

# RN UPDATE

Accreditation ★ Licensure ★ Practice ★ Compliance

September 1992

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**Vice President** Sara J. Keele, MS, RN  
**Treasurer** Pettey C. Ross, MS, RN  
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## 1992-93 OFFICERS ELECTED

The Board has elected Morris H. Parrish, PhD, a consumer member from Irving, President for 1993. After serving three consecutive terms as President, Dr. Eileen Piwetz of Midland, turned the gavel over to Dr. Parrish at the Board's meeting in Austin on July 22. Sara Keele of Houston was elected Vice President and Pettey Ross of El Paso was elected Treasurer. Their terms will run until July, 1993.

Dr. Parrish was appointed to the Board in 1989 and served as Treasurer from 1989 until 1991. He has an extensive background in hospital administration, having served as administrator for hospitals in Houston, Nacogdoches and Irving. He earned a bachelor's degree in business administration from Stephen F. Austin State University, Nacogdoches, a master's degree in health administration from Northwestern University, Evanston, Illinois and a doctorate in business administration from Kensington University, Glendale, California. He is a Life Fellow in the American College of Health Care Executives.

Dr. Parrish was elected to the City Council of Irving in 1991. He is chair of the Citizen Advocacy Center (CAC), a support center for public members of health care regulatory and governing boards, sponsored by the American Association of Retired Persons' Health Advocacy Services and is active in numerous other civic organizations. He was named Who's

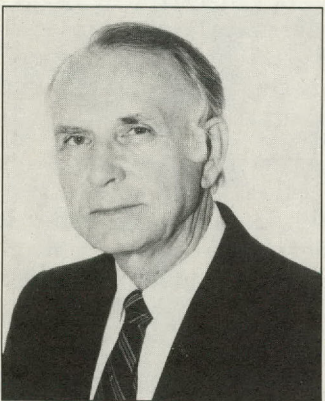
Who in the Southwest in 1991. In addition, he is a member of the Advisory Committee for the Graduate School of Health Care Administration at the University of Dallas and adjunct instructor of Allied Health Education at The University of Texas Southwestern Medical Center, Dallas.

Sara J. Keele is Director of Nursing Services Administration for Jefferson Davis Hospital in Houston. She was appointed to the Board in 1989, served as Treasurer from 1991-1992 and was a member of the Advanced Nurse Practitioner Advisory Committee. Currently she chairs the Task Force on the Use of Unlicensed Personnel. She received a bachelor's degree and a master's degree, both in nursing, from Texas Woman's University in Houston. Ms. Keele is a Certified Nurse Administrator Advanced.

Ms. Keele has been actively involved with hospital nursing service and has made numerous contributions to health care, nursing practice and education at state and national levels. She is a member of the American Nurses Association, Texas Nurses Association District 9, Texas Hospital Association, Texas Organization of Nurse Executives and American Organization of Nurse Executives. She is a former President of the Houston Organization of Nurse Executives and is a member of Sigma Theta Tau, the Federation of Houston Professional Women and Texas Executive Women.

Pettey Ross is manager of the Learning Resource Center at Providence Memorial Hospital in El Paso. She was appointed to the Board in 1989, served as Vice President from 1991-1992 and co-chaired the Joint Advisory Committee on Continuing Education from 1989-1991. She earned a bachelor's degree in nursing from Texas Christian University, Fort Worth and a master's degree in nursing from The University of Colorado, Boulder.

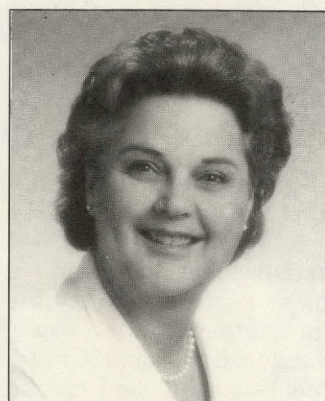
Ms. Ross has an extensive academic background



