



Nursing Newsletter

The Official Publication of the
Kansas State Board of Nursing
www.ksbn.org

Landon State Office Building
900 SW Jackson, Ste. 1051, Topeka, KS 66612-1230

Quarterly circulation approximately 54,000 to all RNs, LPNs and Licensed Mental Health Technicians in Kansas.

Volume 26, Number 1

Office Hours: 8:00 a.m. to 4:30 p.m.

January, February, March 2013

New Free Service Launched to Licensees in Kansas



KSBN is proud to announce a free notification service implemented to licensees in Kansas. If KSBN has your e-mail address you will now receive KSBN notices by email from the “KANNAlert” program. The new service, powered by the Kansas Company INAAalert, notifies you of emergencies and the expiration of your license. “KANNAlert” notifies a licensee that their license is about to expire. Licensee receives an e-mail approximately 90, 30 and 10 days prior to their license expiration date. To receive this notice KSBN must have your e-mail address. Please make sure your email service does not label the email as spam. If you need to reply, follow the instructions of the message or contact the KSBN directly.

The first KANNAlert was implemented the last week of September and the second alert was sent the first of October. Soon after the implementation, KSBN received “Hello to the Kansas Board. Thank you for sending my renewal notice reminder. It will be taken care of before it expires, I assure the board. Thanks again.”

The KANNAlert system complements a growing list of online and automated KSBN services including license renewal, address change and application check. It is important that you keep your email address current in KSBN records. Changes can be made at www.ksbn.org by clicking “Online Address Change” on the home page.



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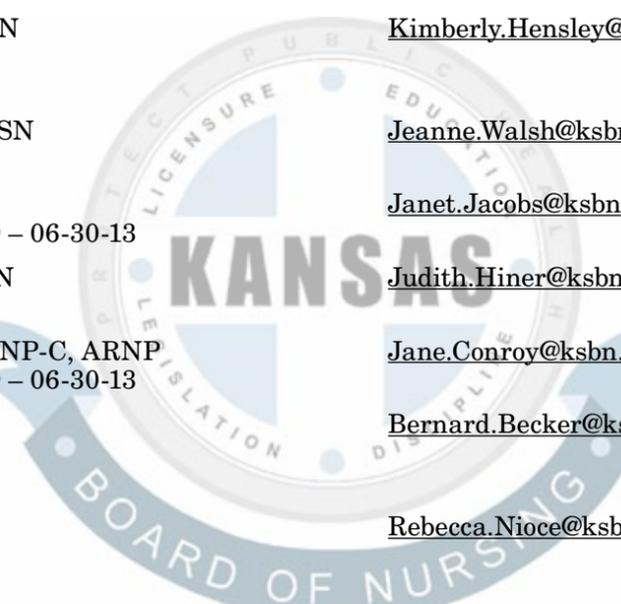
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Published by:
Arthur L. Davis
Publishing Agency, Inc.



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Tell Us How We Are Doing

The Kansas Board of Nursing (KSNB) would like your opinions on our Customer Service, Newsletter and Web Site. Your opinions are important to the KSNB and will help us to evaluate the quality of communication services provided to you on the phone, in print or over the internet. Your responses will assist us in determining ways to better improve our service to all our customers and to pinpoint areas that need improvement. You will find a link to the Customer Service Survey on our website at www.ksbn.org





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APRNS – Do You Prescribe Controlled Substances?

If the answer to the question above is yes, you do prescribe controlled substances, are you following the law?

Here are the legal requirements to prescribe controlled substances in Kansas:

1. It is required to have protocols within your collaborative agreement, to prescribe any medication, including controlled substances.
2. Each written protocol shall contain a precise and detailed medical plan of care for each classification of disease or injury for which the advanced practice registered nurse is authorized to prescribe and shall specify all drugs which may be prescribed by the advanced practice registered nurse.
3. Furthermore, to prescribe controlled substances you must:
 - a. register with the federal drug enforcement administration
 - b. notify the board of the name and address of the responsible physician or physicians

In no case shall the scope of authority of the advanced practice registered nurse exceed the normal and customary practice of the responsible physician. This statement means that you can only prescribe the same schedules and for the same purposes as your collaborating physician.

If you have not notified KSBN, then go to the website ksbn.org, click on **Forms** in the blue box, then open up the pdf titled: “Controlled Substance Verification,” follow the directions, and get it filed with the Board.

Remember, the law says:

“In order to prescribe controlled substances, the advanced practice registered nurse shall”

- a. register with the federal drug enforcement administration
- b. notify the board of the name and address of the responsible physician or physicians

The word “shall” is mandatory language. If you are prescribing controlled substances without following the mandatory legal requirements, then you are at great risk if any mistake results in litigation, and your license could be at risk.

KSA 65-1130

Want to see our website? Point your Internet browser at <http://www.ksbn.org>.

Need to fax us? KSBN fax number is 785-296-3929.

All federal mail should be addressed to:

Kansas State Board of Nursing (intended recipient)
900 SW Jackson, Suite 1051, Topeka, KS 66612-1230

New Board Member Changes in NCLEX Licensure Examination



Jeanne Catanzaro has been faculty at Washburn University School of Nursing since 2008. Born and raised in St. Louis, Missouri, Jeanne received her ADN from St. Mary's College, a BSN from St. Louis University and an MSN from the University of Missouri - Kansas City. Currently she is completing her doctorate degree in Educational Technology and E-Learning from Northcentral University. In addition to teaching at Washburn, Jeanne works as a Peer Advisor for Elsevier Health Sciences division. She has been in nursing education for 18 years and looks forward to serving the State of Kansas as a member of the Board of Nursing. Jeanne and her husband live in the country with their four Doberman Pinschers, two house cats and a farm cat.

Investigative Committee

The Investigative Committee met on Monday and Tuesday, September 10 and 11. Approximately 30 cases were reviewed and dispositions were directed. On Tuesday morning, the general session was held. There was no new business to come before the committee.

It is a requirement for licensure that all applicants pass the NCLEX licensure examination or have passed it for licensure in another state. Throughout the years the licensure examination has been administered in different formats. The first examination given in December 1913 was administered via examination essay questions on cards and the applicants wrote answers in blue books. The last paper and pencil examination was given in 1994. The licensure examination today is administered via Computerized Adaptive Testing (CAT) format. This format tests each individual's knowledge. CAT is able to target questions to the candidate's ability, which leads to more stable exam results. The goal of NCLEX (National Council Licensure Examination) is to determine the ability of the candidate in relation to the passing standard. The computer re-estimates the candidate's ability each time the candidate answers a question. The ability estimate becomes more precise with each additional question answered. Questions given to candidates are selected from a large pool of items using three criteria:

- 1) The question is limited to content areas that will produce the best match to test plan percentages. Each candidate's exam has enough questions from each content area to match the percentages from the test plan.
- 2) A question is selected that the candidate is expected to find challenging. Based on the candidate's answers up to that point and the

difficulty of those questions, the computer estimates the candidate's ability and selects a question the candidate should have a 50% chance of answering correctly. The next questions should not be too easy or too hard and the examination can get maximum information about the candidate's ability from the item.

- 3) Excludes any question a repeat candidate has seen in the last year.

The NCLEX test is offered at three sites in Kansas. The NCLEX RN and NCLEX PN test is standard across the United States. The following security measures are utilized at all NCLEX test sites:

- 1) Require valid acceptable ID and printed Authorization to Test letter
- 2) Require digital signature, palm vein scan, fingerprints and photograph

Kansas exam results are released to the Kansas State Board of Nursing. Results are typically received electronically the day of the exam. Candidate status is updated on KSBN website when results are received. If candidate is successful, licensure cards are printed and mailed. Unsuccessful candidates will receive a candidate performance report document that can assist them in preparing to retake the NCLEX.

National Council of State Boards of Nursing (NSCBN) has a short video on their website (www.ncsbn.org) that explains in detail NCLEX CAT testing.

New Employees

Tricia Waters is the new Senior Administrative Assistant in the legal department for KSBN. She is married and has two children; a 2 year old and a 5 month old. When not at work or school, she enjoys spending as much time with her children as possible. Also, Tricia enjoys running and is looking forward to the Warrior Dash in April in which she is competing for the first time. Tricia is grateful for this job opportunity, and excited to be here at KSBN!

Lauren (Cundy) Wolf, RN is the newest member of the KSBN Nurse Investigative Team. She graduated from Baker University School of Nursing and has worked in Intensive Care and Home Health. Lauren was married last month and enjoys spending time with her husband and their dog Ruby, a Golden Retriever. She also enjoys traveling, drag racing and spending time with her family and friends.

Practice Committee

The Practice Committee met on Tuesday September 11. The committee was updated on the Osawatome State Hospital (OSH) application process for a new LMHT program. The IV Therapy Checklist changes and final regulation discussion took place. The statues and regulations slated for 5 year review were reviewed and no changes suggested. One new business item was added to the agenda. Information was provided and a discussion took place regarding the licensing of massage therapists by the KSBN.

June Finance Committee

The June Finance Committee was called to order June 13, 2012 at 8:30 a.m. in room 108 of the Landon State Office Building in Topeka by Bernard Becker, Chair. There were no additions to the agenda. The minutes of the March 28, 2012 Finance Committee were approved as written.

Mary Blubaugh reported that we are \$63,000 under budget. We will be purchasing the end of year items so that amount will be reduced.

Ms. Blubaugh also reported that the number of investigative cases has been increasing over the last several years and request permission to add two new investigators into the next budget. It was the consensus of the committee to request for two additional investigators.

The meeting was adjourned at 9:00 A.M.

June 2012 Education Committee

The Education Committee met June 12, 2012 and was called to order by Mary Carol Pomatto, RN, APRN, EdD, Chair at 8:30 a.m. in Room 106 of the Landon State Office Building. The Committee reviewed the onsite packet and approved the additions and revisions to the agenda. The minutes from March 27, 2012 were approved. The Education Specialist report was given by Carol Moreland, MSN, RN.

Kansas Wesleyan University BSN Program had a site visit on February 14-16, 2012. It was moved to accept the site visit report for Kansas Wesleyan University BSN program with recommendations and to re-approve the program for eight years.

MidAmerica Nazarene University Traditional BSN and Accelerated BSN programs had a site visit on April 2-4, 2012. It was moved to accept the site visit report for MidAmerica Nazarene University Traditional BSN and Accelerated BSN programs with recommendations and to re-approve both programs for ten years.

Highland Community College PN and ADN programs had a site visit on April 10 & 11, 2012. It was moved to accept the site visit report for Highland Community College PN and ADN programs with recommendations and to re-approve both programs for five years.

Coffeyville Community College PN and ADN programs had a site visit on April 17 & 18, 2012. It was moved to approve the site visit report for Coffeyville Community College PN and ADN programs with recommendations and to re-approve both programs for five years.

The following schools presented major curriculum changes:

- Kansas Wesleyan University
- Bethel College
- Brown Mackie College – Kansas City
- Pratt Community College
- Wichita Area Technical College
- Garden City Community College
- Hutchinson Community College – PN program

ITT Technical Institute requested approval for an ADN Program in Overland Park. It was moved to approve the request from ITT Technical Institute, Breckenridge School of Nursing and Health Sciences to offer an ADN program in Overland Park with a site visit to occur before approval is given to admit students.

Wright Career College requested approval for ADN Programs in Wichita and Overland Park. It was moved to approve the request from Wright Career College to offer an ADN program in Overland Park with a site visit to occur before approval is given to admit students. It was moved to approve Wright Career College to offer an ADN program in Wichita with a site visit to occur before approval is given to admit students.

The March 2012 Report of the Council for Nursing Articulation in Kansas (C-NAK) will replace the existing C-NAK document on the KSBN website.

Sixteen petitions for permission to test/retest were reviewed and action taken.

The meeting was adjourned at 12:10 pm.

June 2012 APRN Newsletter

The following items are from the minutes of the June 2012 ARNP committee:

1. The amended APRN regulations have been approved and became effective on May 18, 2012. Important points of the amended regulations are as follows:
 - a. Prescriptions are to be signed with the initials, A.P.R.N.
 - b. On and after January 1, 2013, each individual renewing a license shall have completed the required 30 contact hours of approved continuing nursing education (CNE) related to the advanced practice registered nurse role during the most recent prior license period. Proof of completion of 30 contact hours of approved CNE in the advanced practice nurse role may be requested by the board. Contact hours accumulated in excess of the 30-hour requirement shall not be carried over to the next renewal period.
2. The committee discussed guidelines to help APRNs determine whether a CNE offering would meet the requirement for advanced practice CNE. The guidelines that were approved are:

Language/Definition of APRN CNE:

CNE for advance practice nurses is formal training that includes any of the following:

- a. Providing new knowledge and skills to assist with advanced clinical decision making;
- b. Designed to maintain or enhance knowledge, skills and/or professional attitudes of APRN practice;
- c. Support innovation and creativity in APRN practice; and/or
- d. Address new and advance standards of APRN practice.

