YOUR DRUG SCREEN IS POSITIVE
Do you have what it takes to be part of our team? If you’re committed to providing quality healthcare - you do. We’re looking for nurses and other healthcare professionals with skills, energy, drive and a passion for patient care; because our patients are our first priority.

Find out how you can be part of our growing team of quality healthcare professionals. Go to StVincentHealth.com/Careers for more information.

YOU MAY BE ELIGIBLE FOR A SIGN-ON BONUS!!

To find out more or apply online go to StVincentHealth.com/Careers or call 501-552-3738
Contents

Executive Director’s Message • 4

President’s Message • 6

Board Business • 7

Staff Directory • 8

Breastfeeding: A Call to Action • 10

Nursing Education Program Approval • 12

My License is different • 15

Your Drug Screen is Positive • 16

Collaborative Practice Agreement for APNs with Prescriptive Authority • 18

News from the NCLA • 20

Continuing Education Workshop • 22

Frequently Asked Questions • 23

Position Statement 03-1: School Nurse Guidelines in Patient Care Settings other than Schools • 24

Disciplinary Actions • 27

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

The holiday season is upon us and everything is decorated with garland, tinsel and lights. There is a chill in the air and Christmas music is playing in the background. I don’t know about you, but my shopping is finished and everything is wrapped and under the tree. Every year I complete my shopping long before the big day because I do not like to wait until the last minute for anything. It always seems to cause problems and headaches that are not necessary. I won’t say that I don’t go shopping on Christmas Eve because there is nothing better than the holiday ambience and, of course, the bargains.

However, many people wait until the ninth hour to do their Christmas shopping. Some love the festive atmosphere and others are just plain procrastinators. Procrastination can get you a bargain on a gift or can result in you coming up empty handed. The tendency to procrastinate spills over into other aspects of life, such as the renewal of a nursing license. Unfortunately, renewing a nursing license on the day of expiration often results in unplanned days off from work.

All nursing licenses expire on the last day of the nurse’s birth month and can be renewed as early as 60 days prior to the expiration date. It is easy to put the yellow reminder card aside with the intention of taking care of it soon. Before long, soon is gone and the expiration date is upon you.

Online renewal is the quickest way to renew a nursing license, but it still takes two or more business days for the renewal information to show on the ASBN Registry. For example, a license renewed on Tuesday is reviewed and approved by the staff on Wednesday. The registry is updated early Thursday morning and will then show the license(s) has been renewed. Employers look at the registry to determine license status and if the license status is displayed as “expired” then working as a nurse is not an option. Don’t let procrastination interfere with your ability to work. As Larry the Cable Guy says, “git-r-done.”

Have a wonderful holiday.

Sue A. Tedford
Wound Care Institute - March 16-17, 2012

Target Audience – WOC nurses; nurses practicing in acute care, long term care, & home care; physical therapists; nursing home administrators and others involved in preventing and treating patients with pressure ulcers. The content is divided into 3 tracks: Long Term Care, Basic, and Advanced.

Preconference Sessions – March 15
- A Touch of Sugar: Diabetes Update with Barb Bancroft
- Caring for the Client with an Ostomy
- Continence: Assessment and Management

Main conference topics March 16-17
Getting Pressure Ulcer Prevention RIGHT (and Legally Defensible)!
Pressure Ulcer Staging - Photography and Documentation
Diabetic Foot Ulcers - Negative Pressure Wound Therapy
Venous and Arterial Ulcers - Prevention in the Geriatric Population
Using Evidence to Guide Nursing Wound Care Practice - Factors in Wound Development
Chronic Wounds in the Geriatric Population - Incontinence Associated Dermatitis
* This program has been submitted to the Office of Long Term Care for Nursing Home Administrator CE approval.

Nurse Practitioners, Nurse Educators, School Nurses and Nurses... Join Barb Bancroft for 3 days of non-stop “edutainment”... EDUCATIONAL FUN, SENSATIONAL SUN — on the sands of WAIKIKI BEACH
November 8-10, 2012

For more Information on either conference, visit www.northark.edu/services/naphe.aspx

Both Conferences sponsored by: North Arkansas Partnership for Health Education

* UAMS AHEC-NW is an approved provider of continuing nursing education by Arkansas Nurses Association, an accredited approver by the American Nurses Credentialing Center’s Commission on Accreditation.

Nurse Educator Institute - April 18-20, 2012

Preconference - April 16 - 17
Nursing Curriculum Institute: Learning Strategies, Activities, and Tools

Preconference - April 17
- Designing Engaging Simulation Learning Environments held at the College of the Ozarks
- Lessons in Civility: Strategies for Student and Faculty Success
- The All in One Day Clinical Approach: “On Your Mark, Get Set, Go!”
- NCLLEX® Mini Review for Students

Main Conference Topics
The Future of Nursing • Legal Pitfalls in Nursing Education
Test Item Writing & Analysis • Genomics
Clinical Learning Environment • Teaching Pharmacology
Informatics & Technology • Movies, Music, Literature & Art
Multi-Media Strategies • Interdisciplinary Clinical Simulation
Emotional Intelligence • Podcasting, Video, & Clickers
Social Media • Delegation, Prioritization & Client Acuity
Accurately Evaluating Students Giving Meds • Quality & Safety in Curricula

Thursday, April 19
Neuro for the Not-So Neuro-Minded – Barb Bancroft

Nurse Curriculum Institute: For Nursing Home Administrator CE approval.

2012 Nursing Conferences
At the breathtaking Chateau on the Lake Resort and Spa, Branson, Missouri

Featuring many National Speakers, including Barb Bancroft, RN, MSN, PNP
Barb has over 25 years of teaching experience — teaching students, nurses, practitioners, educators and lay audience and has provided over 2,200 continuing education seminars. Barb has also taught at various universities in her career and provided courses in Advanced Pathophysiology, Pharmacology and Physical Assessment to undergraduate and graduate students.

Nurse Practitioners, Nurse Educators, School Nurses and Nurses... Join Barb Bancroft for 3 days of non-stop “edutainment”... EDUCATIONAL FUN, SENSATIONAL SUN — on the sands of WAIKIKI BEACH
November 8-10, 2012

Early Bird Rates before April 15th

The Marriott Resort & Spa, Waikiki Beach
2552 Kalakaua Avenue • Honolulu, Hawaii
Discounted airline tickets through United Airlines
Hotel rate only $159/night

For more information, visit www.DeanneBlach.com
...and you can complete this old familiar nursery rhyme. I have often wondered, did the giant smell an odor or an aroma?

According to Webster, an aroma is a pleasant odor, fragrance. An odor is a smell whether pleasant or unpleasant, stench. The giant I believe must have smelled an odor because he reacted in a violent negative manner.

What is pleasant and soothing to one person is not to another. Possibly that is why an entire industry has developed around individual preferences for perfumes, colognes, candles, lotions, creams, etc. Again, my question did the giant in the nursery rhyme smell an odor, which caused a reaction or an aroma, which was pleasant?