Morris H. Parrish, PhD  
President



Sara J. Keele, MS, RN  
Vice President



Pettey C. Ross, MS, RN  
Treasurer

cont. on page 2



Inside this Issue

Accustomation Course to be Topic at National Meeting ..... 4

Administrative Law Judge Hearings ..... 8

Americans with Disabilities Act ..... 7

Attn: ANPs ..... 11

BNE Nursing Consultant Recognized ..... 7

Board Adopts Position Statement on Laser Therapy ..... 2

Board Member Named to Advisory Committee ..... 2

CE Questions and Answers ..... 6

Compliance Reminders ..... 12

Debits ..... 15

Director of Education Appointed ..... 7

Disciplinary Actions/Warning/Impostors .. 13-14

Education Reports ..... 8

Errors in Subclavian Administration of PO Meds Continue ..... 4

Law Mandates Non-Renewal of License for Loan Default ..... 12

Legal Eagle ..... 9

Legislation Centralizes State Agency Legal Services ..... 8

Long Term Care Offers Rewards and Challenges .... 10

'92 NCLEX Figures Continue Upward Trend .... 7

1992-93 Officers Elected ..... 1

Nursing Education Advisory Committee ..... 5

Practice Related Questions and Answers ..... 12

President's Message ..... 3

Proposed Rules ..... 8

Requirements of Certificate Level ANP Programs ..... 5

Revocation vs Voluntary Surrender ..... 9

Staff on the Move ..... 15

Sunset Staff Plan On-Site Review of Board ..... 11

Survey of ANP Programs in Texas ..... 4

System Speeds Processing of License Renewals 11

Texas Selected to Serve on NCLEX Panels ..... 5

Use of the Title "Clinical Nurse Specialist" ..... 5

**OFFICERS ELECTED** *cont. from page 1*

including appointments at The University of Texas at El Paso College of Nursing, The University of Texas System School of Nursing, Texas Woman's University (Houston Center), Texas Christian University, Harris College of Nursing and the University of Arizona.

She is a perioperative nursing specialist, a medical surgical clinical specialist, and a member of Alpha Lambda Delta and Sigma Theta Tau National Honor Societies. She is listed among Who's Who in Nursing and the National Registry of Certified Advanced Clinical Nurse Practitioners. Community affiliations include Day Care Committee of the Young Women's Christian Association, Education Consultant for the El Paso State Center for Mental Health and Mental Retardation and member of the Nurse Advisory Committee for the Southwest Organ Bank. ♦

**BOARD ADOPTS POSITION STATEMENT ON LASER THERAPY**

Recently the Board was asked to consider whether performance of laser therapy is within the scope of nursing practice. The Board felt that while the registered nurse has an important role in the delivery of care to patients undergoing laser therapy, it is a medical procedure and should not be performed independently by a registered nurse. Following is the position statement adopted by the Board on May 19, 1992:

*Policy Statement on Performance of Laser Therapy by RNs*

The RN plays many important roles in the care of patients undergoing procedures performed with lasers. The Board views the use of lasers as a type of surgery. The RN may most appropriately be involved with the preparation and education of the patient, both pre and post operatively, with the operation of the laser equipment while the physician performs the procedure and the maintenance of a safe environment.

An RN *may not* perform the delivery of laser energy to a patient as an independent nursing function. An RN who has documented education and experience may, under the delegation and direct supervision of the physician, assist with the direct delivery of laser energy to the patient. There must be approved policies and procedures to guide the RN who performs this delegated medical act.—*Kathy Vrazel* ♦

**BOARD MEMBER NAMED TO EDUCATION COMMISSIONER'S ADVISORY COMMITTEE**

Mary V. Fenton, DrPh, RN, of Galveston has been appointed to the Health Professions Education Advisory Committee to the Commissioner of Higher Education. The 18-member committee will study broad-based issues of concern in health education, including the review of proposed new health-related degree and certificate programs. The review process is to assure the commissioner that new programs approved have quality, are needed in the health care system and that they are not unnecessarily duplicative.

The committee's broad based membership represents various health education fields, specialized interests, geographical areas and types of health education institutions. It includes two health science center presidents, three university/college presidents, one provost, a community college administrator and four deans representing medicine, nursing, allied health sciences and graduate biomedical sciences.

Dr. Fenton is Dean and Professor of The University of Texas Medical Branch at Galveston School of Nursing. She was appointed to the Board of Nurse Examiners in 1991. ♦



## PRESIDENT'S MESSAGE

As this issue goes to print, I am concluding my tenure as President of the Board of Nurse Examiners. The past three years have been filled with opportunities and challenges, but most of all, it has been gratifying to know and to work with one of Texas' greatest teams—the Board staff. Board members come and Board members leave as their terms expire, but the staff members have been in place for the duration.

Board and staff members hold different roles. The Board governs; the Executive Director manages; and the staff operates. The Board initiates policies and the staff runs the show by formulating and implementing these policies. The Board communicates the outcomes desired and the staff figures out how to get there. Mutual support is critical and the staff has the most difficult position—who else has to work for nine different bosses scattered all over a huge state?

The staff is the Board's most valuable resource. Our staff members are on top of virtually every situation that impacts nursing. It may be impending legislation, a resurgence of an old issue or a new trend.

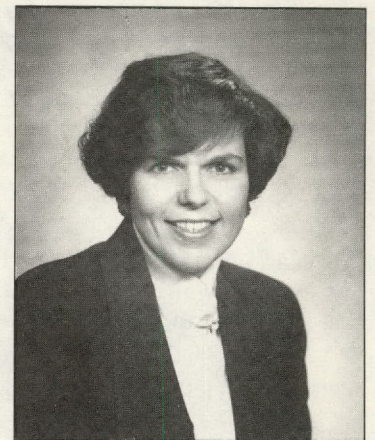
We have found our staff to be creative and innovative. For example, the highly successful Speaking Tour of Texas was a staff idea, as well as the accustomation course for foreign educated nurses. The *RN Update* is solely a staff idea and creation four times a year. To enhance communication, staff members initiated open forums at Board meetings, placed the "Legal Eagle" in the newsletter and expanded the telephone system.

