegating interventions.
- 7. The advanced practice nurse shall maintain current knowledge and skills in the advanced practice nursing category.
- 8. Rules which apply to registered nurses are hereby incorporated by reference.
- 9. The APN shall comply with the standards for registered nurses as specified in Chapter ~~1~~ 1. Standards for a specific role and population focus of APN supersede standards for registered nurses where conflict between the standards, if any, exists.

- C. In addition to the standards, the advanced practice nurse shall practice in accordance with the standards established by the national certifying body from which the APN holds his or her certification required for licensure. These standards shall have been reviewed and accepted by the Board.

D. ADDITIONAL STANDARDS FOR CRNAs

- 1. The CRNA, acting in the normal course of his/her professional practice, may be authorized by a hospital or institution to act as their agent or employee to order the administration of controlled substances under the DEA registration of the hospital or institution.
- 2. The CRNA may order nurses to administer drugs preoperatively and/or postoperatively in connection with an anesthetic and/or other operative or invasive procedure that will be or has been provided.
- 3. The CRNA's order shall be directly related to the administration of drugs preoperatively and/or

- postoperatively in connection with an anesthetic and/or other operative or invasive procedure that will be or has been provided.
4. A CRNA who has not been granted authority by a DEA registrant as described in Title 21 CFR 1301.22, or its successor to order the administration of controlled substances shall give all orders as verbal orders from the supervising physician, dentist, or other person lawfully entitled to order anesthesia.
 5. The CRNA shall be responsible for complying with all applicable state and federal laws and rules related to medications.

SECTION VII PROFESSIONAL CERTIFICATION PROGRAMS

- A. A national certification program which meets the following criteria shall be recognized by the Board to satisfy Section II of these rules.
- B. The national certification program:
 1. Is national in the scope of its credentialing;
 2. Is accredited by a national accreditation body as acceptable by the Board;
 3. Has no requirement for an applicant to be a member of any organization;
 4. Has an application process and credential review which includes documentation that the applicant's education is in the advanced practice nursing category being certified, and that the applicant's clinical practice is in the certification category;
 5. Education requirements are consistent with the requirements of the advanced practice role and population foci.
 6. Uses an examination as a basis for certification in the advanced practice nursing category which meets the following criteria:
 - a. The examination is based upon job analysis studies conducted using standard methodologies acceptable to the testing community;
 - b. The examination represents entry-level practice in the APN role and population focus;
 - c. The examination represents the knowledge, skills, and abilities essential for the delivery of safe and effective advanced nursing care to clients;
 - d. The examination content and its distribution are specified in a test plan (blueprint), based on the job analysis study, that is available to examinees;
 - e. Examination items are reviewed for content validity and correct scoring using an established mechanism, both before use and periodically;
 - f. Examinations are evaluated for psychometric performance;
 - h. The passing standard is established using acceptable psychometric methods, and is reevaluated **periodically at least every five (5) years**;
 - i. Examination security is maintained through established procedures; and
 - j. A re-take policy is in place.
 7. Issues certification based upon passing the examination and meeting all other certification requirements;
 8. Provides for periodic recertification which includes review of continued education, qualifications, and continued competence;
 9. Has mechanisms in place for communication to the Board for timely verification of an individual's certification status, changes in certification status, and changes in the certification program, including qualifications, test plan, and scope of practice;
 10. Has an evaluation process to provide quality assurance in its certification program.
- C. The Board will notify the appropriate certifying body when an APN has any disciplinary action taken on their license or privilege to practice.

SECTION VIII PRESCRIPTIVE AUTHORITY

A. INITIAL APPLICANT

An applicant for an initial certificate of prescriptive authority shall:

1. Be currently licensed as an advanced practice nurse in Arkansas.
2. Provide evidence from the national certifying body that differential diagnosis and prescribing practices are recognized as being within the scope of practice for the applicant's certification category.