With the caring heart and soul of a nurse this question has to be asked each day in the workplace with our patients. Is my perfume/cologne, hand lotion, bath wash, soap, etc. an odor or an aroma to my patients? Should I even wear perfumes or colognes in the workplace? Chemicals used in fragrances are synthetic, petroleum-based compounds. Patients with allergies to these chemicals can have an allergic reaction like sneezing, watery eyes, wheezing, nausea, difficulty concentrating, and headaches.

Most nursing instructors request that students do not wear perfumes or colognes when in clinical areas. Many dress codes in health care setting direct employees to not wear perfumes or colognes or any fragrance that would initiate an allergic reaction and cause harm. Think about the patient receiving chemotherapy, as sights, sounds, and smells may all cause a violent reaction of nausea and vomiting. Patients receiving drugs that have a side effect of hyperosmia (increased sense of smell) may react each time the nurse who is wearing perfume or cologne walks in the room. Those patients who are in the first trimester of pregnancy may start vomiting with the smell of a fragrance that would not cause a problem for anyone else. The pediatric patient who is being held by a nurse may start coughing, sneezing, and having respiratory difficulty just because of an odor. It is extremely important as a nurse to be aware of the effect odors have on our patients and always keep the well being of the patient in the forefront. In patient rooms and in the home, the odors stay long after the nurse leaves. Nurses, be aware of the effect the scents you use have on your patients.

Nurses today work in an office setting and even though they are not in patients rooms, they must be aware of the odors that say, “I’m coming or I have been here” These odors linger. It is a common courtesy to your co-workers to be aware of the odors you leave behind and the reactions that these odors have on your co-workers and the community members that you associate with each day.

In the nursery rhyme, did the giant smell an odor or an aroma? I believe that he definitely smelled an odor and reacted violently as a result. Are you causing violent reactions because of the aromas that are pleasant to you but causes your fellow man to react with headaches, nausea and vomiting, sneezing, coughing, running nose and watering eyes or even the most violent, an anaphylactic reaction.

I am very humbled to be given the opportunity to serve as President of the Arkansas State Board of Nursing. Remember that every day presents a unique opportunity to be kind to one another.
2012 BOARD DATES

January 11
Hearings

January 12
Business Meeting

February 8
Hearings

February 9
Hearings

March 12-14
NCSBN Midyear Meeting, Chicago, IL

April 11
Hearings

April 12
Hearings

May 9
Board Retreat

May 10
Business Meeting

June 13
Hearings

June 14
Hearings

July 11
Hearings

July 12
Hearings

LETTER FROM THE EDITOR

In the article on “Bullying”, (Oct. 2011 ASBN Update) nowhere was there any comment about the bullying that nurses face on a daily basis from physicians. How could an article in a professional publication on “Bullying” completely ignore this daily instance faced by nurses?

— Name withheld on request

Response from the authors – Sandra J. Priebe, MSN, RN, ASBN Board President & Karen Holcomb, RN, Board Member

Research shows that bullying behavior among employees is one of the biggest drains on energy and productivity in the workplace. In their research, Lewis and Malecha, The Impact of Workplace Incivility on the Work Environment, lost productivity as a result of workplace incivility was calculated at $11,581.00 per nurse per year. The article “Bullying: Confront or Condone” was written to provide the nurse avenues to deal with fellow employees who present unacceptable behavior. Yes, you are correct that another aspect of bullying may come from physicians. Research has been done and much has been published on this issue. Most facilities have developed a process to address this issue which involves the Director of Nurses and the Medical Director of the facility. It is ultimately up to the nurse to follow the policies of the facility in which they work. However, can aspects of this article also be applied to physician bullying with confronting or condoning? The Joint Commission also addresses this issue in the Leadership Standard .02.04.01.

Lewis, Patricia Smokler and Malecha, Ann; The Impact of Workplace Incivility on the Work Environment, Manager Skill, and Productivity; JONA, Vol. 41, No.1, January 2011.

Your responses, comments and suggestions are encouraged. E-mail me at lwalker@arsbn.org

LouAnn Walker,
ASBN Update editor

DID YOU KNOW??

...that regardless of the title within a facility (e.g. dean, vice president, director, head nurse, etc.), supervising nurses who allow nurses to work on an expired license may be subject to discipline by the Board? The Nurse Practice Act ACA § 17-87-104 (a)(1) states that “it shall be a misdemeanor for any person to: (C) Practice professional nursing, registered nurse practitioner nursing, practical nursing, or psychiatric technician nursing as defined by this chapter unless licensed by the Board to do so.” A nurse who is not currently licensed is violating this part of the Act. It is each nurse’s responsibility to maintain a current license, but it is also the employer’s responsibility to ensure that licenses are current on employment and are renewed before the expiration dates. Pursuant to ACA §17-87-309(a)(6), the Board of Nursing has sole authority over the nurse’s license and may discipline a licensee upon proof of, among other things, unprofessional conduct. It could be considered unprofessional conduct for a nurse to supervise, assign, or delegate a nursing task to another person who is not properly licensed.
The Arkansas State Board of Nursing has designated this magazine as an official method to notify nurses residing in the state and licensed by the Board about information and legal developments. Please read this magazine and keep it for future reference as this magazine may be used in hearings as proof of notification of the ASBN Update’s contents. Please contact LouAnn Walker at the Board office (501.686.2701) if you have questions about any of the articles in this magazine.

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

Rosa Marie Bradley L16658
Jessica Gonzalez Exam Application
Tonya Humphrey R55602
Victoria Knighten R81020
Amber Sanders R73529
Nathan Shaheed T01220
Angela Shupert L37543
June Elizabeth Sivils L30290
Della Williams L28175
Sally F. Williams L26287
PPH is seeking motivated individuals with positive attitudes to join their exciting Registered Nursing Team! Full-time and PRN opportunities are available for a variety of shifts.

Please visit www.pinnaclepointehospital.com for details!

(800) 880-3322
Breastfeeding is one of only a few medical interventions proven to increase bonding between mother and child and protect against multiple illnesses and diseases for both mothers and children. Children who were breastfed have a lower risk of otitis media, severe lower respiratory infections, and leukemia; they have a lower risk of hospitalization in the first year of life and of Sudden Infant Death Syndrome (SIDS). Vulnerable preterm infants have a lower risk of necrotizing enterocolitis (NEC) and improved feeding tolerance if they receive breast milk. The American Academy of Pediatrics currently recommends breastfeeding exclusively for six months, then adding solids while continuing to breastfeed at least through the first year. Benefits to mothers who breastfeed their children are also impressive: lower risk of breast and ovarian cancers, lower risk of postpartum bleeding, and lower risk of osteoporosis and hip fracture.

The Surgeon General’s Call to Action to Support Breastfeeding (www.surgeongeneral.gov/topics/breastfeeding), released earlier this year, recognizes the significant benefits of breastfeeding as well as the challenges a mother may face. It is estimated that if 80 percent of U.S. families breastfed exclusively for six months, $10.5 billion per year would be saved through reductions in direct medical costs, indirect costs such as wages lost while a parent cares for a sick child, and the cost of premature death. It is also well known that relatively simple interventions — such as educating pregnant women and their family members about breastfeeding — can significantly improve breastfeeding rates.