The Board staff members are major sources of information having both the expertise and the technical background.

These dedicated individuals write guidelines and draft proposed rules, continually seeking input from our constituents through task forces and committees.

All of our staff members have contributed a great deal to the positive image that nursing projects in the State of Texas through their professionalism, their involvement and their dedication to the mission of the Board. They have worked tirelessly to prepare documents which Board members used in legislative and budget hearings. Many of our staff members must travel frequently and often to unfriendly territory. Primarily due to the efforts of the total staff, the Board of Nurse Examiners received the coveted Member Board Award in 1990 from the National Council of State Boards of Nursing for leadership, commitment and outstanding dedication to the regulation of nursing. Through my frequent contacts with the Board office, I sense that staff members demonstrate both ownership and pride, beginning with the individual who answers the phone to the person with whom I ultimately wish to speak and everyone in between.

Thank you, members of the Board staff. You have made these years a warm and memorable experience! I shall not forget you.



*Eileen Piwetz, EdD, RN  
President,  
Board of Nurse  
Examiners 1989-1992*

### BOARD MEETING DATES

Regular meetings of the Board of Nurse Examiners for the State of Texas are scheduled on the following dates:

**September 22-23, 1992**      **Austin**

**November 17-18, 1992**      **Austin**

The Board meetings are open to the public. Any group or individual wishing to attend any portion of the Board meeting should contact Erlene Fisher at (512) 835-8675 at least four weeks prior to the Board meeting to verify availability of space, the date and location.

All contested cases (formal disciplinary hearings) are heard by an Administrative Law Judge in the newly-created State Office of Administrative Hearings.

Individuals or representatives have an opportunity to communicate directly with the Board during the open forum which is held during each meeting.

Interested persons are requested to notify the Executive Director in writing or by telephone prior to the scheduled Board meeting so that the request to address the Board is assured and to confirm the date, time and location of the open forum.



## ERRORS IN SUBCLAVIAN ADMINISTRATION OF P.O. MEDS CONTINUE

Since 1987, the Board has received and investigated four complaints regarding the improper administration of oral medications through subclavian lines. These incidents occurred in facilities across the state. Alarming, all four of the individuals named in the complaints were new graduates. Two of these individuals were working with Graduate Nurse (GN) permits at the time the incidents occurred and the other two had been licensed less than one month.

In investigating these incidents, the Board found that various oral medications were administered or were injected but clogged the line and did not infuse into the patient. In the 1987 case, a Bactrim DS (trimethoprim and sulfamethoxazole) tablet was crushed and injected into the IV line. In 1991, a Mexitil (mexiletine hydrochloride) capsule was dissolved in Maalox and injected into the subclavian with Total Parenteral Nutrition (TPN) solution infusing into the patient. As with the 1987 incident, the line became clogged preventing a negative outcome to the patient. In 1989, Mylanta was injected directly into the subclavian line resulting in the death of the patient.

Charges have been filed, in yet another case occurring this year, where a GN is alleged to have injected Mycostatin Swish and Swallow and Mexitil via the subclavian line in one patient and Megace (megestrol acetate) through the subclavian line of another patient.

The Board has revoked the licenses of two of these individuals, suspended one for three years with strenuous monitoring stipulations and the hearing on the 1992 case is pending.

These cases, although rare, should remind each GN and RN of their responsibility to know the proper procedure for the administration of each medication. Given that these incidents all involved new graduates, we urge nurse administrators to evaluate the assignment and supervision of these inexperienced graduates. Proper assignment, supervision and mentoring by nursing educators and the RN staff could prevent devastating errors.

This data also has implications for the nursing education programs across the state. The fundamentals of proper medication administration including the five "rights": right patient, right dose, right route, right time, right drug, cannot be overemphasized. Exposure to various types of intravenous access devices is crucial and should be sought out during students' clinical rotations.—*Cady Crismon* ♦

### DID YOU KNOW . . .

that every employer of 10 or more RNs must establish a Peer Review Committee for reviewing reportable incidents? It's the law.

## ACCUSTOMATION COURSE TO BE TOPIC AT NATIONAL MEETING

The results of Texas' accustomation course requirement for foreign educated nurses was the subject of a presentation by Cady Crismon, MSN, RN, CNS, Director of Practice and Compliance, at the National Council of State Boards of Nursing Annual Meeting in Colorado Springs in August. The new requirement has attracted the attention of nursing boards from across the country as concern over the low pass rate of foreign educated candidates on NCLEX-RN continues.

The rules require foreign educated nurses to enroll in a 240-hour Board approved accustomation course prior to being issued a temporary permit and to successfully complete the course prior to taking NCLEX-RN. For the February 1992 exam, the first in which the new rules were in effect, 82% of the foreign educated, first time candidates completing an accustomation course, passed the exam—a 22% improvement over July 1991. ♦

## SURVEY OF ADVANCED NURSE PRACTITIONER PROGRAMS IN TEXAS

In response to the Governor's Task Force on Health Policy's need for information concerning Advanced Nurse Practitioner (ANP) educational programs, Board staff conducted a survey of these programs in May, 1992. Advanced Nurse Practitioner programs include those educational programs preparing Nurse Anesthetists, Nurse Midwives, Nurse Practitioners and Clinical Nurse Specialists.