3. It was moved to approve the following schools from out of state:
 - a. Woford – RNA
 - b. Minneapolis VA – School of Anesthesia – RNA
 - c. Albany Medical College – RNA
 - d. University of Tennessee – RNA
 - e. Hampton University – FNP
 - f. Columbia University – RNA
 - g. University of Texas Medical Branch (UTMB) Galveston – NNP

4. The APRN Task Force discussed its work on the APRN statutory language the task force is creating to be introduced in the state legislature.

5. Jane Symmonds, RN, MS NP-C, APRN, Chair of the APRN committee reported on a round table for APRNS in Chicago concerning advancement of the APRN role.

June 2012 CNE Newsletter

A. The following items are from the approved minutes of the June 2012 CNE committee:

1. The following long term CNE providerships were granted renewal for 5 years: Crossroads Hospice, Shawnee Mission Medical Center, Hutchinson Community College, Midland Care Connection, Inc., Salina Regional Health Center, Via Christi – Pittsburg, Miami County Medical Center.
2. An initial application for Long Term CNE Providership was submitted by Carrefour Associates, LLC. The committee voted to approve the providership after a few changes were submitted.
3. A number of the applications for renewal of Long Term CNE Providers were submitted electronically. The committee members commented that it is easy to read the submittals. The process was more efficient by saving a considerable amount of paper copies.
4. The staff was directed to make changes to the Individual Offering Form for CNE submittals in an attempt to get better compliance with submitting CNE and with fewer people renewing licenses with properly approved CNE. The instructions were placed first in the form, and several sections were highlighted on the form to emphasize the necessity of obtaining 30 hours of approved CNE before renewing.
5. The committee discussed drafting an amendment to the regulations to allow RNs and LPNs to also be authorized to use 30 minute CNE offerings for license renewal.
6. It was noted again for the record that all applications for renewal or new long term CNE providerships will be required to be submitted electronically after September, 2012.

BOARD MEETING SCHEDULE

2012 Board Meeting

- December 11 & 12

2013 Board Meeting

- March 26 & 27
- June 11 & 12
- September 17 & 18
- December 10 & 11

False/Inaccurate Information

The following individuals were fined for providing false/inaccurate information in the KSBN renewal licensing process a second or subsequent time and were fined \$200.00

Andralie Gust
#24-39684-032
Kansas City, MO 64133

Steve Fletcher
#13-97545-062
Wichita, KS 67212

Mitchell Ebke
#14-103057-072
Crete, NE 68333

Robert Schimelpfenig
#14-106085-082
#43-556862-082
Dodge City, KS 67801

Kathy Hudson
#13-112111-072
Wichita, KS 67214

Valereen Vanderman
#13-107221-042
Grandview, MO 64030

Molly Mansur
#13-96878-072
Hutchinson, KS 67502

We Need Your Help!

Did you realize that nursing regulation in Kansas will be 100 years old on July 1, 2013? The Kansas State Board of Nurse Examiners held its first regular meeting July 1, 1913 at the National Hotel in Topeka. Two board members were appointed to a committee to draw up rules by which the Board would be governed. Do you know when the first exam was given? Do you know when the first male was licensed as an RN in Kansas? Look for articles in future newsletters for the answers.

In preparing for the centennial celebration, we need your help. We are looking for memorable items and information of the past 100 years. We are looking for the oldest nurse in Kansas and past board members. If you have anything that you would like to share, please contact Mary Blubaugh, Executive Administrator at 785-296-5752 or email mary.blubaugh@ksbn.state.ks.us.

Mark your calendars for Monday, July 1, 2013 to join the ceremonial board meeting to celebrate the last 100 years of nursing regulation and future nursing regulation. More information will be in future newsletters and at www.ksbn.org.

Nursing License Renewal Schedule

If your license expires on:	You should receive your renewal notice by:	Your completed renewal application should be in the Board office by:
December 31, 2012	October 15, 2012	November 30, 2012
January 31, 2013	November 15, 2012	December 31, 2012
February 28, 2013	December 15, 2012	January 31, 2013
March 30, 2013	January 15, 2012	February 28, 2013
April 30, 2013	February 15, 2013	March 30, 2013
May 31, 2013	March 15, 2013	April 30, 2013
June 30, 2013	April 15, 2013	May 31, 2013
July 31, 2013	May 15, 2013	June 30, 2013
August 31, 2013	June 15, 2013	July 31, 2013
September 30, 2013	July 15, 2013	August 31, 2013
October 31, 2013	August 15, 2013	September 30, 2013
November 30, 2013	September 15, 2013	October 31, 2013
December 31, 2013	October 15, 2013	November 30, 2013

Discipline Cases

Alexandria Hittle
Newton, KS 67114
License #13-120582-062
Case #12-131-4
Suspended with stay,
conditions of practice 8/28/12

Christopher Brauner
Thayer, KS 66776
License #14-120539-101
Case #12-542-0
Suspended with stay,
conditions of practice 8/27/12

Mandy Redinger
Overland Park, KS 66204
License #13-103473-031
Case #12-165-7
Revoked 9/7/12

Cassandra Rogers
Louisburg, KS 66053
License #14-105566-082
Case #10-724-7
Revoked 9/14/12

Jennifer Drake
El Dorado, KS 67042
License #13-93501-041
Case #05-281-6
Revoke 9/10/12

Beatrice Babatunde
License Pending
Case #12-484-0
Limited 9/5/12

Jessica Burnett
Wellington, KS 67152
License #23-28434-092
Case #11-1318-4 & 11-1334-4
Revoked 9/7/12

Karen Chaffin
Hartford, KS 66854
License #13-95705-011
Case #10-386-9
Suspended with stay,
conditions of practice 8/16/12

Tracey Chedister
Lenexa, KS 66215
License #13-108960-052
Case # 12-285-7
Revoked 8/15/12

Brandy Cummins
Atchison, KS 66002
License #23-39516-101
Case #11-1195-9 & 10/192-9
Revoked 8/14/12

Sheila Robinson
Wichita, KS 67216
License #23-14290-102
Case #11-1488-5
Revoked 9/11/12

Larry Troshynski
Maryville, MO 64468
License #14-82832-061
Case #10-1057-0, 11-569-9,
11-738-0, 11-1514-0
Suspended 9/10/12

Unlicensed Practice

The following individuals were fined for unlicensed practice for practicing for six (6) calendar months or more in Kansas without a license, or had a second or subsequent unlicensed practice.

Cole Champman
#23-39843-101
Winfield, KS 67156
6 months/\$300.00

Nikita Michael
#24-35630-031
St. Paul, KS 66771
16 months/\$800.00

Deborah Mann
#14-120749-031
Blue Springs, MO 64015
12 months/\$600.00

Hannah Boldt
14-120758-112
Kansas City, MO 64116
12 months/\$600.00

Mindy Schwartz
#13-108997-022
Lenexa, KS 66215
7 months/\$350.00

Thrisyle Lolowang
#23-40961-091
Colby, KS 67701
12 months/\$600.00

Jacqueline Arnett
#13-81329-111
Winfield, KS 67156
8 months/\$400.00

Amendments to Kansas Prescription Monitoring Program Act Now in Effect

On May 4, 2012 Kansas Governor Sam Brownback signed into law SB 134 which makes several significant changes to the Kansas Prescription Monitoring Program Act. The new law became effective on May 17th, 2012, when it was published in the Kansas Register.

Among other health issues, the bill directs the Board of Pharmacy's Prescription Monitoring Program Advisory Committee to review and analyze PMP data to identify patterns and activity of concern. The committee is authorized to utilize a peer review system to identify patients that may be engaging in criminal behavior and obtaining prescriptions for illegitimate reasons, as well as those in which substance abuse treatment could be beneficial. The committee would then have the opportunity to refer specific patients to substance abuse treatment based on their findings, or in the case of criminal activity, the patient may be referred to law enforcement.

"This bill improves tools of the Kansas Board of Pharmacy and law enforcement to prevent prescription drug abuse and stop black market sales," Attorney General Derek Schmidt said in support of the legislation. "Improving monitoring and enforcement efforts are keys to reducing drug abuse and the violent crimes which often accompany it."

Along the same lines, peer review committees will also be able to determine what kind of prescribing or dispensing patterns could be indicative of prescribing or dispensing problems with providers. The providers would then be able to utilize educational tools created by the Advisory Committee to assist them in their prescribing or dispensing. In addition, egregious cases could be referred to a licensee's administrative oversight agency or law enforcement in order to protect public safety.

In addition to the peer review language, the law strengthens patient privacy by making it a felony to improperly obtain or attempt to obtain data from the Prescription Monitoring Program. Coroners and medical examiners can now access the program for purposes of determining cause of death in their patients as well.

WALL CERTIFICATES

Wall Certificates suitable for framing are available through the Kansas State Board of Nursing. Certificates are available to those NPs/CNSs/NMWs/RNAs who hold a permanent Kansas license. To obtain a certificate, please complete the following form.

Name: _____

Address: _____

City: _____

State: _____ Zip Code: _____

Certificate of Qualification (License) Number: _____

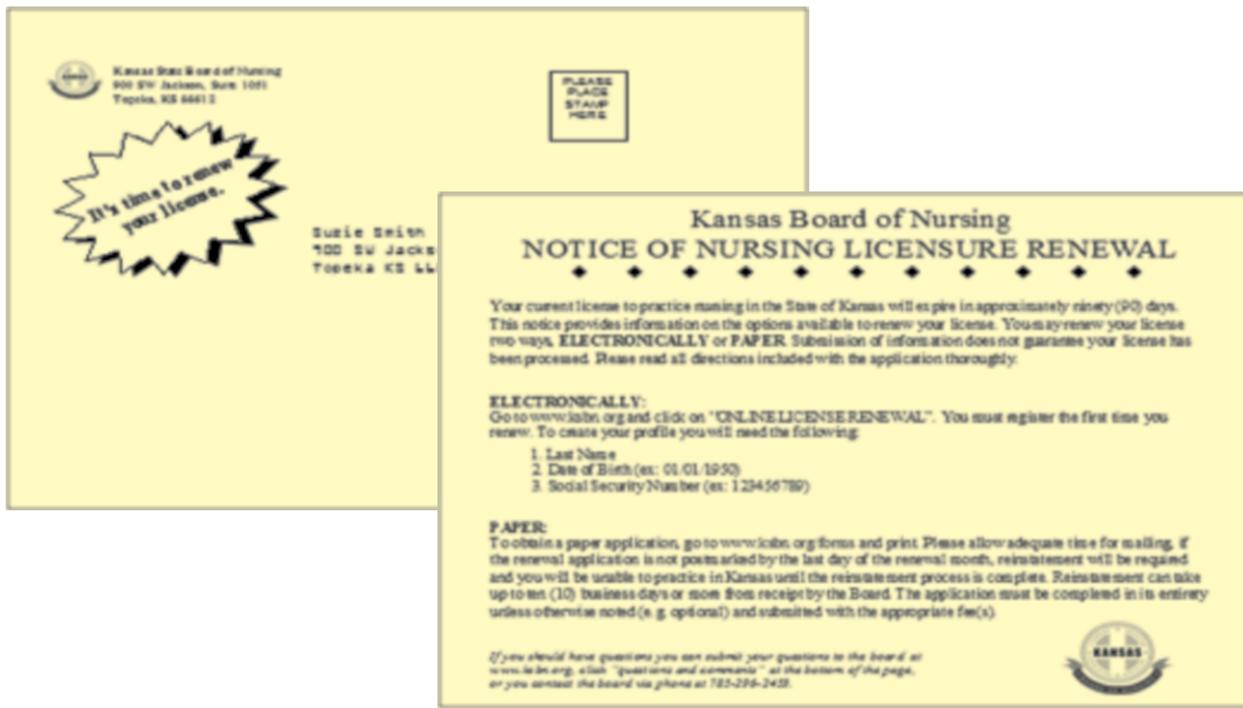
Original Date of Issue: _____

Each certificate is \$10.00.

Please submit order form to:
 Kansas State Board of Nursing
 Landon State Office Building
 900 SW Jackson, Suite 1051
 Topeka, KS 66612-1230

IMPORTANT NEWS: Licensure Renewals!!!!

The Board has changed the look of the licensure renewal reminder. The new licensure renewal reminder will be a yellow 4 X 6 postcard. These new reminders will begin arriving in the mail June 1, 2012. This postcard includes all of the necessary information to renew your nursing license(s). For questions about the new License Renewal Notification process please visit our website at www.ksbn.org or contact the KSBN Renewals Department at 785-296-2453. Below is an example of the new licensure renewal reminder, be watching for your new licensure renewal reminder in the mail.



Helping Patients Who Are Victims Of Domestic Or Sexual Violence

In January 2007, Kansas began offering the Safe at Home address confidentiality program to victims of domestic violence, sexual assault, human trafficking and stalking. This program is administered by the Secretary of State's office, and currently more than 230 victims have enrolled for this service. As health care professionals, you may be the first point of contact for a victim who could benefit from this program. You may recommend it to a patient in need, or a victim may ask you to provide documentation that he or she can use as evidence to qualify for Safe at Home.

Modeled after similar programs in other states, Safe at Home provides a substitute address for victims, as well as a free mail forwarding system for all first-class mail. Safe at Home allows qualified program participants to use this substitute address on all public records in lieu of the residential address required by many other Kansas laws. For many victims of these crimes, Safe at Home allows them to interact on a normal basis with all levels of government, rather than fearing that government records will put their lives in danger.