Nationally, 75 percent of newborns start breastfeeding in the hospital, indicat-
Kristine G. Palmer, MD, associate professor of neonatology in the Department of Pediatrics at the University of Arkansas for Medical Sciences

Breastfeeding is one of only a few medical interventions proven to increase bonding between mother and child and protect against multiple illnesses and diseases for both mothers and children.

How can health providers improve the poor statistics in our state? First, get educated about the basics of breastfeeding. Many U.S. providers trained before the subject became part of the curriculum. Next, educate mothers and families about the benefits of breastfeeding, and have a knowledgeable person available to assist patients both in the hospital and after discharge (ideally provided by an International Board Certified Lactation Consultant). Ensure that the hospital’s maternity practices are supportive of breastfeeding and work toward instituting the ten steps of the Baby Friendly Initiative, which have been proven to improve rates of successful breastfeeding (see table). With the support of health care providers around the state, the initiative to improve support for breastfeeding mothers could have far-reaching health benefits for Arkansans.

REFERENCES/FOOTNOTES

3. Resources for health professionals include: ANGELS Neonatal Guideline on Breastfeeding (www.uams.edu/angels); AFMC/DHS breastfeeding promotion project (www.afmc.org/breastfeeding).

1. Have a written breastfeeding policy that is routinely communicated to all health care staff.
2. Train all health care staff in skills necessary to implement this policy.
3. Inform all pregnant women about the benefits and management of breastfeeding.
4. Help mothers initiate breastfeeding within one hour of birth.
5. Show mothers how to breastfeed and how to maintain lactation, even if they are separated from their infants.
6. Give newborn infants no food or drink other than breast milk, unless medically indicated.
7. Practice “rooming in”— allow mothers and infants to remain together 24 hours a day.
8. Encourage breastfeeding on demand.
9. Give no pacifiers or artificial nipples to breastfeeding infants.
10. Foster the establishment of breastfeeding support groups and refer mothers to them on discharge from the hospital or clinic.

SOURCE: Baby-Friendly USA (www.babyfriendlyusa.org)
I recently attended the 2011 National Council of State Boards of Nursing (NCSBN) Leadership and Public Policy Conference in Alexandria, VA. The conference provided an informative and innovative perspective regarding state structure and sovereignty as it related the leadership principles of our founding fathers to the challenge of modern day policy revisions.

Abigail Adams, who is often referred to as the “First Lady of the White House” is well known as the wife of John Adams, second President of the United States and mother of John Quincy Adams, sixth President of the United States, but is not typically an individual that comes to mind as a significant contributor to the foundational development of education.

Although Abigail lacked formal education, as was the case for women of the time, she was a diligent advocate for increased rights for women and was especially monumental in pursuit of expanding educational opportunities. Her passionate contribution to the fundamental opportunities attained by education carved her a place as an extraordinary influence in American History. Abigail’s powerful statement that, “Learning is not attained by chance; it must be sought for with ardor and diligence” allow contemplation of the critical role that foundational nursing education programs may play in the future.

Nursing education faces a historical milestone as the Institute of Medicines (IOM) Future of Nursing: Leading Change, Advancing Health report (2010) crafts the vision of a nursing workforce that should strive to achieve higher levels of formal education in an environment of new health care reform. We are at an incredible moment in redefining health care and invigorating the workforce. New doors are opening to educational opportunities and career advancement. It is vital to ensure that prelicensure nursing education programs are robust and remain in compliance with educational standards that are in place to provide a springboard of inclusiveness that will dovetail with educational progression.

The Arkansas State Board of Nursing (ASBN) has statutory authority to oversee nursing educational program compliance with mandated regulations and educational standards as established by the Arkansas legislature. An individual that applies for licensure in Arkansas must meet explicit qualification criteria according to the Nurse Practice Act. One such criterion states that the individual must have completed an approved nursing education program. The ASBN oversees 27 licensed practical nursing and 29 registered nursing programs. A nursing program that is approved by the ASBN initially progressed through a three-tiered process of approval that includes the following:
We're searching Arkansas to find the one nurse we can say is the most outstanding in our state. Do you know a nurse that you feel is the most compassionate, caring and empathetic caregiver? A nurse who has given comfort or care to you, a family member or friend? We are asking you to send us their name, where they work, phone number and a short message expressing why you think they are the most deserving nurse in Arkansas.

**Deadline March 31, 2012.**

We hope to have nominees from every county and every medical facility in Arkansas. From approximately 48 finalists, we will choose two “Runners Up” and finally, one nurse will be named Arkansas’ Most Compassionate Nurse at a special ceremony. The nurses will be recognized in the ASBN Update magazine and the Winner will be featured inside and on the cover. Watch for more details coming soon!

Send or email your nomination to:  
NURSING COMPASSION  
P.O. Box 17427  
Little Rock, Arkansas 72222  
sramsel@pcipublishing.com

**Arkansas’ Most Caring Caregiver**

| 2011 Nursing Compassion Award Winner Elaine Peterson, RN |

**Full Approval** is the status that is assigned to an institution’s program of nursing that can provide evidence of compliance with the Education Standards. The ASBN staff will validate program compliance before the first graduating class and prepare a report for submission to the Board for review for a decision to grant, defer or deny full approval.

A nursing program that is approved by the ASBN continues to be reviewed for continued compliance with the educational standards as delineated in the ASBN Rules, Chapter 6, Section II: Program Requirements, A – J. The ASBN staff periodically conducts a program review to verify compliance. A new program has an on-site survey three years after initial full approval. Established programs have an on-site survey every five years or if they have continued accreditation status from a national nursing accreditation organization and maintain a National Council Licensure Examination (NCLEX®) passage rate of 75 percent or higher; they are allowed to submit a paper survey to ASBN versus an on-site review.

The Board reviews a survey report and makes a determination regarding status of the nursing program. There are two approval designations for established programs that prepare graduates for licensure that include the following:

- **Continued Full Approval** is the status assigned to a nursing program that is in compliance with standards.

- **Conditional Approval** is the status assigned to a nursing program that has areas of non-compliance with the standards that must be corrected within a Board specified timeframe.

Additional information related to approved Arkansas nursing programs, program requirements, and approval levels is located on our website at www.arsbn.org. Click on the Education tab.
Perioperative nurses are nurses that work in the surgical setting taking care of the patients in the pre-operative, inter-operative, and post-operative setting. Nurses in the photo are members of the Central Arkansas AORN (Association of Perioperative Nurses).

L to R: Elizabeth Dover, RN, Arkansas Children’s Hospital; Tammy Roberson, RN, Arkansas Children’s Hospital; Renee Lawrence, RN, UAMS; Gov. Mike Beebe; Mary McCartney, UAMS; Kenny Worley, RN, UAMS.