Of the 17 programs who responded, there are three certificate level and 14 graduate level programs preparing ANPs. Of these programs, three prepare Nurse Midwives, four prepare Nurse Anesthetists, nine prepare Nurse Practitioners and 10 prepare Clinical Nurse Specialists. A list of all ANP programs and key contact people at each program has been developed from the survey.

The survey collected student enrollment data from 1989-1991 which reveals that during that time period enrollment in Nurse Anesthesia programs increased by 41%; in Nurse Midwifery programs by 19%; in Nurse Practitioner programs by 43%; and in Clinical Nurse Specialist programs by 39%. Overall, the percent increase in ANP programs between 1989-1991 was 40%.

Respondents indicated that they needed additional resources to expand their programs in the future. Specifically, in order to increase enrollment, qualified faculty, adequate funding and additional physical space were identified as the top three resources needed to expand existing programs.

For further information regarding the results of this survey, contact Kathy Thomas, MN, RN, CPNP, Nursing Consultant at the Board office at 512/835-8657.—*Kathy Thomas* ♦



## USE OF THE TITLE "CLINICAL NURSE SPECIALIST"

In recent months, Board staff have received several phone calls from individuals reporting that employers are using the title "Clinical Nurse Specialist" as a clinical ladder or differentiated practice title.

Clinical Nurse Specialist (CNS) is a title protected by Rule 221 of the Board's *Rules and Regulations Relating to Professional Nurse Education, Licensure and Practice*. In other words, no RN may use the title "Clinical Nurse Specialist" without the approval of the Board. An RN who wishes to use the title of CNS must apply to the Board for recognition as Advanced Nurse Practitioner (ANP). Advanced Nurse Practitioners include Nurse Anesthetists, Nurse Midwives, Nurse Practitioners and Clinical Nurse Specialists. The credentials of ANPs are reviewed by the Board of Nurse Examiners through an application process designed to assure the public that educational credentials are appropriate for these roles of advanced nursing practice. Following approval, the ANP is issued a letter and a certificate specifying approval of the title "Clinical Nurse Specialist". One of these documents can be provided to employers to verify Board recognition.

According to the policy of the Board, a CNS must hold a master's degree in nursing with a minimum of nine semester hours in a specific clinical focus area. For an ANP application, please write the Board office; mark all correspondence, Attn: ANP.—*Kathy Thomas* ♦

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## TEXANS SELECTED TO SERVE ON NCLEX-RN PANELS

Seven RNs from Texas have been selected by the National Council of State Boards of Nursing (NCSBN) to serve on its NCLEX-RN panels as item writers and item reviewers for 1992.

Members of the item writing panel wrote questions for the licensure examination. Panel members included Karen Lyon, PhD, RN, El Paso; Marilyn Robinson Neumann, MA, RN, Killeen; and Judy Lynn Candler, MSN, RN, Kaufman. Jean Audrey Sorenson, MSN, RN, San Antonio, served as an alternate.

Members of the item reviewers panel reviewed test items for job relatedness, content accuracy and validity. Diane Thompson, RN, Amarillo, along with two RNs from El Paso, Cerena Suarez and Davie Johnson, were selected to serve on the item reviewer panel.

NCSBN is an organization through which boards of nursing work together on matters affecting the public's health, safety and welfare. Headquartered in Chicago, the NCSBN is comprised of 62 member boards throughout the United States as well as several U.S. territories. ♦

## REQUIREMENTS OF CERTIFICATE LEVEL ANP PROGRAMS

If you are interested in attending a certificate level program for Advanced Nurse Practitioners (ANPs) in Texas or another state, this article will be of interest to you. There are certificate level programs available across the country which prepare Nurse Anesthetists, Nurse Midwives and Nurse Practitioners. In Texas there are currently few certificate level programs remaining; there are two for Nurse Midwives and one for Women's Health Care Nurse Practitioners.

The Board recognizes graduates of certificate level programs, but there is some confusion among RNs about which programs are acceptable. Rule 221 of the Board's *Rules and Regulations Relating to Professional Nurse Education, Licensure and Practice* sets forth the requirements of ANP programs for those who wish to be recognized by the Board. The requirements of educational programs are as follows:

1. They must prepare graduates for the roles which are recognized by the Board;
2. They must be accredited by an organization recognized by the Board; and
3. They must be at least one academic year in length which may include a formal preceptorship.

There is significant confusion concerning requirement #2. Accreditation is a formal review process conducted by an organization which reviews and visits the specific program to ascertain that the program meets certain standards.