Potential participants must apply for certification in the Safe at Home program through enrolling agents, which are usually organizations

that offer shelter or counseling services to these victims. These enrolling agents have designated staff that help victims through the application process and help them develop safety plans. When applying for Safe at Home, applicants must provide contact information, including their actual physical address, as well as evidence that they are a victim of one of the qualifying crimes.

Once certified in Safe at Home, participants are able to use the substitute address – a post office box in Topeka – on all of their records with state and local agencies. Participants are issued a participant card that can be shown as proof of certification in the program. All first-class and certified mail received at the post office box is forwarded to the participants at no cost. Safe at Home also accepts service of process for participants.

Safe at Home is a valuable resource in protecting victims of domestic violence, sexual assault, human trafficking and stalking. Used in cooperation with a safety plan, victims may now feel safer in their homes and daily lives. To obtain more information about the program, please visit www.sos.ks.gov/safeathome or contact the program coordinator at safeathome@sos.ks.gov or at (785) 296-3806.

THE CONDUCT OF BOARD MEETINGS



1. Kansas State Board of Nursing meetings are open to the public.
2. Executive sessions and the Investigative Committee meetings are closed to the public.
3. The President will call for the Executive Session citing a specific purpose, length of time and who is included.
4. The Board meeting follows a prepared agenda.
5. Visitors and/or guests do not actively participate in the formal meeting but may be recognized by the President of the Board for additional information or questions.
6. Whenever possible, all meetings will be called to order on time and will follow the prepared agenda.
7. Members of the Board, Board committee members, and the Board staff shall be recognized by the President.
8. Only one person will speak at a time.
9. Members of the Board will speak in an orderly fashion and refrain from conversation when another member is speaking.
10. Guests/visitors will be recognized only at the discretion of the President.
11. Persons in attendance at meetings are respectfully requested to refrain from talking or making noises while the meeting is in progress.
12. Anyone disrupting the meeting will be asked to leave.
13. Meetings will be adjourned as scheduled or upon completion of business, or; continued only upon the consensus of the membership of the group.
14. The President may establish and announce additional guidelines for the meeting subject to the agreement of the other Board members.
15. The President is responsible for the conduct of the meeting and will enforce the rules of conduct.

THE CONDUCT OF COMMITTEE MEETINGS

1. Kansas State Board of Nursing Committee meetings are open to the public.
2. Executive sessions and the Investigative Committee meetings are closed to the public.
3. The Committee Chair will call for the Executive Session citing a specific purpose, length of time and who is included.
4. The Committee meeting follows a prepared agenda.
5. Visitors and/or guests do not actively participate in the formal meeting but may be recognized by the committee chair for additional information or questions.
6. Whenever possible, all meetings will be called to order on time and will follow the prepared agenda.
7. Members of the Committee, Board members, and the Board staff shall be recognized by the Committee Chair.
8. Only one person will speak at a time.
9. Members of the Committee will speak in an orderly fashion and refrain from conversation when another member is speaking.
10. Guests/visitors will be recognized only at the discretion of the Committee Chair.
11. Persons in attendance at meetings are respectfully requested to refrain from talking or making noises while the meeting is in progress.
12. Anyone disrupting the meeting will be asked to leave.
13. Meetings will be adjourned as scheduled or upon completion of business, or; continued only upon the consensus of the membership of the group.
14. The Committee Chair may establish and announce additional guidelines for the meeting subject to the agreement of the other Committee members.
15. The Committee Chair is responsible for the conduct of the meeting and will enforce the rules of conduct.



Celebrating *100 Years of Nursing Regulation* 1913 - 2013

Please join the Kansas State Board of Nursing while we Celebrate 100 Years of Nursing Regulation!
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Lapel Pins

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Gold Tone

Pin orders may be placed at the Board Office or at www.ksbn.org

KANSAS STATE BOARD OF NURSING
900 SW JACKSON, SUITE 1051
TOPEKA, KS 66612



What is KNAP?

KNAP is a professional assistance program designed to assist all nurses and mental health technicians who have a problem or illness that has or could impair their ability to practice safely.

The Goal of KNAP

Mental and physical illness, including alcohol and other drug addiction, can potentially impair practice and health. We estimate that at any given time, approximately 10% of the population is affected. This same percentage is thought to be true of healthcare professionals.

Alcohol and other drug addiction, as well as mental and physical illnesses, are treatable. KNAP works with the program participants to obtain an evaluation, treatment (if indicated), and monitoring throughout the recovery process.

Referrals

Self-referrals to the program are encouraged, but referrals may be made by a family member, a friend, employer or anyone concerned about the nurse/LMHT.

Anonymous referrals are not accepted. A person may call for information or advice without giving their name, however. Referrals may be made by calling 913-236-7575.

KNAP Providers

- Confidential services to Kansas RNs, LPNs, and LMHTs experiencing problems and illnesses which could lead to impaired practice.
- Interventions, assessments, referrals for evaluation and treatment (if indicated.)
- On-going monitoring through random urine drug screens, contact with employers and monthly groups.

Causes for Concern

Job Function

- Narcotics discrepancies, e.g.: incorrect counts, alteration of narcotic containers, increased patient

reports of ineffective pain control, discrepancies on records or frequent corrections of records, unusual amounts of narcotics wasted, significant variations in the quantity of narcotics ordered for technician's unit or shift.

- Fluctuations in the quality of work performance.
- Irresponsible behavior from someone previously conscientious and responsible.
- Requests to work shifts that are the least supervised.
- Inordinate interest in patients' pain control medications.

Behavior

- Increasing isolation from colleagues, friends and family and avoiding social activities.
- Complaints from others about work performance or alcohol or drug use.
- Mood swings, irritability or depression, or suicide threats or attempts, perhaps caused by accidental overdose.

Physical Symptoms

- Obvious intoxication such as swaying, staggering or slurred speech.
- Odor of alcohol on breath or the excessive use of breath-fresheners or perfume to disguise the odor of alcohol.

KNAP is supported by funds from the Board of Nursing and, in small part, by fees charged to the participants.

For further information

The Kansas Nurses Assistance Program
 Cloverleaf Complex Bldg #3
 6405 Metcalf, Suite 502
 Overland Park, Ks 66202
 (913)236-7575

john@hapn.org—John Childers, LMSW—
 Executive Director

regena@hapn.org—Regena M. Walters, RN—
 Program Manager

admassist@hapn.org—Selina Snook—Program Assistant

betty@hapn.org—Betty Childers—Office Manager

ADDRESS CHANGE

You can use your user ID and password to change your address on-line OR send us the change of address in writing. Please submit within 30 days of address change. You may mail your address change to Kansas State Board of Nursing; 900 SW Jackson St, Ste 1051; Topeka, KS 66612-1230. The Address Change form is available at www.ksbn.org/forms.

If you do not have access to a computer please include the following information in your written request:

First and Last Name
 (please print complete names)

Kansas Nursing License Number(s)

Social Security Number

Old Address and New Address
 (complete Street Address with Apt #, City, State, and Zip)

Home phone number and Work Phone number

Date the New Address is in Effect

Sign and date your request

We are unable to accept your request to change your address from information delivered over the phone or via an email. All requests must be received in writing and include a signature.

Advance Practice Registered Nurse Regulation Changes Effective May 18, 2012

60-11-101. Definition of expanded role; limitations; restrictions.

- (a) Each "advanced practice registered nurse" (APRN), as defined by K.S.A. 65-1113 and amendments thereto, shall function in an expanded role to provide primary, secondary, and tertiary health care in the APRN's role of advanced practice. Each APRN shall be authorized to make independent decisions about advanced practice nursing needs of families, patients, and clients and medical decisions based on the authorization for collaborative practice with one or more physicians. This regulation shall not be deemed to require the immediate and physical presence of the physician when care is given by an APRN. Each APRN shall be directly accountable and responsible to the consumer.
- (b) "Authorization for collaborative practice" shall mean that an APRN is authorized to develop and manage the medical plan of care for patients or clients based upon an agreement developed jointly and signed by the APRN and one or more physicians. Each APRN and physician shall jointly review the authorization for collaborative practice annually. Each authorization for collaborative practice shall include a cover page containing the names and telephone numbers of the APRN and the physician, their signatures, and the date of review by the APRN and the physician. Each authorization for collaborative practice shall be maintained in either hard copy or electronic format at the APRN's principal place of practice.
- (c) "Physician" shall mean a person licensed to practice medicine and surgery by the state board of healing arts.
- (d) "Prescription" shall have the meaning specified in K.S.A. 65-1626, and amendments thereto.
- (e) "Prescription order" shall have the meaning specified in K.S.A. 65-1626, and amendments thereto.

History: (Authorized by and implementing K.S.A. 65-1113, as amended by L. 2011, ch. 114, sec. 39, and K.S.A. 65-1130, as amended by L. 2011, ch. 114, sec. 44; effective May 1, 1984; amended March 31, 2000; amended Sept. 4, 2009; amended P-_____.)

60-11-102. Roles of advanced practice registered nurses.

The four roles of advanced practice registered nurses licensed by the board of nursing shall be the following:

- (a) Clinical nurse specialist;
- (b) nurse anesthetist;
- (c) nurse-midwife; and
- (d) nurse practitioner.

History: (Authorized by and implementing K.S.A. 65-1113, as amended by L. 2011, ch. 114, sec. 39, and K.S.A. 65-1130, as amended by L. 2011, ch. 114, sec. 44; effective May 1, 1984; amended Sept. 4, 2009; amended P-_____.)

60-11-103. Educational requirements for advanced practice registered nurses.

- (a) To be issued a license as an advanced practice registered nurse in any of the roles of advanced practice, as identified in K.A.R. 60-11-102, each applicant shall meet at least one of the following criteria:
 - (1) Complete a formal, post-basic nursing education program located or offered in Kansas that has been approved by the board and prepares the nurse to function in the advanced role for which application is made;
 - (2) complete a formal, post-basic nursing education program that is not located or offered in Kansas but is determined by the board to meet the standards for program approval established by K.A.R. 60-17-101 through 60-17-108;
 - (3) have completed a formal, post-basic nursing education program that could be no longer in existence but is determined by the board to meet standards at least as stringent as those required for program approval by the board at the time of graduation;
 - (4) hold a current license to practice as an advanced practice registered nurse in the role for which application is made and that meets the following criteria:
 - (A) Was issued by a nursing licensing authority of another jurisdiction; and
 - (B) required completion of a program meeting standards equal to or greater than those established by K.A.R. 60-17-101 through 60-17-108; or
 - (5) complete a formal educational program of post-basic study and clinical experience that can be demonstrated by the applicant to have sufficiently prepared the applicant for practice in the role of advanced practice for which application is made. The applicant shall show that the curriculum of the program is consistent with public health and safety policy and that it prepared individuals to perform acts generally recognized by the nursing profession as capable of being performed by persons with post-basic education in nursing.
- (b) Each applicant for a license as an advanced practice registered nurse in a role other than anesthesia or midwifery shall meet one of the following requirements:
 - (1) Have met one of the requirements of subsection (a) before July 1, 1994;
 - (2) if none of the requirements in subsection (a) have been met before July 1, 1994, meet one of the requirements of subsection (a) and hold a baccalaureate or higher degree in nursing; or
 - (3) if none of the requirements in subsection (a) have been met before July 1, 2002, meet one of the

requirements of subsection (a) and hold a master's or higher degree in a clinical area of nursing.

- (c) Each applicant for a license as an advanced practice registered nurse in the role of anesthesia shall meet one of the following requirements:
 - (1) Have met one of the requirements of subsection (a) before July 1, 2002; or
 - (2) if none of the requirements in subsection (a) have been met before July 1, 2002, meet one of the requirements of subsection (a) and hold a master's degree or a higher degree in nurse anesthesia or a related field.
- (d) Each applicant for a license as an advanced practice registered nurse in the role of midwifery shall meet one of the following requirements:
 - (1) Have met one of the requirements of subsection (a) before July 1, 2000;
 - (2) if none of the requirements in subsection (a) have been met before July 1, 2000, meet one of the requirements of subsection (a) and hold a baccalaureate degree in nursing; or
 - (3) if none of the requirements in subsection (a) have been met before January 1, 2010, meet one of the requirements of subsection (a) and hold a master's degree or a higher degree in nursing, midwifery, or a related field.
- (e) A license may be granted if an individual has been certified by a national nursing organization whose certification standards have been approved by the board as equal to or greater than the corresponding standards established by the board for obtaining a license to practice as an advanced practice registered nurse. National nursing organizations with certification standards that meet this standard shall be identified by the board, and a current list of national nursing organizations with certification standards approved by the board shall be maintained by the board. Any licensee may request that a certification program be considered by the board for approval and, if approved, included by the board on its list of national nursing organizations with approved certification standards.
- (f) Each applicant who completes an advanced practice registered nurse program after January 1, 1997 shall have completed three college hours in advanced pharmacology or the equivalent.
- (g) Each applicant who completes an advanced practice registered nurse program after January 1, 2001 in a role other than anesthesia or midwifery shall have completed three college hours in advanced pathophysiology or its equivalent and three college hours in advanced health assessment or its equivalent.
- (h) Each applicant who completes an advanced practice registered nurse program after July 1, 2009 shall have completed three college hours in advanced pathophysiology or its equivalent and three college hours in advanced health assessment or its equivalent.
- (i) Notwithstanding the provisions of subsections (a) through (h), each applicant for a license as an advanced practice registered nurse who has not gained 1,000 hours of advanced nursing practice during the five years preceding the date of application shall be required to successfully complete a refresher course as defined by the board.