Not All Continuing Education Programs Offer the Same Value

There are a lot of places online where you can get continuing education. Some are even free. But if you’re just trying to get hours to meet some bureaucratic requirement then stop reading now. Because this ad is about a CE program that will help make you a better nurse. One that’s academically based from the only Academic Health Sciences Center in Arkansas.

Our academic content is current (upwards of 10 new hours each week available via statewide interactive video system) and we have over 100 previously recorded lectures ready for viewing online. They’re all relevant, easy to follow and very inexpensive. Visit our website and get started on a CE program that will make you more valuable to your patient and to your employer.

UAMS

CENTER FOR RURAL HEALTH

UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES

Your Trusted Source For Continuing Education

www.onlinemenow.com

The UAMS Center for Rural Health is an approved provider of continuing nursing education by the Arkansas Nurses Association, an accredited approver by the American nurses Credentialing Center’s Commission on Accreditation.
We have been promising the change for a while. If you have renewed your license recently you are among the first to receive a plastic card instead of the paper licensure cards. These cards are different, not only because they are plastic, but also because they are permanent. The license expiration date is no longer printed on the card, so it may not be used as validation of current licensure. After receiving your plastic permanent license, the next time you renew your license you will not receive another permanent plastic license card. To verify your license you and/or your employer must go online to www.arsbn.org and follow these easy steps:

- Under Online Services select “Registry Search”
- Click the link by “1. ASBN Registry Search”
- Under Search License Registry type your license number or your name
- Click “Search”
- Click on your name

You may print this as the website is secure and may be used as primary source verification. The next time you renew your license you will not receive a plastic card. After you renew, give us a few days to process your application, and then go online as described above to check your status. No more waiting for a card in the mail. Yes, it really is that easy.
The nurses’ statements above were the reasons given for why they tested positive for a controlled substance in the twenty-four hours or so after the nurse returned to work. The drug screens were done for both random and reasonable cause. The nurses were terminated by their respective employers for not being able to produce a prescription for the medication for which they tested positive. The nurses were also referred to the Arkansas State Board of Nursing (ASBN) for violation of the facilities’ policies and procedures as they relate to fitness for duty.

As educated nurses, we would never advise our patients to take a medication that they have ‘saved’ from the last time they had a prescription filled. Saving the last few antibiotics ‘for the next time’ is one cause of drug resistant infections. Self-medicating is dangerous in other ways, especially when taking ‘saved’ controlled substances for pain.

Pain is a symptom. Medicating for pain without determining the reason for the pain may prevent the timely diagnosis of cancer, heart disease, or serious infection. Saving medications and taking them later may place you at risk for a serious drug interaction when you mix former and current medications. This interaction may affect your reasoning ability, damage your organs, or in the worst-case scenario, cause death.

Saving unused medications also may place your
I have a bottle I keep left over medications in so if I get a migraine, I have something to take for it. . .

I found a Hydrocodone I had left over from four years ago in my bathroom medicine cabinet, so I took it for back pain. . .

I found an Adderal in my purse when I was cleaning out my closet and took it. I used to take Adderal two to three years ago. . .

I must have taken my cat’s Hydrocodone by mistake. . .

family at risk. You save the remainder of the prn Hydrocodone from your sprained ankle in year one, now in year four, you may be tempted to give one to a family member or friend who complains of pain. You have placed your license at risk for prescribing and dispensing pain medication. If there is a poor outcome, such as a fall due to dizziness and a fractured hip, you may be legally implicated by the harmed person and family.

There is also the recent surge of children and teens taking medications from home, grandparents, and other relatives for the purpose of trading, selling, and even using them. Your nine-year-old Billy stays weekends with grandma, who saves her pain medication to avoid paying a clinic visit co-pay. Four years later, Billy is now thirteen. His friends are also well known to grandma. They know that grandma saves her ‘old’ pills. They reason that grandma will not miss a bottle of pills or remember how many she ‘saved’ in one of her bottles, so they take some of the pills. Unfortunately, this happens more than we care to admit.

When a nurse is referred to the ASBN for testing positive on a drug screen, it generally means that the nurse was not able to produce a prescription for the Medical Review Officer (MRO) who evaluated the drug screen for the medication that was reported positive. The MRO has to decide what policy he or she would like to follow, and what they would be willing to defend in a court of law (i.e. is the policy legally defensible)? Every MRO has his or her own way of doing things when it comes to this issue.

Generally, if the prescription is less than one year old, the prescription information is confirmed with the pharmacy. If the prescription is over a year old, then the MRO may request that a copy of the original bottle be sent. If the bottle is no longer available, the nurse generally ends up with a positive test. Most of the time, nurses cannot produce the bottle of the medication claimed to have been taken in the last 24 to 48 hours. The nurse had kept the bottle for two to four years and now it is gone. Is the nurse being truthful of where the medication came from? Was this the one and only time the nurse took an ‘old saved’ controlled substance and had a drug screen the next day? Only the nurse knows.

The mission of the ASBN is to protect the public and act as their advocate by effectively regulating the practice of nursing. When a nurse takes an ‘old’ prescription, that nurse is self-prescribing and self-medicating thereby risking serious consequences and should be held accountable and reprimanded. Providers generally advise patients not to take a prescription that is over a year old. Prescription bottles are usually labeled with a ‘use before date’ that is generally one year after the prescription is filled. While it is not against the law to take expired medicines, a nurse may risk discipline, as he or she should be aware of the consequences of this risky behavior.

Corizon, provider of health care services for the Arkansas Department of Correction, has excellent opportunities for Nurse Practitioners, RNs and LPNs in various areas

As members of the Corizon healthcare team, our providers and nurses are supported by:

• Competitive Compensation
• Excellent Benefits
• Opportunities for personal and career growth
• An environment that values innovation to improve patient care

For more than 20 years, ARcare’s nurses have been the heart of one of the state’s most trusted care teams known for delivering top-quality healthcare to rural Arkansas communities, regardless of ability to pay.

Today, as we continue to grow, we invite you to join our team of dedicated healthcare professionals and unite in our mission of providing Health for All.

If you’re ready for a career in a fast-paced, cutting-edge work environment, visit arcare.net today!

877-578-9400
What must be included in a Collaborative Practice Agreement? Does it need to be signed by the APN and the collaborating physician? How many collaborating physicians do I need to include? Is there an example I can use? How often does it need to be updated? Do I send in a copy when I renew my license? Is the Collaborative Agreement considered to be a “supervisory” agreement between the APN and the collaborating physician?

These are frequently asked questions we have received about the Collaborative Practice Agreement.

Advanced practice nurses (APNs) with Prescriptive Authority must submit a Collaborative Practice Agreement (CPA) and Quality Assurance (QA) Plan upon initial application for Prescriptive Authority. For license renewal, if the CPA and QA Plan are still exactly the same as previously submitted, you may fax in the previously signed Collaborative Practice Agreement without getting new signatures. However, if there are any changes, you must submit a new original CPA and QA Plan. You will then receive a letter stating that your CPA and QA Plan have been approved or needs revision.