Graduates whose programs do not meet requirements #2 and/or #3 must be certified by an organization recognized by the Board. If you have any questions regarding whether a given certificate program meets these requirements, contact the Director of the program.—*Kathy Thomas* ♦

## NURSING EDUCATION ADVISORY COMMITTEE

The Nursing Education Advisory Committee has scheduled its final meeting for November 5, 1992, in Austin, for the purpose of formulating its recommendations for presentation to the Board. The committee was appointed in 1990 as a joint effort of the Board of Nurse Examiners and the Board of Vocational Nurse Examiners in cooperation with the Texas Higher Education Coordinating Board.

The committee's charges were to identify proposed general education and nursing competency levels, to examine short and long term nursing education and manpower needs in the state and to identify trends in nursing practice and societal forces which will dictate future competencies needed by nurses.

A full report of the committee's recommendations will be included in the next issue of *RN Update*. ♦



## CE QUESTIONS & ANSWERS

Approximately one-half of the licensed registered nurses in Texas have now been notified, with their license renewals, that continuing education requirements are in effect and that they are required to complete 20 contact hours (two continuing education units) before their next renewal. The CE rules, which went into effect September 1, 1991, are being phased in over two years and will be fully implemented in August, 1993.

Board staff continue to receive numerous calls regarding the new requirements. Following are some of the common questions that are being asked:

**Q: I am scheduled to renew my license in March 1993. Do I need continuing education credits for this renewal?**

A: No, the CE requirements begin with your 1993 renewal. You will be notified with your license renewal that CE rules are in effect and that 20 contact hours are required for your 1995 renewal.

**Q: My license expires October 31, 1992. There is a CE program that I would like to attend the second week of October. Will I receive credit for this program since it takes place before my license expires?**

A: Yes, the program would be accepted provided it meets the criteria in the rules. The CE hours must be earned between the first day of the renewal month and the last day of the subsequent renewal (in your case, October 1, 1992 to October 31, 1994).

**Q: What is the difference between a contact hour and a CEU?**

A: A contact hour is fifty consecutive minutes of a learning activity. A Continuing Education Unit (CEU) is 10 contact hours. The requirement is for 20 contact hours or two CEU's within a two-year period.

**Q: The rules state that five hours of Type II credit may be earned for certification. Does this include ACLS?**

A: Certification in the CE rules refers to certification in a nursing specialty, such as a certified critical care nurse (CCRN), certified emergency nurse (CEN), etc. Advanced Cardiac Life Support is not included in this definition. You may, however, receive credit for ACLS the first time you take the course. If the provider has had the course approved by one of the Board's credentialing agencies, you may count all of the hours; otherwise, you may count up to 10 Type II hours.

**Q: Frequently there are programs offered in my hospital which are approved for CME credit for physicians. If I attend these, may I receive nursing CE credit?**

A: Programs which are approved for continuing education credit for other health care professionals such as physicians, pharmacists, social workers, etc. may be accepted for Type II nursing hours if the program meets the criteria in the CE rules.

**Q: How can I find out about CE offerings in my area?**

A: You should contact local colleges, universities, nursing schools, major hospitals, professional nursing associations

for this information and request to be placed on their mailing lists. The Board office does not maintain a list of CE programs.

**Q: I heard some of my colleagues complaining that their nursing specialty organizations are not recognized by the Board as one of the five CE credentialing organizations. I haven't had any problems finding Type I programs, but I wondered if the Board is going to change or increase the number of credentialing groups.**

A: The Board considered the issue of recognizing additional credentialing agencies at its July, 1992 Board meeting and decided, because the rules are still being phased in, not to add credentialing groups at this time. After the rules are fully implemented and audits are performed to determine compliance, the Board will again consider requests to recognize other groups.

Currently, there are 119 approved Type I providers offering programs across the state. These providers have been approved by the Texas Nurses Association. There are additional providers approved by the other Board recognized credentialing organizations.

**Q: Are the articles in nursing journals, such as *RN Magazine*, accepted for CE credit, and if so, are they considered Type I or Type II?**

A: Home study programs are accepted for Type I credit if they have been approved by one of the Board's credentialing organizations, such as the American Nurses Association. You may earn all 20 hours in home study if the program is Type I. You are limited to five hours in home study if the program is Type II.

**Q: How will my CE hours be reported to the Board?**

A: It is not necessary to send anything to the Board's office. The Board will implement an auditing system and if you are audited, you will be requested to send documentation of your CE hours. Otherwise, keep this information in your files for two renewal periods (four years).

The Board has also developed a handy brochure entitled, "Continuing Education for Registered Nurses—What's Required?" that is being included in each nurse's license renewal. The text of this brochure was also reprinted in the February 1992 issue of *RN Update*. If you would like to receive a copy, please send a request along with a self-addressed, stamped envelope to the Board of Nurse Examiners, Box 140466, Austin, 78714, Attn: CE.—*Kathy Vrazel, Cady Crismon* ♦

### PRICE INCREASES FOR PUBLICATIONS

Due to increased printing and production costs, it has been necessary to increase the cost for BNE publications. The price increases become effective August 31, 1992. An order form is included in this publication.