3. Provide documentation of successful completion of pharmacology coursework which shall include pharmacokinetics principles and their clinical application and the prescription of pharmacological agents in the prevention and treatment of illness, and the restoration and maintenance of health. The coursework shall contain a minimum of:
 - a. Three (3) graduate credit hour pharmacology course offered by an accredited college or university within two years immediately prior to the date of application to the Board; or
 - b. Forty-five (45) contact hours [a contact hour is fifty (50) minutes] in a pharmacology course which includes a competency component, offered by an accredited college or university, within two (2) years immediately prior to the date of application to the Board; or
 - c. Three (3) graduate credit hours pharmacology course, included as part of an advanced practice nursing education program, within five (5) years immediately prior to the date of application to the Board.
4. Provide documentation of a minimum of three hundred (300) clock hours preceptorial experience in the prescription of drugs, medicines and therapeutic devices with a qualified preceptor, to be initiated with the pharmacology course and to be completed within one year of the beginning of the course. Preceptorial experience completed as a part of the formal educational program in which the pharmacology course is taught will meet the three hundred (300) clock hour requirement.
5. Submit a current collaborative practice agreement with a physician who is licensed under the Arkansas Medical Practices Act, §17-95-201 et seq., and who has a practice comparable in scope, specialty or expertise to that of the advanced practice nurse. APNs who will prescribe controlled substances shall seek a collaborative practice with a physician who has an unrestricted DEA registration number. The collaborative practice agreement shall include, but not be limited to:
 - a. Availability of the collaborating physician(s) for consultation or referral or both;
 - b. Methods of management of the collaborative practice, which shall include the use of protocols for prescriptive authority;
 - c. Plans for coverage of the health care needs of a client in the emergency absence of the advanced practice nurse or physician;
 - d. Provision for quality assurance; and
 - e. Signatures of the advanced practice nurse and collaborating physician(s), signifying mutual agreement to the terms of the collaborative practice.
6. Submit the nonrefundable processing fee with the application for a certificate of prescriptive authority.

B. ENDORSEMENT APPLICANT

1. An applicant for endorsement of prescriptive authority shall:
 - a. Provide documentation of a three (3) graduate credit hour pharmacology course offered by an accredited college or university or a forty-five (45) contact hour [a contact hour is fifty (50) minutes] pharmacology course which includes a competency component offered by an accredited college or university;
 - b. Provide evidence that prescriptive authority is current and unencumbered in the jurisdiction from which the applicant is moving;
 - c. Provide evidence of prescribing in a clinical setting for at least 500 hours in the year prior to application for a certificate of prescriptive authority;
 - d. Have an unencumbered advanced practice nursing license to practice or the equivalent in the jurisdiction from which the applicant is moving;
 - e. Provide a copy of current DEA registration (if prescriber has DEA number) and history of registration status; and
 - f. Meet requirements in Section VIII.A.1,2,5,6.
2. Endorsement applicants who do not meet all requirements established herein shall be required to submit documentation acceptable to the Board according to Section VIII.A.

C. PROTOCOLS FOR PRESCRIPTIVE AUTHORITY

Protocols shall be made available upon request of the Board. Such protocols shall, at a minimum, include:

1. Indications for and classifications of legend drugs, controlled substances (if prescriber holds a DEA registration number), and therapeutic devices which will be prescribed or administered by the APN;
2. Date the protocol was adopted or last reviewed, which shall be at least annually.