The purpose of the CPA is to provide the APN with a reliable resource phy-
Here for you, for life.

Jessica Royal, RN, BSN, PCCN
Assistant Director, Cardiology

“I started here as a staff nurse, moved into the role of a charge nurse, then became a preceptor to train and mentor new nurses, then shortly after that I was promoted to Assistant Director of Cardiology. Washington Regional has some of the areas best physicians and nurses, and I love that the hospital is committed to community service.” – Jessica

To join our team
Apply online at www.wregional.com
or call HR at 479-463-1065 and ask for Melissa Williams, Employment Manager.

Jill Hasley, MNSc, RN,
ASBN Program Coordinator

There are specific guidelines that must be addressed in a CPA. These guidelines can be found on the ASBN’s website in the ASBN Rules, Chapter 4: Advanced Practice Nursing.

The guidelines that must be included in the CPA (but not limited to) follow:

- a collaborating physician who is licensed in Arkansas, has an unrestricted DEA registration number and who has a practice comparable in scope, specialty, or expertise to that of the APN.
- the collaborating physician agrees to be available for consultation and/or referral either in person or via electronic/telephonic communication.
- the use of protocols for prescriptive authority, which should be reviewed annually. Do not submit prescriptive protocols to the ASBN unless they are requested.
- plans for emergency coverage of the health care needs of the patient in the absence of the APN and/or collaborating physician.
- a provision statement for quality assurance (a QA Plan must be submitted to the ASBN with initial or new CPAs).
- signatures of the APN and collaborating physician, which signify mutual agreement to the terms of the collaborative practice. The physician’s Arkansas medical license number and specialty must be included. The name and address of the work site(s) for the APN and the collaborating physician must also be provided.
- statement that the APN will limit prescribing to the area of educational preparation and certification.

The APN must use their own judgment regarding submitting more than one collaborating physician. For example, if an APN works at a hospital facility in the oncology and respiratory care units, they would need a collaborating physician for each unit, since the specialties are very different. Many Arkansas APNs work PRN in multiple facilities/clinics; therefore, they would need to have a separate CPA and QA Plan for each facility/clinic.

In addition to the QA Plan examples on the www.arsbn.org website (select the Adv. Practice tab), there is an example of a Collaborative Practice Agreement that most of Arkansas’ APNs use.
The Board of Nursing is composed of thirteen board members appointed by the Governor for four year terms with the following designations: seven registered nurses, one of which is advanced practice with prescriptive authority, two of which are diploma school graduates, two of which are associate degree graduates, and two baccalaureate degree or post-paccalaureate degree graduates; four licensed practical nurses or licensed psychiatric technician nurses, one consumer member; and one representative of the older population (age 60 or over). Board members can serve a total of two four-year terms.

Qualifications for the nurse Board members are that you have been a nurse for five years, actively practicing for the last three years, the last two of which must be in Arkansas.

Service on the Board requires a time commitment of two days a month for about nine months out of the year.

If you are interested in serving on the Board, you can apply through the Governor’s Web site, www.governor.arkansas.gov. On the left side under Services, click on the link for Board Appointments. You will then fill out an online application. It is helpful to have letters of support from your legislators and your professional colleagues. If considered, a thorough background investigation is conducted. If selected, you will receive an appointment letter from the Governor.

The Nurse Licensure Compact Administrators (NLCA) released “The Nurse Licensure Compact Explained,” a new video that explains the privilege to practice that a multistate license provides to registered nurses and licensed practical/vocational nurses. In addition to explaining the difference between single state and multistate license, nurses learn what states are compact states, eligibility requirements for a multistate license, and key points to note when moving to a new state. The video can be found on our website at www.arsbn.org. Choose the Compact tab, then the link at the bottom of the page.
SUPERVISOR, TELEMEDICINE UNIT (APN)
position will be located in Little Rock

Incumbent will be clinical lead and will supervise the Advanced Practice Nurse and Medical Assistant/Nurse Extender. The APN’s clinical actions will be governed by strict evidence based clinical protocols that have been agreed upon by community cardiologists. The APN will interpret previously obtained (from multiple sources) patient history, home based wireless biometric data and information obtained telephonically from enrolled patients and make clinical decisions based on protocols. The APN will be responsible to assure clinical care is always coordinated with other members of the telemedicine team, related units such as case management/dietary education/pharmacy and participating community physicians. **Individual must meet the following minimum qualifications:**

- Current licensed RN with Masters Degree from an Accredited Advanced Nurse Practitioners Program
- Must have obtained APN Certification
- Minimum of 2 yrs APN experience
- Experience in a Cardiologist practice, ICU, or CCU as an RN or APN
- Basic computer skills
- Leadership or supervisory experience preferred

We offer an excellent benefit package and competitive salary. To view position description and complete an application please visit our website at www.arkansasbluecross.com

**Careers That Are Good For You!**
NURSING:
KALEIDOSCOPE
OF PRACTICE
CONTINUING EDUCATION WORKSHOP

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

SCHEDULE

8:30 - 9:00 a.m. ASBN 101 A Line in the Sand: Professional Boundaries in Nursing
9:00 - 10:00 a.m. Break
10:00 - 10:15 a.m. Can You Spot a Red Herring? Stay safe! Infection Control & Disaster Preparedness Lunch
10:15 - 11:00 a.m. CSI: What Not to Do
11:00 - 12:00 noon Stay safe! Infection Control & Disaster Preparedness
12:00 - 12:45 p.m. Lunch
12:45 - 1:30 p.m. Licensure Privilege to Practice Break
1:30 - 2:30 p.m. CSI: What Not to Do
2:30 - 2:45 p.m. Break
2:45 - 3:45 p.m. The Nuts and Bolts of NCLEX®

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

REGISTRATION FORM

Online registration available after January 15, 2012

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

Check date you plan to attend: [ ] March 8 [ ] September 26 [ ] November 8

NAME_________________________________________________________ LICENSE NUMBER________________________________________

CITY_______________________________ ZIP____________ PHONE______________________

Arkansas State Board of Nursing • 1123 S. University Ave., Suite 800 • Little Rock, AR 72204 • 501.686.2700 • www.arsbn.org
How do compact licenses work?

If your primary state of residence is in a compact state you cannot hold a license in other compact states. You may work in any other compact State on that compact license. Single state licenses are issued to persons who live in a non-compact state and want to work in Arkansas.

I have only had my license for one year. Will I need the entire 15 Contact hours of Continuing Education?

If your initial license is valid for less than two years, you do not need continuing education with the first renewal.

I have enrolled in a BSN to MSN program and keep hearing that a doctorate will be required for APNs around 2015 and some say 2013. Can you let me know when this will go into effect?

At this time, there is no requirement for APNs to hold a doctorate degree in order to practice. The American Association of Colleges of Nursing (AACN) has made a recommendation for APNs to move from the Master’s degree to the doctorate level by 2015. However, it is within each state’s Board of Nursing’s jurisdiction to make this a requirement. At the present time, no state Board of Nursing has adopted the doctorate degree as the entry-level degree for APN practice.