## DIRECTOR OF EDUCATION APPOINTED

Mary Anne Hanley was appointed Director of Education for the BNE on May 18, 1992. She joined the Board's staff in August 1991 as a Nursing Consultant. Ms. Hanley earned a Bachelor of Science degree in Nursing from the University of Connecticut at Storrs and a Master of Arts in Nursing from New York University. She has been accepted to the Doctoral Program at The University of Texas at Austin.

She has extensive experience in a variety of education programs, including Mohegan Community College's ADN Program, New York University's Master's Program, and City College of New York. Most recently, she taught in Lehman College's Baccalaureate Nursing Program in Bronx, New York. Ms. Hanley had management experience at Veterans Administration Medical Centers in Manhattan and the Bronx, coordinating the utilization review and prospective payment systems for those medical centers.

A member of Sigma Theta Tau International Honor Society and listed in *Who's Who in Nursing*, Ms. Hanley has explored the learning/teaching processes relating to the Rogerian Nursing Science of Unitary Human Beings and Therapeutic Touch in publications by the National League of Nursing and *Journal of Holistic Nursing*.

Ms. Hanley's areas of practice include psychiatric/mental health nursing, geriatrics and home care. Her particular area of interest is in therapeutic touch. She has conducted numerous workshops and educational programs in therapeutic touch over the past six years.

As Director of Education, Ms. Hanley will be responsible for all aspects of the Board's activities related to accreditation of professional nursing programs and administration of the licensure examination for registered nurses.

Ms. Hanley replaces Dr. Elizabeth Bole who resigned on May 15, 1992. ♦

## AMERICANS WITH DISABILITIES ACT

The Americans with Disabilities Act (ADA) became effective January 26, 1992 for all public and private organizations offering goods and services to the public. The Board of Nurse Examiners (BNE) is complying with all aspects of the law and has appointed an ADA coordinator, published a grievance procedure and structural transition plan. The BNE's self-evaluation plan will be due on January 26, 1993.

It is the goal of the BNE to assure the public and all constituencies that the agency is in full compliance with ADA and that our office, programs, activities and publications are accessible to anyone needing reasonable accommodations.

Anyone needing accommodation should call Mark Majek at (512) 835-8670 (Voice), (512) 835-8684 (FAX) or 1-800-Relay-TX (TDD), or visit the BNE's office at 9101 Burnet Road, #104, Austin, Texas 78758. ♦

## '92 NCLEX FIGURES CONTINUE UPWARD TREND

On July 8-9, 1992, 4,534 candidates took the NCLEX-RN at three different sites in Texas. There were 1,048 candidates in Galveston, 1,699 candidates in Fort Worth, and 1,787 in Austin. During the four-year period from 1988-1991, the number of candidates writing the NCLEX-RN along with the pass rate have both exhibited upward trends. This year the total number of candidates tested, 7,189, exceeded the 1991 figure by 4%.

Results of the July exam are expected to be received by the first week in September, 1992.

The next NCLEX-RN is scheduled for February 3-4, 1993, in Austin, Galveston and Fort Worth. ♦

## BNE NURSING CONSULTANT RECOGNIZED FOR CONTRIBUTIONS TO AGENCY AND NURSING PRACTICE

Everyday, the BNE's staff RNs use their nursing experience and knowledge to answer numerous practice questions, provide input on rules and regulations, evaluate potential nursing practice violations and the list goes on.

This year, during National Nurses Week, May 4-10, BNE employees were asked to nominate one of the six RNs on the BNE staff for special recognition.

Criteria included promoting a clearer understanding of the Nurse Practice Act and the Board's rules; fostering an attitude of striving for excellence in job performance among co-workers; and establishing good working relationships with co-workers and associates. When the votes were tallied, Kathy Thomas, MSN, RN, CPNP was selected as the 1992 BNE Nurse of the Year.

Ms. Thomas joined the Board as a nursing consultant in 1989 and is the Board's representative on issues related to advanced nurse practitioners. She currently serves on the Board's Advanced Nurse Practitioner Advisory Committee and the Nursing Education Advisory Committee.

Ms. Thomas earned a master's degree in nursing from the University of Kansas, Kansas City and a bachelor's degree in nursing from the University of Virginia at Charlottesville. She is an Advanced Nurse Practitioner with certification in pediatrics.

One comment sums up the pride in and appreciation of Ms. Thomas that Board staff feel: "Kathy is a real pro and wonderful to work with. In addition to her nursing knowledge and skills, which obviously are very vast, she is a very kind and thoughtful person. She is always willing to help her fellow staff members, to answer questions and is cheerful and cooperative in every way." ♦



## ADMINISTRATIVE LAW JUDGE HEARINGS

*This is the third article in our series designed to assist nurses to understand the Board's disciplinary process. This article addresses the hearings before the Administrative Law Judge (ALJ).*

The State Office of Administrative Hearings was created under S.B. 884, 71st Legislature, 1991. Effective January 1, 1992, the State Office of Administrative Hearings was mandated to conduct hearings on contested cases for the Board of Nurse Examiners as well as any other agency who did not have full time hearings officers.