History: (Authorized by and implementing K.S.A. 65-1130, as amended by L. 2012, ch. 114, sec. 44; effective May 1, 1984; amended, T-85-16, June 5, 1984; amended May 1, 1985; amended, T-60-11-14-90, Nov. 14, 1990; amended, T-60-3-14-91, March 14, 1991; amended Sept. 2, 1991; amended March 9, 1992; amended Sept. 14, 1992; amended April 26, 1993; amended Sept. 6, 1994; amended Jan. 3, 1997; amended March 31, 2000; amended Sept. 4, 2009; amended P-_____.)

60-11-104. Functions of the advanced practice registered nurse in the role of nurse practitioner.

Each advanced practice registered nurse in the role of nurse practitioner shall function in an advanced role at a specialized level, through the application of advanced knowledge and skills and shall be authorized to perform the following:

- (a) Provide health promotion and maintenance, disease prevention, and independent nursing diagnosis, as defined in K.S.A. 65-1113(b) and amendments thereto, and treatment, as defined in K.S.A. 65-1113(c) and amendments thereto, of acute and chronic diseases;
- (b) develop and manage the medical plan of care for patients or clients, based on the authorization for collaborative practice;
- (c) provide health care services for which the nurse practitioner is educationally prepared and for which competency has been established and maintained. Educational preparation may include academic coursework, workshops, institutes, and seminars if theory or clinical experience, or both, are included;
- (d) provide health care for individuals by managing health problems encountered by patients and clients; and
- (e) provide innovation in evidence-based nursing practice based upon advanced clinical expertise, decision making, and leadership skills and serve as a consultant, researcher, and patient advocate for individuals, families, groups, and communities to achieve quality, cost-effective patient outcomes and solutions.

History: (Authorized by and implementing K.S.A. 65-1113, as amended by L. 2011, ch. 114, sec. 39, and K.S.A. 65-1130, as amended by L. 2011, ch. 114, sec. 44; effective May 1, 1984; amended, T-85-16, June 5, 1984; amended May 1, 1985; amended Sept. 4, 2009; amended P-_____.)

60-11-104a. Protocol requirements; prescription orders.

- (a) Each written protocol that an advanced practice registered nurse is to follow when prescribing, administering, or supplying a prescription-only drug shall meet the following requirements:
 - (1) Specify for each classification of disease or injury the corresponding class of drugs that the advanced practice registered nurse is permitted to prescribe;
 - (2) be maintained in either a loose-leaf notebook or a book of published protocols. The notebook or book of published protocols shall include a cover page containing the following data:
 - (A) The names, telephone numbers, and signatures of the advanced practice registered nurse and a responsible physician who has authorized the protocol; and
 - (B) the date on which the protocol was adopted or last reviewed; and
 - (3) be kept at the advanced practice registered nurse's principal place of practice.
- (b) Each advanced practice registered nurse shall ensure that each protocol is reviewed by the advanced practice registered nurse and physician at least annually.
- (c) Each prescription order in written form shall meet the following requirements:
 - (1) Include the name, address, and telephone number of the practice location of the advanced practice registered nurse;
 - (2) include the name, address, and telephone number of the responsible physician;
 - (3) be signed by the advanced practice registered nurse with the letters A.P.R.N.;
 - (4) be from a class of drugs prescribed pursuant to protocol; and
 - (5) contain the D.E.A. registration number issued to the advanced practice registered nurse when a controlled substance, as defined in K.S.A. 65-4101(e) and amendments thereto, is prescribed.
- (d) Nothing in this regulation shall be construed to prohibit any registered nurse or licensed practical nurse or advanced practice registered nurse from conveying a prescription order orally or administering a drug if acting under the lawful direction of a person licensed to practice either medicine and surgery or dentistry or licensed as an advanced practice registered nurse.
- (e) When used in this regulation, terms shall be construed to have the meanings specified in K.S.A. 65-1626, and amendments thereto.

History: (Authorized by and implementing K.S.A. 65-1130, as amended by L. 2011, ch. 114, sec. 44; effective, T-60-9-12-88, Sept. 12, 1988; effective Feb. 13, 1989; amended May 7, 1990; amended Jan. 3, 1995; amended March 31, 2000; amended P-_____.)

60-11-105. Functions of the advanced practice registered nurse in the role of nurse-midwife.

Each advanced practice registered nurse in the role of nurse-midwife shall function in an advanced role through the application of advanced skills and knowledge of women's health care through the life span and shall be authorized to perform the following:

- (a) Provide independent nursing diagnosis, as defined in K.S.A. 65-1113(b) and amendments thereto, and treatment, as defined in K.S.A. 65-1113(c) and amendments thereto;
- (b) develop and manage the medical plan of care for patients or clients, based on the authorization for collaborative practice;
- (c) provide health care services for which the nurse-midwife is educationally prepared and for which competency has been established and maintained. Educational preparation may include academic coursework, workshops, institutes, and seminars if theory or clinical experience, or both, are included;
- (d) in a manner consistent with subsection (c), provide health care for women, focusing on gynecological needs, pregnancy, childbirth, the postpartum period, care of the newborn, and family planning, including indicated partner evaluation, treatment, and referral for infertility and sexually transmitted diseases; and
- (e) provide innovation in evidence-based nursing practice based upon advanced clinical expertise, decision making, and leadership skills and serve as a consultant, researcher, and patient advocate for individuals, families, groups, and communities to achieve quality, cost-effective patient outcomes and solutions.

History: (Authorized by and implementing K.S.A. 65-1113, as amended by L. 2011, ch. 114, sec. 39, and K.S.A. 65-1130, as amended by L. 2011, ch. 114, sec. 44; effective May 1, 1984; amended, T-85-16, June 5, 1984; amended May 1, 1985; amended Sept. 4, 2009; amended P-_____.)

60-11-106. Functions of the advanced practice registered nurse; nurse anesthetist.

The functions that may be performed by any advanced practice registered nurse functioning in the advanced role of registered nurse anesthetist shall be those functions defined in K.S.A. 65-1158, and amendments thereto.

History: (Authorized by and implementing K.S.A. 65-1113, as amended by L. 2011, ch. 114, sec. 39, and K.S.A. 65-1130, as amended by L. 2011, ch. 114, sec. 44; effective May 1, 1984; amended, T-85-16, June 5, 1984; amended May 1, 1985; amended March 31, 2000; amended P-_____.)

60-11-107. Functions of the advanced practice registered nurse in the role of clinical nurse specialist.

Each

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advanced practice registered nurse in the role of clinical nurse specialist shall function in an advanced role to provide evidence-based nursing practice within a specialty area focused on specific patients or clients, populations, settings, and types of care. Each clinical nurse specialist shall be authorized to perform the following:

- (a) Provide independent nursing diagnosis, as defined in K.S.A. 65-1113(b) and amendments thereto, and treatment, as defined in K.S.A. 65-1113(c) and amendments thereto;
- (b) develop and manage the medical plan of care for patients or clients, based on the authorization for collaborative practice;
- (c) provide health care services for which the clinical nurse specialist is educationally prepared and for which competency has been established and maintained. Educational preparation may include academic coursework, workshops, institutes, and seminars if theory or clinical experience, or both, are included;
- (d) provide care for specific patients or clients or specific populations, or both, utilizing a broad base of advanced scientific knowledge, nursing theory, and skills in assessing, planning, implementing, and evaluating health and nursing care; and
- (e) provide innovation in evidence-based nursing practice based upon advanced clinical expertise, decision making, and leadership skills and serve as a consultant, researcher, and patient advocate for individuals, families, groups, and communities to achieve quality, cost-effective patient outcomes and solutions.

History: (Authorized by and implementing K.S.A. 65-1113, as amended by L. 2011, ch. 114, sec. 39, and K.S.A. 65-1130, as amended by L. 2011, ch. 114, sec. 44; effective May 1, 1984; amended, T-85-16, June 5, 1984; amended May 1, 1985; amended Sept. 4, 2009; amended P- _____.)

60-11-113. License renewal.

- (a) Advanced practice registered nurse licenses shall be renewed on the same biennial cycle as the cycle for the registered professional nurse licensure renewal, as specified in K.A.R. 60-3-108.
- (b) On and after January 1, 2013, each individual renewing a license shall have completed the required 30 contact hours of approved continuing nursing education (CNE) related to the advanced practice registered nurse role during the most recent prior license period. Proof of completion of 30 contact hours of approved CNE in the advanced practice nurse role may be requested by the board. Contact hours accumulated in excess of the 30-hour requirement shall not be carried over to the next renewal period.
- (c) The number of contact hours assigned to any offering that includes a recognized standard curriculum shall be determined by the board.
- (d) Any individual attending any offering not previously approved by the board may submit an application for an individual offering approval (IOA). Credit may be given for offerings that the licensee demonstrates as having a relationship to the practice of the advanced practice registered nursing role. Each separate offering shall be approved before the individual submits the license renewal application.
- (e) Approval shall not be granted for identical offerings completed within the same license renewal period.
- (f) Any individual renewing a license may accumulate 15 contact hours of the required CNE from instructor credit. Each presenter shall receive instructor credit only once for the preparation and presentation of each course. The provider shall issue a certificate listing the number of contact hours earned and clearly identifying the hours as instructor credit.
- (g) Fractions of contact hours may be accepted for offerings over 30 minutes.
- (h) All CNE accumulated for APRN license renewal shall also be applicable to the renewal of the registered professional nurse license.

History: (Authorized by K.S.A. 2011 Supp. 65-1117 and K.S.A. 65-1129; implementing K.S.A. 2011 Supp. 65-1117 and K.S.A. 2011 Supp. 65-1132; effective Sept. 2, 1991; amended May 9, 1994; amended July 29, 2005; amended P- _____.)

60-11-116. Reinstatement of license.

- (a) Any nurse anesthetist whose Kansas APRN license has lapsed and who desires to obtain a reinstatement of APRN licensure shall meet the same requirements as those in K.A.R. 60-13-110.
- (b) Any nurse practitioner, clinical nurse specialist, or nurse-midwife whose Kansas APRN license has lapsed may, within five years of its expiration date, reinstate the license by submitting proof that the applicant has met either of the following requirements:
 - (1) Obtained 30 hours of continuing nursing education related to the advanced practice registered nurse role within the preceding two-year period; or
 - (2) been licensed in another jurisdiction and, while licensed in that jurisdiction, has accumulated 1,000 hours of advanced practice registered nurse practice within the preceding five-year period.
- (c) Any nurse practitioner, clinical nurse specialist, or nurse-midwife whose Kansas APRN license has lapsed for more than five years beyond its expiration date may reinstate the license by submitting evidence of having attained either of the following:
 - (1) A total of 1,000 hours of advanced practice registered nurse practice in another jurisdiction within the preceding five-year period and 30 hours of continuing nursing education related to the advanced practice registered nurse role; or
 - (2) completion of a refresher course approved by the board.

History: (Authorized by KS.A. 2011 Supp. 65-1117, as amended by L. 2011, ch. 114, sec. 79, and K.S.A. 65-1129; implementing K.S.A. 2010 Supp. 65-1117, as amended by

L. 2011, ch. 114, sec. 79, and K.S.A. 2010 Supp. 65-1132, as amended by L. 2011, ch. 114, sec. 46; effective Sept. 2, 1991; amended March 22, 2002; amended P- _____.)

60-11-118. Temporary permit to practice.

- (a) A temporary permit to practice as an advanced practice registered nurse may be issued by the board for a period of not more than 180 days to an applicant for licensure as an advanced practice registered nurse who meets the following requirements:
 - (1) Was previously licensed in this state; and
 - (2) is enrolled in a refresher course required by the board for reinstatement of a license that has lapsed for more than five years.
- (b) A one-time temporary permit to practice as an advanced practice registered nurse may be issued by the board for a period of not more than 180 days pending completion of the application for a license.

History: (Authorized by K.S.A. 65-1129; implementing K.S.A. 2010 Supp. 65-1132, as amended by L. 2011, ch. 114, sec. 45; effective Sept. 2, 1991; amended April 26, 1993; amended P- _____.)

60-11-119. Payment of fees. Payment of fees for advanced practice registered nurses shall be as follows:

- (a) Initial application for license\$50.00
- (b) Biennial renewal of license 60.00
- (c) Application for reinstatement of license without temporary permit 75.00
- (d) Application for license with temporary permit ... 100.00
- (e) Application for exempt license 50.00
- (f) Renewal of exempt license50.00

History: (Authorized by K.S.A. 65-1131, as amended by L. 2011, ch. 114, sec. 45; implementing K.S.A. 65-1118, as amended by L. 2011, ch. 114, sec. 41, and 65-1131, as amended by L. 2011, ch. 114, sec. 45; effective Sept. 2, 1991; amended May 17, 1993; amended Feb. 6, 1995; amended April 3, 1998; amended July 1, 2001; amended April 20, 2007; amended P- _____.)