Also keep in mind that a nurse’s license cannot be rescinded unless they do not renew their license or violate the Nurse Practice Act or ASBN Rules.

The ASBN could conceivably propose to require a doctorate degree for APNs in the future, but it is not being discussed at this time.

Am I still required to take 20 hours of continuing education if my license is expired for only one day?

Arkansas State Board of Nursing Rules do not speak specifically to CE requirements for individuals whose license has expired, but it does address CE requirements from inactive status. Since an expired license is an inactive status, when a person’s license expires, even for one day, that places them into the category of having to have completed 20 hours of continuing education in order to renew the license.

If the individual is audited following expiration of a license, Arkansas State Board of Nursing would hold them accountable for having the 20 contact hours of practice focused continuing education.

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

The Delegation Chapter of the ASBN Rules lists tasks that can be delegated without prior assessment, tasks that shall not be delegated and describes circumstances under which other tasks can be delegated if the five rights are met. Medication administration by any route is in the list of tasks that shall not be delegated to any unlicensed persons. Nurses who delegate to unlicensed personnel the performance of tasks other than as described in Chapter 5 are subject to disciplinary action for unprofessional conduct.
It is the Board’s opinion that the Arkansas State Board of Nursing School Nurse Roles and Responsibilities Practice Guidelines may be applied to settings other than schools provided they are used as a whole and not taken out of context. Further it is the opinion of the Board that it is inappropriate to use these guidelines to approve or deny services to clients.

In May 2000 the Arkansas State Board of Nursing approved practice guidelines for school nurses. These guidelines were developed to assist the school nurse in determining the nursing care activities that could safely be delegated when certain conditions were met. The guidelines may be applied to other similar settings if:

1. Nursing care is NOT the primary purpose of the client being in the setting,
2. The parent/guardian would do the same nursing task(s) if they were present, and
3. The parent/guardian has given their consent for the unlicensed person to perform the nursing tasks.

In addition, the nurse who delegates nursing care to an unlicensed person must apply the following criteria in determining if it is appropriate to delegate the care:

1. A licensed nurse responsible for the client’s nursing care and qualified to determine the appropriate application of delegation to an unlicensed person must assess the client. Periodic reassessment must confirm that the nursing care being delegated to an unlicensed person continues to be appropriate.
2. The client’s nursing care needs must be stable.
3. The performance of the nursing care by an unlicensed person must not pose a potential harm to the client.
4. No or little modification can be made in the nursing care provided the client.
5. The nursing care being provided for the client cannot involve ongoing assessments, interpretations, or decision-making.
6. The competency of the unlicensed person to perform the required nursing care is validated and documented. This requires the nurse who is delegating the nursing care to be familiar with the client’s needs and with the unlicensed person’s skills.
7. Supervision that is required for the individual unlicensed person performing the specific task(s) for a specific client is readily available.
8. The facilities’ policies and procedures also recognize that the nurse who is delegating the task(s) is responsible for determining that a task is appropriate to delegate in a specific situation.

Nurses who delegate nursing tasks are responsible and accountable for ensuring that the delegation was appropriate. Unlicensed persons are responsible and accountable for competent performance of the nursing care that is delegated to them which includes calling the delegating nurse for assistance if the client’s condition or needs change.

Adopted: February 12, 2003
As the largest employer in Hot Springs and three-time large-company Gold Award recipient and ambassador to the Arkansas Governor’s Work Life Balance Award, St. Joseph’s Mercy provides health care services for residents of Hot Springs and surrounding communities. With 24 clinics across five counties, St. Joseph’s Mercy offers a variety of health care positions tailored to fit the needs of co-workers. For more information on positions available at St. Joseph’s Mercy, log on to www.SaintJosephs.com

Join Our Talent Network
http://www.jobs.net/jobs/mercy/join
Contact us at: StJosephsHR@Mercy.net

St. Joseph’s Mercy Health System
300 Werner Street • PO Box 29001
Hot Springs, AR 71903

Get The Nursing Degree You Want
RIGHT WHERE YOU LIVE!

Arkansas Rural Nursing Education Consortium enables Practical Nurses to advance their careers by becoming a Registered Nurse (RN) in as little as ONE YEAR!

BECOMING A REGISTERED NURSE WILL:
• allow you to work in a wide variety of settings
• increase opportunities for higher pay
• allow you more leadership and responsibility
• improve your opportunities for promotion

PARTICIPATING TWO-YEAR COLLEGES:
Arkansas State University-Newport • Black River Technical College UA, Nashville • Ozarka College, Melbourne • Rich Mountain Community College, Mena • South Arkansas Community College, El Dorado • University of Arkansas Community College-Hope • University of Arkansas Community College-Morrilton (All Colleges offer LPN Certificates as well)

Download an application packet at www.arnec.org
Classes begin in January and end in December

The University of Arkansas Community College at Hope is now accepting applications for the following positions.

Practical Nursing Instructor - beginning January 2012
This is a 10 month appointment. Qualifications - Masters Degree in Nursing with an unrestricted Arkansas RN license, 3 years clinical practice; teaching experience preferred.

Practical Nursing Instructor/ARNEC Chair - beginning July 2012
This is an 11 month appointment. Qualifications - Masters Degree in Nursing with an unrestricted Arkansas RN license, 3 years clinical practice; teaching experience preferred.

Please send letter of application, resume, three letters of recommendation, official transcripts and a University of Arkansas Community College at Hope application to the Human Resource Officer
University of Arkansas Community College at Hope
P.O. Box 140 • Hope, AR 71802
Prompt application is encouraged as the application review process will begin immediately. For detailed information & application please visit www.uacch.edu.
This position is subject to a pre-employment criminal background check. A criminal conviction or arrest pending adjudication alone shall not disqualify an applicant in the absence of a relationship to the requirements of the position. Background check information will be used in a confidential, nondiscriminatory manner consistent with state and federal law. EOE/AA.

The nurses at Arkansas Children’s Hospital are making a difference in children’s lives every day. We salute them for their commitment to ACH and the children of Arkansas.

...for making a difference every day at ACH.

Thank you!

www.arsbn.org
Your life is busy. Mineral make up is healthy for your skin, quick and easy to use. You can even sleep in it without clogging your pores.

Enjoy beautiful healthy skin with botanical easy to use Mineral Make up from Jordan Essentials.
The full statutory citations for disciplinary actions can be found at www.arsbn.org under Nurse Practice Act, Sub Chapter 3, §17-87-309. Frequent violations are ACA §17-87-309(a)(1) “Is guilty of fraud or deceit in procuring or attempting to procure a license to practice nursing or engaged in the practice of nursing without a valid license;” (a)(2) “Is guilty of a crime or gross immorality;” (a)(4) “Is habitually intemperate or is addicted to the use of habit-forming drugs;” (a)(6) “Is guilty of unprofessional conduct;” and (a)(9) “Has willfully or repeatedly violated any of the provisions of this chapter.” Other orders by the Board include civil penalties (CP), specific education courses (ED), and research papers (RP). Probation periods vary and may include an impaired-nurse contract with an employer and/or drug monitoring and treatment programs.