D. PRESCRIBING PRIVILEGES

1. The APN, applying for a certificate of prescriptive authority, shall acknowledge in the application that he or she is familiar with all state and federal laws and rules regarding prescribing, and shall agree to comply with these laws and rules.
2. An advanced practice nurse with a certificate of prescriptive authority may receive and prescribe legend drugs, medicines or therapeutic devices appropriate to the APN 's area of practice. The prescriptive authority for controlled drugs shall only extend to drugs listed in Schedules III through V.
3. Prescribing stipulations are as follows:
 - a. Legend drugs, therapeutic devices, and controlled substances (Schedules III-V), defined by the state and/or federal controlled substances lists, will be prescribed, administered, or ordered as established in protocols provided that the APN has an assigned DEA registration number which is entered on each written prescription for a controlled substance.
 - b. The APN shall file his/her DEA registration number with the Board upon receipt.
 - c. Advanced practice nurses shall not delegate to unlicensed ancillary staff the calling in of prescriptions to the pharmacy.
 - d. The APN shall notify the Board in writing ~~the next working day~~ within thirty (30) days following termination of the collaborative practice agreement. A new collaborative practice agreement is required to be on file prior to reactivating prescriptive authority.
4. The APN may prescribe a legend drug, medicine or therapeutic devices not included in the written protocols only as follows:
 - a. Upon a specific written or verbal order obtained from the collaborating physician before the prescription or order is issued by the APN; and
 - b. Include documentation of consultation as described above in the client's medical record to be signed by the APN;
 - c. Schedules I and II controlled substances shall not be prescribed under the APN 's certificate of prescriptive authority.
5. The APN shall note prescriptions on the client's medical record and include the following information:
 - a. Medication and strength;
 - b. Dose;
 - c. Amount prescribed;
 - d. Directions for use;
 - e. Number of refills; and
 - f. Initials or signature of APN.
6. Advanced practice nurses in the category of certified registered nurse anesthetists shall not be required to have prescriptive authority to provide anesthesia care, including the administration of drugs or medicines necessary for such care.
7. Advanced practice nurses who prescribe prior to obtaining a certificate of prescriptive shall be considered illegal practitioners and shall be subject to the penalties provided for violation of the *Nurse Practice Act*.

E. WRITTEN PRESCRIPTION FORMAT

1. All written prescriptions issued by the APN shall contain the name of the client, and the APN 's name, title, address, telephone number, signature with the initials " APN ", prescribing identification number issued by the Board, and should shall include information contained in Subsection D.5.a-f of this Section.
2. All prescriptions for controlled substances shall be written in accordance with federal rules. The APN 's assigned DEA registration number shall be written included on the prescription form when a controlled substance is prescribed.

F. RECEIVING PREPACKAGED DRUG SAMPLES

1. APNs who have fulfilled requirements for prescriptive authority may receive legend drug samples and therapeutic devices appropriate to their area of practice, including controlled substances contained in Schedules III through V of the Controlled Substance Act, which have been prepared, packaged, or fabricated by a pharmaceutical manufacturer in accordance with the Arkansas pharmacy laws and rules.
2. Records must comply with all applicable federal and state laws and rules.

G. TERMINATION OF PRESCRIPTIVE AUTHORITY

1. Prescriptive authority may be terminated by the Board when the prescriber:
 - a. Fails to maintain current active licensure as an advanced practice nurse;
 - b. Violates provisions of this Act and/or rules established by the Arkansas Department of Health, Nursing, or Pharmacy Boards;
 - c. Violates any state or federal law or rules applicable to prescriptions; or
 - d. Fails to follow any conditions imposed.
2. To reinstate prescriptive authority, the APN must meet requirements of the Board at the time of reinstatement.

H. LAPSED CERTIFICATE OF PRESCRIPTIVE AUTHORITY

1. The certificate of prescriptive authority is lapsed if:
 - a. The licensee's active advanced practice nurse license is not renewed by the expiration date;
 - b. The national certification upon which licensure is based expires;
 - c. There is not a current collaborative practice agreement on file with the board; or
 - d. The advanced practice license is placed in inactive or retired status.
2. After reinstating a lapsed advanced practice license, the licensee shall submit to the Board a current collaborative practice agreement to reactivate the certificate of prescriptive authority.
3. Any person engaged in prescribing during the time his or her certificate of prescriptive authority has lapsed shall be considered an illegal practitioner and shall be subject to the penalties provided for violation of the *Nurse Practice Act*.

I. INACTIVE STATUS

1. A certificate of prescriptive authority will automatically be considered lapsed and subject to the requirements of these rules when a licensee places his or her advanced practice license on inactive status.
2. While the certificate of prescriptive authority or advanced practice nurse license is inactive the licensee shall not engage in any practice within the scope of the certificate of prescriptive authority.
3. If the nurse desires to resume practice in this state, he or she shall request a renewal application which shall be completed and submitted with a renewal fee and the reinstatement fee. Fees are nonrefundable.
4. All certification requirements for renewal shall apply.
5. If disciplinary proceedings on an inactive licensee have been initiated, the license shall not be reinstated until the proceedings have been completed.
6. Effective January 1, 2010, APN s whose prescriptive authority is inactive shall complete five (5) contact hours of pharmacotherapeutics continuing education in the APN's area of certification for each 12 months of non-prescribing activity in addition to the five (5) contact hours required for APN license renewal prior to reactivation of prescriptive authority.