60-11-120. Expiration dates of licenses; applications. The expiration dates of all licenses and applications shall be in accordance with K.A.R. 60-3-107 and 60-3-108.

History: (Authorized by and implementing K.S.A. 65-1131, as amended by L. 2011, ch. 114, sec. 45, and K.S.A. 2010 Supp. 65-1132, as amended by L. 2011, ch. 114, sec. 46; effective April 3, 1998; amended July 29, 2005; amended P- _____.)

60-11-121. Exempt license.

- (a) An exempt license shall be granted only to an advanced practice registered nurse who meets these requirements:
 - (1) Is not regularly engaged as an advanced practice registered nurse in Kansas, but volunteers advanced practice registered nurse services or is a charitable health care provider, as defined by K.S.A. 75-6102 and amendments thereto; and
 - (2) (A) Has been licensed in Kansas for the five years previous to applying for an exempt license; or
(B) has been licensed, authorized, or certified in another jurisdiction for the five years previous to applying for an exempt license and meets all requirements for endorsement into Kansas.
- (b) The expiration date of the exempt license shall be in accordance with K.A.R. 60-3-108.
- (c) Each application for renewal of an exempt license shall be submitted upon a form furnished by the board and shall be accompanied by the fee in accordance with K.A.R. 60-11-119.

History: (Authorized by and implementing K.S.A. 65-1131, as amended by L. 2011, ch. 114, sec. 45; effective April 3, 1998; amended Oct. 25, 2002; amended July 29, 2005; amended P- _____.)

60-13-112. License renewal.

- (a) Each license to practice as a registered nurse anesthetist (RNA) in Kansas shall be subject to the same biennial expiration dates as those specified in K.A.R. 60-3-108 for the registered professional nurse license in Kansas.
- (b) Each individual renewing a license shall have completed the required 30 contact hours of approved continuing nursing education (CNE) related to nurse anesthesia during the most recent prior licensure period. Proof of completion of 30 contact hours of approved CNE in the nurse anesthesia role may be requested by the board. Contact hours accumulated in excess of the 30-hour requirement shall not be carried over to the next renewal period.
- (c) The number of contact hours assigned to any offering that includes a recognized standard curriculum shall be determined by the board.
- (d) Any individual attending any offering not previously approved by the board may submit an application for an individual offering approval (IOA). Credit may be given for offerings that the licensee demonstrates as having a relationship to the practice of nurse anesthesia. Each separate offering shall be approved before the individual submits the license renewal application.
- (e) Approval shall not be granted for identical offerings completed within the same license renewal period.
- (f) Any individual renewing a license may accumulate 15 contact hours of the required CNE from instructor credit. Each presenter shall receive instructor credit only once for the preparation and presentation of each course. The provider shall issue a certificate listing the number of contact hours earned and clearly identifying the hours as instructor credit.
- (g) Fractions of contact hours may be accepted for offerings over 30 minutes.
- (h) An CNE accumulated for RNA license renewal shall also be applicable to the renewal of the registered professional nurse license.

History: (Authorized by K.S.A. 65-1164; implementing K.S.A. 65-1159; effective Sept. 2, 1991; amended Feb. 16, 1996;

amended Oct. 12, 2001; amended July 29, 2005; amended P- _____.)

60-17-101. Definitions.

- (a) An "advanced nursing education program" may be housed within a part of any of the following organizational units within an academic institution:
 - (1) A college;
 - (2) a school;
 - (3) a division;
 - (4) a department; or
 - (5) an academic unit.
- (b) "Affiliating agency" means an agency that cooperates with the advanced nursing education program to provide clinical facilities and resources for selected student experiences.
- (c) "Clinical learning" means an active process in which the student participates in advanced nursing activities while being guided by a member of the faculty.
- (d) "Contractual agreement" means a written contract or letter signed by the legal representatives of the advanced nursing education program and the affiliating agency.
- (e) "Preceptor" means an advanced practice registered nurse or a physician who provides clinical supervision for advanced practice registered nurse students as a part of nursing courses taken during the advanced nursing education program.
- (f) "Satellite program" means an existing, accredited advanced nursing education program provided at a location geographically separate from the parent program. The students may spend a portion or all of their time at the satellite location. The curricula in all locations shall be the same, and each credential shall be conferred by the parent institution.
- (g) "Transfer student" means an individual who is permitted to apply advanced nursing courses completed at another institution to a different advanced nursing education program.

History: (Authorized by K.S.A. 65-1129 and K.S.A. 2010 Supp. 74-1106; implementing K.S.A. 65-1133, as amended by L. 2011, ch. 114, sec. 47; effective March 31, 2000; amended P- _____.)

60-17-104. Faculty and preceptor qualifications.

- (a) Each nurse faculty member shall be licensed as a registered professional nurse in Kansas.
- (b) Each preceptor shall be licensed in the state in which the preceptor is currently practicing. Each preceptor shall complete a preceptor orientation that includes information about the pedagogical aspects of the student-preceptor relationship.
- (c) For advanced nursing education programs in the role of nurse anesthesia, each nurse faculty member shall have the following academic preparation and experience:
 - (1) The nurse administrator who is responsible for the development and implementation of the advanced nursing education program shall have had experience in administration or teaching and shall have a graduate degree.
 - (2) Each nurse faculty member who is assigned the responsibility of a course shall hold a graduate degree.
 - (3) Each nurse faculty member responsible for clinical instruction shall possess a license as an advanced practice registered nurse and a graduate degree.
- (d) For advanced nursing education programs in any role other than nurse anesthesia, each nurse faculty member shall have the following academic preparation and experience:
 - (1) The nurse administrator who is responsible for the development and implementation of the advanced nursing education program shall have had experience in administration or teaching and shall have a graduate degree in nursing.
 - (2) Each nurse faculty member who is assigned the responsibility of a course shall hold a graduate degree. Each person who is hired as a nurse faculty member shall have a graduate degree in nursing, except for any person whose graduate degree was conferred before July 1, 2005.
 - (3) Each nurse faculty member responsible for coordinating clinical instruction shall possess a license as an advanced practice registered nurse in the role for which clinical instruction is provided and shall have a graduate degree. Each person who is hired as a nurse faculty member shall have a graduate degree in nursing, except for any person whose graduate degree was conferred before July 1, 2005.
 - (4) Each preceptor or adjunct faculty shall be licensed as an advanced practice registered nurse or shall be licensed as a physician in the state in which the individual is currently practicing. Each preceptor shall complete a preceptor orientation including information about the pedagogical aspects of the student-preceptor relationship.
- (e) The nonnursing faculty of each advanced nursing education program shall have graduate degrees in the area of expertise.
- (f) The nurse administrator of each advanced nursing education program shall submit to the board a faculty qualification report for each faculty member who is newly employed by the program.

History: (Authorized by K.S.A. 65-1129 and K.S.A. 2010 Supp. 74-1106; implementing K.S.A. 65-1133, as amended by L. 2011, ch. 114, sec. 47; effective March 31, 2000; amended April 20, 2007; amended P- _____.)

60-17-105. Curriculum requirements.

- (a) The faculty in each advanced nursing education program shall fulfill these requirements:

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- (1) Identify the competencies of the graduate for each role of advanced nursing practice for which the program provides instruction;
 - (2) determine the approach and content for learning experiences;
 - (3) direct clinical instruction as an integral part of the program; and
 - (4) provide for learning experiences of the depth and scope needed to fulfill the objectives or outcomes of advanced nursing courses.
- (b) The curriculum in each advanced nursing education program shall include all of the following:
- (1) Role alignment related to the distinction between practice as a registered professional nurse and the advanced role of an advanced practice registered nurse as specified in K.A.R. 60-11-101;
 - (2) theoretical instruction in the role or roles of advanced nursing practice for which the program provides instruction;
 - (3) the health care delivery system;
 - (4) the ethical and legal implications of advanced nursing practice;
 - (5) three college hours in advanced pharmacology or the equivalent;
 - (6) three college hours in advanced pathophysiology or its equivalent and three college hours in advanced health assessment or its equivalent for licensure as an advanced practice registered nurse in a role other than nurse anesthesia and nurse midwifery;
 - (7) if completing an advanced practice registered nurse program after July 1, 2009, three college hours in advanced pathophysiology or its equivalent and three college hours in advanced health assessment or its equivalent; and
 - (8) clinical instruction in the area of specialization, which shall include the following:
 - (A) Performance of or ordering diagnostic procedures;
 - (B) evaluation of diagnostic and assessment findings; and
 - (C) the prescription of medications and other treatment modalities for client conditions.
- (c) (1) Each program shall consist of at least 45 semester credit hours or the academic equivalent. As used in this regulation, "academic equivalent" shall mean the prorated proportionate credit for formal academic coursework if that coursework is completed on the basis of trimester or quarter hours rather than semester hours.
- (2) The clinical component shall consist of at least 260 hours of clinical learning. After January 1, 2003, the clinical component shall consist of at least 500 hours of clinical learning. After July 1, 2009, the clinical component shall consist of at least 500 hours of clinical learning in each clinical track, or the program shall provide documentation of the overlap if any clinical track consists of less than 500 clinical hours.

- (d) Each nurse administrator shall meet the following requirements:
- (1) Develop and implement a written plan for program evaluation; and
 - (2) submit any major revision to the curriculum of advanced nursing courses for board approval at least 30 days before a meeting of the board. The following shall be considered major revisions to the curriculum:
 - (A) Any significant change in the plan of curriculum organization; and
 - (B) any change in content.
- (e) Each nurse administrator shall submit all revisions that are not major revisions, as defined in paragraph (d)(2), to the board or the board's designee for approval.

History: (Authorized by K.S.A. 65-1129 and K.S.A. 2010 Supp. 74-1106; implementing K.S.A. 65-1133, as amended by L. 2011, ch. 114, sec. 47; effective March 31, 2000; amended April 20, 2007; amended P-____.)

60-17-110. Discontinuing an advanced practice registered nurse program. Each school terminating its program shall submit, for board approval, the school's plan for its currently enrolled students and for disposition of its records.

History: (Authorized by K.S.A. 65-1129 and K.S.A. 2010 Supp. 74-1106; implementing K.S.A. 65-1133, as amended by L. 2011, ch. 114, sec. 47; effective March 31, 2000; amended April 20, 2007; amended P-____.)

60-17-111. Requirements for advanced practice registered nurse refresher course.

- (a)
 - (1) Each refresher course that prepares advanced practice registered nurses (APRNs) who have not been actively engaged in advanced nursing practice for more than five years shall be accredited by the board.
 - (2) If a formal refresher course is not available, an individualized course may be designed for a nurse. Each individualized course shall be accredited by the education specialist.
- (b) Each refresher course student shall meet both of the following conditions:
 - (1) Be licensed currently as a Kansas registered professional nurse; and
 - (2) have been licensed as an advanced practice registered nurse in Kansas or another state or have completed the education required to be licensed as an advanced practice registered nurse in Kansas.
- (c) Continuing nursing education contact hours may be awarded for completion of APRN refresher courses. A contact hour shall equal a 50-minute hour of instruction.
- (d) The objectives and outcomes of the refresher course shall be stated in behavioral terms and shall describe the expected competencies of the applicant.
- (e) Each instructor for an APRN refresher course shall be licensed as an APRN and shall show evidence of recent professional education and competency in teaching.
- (f) Each provider that has been accredited by the board to offer an APRN refresher course shall provide the following classroom and clinical experiences, based on

the length of time that the student has not been actively engaged in advanced nursing practice:

- (1) For students who have not engaged in advanced nursing practice for more than five years, but less than or equal to 10 years, 150 didactic hours and 350 clinical hours; and
 - (2) for students who have not engaged in advanced nursing practice for more than 10 years, 200 didactic hours and 500 clinical hours.
- (g) The content, methods of instruction, and learning experiences shall be consistent with the objectives and outcomes of the course.
- (h) Each refresher course for the roles of nurse practitioner, clinical nurse specialist, and nurse-midwife shall contain the following content:
- (1) Didactic:
 - (A) Role alignment related to recent changes in the area of advanced nursing practice;
 - (B) the ethical and legal implications of advanced nursing practice;
 - (C) the health care delivery system;
 - (D) diagnostic procedures for the area of specialization; and
 - (E) prescribing medications for the area of specialization; and
 - (2) clinical:
 - (A) Conducting diagnostic procedures for the area of specialization;
 - (B) prescribing medications for the area of specialization;
 - (C) evaluating the physical and psychosocial health status of a client;
 - (D) obtaining a comprehensive health history;
 - (E) conducting physical examinations using basic examination techniques, diagnostic instruments, and laboratory procedures;
 - (F) planning, implementing, and evaluating care;
 - (G) consulting with clients and members of the health care team;
 - (H) managing the medical plan of care prescribed based on protocols or guidelines;
 - (I) initiating and maintaining records, documents, and other reports;
 - (J) developing teaching plans; and
 - (K) counseling individuals, families, and groups on the following issues:
 - (i) Health;
 - (ii) illness; and
 - (iii) the promotion of health maintenance.
- (i) Each student in nurse-midwife refresher training shall also have clinical hours in the management of the expanding family throughout pregnancy, labor, delivery, postdelivery care, and gynecological care.
- (j) The provider of each refresher course shall provide official evidence of completion to each individual who successfully completes the refresher course.