Each individual nurse is responsible for reporting any actual or suspected violations of the Nurse Practice Act. To submit a report use the online complaint form at www.arsbn.org, or to receive additional information, contact the Nursing Practice Section at 501.686.2700 or Arkansas State Board of Nursing, 1123 South University, Suite 800, Little Rock, Arkansas 72204.
### BOARD DISCIPLINARY ACTIONS - JULY 1, 2010 - JUNE 30, 2011

<table>
<thead>
<tr>
<th>ACTION</th>
<th>RN</th>
<th>CRNA</th>
<th>APN</th>
<th>RNP</th>
<th>LPN</th>
<th>LPTN</th>
<th>APPL</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Licenses Suspended</td>
<td>29</td>
<td>0</td>
<td>2</td>
<td>0</td>
<td>33</td>
<td>1</td>
<td>0</td>
<td>65</td>
</tr>
<tr>
<td>Licenses Revoked</td>
<td>3</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>Placed on Probation</td>
<td>81</td>
<td>0</td>
<td>6</td>
<td>2</td>
<td>46</td>
<td>0</td>
<td>13</td>
<td>148</td>
</tr>
<tr>
<td>Licenses Reinstated</td>
<td>7</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>11</td>
<td>0</td>
<td>0</td>
<td>19</td>
</tr>
<tr>
<td>Probation Removed</td>
<td>46</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>22</td>
<td>0</td>
<td>0</td>
<td>70</td>
</tr>
<tr>
<td>Written Reprimands</td>
<td>27</td>
<td>1</td>
<td>2</td>
<td>0</td>
<td>29</td>
<td>0</td>
<td>0</td>
<td>59</td>
</tr>
<tr>
<td>Voluntary Surrenders</td>
<td>54</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>36</td>
<td>1</td>
<td>0</td>
<td>92</td>
</tr>
<tr>
<td>Imposters Investigated</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Prescriptive Authority Terminated</td>
<td>0</td>
<td>0</td>
<td>4</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>4</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>247</td>
<td>3</td>
<td>16</td>
<td>2</td>
<td>179</td>
<td>2</td>
<td>13</td>
<td>462</td>
</tr>
</tbody>
</table>

| ADMINISTRATIVE HEARINGS         | 38 | 1    | 2   | 0   | 44  | 1    | 15   | 101   |
| Consent Agreements              | 79 | 0    | 6   | 2   | 45  | 0    | 11   | 143   |

| Licensees Fined                 | 75 | 0    | 6   | 2   | 41  | 1    | 0    | 125   |

**Total Fines Assessed** $156,810.00  
**Total Fines Collected** $128,409.72

In addition, the Board sent non-disciplinary letters of warning as follows:

| Letters of Warning              | 54 | 1    | 3   | 1   | 58  | 2    | 2    | 121   |

---

**Targeted Networking - The “NEW” Classifieds**

Reach over 48,000 nurses in Arkansas for as little as $85.

Contact Michele Forinash  
mforinash@pcipublishing.com  
1-800-561-4686 ext. 112

---

**Nursing Board Issues?**

Call an attorney with Nursing Board experience...  
Darren O’Quinn  
800-455-0581  
www.DarrenOQuinn.com

The Law Offices of Darren O’Quinn  
415 North McKinley Street, Suite 1000  
Little Rock, Arkansas 72205

---

For unto you is born this day in the city of David  
a Saviour, which is Christ the Lord. - Luke 2:11

Wishing you a Very Merry Christmas & Blessed New Year!!

We are so THANKFUL,  
Thank you for an awesome 2011!

Come join our professional team today,  
currently increasing our RN staff: Psych, LTAC & in L/D  
Call us today!! 501-224-1010

Arkansas Medical Staffing, LLC  
“Caring Professionals by Your Side”

---

For goo updates, please visit us online at  
www.Update.com
Disciplinary Actions NOVEMBER 2011

PROBATION
Bennett, Alicia Marie
PN Applicant, Rogers
A.C.A.§17-87-309(a)(2)
Probation – 1 year

Coulter, Sibyl Daneylle
L35145, Arkadelphia
A.C.A.§17-87-309(a)(1), (a)(2) & (a)(6)
Probation – 1 year
Civil Penalty - $1,200.00

Despain, Jr., Robert Doyle
R84284, Jonesboro
A.C.A.§17-87-309(a)(1), (a)(4) & (a)(6)
Probation – 1 year

French, Melissa Dawn
R65038, L33367 (exp), Arkadelphia
Probation – 1 year

Harris, Kelly Jeanne Summer
Harris
L50282, Texarkana
Probation – 1 year

Henry, Jamesena Louise Hill
L23583, Judsonia
A.C.A.§17-87-309(a)(6)
Probation – 1 year
Civil Penalty - $1,300.00

Jackson, Buzzy Jo Campbell
R85950, Conway
A.C.A.§17-87-309(a)(2), (a)(4) & (a)(6)
Probation – 1 year
Civil Penalty - $500.00

Noel, Billy Harley
A01824, R42221, PAC 01688, Branch
A.C.A.§17-87-309(a)(2) & (a)(6)
Probation – 3 years and Voluntary Surrendered – 3 yrs,
Prescriptive Authority Only
Civil Penalty - $500.00

Sharum, Kevin Arthur
R27984, Alma
Probation Non-Compliance
Probation – 2 years
Civil Penalty - $500 plus prev bal

SUSPENSION
Bhatia, Ravi Alethea
RS6347, Little Rock
Probation Non-Compliance
Suspension – 2 years, followed by

Boyer, Michelle LaJean
R71767, Bryant
Probation Non-Compliance
Suspension – 2 years, followed by
Probation – 2 years
Civil Penalty - $2,000 plus prev bal

Breuer, Linda Sue Laswell
L38357 (exp), Rose Bud
Probation Non-Compliance
Suspension – 3 years, followed by
Probation – 2 years
Civil Penalty - $2,500 plus prev bal

Danner, Barbara A.
L38793, Texarkana
Probation Non-Compliance
Suspension – 2 years, followed by
Probation – 2 years
Civil Penalty - $2,000

Hevett, Francene D. Ray
R33571 (exp), Rogers
A.C.A.§17-87-309(a)(4) & (a)(6)
Suspension – 3 years, followed by
Probation – 2 years
Civil Penalty - $3,362.50

Nelson, Dorothy Jean Robinson
L23734, Dermott
Probation Non-Compliance
Suspension – 1 year, followed by
Probation – 2 years
Civil Penalty - $1,500.00

Sampley, Annie Marie Davenport
L38379, Ozark
Probation Non-Compliance
Suspension – 1 ½ years, followed by
Probation – 3 years
Civil Penalty - $1,000 plus prev bal