Upon completion of an investigation, the investigator will recommend that the case either be closed or that it proceed to one of the following:

- 1) Hearing before the Executive Director
- 2) Formal Charges
  - a) Prehearing Conference
  - b) Hearing before the Administrative Law Judge

Once formal charges are filed, the case is considered contested and a Prehearing Conference is offered to the nurse. If the case is not resolved at a Prehearing Conference, the case is docketed to be heard by an Administrative Law Judge. The hearings are conducted in accordance with the Administrative Procedure and Texas Register Act, the Board's statutes, rules and regulations. The hearings conducted by the ALJ are open to the public.

During the hearing, documentary evidence is introduced and witness testimony is heard. The ALJ will review prior disciplinary actions taken against the RN's license prior to determining the appropriate sanction(s) and length of monitoring, if needed. Following the hearing, the ALJ prepares a "proposed order for decision" which will be presented to the Board during a regularly scheduled meeting. The Board may vacate or modify the decision of the ALJ or ratify the order.—*Noemi Leal* ♦

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## LEGISLATION CENTRALIZES STATE AGENCY LEGAL SERVICES

Senate Bill 3, which was passed during the last legislative session, requires the Office of the Attorney General to develop a plan for the centralization of legal services provided to state agencies. At this time, the Board of Nurse Examiners has not received a proposal for implementation of the centralization plan for this agency. We will publish any changes which may affect the Board in the *RN Update*. ♦

## PROPOSED RULES

At their May 19, 1992 meeting, the Board of Nurse Examiners took the following action in relation to rules:

- Adopted a rule change in Practice and Procedure, specifically § 213.20 regarding Licensure of Persons Who Have Physical or Mental Disability/Illness, or Who are Chemically Dependent.

At their July 21-22, 1992 meeting, the Board of Nurse Examiners took the following action in relation to rules:

- Proposed rule changes in § 213, Practice and Procedure. These amendments occur throughout the entire section and are for the purpose of bringing the rules in alignment with the recent establishment of the State Office of Administrative Hearings (Senate Bill 884). ♦

## EDUCATION REPORTS

At the May 19, 1992 meeting of the Board of Nurse Examiners, the Board took the following actions:

- Authorized a site visit to Temple Junior College to evaluate the program's progress in developing its Associate Degree Nursing Program.
- Placed Howard College Associate Degree Nursing Program and its Extended Campuses in Del Rio, Kerrville, Brownwood and Snyder on warning for non-compliance with the Board's *Rules and Regulations relating to Professional Nurse Education, Licensure and Practice*.

The following actions were taken by the Board at its July 21-22, 1992 meeting:

- Granted Initial Accreditation status to East Texas Baptist University Baccalaureate Nursing Program in Marshall.
- Granted Initial Accreditation status to Vernon Regional College, LVN Transition and Associate Degree Nursing Program in Vernon.
- Approved the development of an generic Associate Degree Nursing Program at Temple Junior College in Temple.
- Continued Initial Accreditation of Collin County Community College in McKinney.
- Rescinded the Warning given to Lamar University at Beaumont, Associate Degree Nursing Program.
- Continued the Warning given to Houston Community College in November of 1991, pending review of the College's 1991-1992 Annual Report and Report of Survey visit to be made in the Fall of 1992.
- Major curriculum changes were approved for implementation by San Jacinto College Central, Associate Degree Nursing Program, Pasadena.
- Authorized the use of extension sites by Cooke County College in Lewisville and Denton.
- Impaneled an Education Task Force to review and recommend revisions to the Board's Education and related rules. ♦



## THE LEGAL EAGLE

For the past three years, in each issue of the *RN Update* Joan Stewart, General Counsel for the Board of Nurse Examiners, has responded to questions regarding the Nurse Practice Act, the Board's Rules and Regulations, and other legal issues related to nursing.

This column will be the last for Ms. Stewart, as she has resigned from the Board to be a "full time Mother" and to do private practice. She will be missed by the Board and staff and we wish her the best in her new endeavors.

Dear Legal Eagle,

I work in a long term care facility. It is the policy of our facility to withhold the institution of any resuscitation measures to patients. None of the nurses here are CPR certified. Most of our patients have DNR orders, so it's usually no problem. However, when a patient without a DNR order "codes", the nurses do not perform CPR or institute resuscitation measures of any kind. We call 911 and CPR is instituted when EMS arrives. Is this OK?

Signed,

Unsure

Dear Unsure,

I'm sure and the answer is a big "No". It's not OK. Rule 217.11(3) of The Standards of Nursing Practice states that:

"The Registered Professional Nurse shall institute appropriate nursing intervention which might be required to stabilize a patient's/client's condition and/or prevent complications."

Rule 217.13(1) states that: "Unprofessional conduct in the opinion of the board includes ... failing to institute nursing intervention which might be required to stabilize a patient's/client's condition or prevent complications." Your conduct is not in compliance with the Nurse Practice Act and your licensure could be subject to discipline. Please consider collaborating with the other professionals in your facility regarding this policy, with the goal of bringing the policy and the practice of the professional nursing staff into compliance with the Board's rules. This change should also require CPR training for the RN staff.