History: (Authorized by K.S.A. 65-1129 and K.S.A. 2010 Supp. 74-1106; implementing K.S.A. 65-1130, as amended by L. 2011, ch. 114, sec. 44, and K.S.A. 65-1133, as amended by L. 2011, ch. 114, sec. 47; effective March 31, 2000; amended July 29, 2005; amended P-____.)

IV Regulation Changes Effective May 18, 2012

60-16-102. Scope of practice for licensed practical nurse performing intravenous fluid therapy.

- (a) A licensed practical nurse under the supervision of a registered professional nurse may engage in a limited scope of intravenous fluid treatment, including the following:
- (1) Monitoring;
 - (2) maintaining basic fluids;
 - (3) discontinuing intravenous flow and an intravenous access device not exceeding three inches in length in peripheral sites only; and
 - (4) changing dressings for intravenous access devices not exceeding three inches in length in peripheral sites only.
- (b) Any licensed practical nurse who has met one of the requirements under K.S.A. 65-1136, and amendments thereto, may perform, in addition to the functions specified in subsection (a) of this regulation, the following procedures relating to the expanded administration of intravenous fluid therapy under the supervision of a registered professional nurse:
- (1) Calculating;
 - (2) adding parenteral solutions to existing patent central and peripheral intravenous access devices or administration sets;
 - (3) changing administration sets;
 - (4) inserting intravenous access devices that meet these conditions:
 - (A) Do not exceed three inches in length; and
 - (B) are located in peripheral sites only;
 - (5) adding designated premixed medications to existing patent central and peripheral intravenous access devices or administration sets either by continuous or intermittent methods, excluding the initial dosage of medications or solutions;
 - (6) maintaining the patency of central and peripheral intravenous access devices and administration sets with medications or solutions as allowed by policy of the facility;
 - (7) changing dressings for central venous access devices;
 - (8) administering continuous intravenous drip analgesics and antibiotics; and
 - (9) performing the following procedures in any facility having continuous on-site registered professional nurse supervision:
 - (A) Admixing intravenous medications; and
 - (B) administering by direct intravenous push any drug in a drug category that is not specifically listed as a banned drug category in subsection (c), including analgesics, antibiotics, antiemetics, diuretics, and corticosteroids, as allowed by policy of the facility.
- (c) A licensed practical nurse shall not perform any of the following:
- (1) Administer any of the following by intravenous route:
 - (A) Blood and blood products, including albumin;
 - (B) investigational medications;
 - (C) anesthetics, antianxiety agents, biological therapy, serums, hemostatics, immunosuppressants, muscle relaxants, human plasma fractions, oxytocics, sedatives, tocolytics, thrombolytics, anticonvulsants, cardiovascular preparations, antineoplastics agents, hematopoietics, autonomic drugs, and respiratory stimulants;
 - (D) intravenous fluid therapy in the home health setting, with the exception of the approved scope of practice authorized in subsection (a); or
 - (E) intravenous fluid therapy to any patient under the age of 12 or any patient weighing less than 80 pounds, with the exception of the approved scope of practice authorized in subsection (a);
 - (2) initiate total parenteral nutrition or lipids;
 - (3) titrate medications;
 - (4) draw blood from a central intravenous access device;
 - (5) remove a central intravenous access device or any intravenous access device exceeding three inches in length; or
 - (6) access implantable ports for any purpose.
- (d) Licensed practical nurses qualified by the board before June 1, 2000 may perform those activities listed in subsection (a) and paragraph (b)(9)(A) regardless of their intravenous therapy course content on admixing.
- (e) This regulation shall limit the scope of practice for each licensed practical nurse only with respect to intravenous fluid therapy and shall not restrict a licensed practical nurse's authority to care for patients receiving this therapy.

History: (Authorized by and implementing K.S.A. 65-1136; effective Nov. 21, 1994; amended Dec. 13, 1996; amended June 12, 1998; amended Oct. 29, 1999; amended Jan. 24, 2003; amended P._____)

60-16-103. Course approval procedure.

- (a) Each person desiring to obtain approval for an intravenous (IV) fluid therapy course shall submit a proposal to the board.
- (b) The proposal shall contain the following:
- (1) The name and qualifications of the coordinator;
 - (2) the name and qualifications of each faculty member of the course;
 - (3) the mechanism through which the provider will

determine that each licensed practical nurse seeking to take the course meets the admission requirements;

- (4) a description of the educational and clinical facilities that will be utilized;
 - (5) the outlines of the classroom curriculum and the clinical curriculum; including time segments. These curricula shall meet the requirements of K.A.R. 60-16-104(g);
 - (6) the methods of student evaluation that will be used, including a copy of the final written competency examination and the final clinical competency examination; and
 - (7) if applicable, a request for continuing education approval meeting the following criteria:
 - (A) For each long-term provider, the IV therapy course provider number shall be printed on the certificates and the course roster, along with the long-term provider number; and
 - (B) for each single program provider, the single program application shall be completed. There shall be no cost to this provider for the initial single offering providership.
- (c) Continuing education providers shall award at least 32 contact hours to each LPN who completes the course. Continuing education providers may award 20 contact hours, one time only, to each RN who completes the course.
- (d) After initial approval, each change in the course shall be provided to the board for approval before the change is implemented.
- (e)
- (1) Each IV fluid therapy course provider shall submit to the board an annual report for the period of July 1 through June 30 of the respective year that includes the total number of licensees taking the intravenous fluid therapy course, the number passing the course, and the number of courses held.
 - (2) The single program providership shall be effective for two years and may be renewed by submitting the single offering provider application and by paying the fee specified in K.A.R. 604-103(a)(5). Each single program provider who chooses not to renew the providership shall notify the board in writing of the location at which the rosters and course materials will be accessible to the board for three years.
 - (3) Each long-term provider shall submit the materials outlined in subsection (b) with the five-year long-term provider renewal.
- (f) If a course does not meet or continue to meet the criteria for approval established by the board or if there is a material misrepresentation of any fact with the information submitted to the board by a provider, approval may be withheld, made conditional, limited, or withdrawn by the board after giving the provider notice and an opportunity to be heard.

History: (Authorized by and implementing K.S.A. 65-1136; effective Nov. 21, 1994; amended June 14, 2002; amended July 29, 2005; amended P-_____)

60-16-104. Standards for course; competency examination; recordkeeping.

- (a) The purpose of the intravenous fluid therapy course shall be to prepare licensed practical nurses to perform safely and competently the activities as defined in K.A.R. 60-16-102. The course shall be based on the nursing process and current intravenous nursing standards of practice.
- (b) The course shall meet both of the following conditions:
- (1) Consist of at least 30 hours of instruction; and
 - (2) require at least eight hours of supervised clinical practice, which shall include at least one successful peripheral venous access procedure and the initiation of an intravenous infusion treatment modality on an individual.
- (c) To be eligible to enroll in an intravenous fluid therapy course, the individual shall be a nurse with a current license.
- (d) The intravenous therapy course coordinator shall meet the following requirements:
- (1) Be licensed as a registered professional nurse;
 - (2) be responsible for the development and implementation of the intravenous fluid therapy course; and
 - (3) have experience in intravenous fluid therapy and knowledge of the intravenous therapy standards.
- (e)
- (1) Each primary faculty member shall meet the following requirements:
 - (A) Be currently licensed to practice as a registered professional nurse in Kansas;
 - (B) have clinical experience within the past five years that includes intravenous fluid therapy; and
 - (C) maintain competency in intravenous fluid therapy.
 - (2) Each guest lecturer shall have professional preparation and qualifications for the specific subject area in which that individual instructs.
- (f)
- (1) Each classroom shall contain sufficient space, equipment, and teaching aids to meet the course objectives.
 - (2) The facility in which clinical practice and the competency examination are conducted shall allow the students and faculty access to the intravenous fluid therapy equipment

and intravenous fluid therapy recipients, and to the pertinent records for the purpose of documentation.

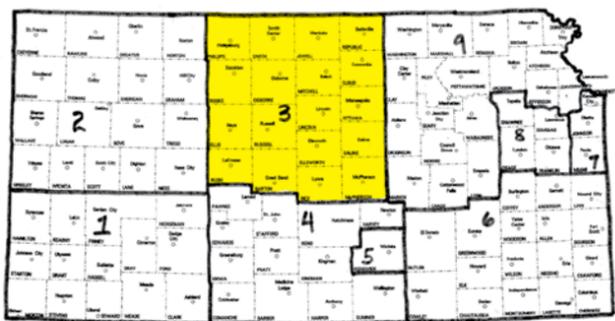
- (3) There shall be a signed, written agreement between the provider and a cooperating health care facility that specifies the roles, responsibilities, and liabilities of each party. This written agreement shall not be required if the only health care facility to be used is also the provider.
- (g)
- (1) The board-approved intravenous fluid therapy curriculum shall be the following standards of the infusion nurses society's supplement titled "infusion nursing standards of practice," volume 34, number 1S, dated January/February 2011, which are hereby adopted by reference:
 - (A) "Nursing practice":
 - (i) "Practice setting" standard 1.1, 1.2, 1.3;
 - (ii) "neonatal and pediatric patients" standard 2.1, 2.2, 2.3, which shall be taught only for clinical knowledge and awareness;
 - (iii) "older adult patients" standard 3.1, 3.2;
 - (iv) "ethics" standard 4.1, 4.2, 4.3, 4.4;
 - (v) "scope of practice" standard 5.1, 5.2, 5.3, 5.4, 5.5, 5.6, 5.7;
 - (vi) "competence and competency validation" standard 6.1, 6.2, 6.3, 6.4;
 - (vii) "quality improvement" standard 7.1;
 - (viii) "research and evidence-based practice" standard 8.1, 8.2, 8.3, 8.4; and
 - (ix) "policies, procedures, and/or practice guidelines" standard 9.1, 9.2, 9.3,9.4;
 - (B) "patient care":
 - (i) "Orders for the initiation and management of infusion therapy" standard 10.1, 10.2, 10.3, 10.4, 10.5, 10.6, 10.7;
 - (ii) "patient education" standard 11.1, 11.2;
 - (iii) "informed consent" standard 12.1, 12.2, 12.3; and
 - (iv) "plan of care" standard 13.1, 13.2, 13.3, 13.4, 13.5, 13.6, 13.7;
 - (C) "documentation":
 - (i) "Documentation" standard 14.1, 14.2, 14.3, 14.4, 14.5;
 - (ii) "unusual occurrence and sentinel event reporting" standard 15.1, 15.2;
 - (iii) "product evaluation, integrity, and defect reporting" standard 16.1, 16.2, 16.3, 16.4, 16.5; and
 - (iv) "verification of products and medications" standard 17.1, 17.2, 17.3;
 - (D) "infection prevention and safety compliance":
 - (i) "Infection prevention" standard 18.1, 18.2, 18.3, 18.4, 18.5, 18.6, 18.7, 18.8, 18.9;
 - (ii) "hand hygiene" standard 19.1, 19.2, 19.3, 19.4;
 - (iii) "scissors" standard 21.1, 21.2, 21.3;
 - (iv) "safe handling and disposal of sharps, hazardous materials, and hazardous waste" standard 22.1, 22.2, 22.3, 22.4, 22.5, 22.6, 22.7, 22.8;
 - (v) "disinfection of durable medical equipment" standard 23.1, 23.2, 23.3, 23.4;
 - (vi) "transmission-based precautions" standard 24.1,24.2; and
 - (vii) "latex sensitivity or allergy" standard 25.1, 25.2, 25.3;
 - (E) "infusion equipment":
 - (i) "Add-on devices" standard 26.1, 26.2, 26.3;
 - (ii) "needleless connectors" standard 27.1, 27.2, 27.3, 27.4, 27.5;
 - (iii) "filters" standard 28.1, 28.2, 28.3, 28.4, 28.5, 28.6;
 - (iv) "flow-control devices" standard 29.1, 29.2, 29.3, 29.4, 29.5; and
 - (v) "tourniquets" standard 31.1, 31.2;
 - (F) "vascular access device selection and placement":
 - (i) "Vascular access device selection" standard 32.1, 32.2, 32.3, 32.4;
 - (ii) "site selection" standard 33.1, 33.2, 33.3, 33.4, 33.5. Standard 33.4 and 33.5 shall be taught only for clinical knowledge and awareness;
 - (iii) "local anesthesia for vascular access device placement and access" standard 34.1, 34.2, 34.3, 34.4;
 - (iv) "vascular access site preparation and device placement" standard 35.1, 35.2, 35.3, 35.4, 35.5, 35.6, 35.7, 35.8;
 - (v) "vascular access device stabilization" standard 36.1, 36.2, 36.3, 36.4;