SECTION IX **PRESCRIBING GUIDELINES FOR ANOREXIANT DRUGS**

An Advanced Practice Nurse (APN) must maintain prescribing medication practices that are within the APN's educational preparation and certification. An APN will be in violation of the Arkansas Nurse Practice Act if he/she prescribes Schedule III and/or Schedule IV drugs under the Uniform Controlled Substance Act for short-term treatment of obesity, except in conformity with the requirements as set below.

A. PRESCRIBING GUIDELINES

1. An established APN/patient relationship shall exist. The patient shall be age 18 or older, or have written consent from a parent or guardian. The medication shall only be an adjunct to a comprehensive weight loss program focused on appropriate nutrition education, a change in lifestyle, counseling, and an individualized exercise program. The APN shall determine whether or not the patient has made a substantial good faith effort to lose weight through diet and alteration of lifestyle prior to beginning drug therapy.
2. The treating APN shall take a complete history of the patient, including a detailed family history, dietary history, and shall perform a complete physical examination. The physical examination shall include a minimum of checking the blood pressure and pulse, examining the heart and lungs, recording height and weight, and administering any other appropriate diagnostic tests to evaluate for a metabolic disorder. The

- history and examination shall be sufficient to determine if the patient has previously been drug dependent, to determine if there is a metabolic cause of the obesity which would make anorexiants drugs inappropriate, and to determine if there are other contraindications to use of anorexiants drugs exists.
3. The APN shall discuss with the patient different approaches to the treatment of obesity, and the risks and benefits associated with each approach. Risks shall include potential side effects, such as cardiovascular and pulmonary complications, as well as the potential for lack of success with weight loss. The APN shall be aware of potential drug interactions between anorexiants, and other centrally acting drugs. The treating APN shall prescribe a diet for weight loss and appropriate counseling regarding lifestyle change, and record these changes on the patient's medical record. Consideration on the use of anorexiants medications shall take into account the degree of overweight and associated medical conditions. The body mass index (BMI) shall be used as a guide to determine the degree of overweight status. In general, anorexiants medications shall only be used if the BMI is more than 27. In the case of associated obesity-related medical conditions, anorexiants medications may be considered with a BMI above 25. Obesity-related medical conditions include, but are not limited to, diabetes, hypertension, dyslipidemia, cardiovascular disease, sleep apnea, psychological conditions, disc disease, and severe arthritis of the lower extremities.
 4. The treating APN shall prescribe a daily dosage that does not exceed the dosage recommended in the manufacturer's prescribing information for the drug prescribed.
 5. The APN shall not prescribe more than a 30-day supply for a patient at each visit and regular follow-up visits shall not exceed 30 days. The patient shall be weighed at each visit prior to the prescribing of an additional supply of the drug.
 6. At the time of each return patient visit, the treating APN shall monitor progress of the patient. The patient's weight, blood pressure, pulse, heart, and lungs shall be assessed. In addition to any side effects of the medications, the APN shall perform appropriate exams and tests to monitor the safety of any weight loss. This may include a detailed dietary questionnaire, serum electrolytes, blood glucose, and other tests deemed appropriate. The APN shall discontinue the anorexiants medications when the patient reaches weight loss goals. These goals may be defined as a body weight that is no longer considered "obese" (e.g. BMI of less than or equal to 27), or an improvement in medical conditions (e.g. normalization of blood glucose). After the goal is reached, the APN may continue to prescribe anorexiants drugs for up to an additional sixty (60) days.
 7. Except as otherwise provided by this regulation, Schedule III and/or Schedule IV anorexiants drugs are only recommended for short-term use (e.g. 90 days). In addition, anorexiants drugs shall not be prescribed to a patient with a BMI of less than 27, unless prescribing for obesity-related conditions with a BMI of above 25. The treating APN may extend therapy beyond 90 days under the following conditions:
 - a. When the anorexiants drugs are indicated for treatment of diseases other than obesity; and
 - b. When, in the APN's professional judgment, the treating APN is assessing and recording significant progress or benefit from the drugs and no adverse effects occur that are related to the treatment.