Stone, Tamatha Arm
R30708 (exp), Winterville, GA
Probation Non-Compliance
Suspension – 1 year, followed by
Civil Penalty - $1,000 plus prev bal

VOLUNTARY SURRENDER
Buford, Rita Carol
R15522, West Helena
November 15, 2011

Burch, Michael Anthony
L51192, Portageville, MO
November 21, 2011

Cetinkaya, Teresa Charlene
L41423, Imboden
November 3, 2011

Culberson, Rita Corine
T01580, Little Rock
November 2, 2011

Henson, Allen Keith
L50348, Newport
November 2, 2011

Mahar, Shawn Noel Rouse Isom
L44431, Flippin
November 17, 2011

Stephens, Carla Sue
LA7682, Bradenton, FL
November 3, 2011

Soboaugh, Sarah Marie
R77253, Conway
November 9, 2011

Traywick, Kagan Leah Walls
L43248, Jacksonville
November 9, 2011

Wilson, Karla Leigh
L45443, Wynne
November 3, 2011

RESCISSON
Alaman, Sayward Mary Allen
L36087, Searcy
Letter of Reprimand – Rescinded
November 9, 2011

REVOCATION
Wood, Gerrold Glenn
L24679, Oxford
November 9, 2011

PROBATORY STATUS REMOVED
Fitzhugh, Casey Lee
R80953, Benton
November 17, 2011

APPEAL DENIED
Sadie, Marie Janine
A03528, PAC 3383, Forsyth, MO
LOR UPHeld

WAIVER GRANTED
Doolittle, John William
NCLEX®-PN Applicant, little Rock
November 9, 2011

Reed, Benice Dianne Burnett
NCLEX®-Applicant
November 10, 2011

Send application and/or resume to jrowen.ashlr@ahmgt.com
For more information and/or application, please visit www.ahmgt.com

WE HAVE MOVED to
1400 Braden St., Jacksonville, AR
501-985-7026

Nurses for the Girls Shirts Available Now!

Limited number of t-shirts left...
Medium, Large & X-Large
$15.00 Each

Call to place your order today!
1-800-561-4686 ext.101

WE HAVE MOVED to
1400 Braden St., Jacksonville, AR
501-985-7026

Nurses for the Girls Shirts Available Now!

Limited number of t-shirts left...
Medium, Large & X-Large
$15.00 Each

Call to place your order today!
1-800-561-4686 ext.101

Positions Available:
RN: Full-Time & PRN
minimum 2 years exp
Experienced Wound Nurse

Send application and/or resume to jrowen.ashlr@ahmgt.com
For more information and/or application, please visit www.ahmgt.com
RN's and LPN's: We're hiring!

Since 1993, Care IV Home Health has proudly provided quality home health services to the state of Arkansas. Join us today!

NOW HIRING:

- RN Case Manager needed F/T in Little Rock. RN w/Home Care, Medicare & OASIS req. Excellent benefits + paid mileage.
- RNs & LPNs: Private Duty shifts open in areas such as Little Rock, Conway, Cabot, Ft. Smith, Hot Springs, Farmington, Clarksville, Russellville and more! One Patient/One Nurse. Training avail.

To apply, visit: www.care4.com
Ph: 501-686-2420 / (888) 731-CARE
Email: nkustoff@care4.com

Where membership matters.

In the fields or the suburbs.
In the chicken houses or the downtown lofts.

With nearly one in every four Arkansans belonging to a Farm Bureau family, chances are you can find one of our members anywhere.

Furthermore, the diversity of our members is a direct result of the diversity of benefits we offer.

An advocate at the Capitol or affordable insurance. A discount on a new vehicle or a college scholarship.

We really do have something for everyone.
COMMUNITY OUTREACH

Magnet Principles are Working at UAMS.

Community outreach is important to nurses at UAMS. One of several community service projects UAMS nurses have participated in during the past year is the collection of plastic bags to make sleep mats for homeless people in Central Arkansas. The mats are lightweight and padded, resist moisture and are more hygienic than blankets. Sleep mats are offered to homeless patients in the Emergency Department and local agencies working to help the homeless. The mats serve not only as a comfort for the homeless, but also keep plastic out of our landfills.

If you want a nursing career where you can make a difference, consider UAMS.

CURRENT EMPLOYMENT OPPORTUNITY

Neurology/Neurosurgery Manager of a 30-bed state-of-the-art unit. BSN required, MSN & National certification preferred. For more information, visit www.uams.edu/don or call 501-686-5691.
Nursing Continuing Education Cruise
April 22-29, 2012

Cruise your way to Nursing CE Credits on the Caribbean Sea aboard Carnival’s Conquest!

Day | Port
--- | ---
Sun., April 22, 2012 | New Orleans, Louisiana
Mon., April 23, 2012 | Fun Day At Sea
Tues., April 24, 2012 | Fun Day At Sea
Wed., April 25, 2012 | Montego Bay, Jamaica
Thurs., April 26, 2012 | Georgetown, Grand Cayman
Fri., April 27, 2012 | Cozumel, Mexico
Sat., April 28, 2012 | Fun Day At Sea
Sun., April 29, 2012 | New Orleans, Louisiana

Who says Continuing Education can’t be fun?
Join ThinkNurse and Poe Travel for our 7th Annual CE Cruise. Cruise the Caribbean on Carnival’s Conquest while you earn your annual CE credits and write the trip off on your taxes! Prices for this cruise and conference are based on double occupancy (bring your spouse, significant other, or friend) and start at only $1055 per person (not including airfare to New Orleans). A $250 non-refundable per-person deposit is required to secure your reservations. Please ask about our Cruise LayAway Plan!

There’s no better way to conquer the High Seas than with the ship Carnival Conquest! Beautiful destination spots, award-winning stage shows, swanky clubs and lounges plus Spa Carnival, a friendly casino, delicious dining options and the Carnival Seaside Theatre. Make your reservations today!

For more information about the cruise and the curriculum, please log on to our Web site at ThinkNurse.com or call Teresa Grace at Poe Travel Toll-free at 800.727.1960.

Cruise TO the cruise with us…
On the bus.
Skip the airline fuss.

Forget the airline security hassles, cramped seating, ear-piercing loud engines and long lines. Take the bus to New Orleans, with us, for only $200 roundtrip, per person. Save $140 roundtrip, per person, over airfares! We’ve chartered a 56 passenger motorcoach to whisk you to departure on our 7th Annual ThinkNurse Continuing Education Caribbean Cruise! It’s equipped with comfortable amenities like reading lights, internet service, DVD players, fully equipped restrooms, roomy luggage bins, fully adjustable seats, large tinted windows and complete climate-controlled comfort. We’ll leave from the Baptist School of Nursing in Little Rock (Col Glenn Rd. off I-430) at 4 A.M., on April 22nd and head straight to New Orleans to connect with our ship. You may leave your vehicle at the school if you like. We will return to the same location after the cruise. Join us for a pleasant trip!

Reserve your seats now.
Space Limited. Reserve Now.

POETRAVEL