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- (vi) "joint stabilization" standard 37.1, 37.2, 37.3, 37.4; and
 - (vii) "site protection" standard 38.1, 38.2, 38.3;
 - (G) "site care and maintenance":
 - (i) "Administration set change" standard 43.1, 43.2, 43.3, 43.4, 43.5, 43.6;
 - (ii) "vascular access device removal" standard 44.1, 44.2, 44.3, 44.4, 44.5, 44.6;
 - (iii) "flushing and locking" standard 45.1, 45.2, 45.3, 45.4; and
 - (iv) "vascular access device site care and dressing changes" standard 46.1, 46.2, 46.3, 46.4;
 - (H) "infusion-related complications":
 - (i) "Phlebitis" standard 47.1, 47.2, 47.3;
 - (ii) "infiltration and extravasation" standard 48.1, 48.2, 48.3;
 - (iii) "infection" standard 49.1, 49.2, 49.3, 49.4;
 - (iv) "air embolism" standard 50.1, 50.2, 50.3, 50.4, 50.5, 50.6;
 - (v) "catheter embolism" standard 51.1, 51.2, 51.3, 51.4;
 - (vi) "catheter-associated venous thrombosis" standard 52.1, 52.2, 52.3, 52.4; and
 - (vii) "central vascular access device malposition" standard 53.1, 53.2, 53.3, 53.4, 53.5; and
 - (I) "infusion therapies":
 - (i) "Parenteral medication and solution administration" standard 61.1, 61.2, 61.3, which shall be taught only for clinical knowledge and awareness;
 - (ii) "antineoplastic therapy" standard 62.1, 62.2, 62.3, 62.4, which shall be taught only for clinical knowledge and awareness;
 - (iii) "biologic therapy" standard 63.1, 63.2, 63.3, which shall be taught only for clinical knowledge and awareness;
 - (iv) "patient-controlled analgesia" standard 64.1, 64.2, 64.3, 64.4;
 - (v) "parenteral nutrition" standard 65.1, 65.2, 65.3, 65.4, 65.5, 65.6, 65.7, which shall be taught only for clinical knowledge and awareness;
 - (vi) "transfusion therapy" standard 66.1, 66.2, 66.3, 66.4;
 - (vii) "moderate sedation/analgesia using intravenous infusion" standard 67.1, 67.2, 67.3, 67.4, which shall be taught only for clinical knowledge and awareness; and
 - (viii) "administration of parenteral investigational drugs" standard 68.1, 68.2, 68.3, which shall be taught only for clinical knowledge and awareness.
- (2) Each provider shall submit documentation of the use of the curriculum required in this subsection to the board on or before February 1, 2013.
- (h)(1) (A) The final written competency examination shall be constructed from the board-approved pool of test questions and shall be based on the board-approved test plan.
- (B) The final written competency examination shall consist of at least 50 questions and shall require a passing grade of 80 percent or above.
- (2) The final clinical competency examination shall require successful completion of the procedures on the board-approved competency checklist, which shall include the following procedures: preparation for the insertion of an intravenous line, insertion of an intravenous access device, conversion of a peripheral catheter to an intermittent infusion device, calculation of infusion flow rate, changing an intravenous fluid container, changing administration set tubing, care of the infusion site, flushing an intermittent infusion device, discontinuance of an intravenous infusion, administration of intravenous medication including both piggyback administration and direct injection, and admixing intravenous medications.
- (i) (1) The faculty shall complete the final record sheet, which shall include competencies and scores.
- (2) The intravenous fluid therapy course coordinator shall perform the following:
- (A) Award a certificate to each licensed nurse documenting successful completion of both the final written competency examination and the final clinical competency examination;
 - (B) submit to the board, within 15 days, a typed, alphabetized roster listing the name and license number of each individual who has successfully completed the course and the date of completion. The coordinator shall ensure that each roster meets the following requirements:
 - (i) RN and LPN participants shall be listed on separate rosters; and
 - (ii) the roster shall include the provider name and address, the single or long-term provider number, the IV therapy course provider number, and the signature of the coordinator; and
 - (C) maintain the records of each individual who has successfully completed the course for a period of at least five years.

History: (Authorized by and implementing K.S.A. 65-1136; effective Nov. 21, 1994; amended Dec. 13, 1996; amended Oct. 29, 1999; amended April 20, 2001; amended June 14, 2002; amended July 29, 2005; amended p. _____)

CONTINUING NURSING EDUCATION OFFERINGS



REGION III

February 13, 2013, 9:00 am-5:00 pm, Salina, KS

The Frequency of Wellness!!! Spon: Cloud County Community College, 2221 Campus Drive, P.O. Box 1002, Concordia, KS 66901-1002. Contact: JoDee Aldridge Ball, Coordinator of Allied Health, 785-243-1435 or 1-800-729-5101 ext. 370. Fac: Jan Dyer, LPN, MS, NH. Aud: RN, LPN. In this class, participants will become familiar with essential oils and their use in maintaining optimum health and in treatment of various diseases. This in-depth class will provide the student with a working knowledge of how essential oils aid the body in healing. We will also explore how various frequencies in the electromagnetic field effect health and vitality. Fee: \$83.50 Adv, \$103.50 At Door. Reg. by: February 11, 2013. Contact Hours: 8.

February 20, 2013, 9:00 am-5:00 pm, Salina, KS

Strategies to Improve Patient Compliance in Healthcare Decisions. Spon: Cloud County Community College, 2221 Campus Drive, P.O. Box 1002, Concordia, KS 66901-1002. Contact: JoDee Aldridge Ball, Coordinator of Allied Health, 785-243-1435 or 1-800-729-5101 ext. 370. Fac: Karen Hawes, MBA, MSN, ARNP, FNP-c. Aud: RN, LPN. Managing chronic disease is a joint task shared with patients and providers. This class will outline the latest information on how to elicit better adherence to medication, diet, exercise, and relaxation in those with lifelong illness. Discussion of teaching for the busy, the money strapped, the disabled, the mentally ill will be the focus for this class. Prodding the patient who will not come into the office will also be addressed. Fee: \$83.50 Adv, \$103.50 At Door. Reg. by: February 15, 2013. Contact Hours: 8.

February 23, 2013, 9:00 am-5:00 pm, Salina, KS

Managing Stress in the Workplace and at Home in Difficult Times. Spon: Cloud County Community College, 2221 Campus Drive, P.O. Box 1002, Concordia, KS 66901-1002. Contact: JoDee Aldridge Ball, Coordinator of Allied Health, 785-243-1435 or 1-800-729-5101 ext. 370. Fac: Beth Whisler, MA. Aud: RN, LPN. Attending this workshop will enable people to examine the various causes of anxiety. Some of these stressors can include dealing with the impact of current health care issues, facing economic stress, and feeling the effects of stress that spills over into their lives at home. We discuss the causes, coping mechanisms, and resources that can make a positive impact. Fee: \$83.50 Adv, \$103.50 At Door. Reg. by: February 21, 2013. Contact Hours: 8.

February 26, 2013, 9:00 am-5:00 pm, Beloit, KS

Aging Gracefully-Finding the Gains in Spite of the Pains. Spon: Cloud County Community College, 2221 Campus Drive, P.O. Box 1002, Concordia, KS 66901-1002. Contact: JoDee Aldridge Ball, Coordinator of Allied Health, 785-243-1435 or 1-800-729-5101 ext. 370. Fac: Dawn Phelps, BSN, BS, LMSW. Aud: RN, LPN. If we are blessed by growing older, our bodies will age-physical changes will happen. Aging may bring health challenges and multiplies losses, even pain. But aging, even with its challenges, is no excuse for dropping out of life. Being "old" is an attitude and attitudes can be changed. Life is meant to be lived fully. Some of the biggest accomplishments in life have been made by older adults. Each participant will be challenged to use his/her own talents and life experiences to make the world a bit better and their own lives more rewarding. During this course, the aging process will be reviewed. Stories of older adults making significant contributions in later life will be discussed. Fee: \$83.50 Adv, \$103.50 At Door. Reg. by: February 26, 2013. Contact Hours: 8.

March 4, 2013, 9:00 am-5:00 pm, Salina, KS

Surviving Cabin Fever: Enjoying Healthcare Anytime of the Year. Spon: Cloud County Community College, 2221 Campus Drive, P.O. Box 1002, Concordia, KS 66901-1002. Contact: JoDee Aldridge Ball, Coordinator

of Allied Health, 785-243-1435 or 1-800-729-5101 ext. 370. Fac: John Mulvaney, MA. Aud: RN, LPN. This class will provide strategies to help transition from the long winter days to the warmer spring days with hints and ideas to improve attitudes when working with patients/clients. Fee: \$83.50 Adv, \$103.50 At Door. Reg. by: March 1, 2013. Contact Hours: 8.

March 6, 2013, 9:00 am-5:00 pm, Salina, KS

Chew on This!!! Guidelines for a Healthier Lifestyle. Spon: Cloud County Community College, 2221 Campus Drive, P.O. Box 1002, Concordia, KS 66901-1002. Contact: JoDee Aldridge Ball, Coordinator of Allied Health, 785-243-1435 or 1-800-729-5101 ext. 370. Fac: Christy Rogers, RDT. Aud: RN, LPN. This workshop offers knowledge, tools and motivational skills to assist clients in weight loss through promotion of a healthier life style. This workshop will explore the movement toward plant based diets and whole foods and other current nutritional trends to promote the healthier life style. Fee: \$83.50 Adv, \$103.50 At Door. Reg. by: March 4, 2013. Contact Hours: 8.

March 13, 2013, 9:00 am-5:00 pm, Salina, KS

Care & Feeding of Our Brain Throughout the Life Span. Spon: Cloud County Community College, 2221 Campus Drive, P.O. Box 1002, Concordia, KS 66901-1002. Contact: JoDee Aldridge Ball, Coordinator of Allied Health, 785-243-1435 or 1-800-729-5101 ext. 370. Fac: Jan Dyer, LPN, MSNH. Aud: RN, LPN. In this class, students will be introduced to dietary changes, supplementation and the work of Dr. Daniel Amen in maintaining a healthy and vibrant mind. Memory and cognitive function can be enhanced, our mood relaxed and calmed, and cognitive problems alleviated with some simple changes in our lives. Specific functions of areas of the brain will be reviewed along with an in-depth discussion of Alzheimer's disease and treatment. Fee: \$83.50 Adv, \$103.50 At Door. Reg. by: March 11, 2013. Contact Hours: 8.

March 28, 2013, 9:00 am-5:00 pm, Salina, KS

Breast Cancer During Pregnancy: Does That Really Happen? Spon: Cloud County Community College, 2221 Campus Drive, P.O. Box 1002, Concordia, KS 66901-1002. Contact: JoDee Aldridge Ball, Coordinator

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of Allied Health, 785-243-1435 or 1-800-729-5101 ext. 370. Fac: Amanda Strait, BS, MBA. Aud: RN, LPN. Listen to one woman's journey of being diagnosed with breast cancer during pregnancy and how it was treated. She will give an overview of the different types and stages of breast cancer and available surgeries, as well as her personal diagnosis, treatment regimen, and the effects on her life and her family. Fee: \$83.50 Adv, \$103.50 At Door. Reg. by: March 26, 2013. Contact Hours: 8.



REGION VIII

January 26 & 27, 2013, 9:00 am-7:00 pm (both days), Baldwin City, KS

Healing Touch Level One. Spon: The Light Center, 1542 Woodson Rd., Baldwin City, KS 66006. Contact: Robin Goff, 785-255-4583. Fac: Robin Goff, BSN, CHTI. Aud: RN, LPN. A comprehensive course in hands-on energy healing teaching techniques that can be applied in any nursing setting. Fee: \$300. Reg. by: Early bird \$275 until January 19, 2013. Contact Hours: 18.



REGION VII

February 1-2, 2013, 8:00 am-5:00 pm, Lenexa, KS

Tai Chi for Health & Fitness. Spon: The Home Gym (www.thehomegym.net), PO Box 3702, Shawnee, KS 66203. Contact: Jim Starshak, 913-322-0764. Fac: Jim Starshak, MS Aud: RNs, LPNs, LMHTs, as well as PTs, OTs, ATCs, and ACSM Professionals. A modular workshop teaching the Taiji Bang (Fitness Module) that uses a small, turned wooden implement to condition muscles and joints in the hands, arms, shoulders, back, and core; and, the Yang-10 Tai Chi (Health Module) that is a short form easily practiced seated or standing in a very small area such as a clinic, home, office, or hotel room. Both complement preventative, rehabilitative & self-care interventions to improve balance, ROM, proprioception, strength, breathing & stress management. Fee: \$289. Reg. by: January 6, 2013 (for early discounted registration fee). Contact Hours: 14.



REGION IX

February 11, 2013, 9:00 am-5:00 pm, Junction City, KS

You Can't Fix Stupid...Dealing with Difficult People. Spon: Cloud County Community College, 2221 Campus Drive, P.O. Box 1002, Concordia, KS 66901-1002. Contact: JoDee Aldridge Ball, Coordinator of Allied Health, 785-243-1435 or 1-800-729-5101 ext. 370. Fac: John Mulvaney, MA. Aud: RN, LPN. The "Peter Principle" which suggests people are often promoted to their level of incompetence is alive and well. Just because someone is a 'good worker' or educated does not mean he/she is

or will be a good manager, boss or supervisor. This workshop will discuss and explore ideas and methods to help with decision making in promoting individuals. Fee: \$83.50 Adv, \$103.50 At Door. Reg. by: February 8, 2013. Contact Hours: 8.