SECTION IX X

PRESCRIPTIVE AUTHORITY ADVISORY COMMITTEE

A. PURPOSE

The purpose of this committee shall include functioning in an advisory capacity to assist the Board with oversight and implementation of the provisions regarding prescriptive authority.

B. COMPOSITION

The Advisory Committee shall be composed of five (5) members appointed by the Board and approved by the Governor. Three (3) members shall be advanced practice nurses holding certificates of prescriptive authority. One (1) committee member shall be a licensed physician who has been involved in a collaborative practice with a registered nurse practitioner for at least five (5) years. One member shall be a licensed pharmacist who has been in practice for at least five (5) years.

C. TERMS OF OFFICE

Members shall serve three (3) year terms and may be reappointed. The Board may remove any advisory committee member, after notice and hearing, for incapacity, incompetence, neglect of duty, or malfeasance in office.

D. COMPENSATION

Advisory committee members shall serve without compensation; but may be reimbursed to the extent special monies are appropriated therefore for actual and necessary expenses incurred in the performance of their official Board duties.

SECTION X XI
NURSING EDUCATION PROGRAMS

A. NEW APN PROGRAM LEADING TO LICENSURE

1. Prerequisite Approval

- a. An institution, seeking to establish a new APN nursing education program leading to licensure, shall submit a letter of intent to the Board.
 - (1) An applicant for an Advanced Practice Nursing (APN) program shall comply with the "Criteria and Procedures for Preparing Proposals for New Programs," established by the Arkansas Department of Higher Education.
 - (2) Appropriate professional accreditation (nursing accrediting organizations recognized by the U.S. Department of Education and/or the Council for Higher Education Accreditation) of the new APN program is considered to be deemed status as approved by the Board.
- b. The institution shall submit:
 - (1) A copy of the curricula plan and course descriptions for Board review within thirty (30) days of sending the information to the accrediting body;
 - (2) Other accreditation materials as requested by the Board; and
 - (3) Documentation of accreditation within thirty (30) days of receipt of the report from the accrediting body.

B. ESTABLISHED PROGRAM THAT PREPARES GRADUATES FOR LICENSURE

1. Continued Full Approval

- a. An established graduate program in advanced practice nursing shall submit to the Board documentation of the program's continued national nursing accreditation status within thirty (30) days of receipt from the accrediting body. Receipt of the documentation shall serve as deemed status for approval by the ASBN.

C. EDUCATION PROGRAM

- 1. The education program for advanced practice nursing shall meet the nursing accrediting body standards for advanced practice nursing.
- 2. The curriculum plan for advanced practice nursing shall include:
 - a. Preparation in one of the four identified APN roles (CRNA, CNM, CNS, and ANP); and
 - b. Preparation in at least one of the approved population foci:
 - (1) Family/Individual Across the Lifespan
 - (2) Adult-Gerontology
 - (3) Neonatal
 - (4) Pediatrics
 - (5) Women's Health/Gender-related
 - (6) Psychiatric/Mental Health; and
 - c. Three separate graduate level courses (the APN Core):
 - (1) Advanced physiology and pathophysiology
 - (2) Advanced health assessment
 - (3) Advanced pharmacology
- 3. Clinical Experiences
 - a. ~~All APN's who have a direct client care role, make diagnoses, prescribe therapeutic regimens and are accountable for these decisions~~ graduate or post-graduate programs leading to advanced practice licensure shall have a minimum of 500 supervised clinical hours in direct clinical practice during the program.

- b. APN programs preparing for two population foci shall have a minimum of 500 supervised clinical hours for each population focus.
- c. Clinical supervision must be congruent with current national professional organizations and nursing accrediting body standards applicable to the APN role and population focus.
- d. Student clinical experiences shall be congruent with the population focus of the role.

*Effective **January 1, 2013***