February 21, 2013, 9:00 am-5:00 pm, Abilene, KS

Keeping Safe: What You Need to Know About Infection Control & Related Topics. Spon: Cloud County Community College, 2221 Campus Drive, P.O. Box 1002, Concordia, KS 66901-1002. Contact: JoDee Aldridge Ball, Coordinator of Allied Health, 785-243-1435 or 1-800-729-5101 ext. 370. Fac: Linda King, PhD. Aud: RN, LPN. Infection control in the healthcare setting is becoming increasingly more important due to the new reimbursement regulations instituted by CMS. Plus, now more than ever, tools to keep the provider safe are needed too. This seminar will explore these topics and more. Fee: \$83.50 Adv, \$103.50 At Door. Reg. by: February 19, 2013. Contact Hours: 8.

March 7, 2013, 9:00 am-5:00 pm, Clay Center, KS

Diabetes: Practical Management. Spon: Cloud County Community College, 2221 Campus Drive, P.O. Box 1002, Concordia, KS 66901-1002. Contact: JoDee Aldridge Ball, Coordinator of Allied Health, 785-243-1435 or 1-800-729-5101 ext. 370. Fac: Emilie Hagen, ARNP-CNS, CDE, CCM. Aud: RN, LPN. Diabetes is everywhere and seems to be increasing every year. The focus of this workshop is a practical real world approach to assisting individuals with their attempt to fit diabetes into their lifestyle. Topics to be presented will include the pathophysiology of glucose intolerance to diabetes, diet management, medications, exercise management and lifestyle management. Fee: \$83.50 Adv, \$103.50 At Door. Reg. by: March 4, 2013. Contact Hours: 8.

March 16, 2013, 9:00 am-5:00 pm, Clay Center, KS

Dangerous Addictions & Dangerous Highs. Spon: Cloud County Community College, 2221 Campus Drive, P.O. Box 1002, Concordia, KS 66901-1002. Contact: JoDee Aldridge Ball,

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Coordinator of Allied Health, 785-243-1435 or 1-800-729-5101 ext. 370. Fac: Beth Whisler, MA. Aud: RN, LPN. Methamphetamine, bath salts, and potpourri abuse are unfortunate and a common phenomenon in our society. Attending the workshop will enable the participant to understand the impact on the abuser and on his/her family. Recognition of symptoms and treatment options will be discussed. Fee: \$83.50 Adv, \$103.50 At Door. Reg. by: March 13, 2013. Contact Hours: 8.

March 26, 2013, 9:00 am-5:00 pm, Abilene, KS
The Importance of Lab Values in the Diagnosis and Treatment of Illnesses.
 Spon: Cloud County Community College, 2221 Campus Drive, P.O. Box 1002, Concordia, KS 66901-1002. Contact: JoDee Aldridge Ball, Coordinator of Allied Health, 785-243-1435 or 1-800-729-5101 ext. 370. Fac: Emilie Hagen, ARNP-CNS, CDE, CCM. Aud: RN, LPN. Lab values are an integral part of the clinical management of the acutely ill patient. Nurses are expected to evaluate lab values then ensure that the appropriate nursing action is taken. This program will present the principles of using lab values in clinical nursing judgment/practice. The focus will be on the most common lab tests used to manage acutely ill patients. Fee: \$83.50 Adv, \$103.50 At Door. Reg. by: March 25, 2013. Contact Hours: 8.

Limited or Ineffective: Practical Issues for Geriatrics. Spon: Central Plains Geriatric Education Center at the University of Kansas Medical Center, 3901 Rainbow Blvd., MS 1005, Kansas City, KS 66160. Contact: Nicole Kelly, 913-588-1464. Fac: Ravinder Goswami, MD. Aud: RNs and LPNs who work with geriatric patients. Dr. Goswami will discuss the etiology of behaviors that may result in interventions that include antipsychotic medications; identify approaches to agitation and other behaviors in older adults, including those with underlying chronic and persistent mental illness; describe the process for determining the appropriateness of antipsychotic medications in geriatric care; and discuss collaboration between clinicians and older adults and family members to develop and implement a plan of care for symptom management to improve quality of life. Fee: \$25. Reg. by: January 7, 2013, 12 pm. Contact Hours: 2.

January 23 & 24, or April 24 & 25, 2013, 7:30 am-6:00 pm, Wichita, KS

Trauma Nursing Core Course (TNCC). Spon: Wesley Medical Center, 550 North Hillside, Wichita, KS 67214. Contact: Denise Spaeth, APRN, MSN, CEN, 316-962-7283 or denise.spaeth@wesleymc.com. Fac: Multiple Faculty. Aud: RN. TNCC is designed to develop and enhance trauma nursing skills, both cognitive and technical. Enrollment is limited. Fee: \$225. Reg. by: Call by 4-6 weeks prior to course to check space availability. Contact Hours: 14.42.

February 14, 15, 25, 26, & 27, 2013, 8:00 am-5:00 pm, Merriam, KS

Pediatric Sexual Assault Nurse Examiner (SANE) Program. Spon: Forensic Assessment Consultation and Treatment (FACT) Program, 9120 W. 75th Street, Shawnee Mission, KS 66204. Contact: Jennifer Johnson, RN, MSN, APRN, SANE-A, SANE-P, 913-676-7500. Fac: Jennifer Johnson, RN, MSN, APRN, SANE-A, SANE-P. Aud: Registered Nurses, Physicians, Social Workers and Law Enforcement. A Pediatric Sexual Assault Nurse Examiner provides direct care to adult and adolescent victims of child abuse & sexual assault. Fee: \$300. Reg. by: February 7, 2013. Contact Hours: 43.

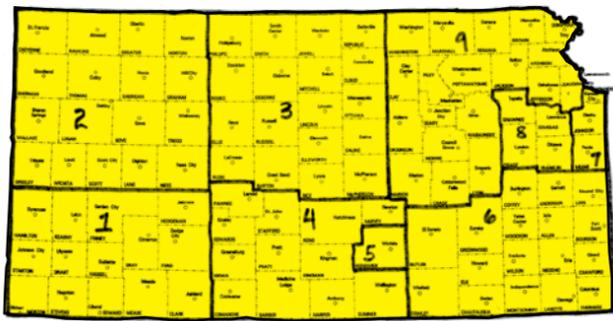
February 20, 2013, 4:00 pm-7:00 pm, Live in Kansas City; by ITV in locations around KS,

and Adobe Connect

Interdisciplinary Management of Acute and Chronic Pain in the Geriatric Population. Spon: Central Plains Geriatric Education Center at the University of Kansas Medical Center, 3901 Rainbow Blvd., MS 1005, Kansas City, KS 66160. Contact: Nicole Kelly, 913-588-1464. Fac: James T. Birch, Jr., MD, MSPH. Aud: RNs and LPNs who work with geriatric patients. Dr. Birch will relate scenarios that involve pain in geriatric patients that is post-trauma, post-operative, or associated with rehabilitation; identify approaches to pain assessment of older adults, including those with dementia; discuss collaboration between the clinician and older adult or family to develop and implement a pain and symptom management plan, including patient and family education; and describe the process for determining the appropriateness of consultation for pharmacological or nonpharmacological techniques to manage pain. Fee: \$30. Reg. by: February 15, 2013, 12 pm. Contact Hours: 3.

February 23, 2013, 8:00 am-3:00 pm, Via Christi Hospital East Harry, Wichita, KS

Spanish Today for Medical Professionals. Spon: Spanish Horizons and Via Christi Hospital East Harry, 3600 E. Harry Street, Wichita, KS 67218. Contact: Vendla Ulrich, 316-932-2361. Aud: LPN, RN, LMHT. Spanish Today for Medical Professionals provides basic medical Spanish skills to help better communicate with Spanish-speaking patients; you will learn basic and medical Spanish. Registration includes an Extensive Spanish Today Manual, a handy pocket guide, and a CD rom. No prior Spanish knowledge is needed. Fee: \$145.00. Reg. by: February 20, 2013. Contact Hours: 6.8.



STATEWIDE

January 10, 2013, 4:00 pm-6:00 pm, Live in Kansas City; by ITV in locations around KS, and Adobe Connect
Antipsychotics When Alternatives are

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March 12-13, 2013, 8:00 am-5:00 pm, Wichita, KS

ONS Chemotherapy & Biotherapy course. Spon: Wesley Medical Center, 550 North Hillside, Wichita, KS 67214. Contact: Linda Long, 316-962-3080. Fac: Dianne Offerman, RN, MN, OCN, ARNP. Aud: RN with minimum of six months experience in Oncology. Comprehensive review of the knowledge needed to safely administer cytotoxic and biotherapeutic agents. Fee: \$175. Reg. by: February 15, 2013. Contact Hours: 13.5.

March 16, 2013, 8:00 am-3:00 pm, Salina Regional Health Center, Salina, KS

Spanish Today for Medical Professionals. Spon: Spanish Horizons and Salina Regional Health Center, 400 South Santa Fe, Salina,

KS 67401. Contact: Vendla Ulrich, 316-932-2361. Aud: LPN, RN, LMHT. Spanish Today for Medical Professionals provides basic medical Spanish skills to help better communicate with Spanish-speaking patients; you will learn basic and medical Spanish. Registration includes an Extensive Spanish Today Manual, a handy pocket guide, and a CD rom. No prior Spanish knowledge is needed. Fee: \$145.00. Reg. by: March 13, 2013. Contact Hours: 6.8.

March 27, 2013, 4:00 pm-6:00 pm, Live in Kansas City; by ITV in locations around KS, and Adobe Connect

Maintaining a Culture of Safety in Extended Care Settings: The Importance of Teamwork, Education, Communication and Documentation. Spon: Central Plains Geriatric Education Center at the University of Kansas Medical Center, 3901 Rainbow Blvd., MS 1005, Kansas City, KS 66160. Contact: Nicole Kelly, 913-588-1464. Fac: Toby Turner,

DHA, APRN, BC, FAAN. Aud: RNs and LPNs who work with geriatric patients. Dr. Turner will review the background, purpose and importance of establishing and maintaining a culture of safety in extended care settings; define the term standard of care; discuss the National Patient Safety Goals and Implications for Safe Extended Care; articulate current findings on common barriers to safe care; discuss potential clinical, risk management, and legal ramifications of failure to assess, communicate, intervene, monitor and document care; and articulate solutions to setting-specific problems. Fee: \$25. Reg. by: March 22, 2013, 12 pm. Contact Hours: 2.

May 1, 2, 3, 20 & 21, 2013, 8:00 am-5:00 pm, Merriam, KS

Sexual Assault Nurse Examiner (SANE) Program-Adult & Adolescent. Spon: Forensic Assessment Consultation and Treatment (FACT) Program, 9120 W. 75th Street, Shawnee Mission, KS 66204. Contact: Jennifer Johnson, RN, MSN, APRN, SANE-A, SANE-P, 913-676-7500. Fac: Jennifer Johnson, RN, MSN, APRN, SANE-A, SANE-P. Aud: Registered Nurses, Physicians, Social Workers and Law Enforcement. A Sexual Assault Nurse Examiner provides direct care to adult and adolescent victims of sexual assault. This program is approved for nursing continuing education and 39.25 AMA PRA Category 1 Credits for Physicians. Fee: \$300. Reg. by: April 25, 2013. Contact Hours: 44.

July 31, August 1, 2, 13 & 14, 2013, 8:00 am-5:00 pm, Merriam, KS

Pediatric Sexual Assault Nurse Examiner (SANE) Program. Spon: Forensic Assessment Consultation and Treatment (FACT) Program, 9120 W. 75th Street, Shawnee Mission, KS 66204. Contact: Jennifer Johnson, RN, MSN, APRN, SANE-A, SANE-P, 913-676-7500. Fac: Jennifer Johnson, RN, MSN, APRN, SANE-A, SANE-P. Aud: Registered Nurses, Physicians, Social Workers and Law Enforcement. A Pediatric Sexual Assault Nurse Examiner provides direct care to adult and adolescent victims of child abuse & sexual assault. Fee: \$300. Reg. by: July 24, 2013. Contact Hours: 43.

October 9, 10, 11, 23 & 24, 2013, 8:00 am-5:00 pm, Merriam, KS

Sexual Assault Nurse Examiner (SANE) Program-Adult & Adolescent. Spon: Forensic Assessment Consultation and Treatment (FACT) Program, 9120 W. 75th Street, Shawnee Mission, KS 66204. Contact: Jennifer Johnson, RN, MSN, APRN, SANE-A, SANE-P, 913-676-7500. Fac: Jennifer Johnson, RN, MSN, APRN, SANE-A, SANE-P. Aud: Registered Nurses, Physicians, Social Workers and Law Enforcement. A Sexual Assault Nurse Examiner provides direct care to adult and adolescent victims of sexual assault. This program is approved for nursing continuing education and 39.25 AMA PRA Category 1 Credits for Physicians. Fee: \$300. Reg. by: October 1, 2013. Contact Hours: 44.