Dear Legal Eagle

I'm unsure of how to handle this situation: A night shift RN/charge nurse informed me of an incident she and an LVN working under her were involved in during a quiet night in the emergency room. She informed me of how a security guard let them in the kitchen and how they happened to find the wine supply (used for OB mothers' celebration meal in hospital). She informed me they stocked

up on food and wine and went back to the station and feasted and drank (while on duty). My dilemma is ... who do I tell this to because it is her word against mine without any physical proof.

Signed

Very Concerned

Dear Very Concerned,

The Nurse Practice Act prohibits drinking on duty. Misappropriating food from the facility is unprofessional conduct. If you have reason to suspect that another registered nurse has violated the Nurse Practice Act, you are obligated by law to report the suspected violation to either the Board (or TPAPN if you suspect chemical dependency or mental illness). Once a report is received, the Board will determine whether there is substantial evidence to file charges against the nurse. You are not required to make that determination before filing a report of a suspected violation with the Board. You should report suspected violations of the Vocational Nurse Act to the LVN Board at 9101 Burnet Road, Suite 105, Austin, Texas 78758. ♦

## REVOCATION VS VOLUNTARY SURRENDER

In the May 1992 issue of *RN Update*, the various sanctions which the Board utilizes were defined. Included in these definitions were the sanctions entitled "revocation" and "voluntary surrender". Revocation was defined as a license becoming void and not reissuable. Voluntary surrender was defined as the revocation of the license of the professional nurse who no longer desires to practice professional nursing.

At face value, the voluntary surrender appears to be an action taken by the nurse who comes to the conclusion that he/she no longer wishes to practice nursing. It appears to be another name for "de-activation". It is not.

A voluntary surrender is an option afforded to a registered nurse in lieu of a revocation based on the substantiation of formal charges. If the nurse chooses to voluntarily surrender his/her license to practice, the Board may revoke this nurse's license based on the voluntary surrender without the necessity of formal charges, notice or a hearing. In both cases, voluntary surrender and direct revocation, the nurse's license to practice nursing is void and may not be reinstated until at least 12 months after the revocation goes into effect.

The final Board Order issued to a registered nurse who chooses to voluntarily surrender will indicate that the Board has, without a hearing, revoked the license based on the individual's desire to surrender his/her licensure. In the alternative, if the revocation is based upon the substantiation of formal charges, the Board Order will contain Findings of Fact and Conclusions of Law detailing the notice provided to the nurse, the fact that a hearing occurred, the specific conduct that violated the law and which provisions of the law were violated.—Tony Diggs, Noemi Leal, Joan Stewart ♦



## LONG TERM CARE OFFERS REWARDS AND CHALLENGES

Guest Editorial by  
Sandy Darrow, CAE, President  
Texas Association of Homes for the Aging

"Long term care nursing is not what you think; try it, you'll like it," says Bonnie McMillan, Director of Nursing at Bivins Memorial Nursing Home in Amarillo. Nurses in long term care are definitely bothered by old negative stereotypes. The best way to change those stereotypes is for more nurses in long term care to expose their colleagues to what they find to be the rewards and challenges of their chosen specialty.

"Our field provides the opportunity to review the whole person in an interdisciplinary sense that is so rewarding. We're able to develop long term relationships with the residents," says Donna Hansen, Nursing Administrator of Morningside Manor in San Antonio. This is a sentiment echoed by most nurses in long term care, and it explains what they find to be most different from the acute care setting. Hansen categorizes this as the social rewards of long term care; the opportunity to acknowledge the importance of older people in our lives.

The professional nurse in long term care is challenged by complex disease and aging processes. Most residents have many chronic diseases and face multiple deficits in their activities of daily living. This is what nurses committed to long term care find most rewarding, the opportunity to assess needs and develop creative solutions. They also have the opportunity to work closely with other disciplines, therapists, dietitians, pharmacists, social workers and activity directors to develop a plan of care that will help the residents to achieve their highest practicable level of functioning.

Another major difference in clinical practice for nurses in long term care is the fact that physicians are not generally on-site much of the time. This means that nurses are expected to exercise more independent thinking and it allows them to apply nursing diagnosis more often. Nurses in long term care are the innovators in geriatric nursing. There is much they can teach hospital personnel about the care of the elderly.

In addition to the clinical nursing challenge offered in long term care, nurses who choose this area of specialty need strong management and leadership skills. Most RNs in this field are directors or assistant directors of nursing, assessment specialists, quality assurance specialists, or training specialists. Nurses who succeed in long term care like the management responsibility. It enables them to develop new skills. They also enjoy the opportunity to develop the people around them.

According to McMillan, "This is the coming of age of long term care and the next 10-15 years will put it on the map." Much of this will be driven by pure demographics. By the year 2030, the population over the age of 85 is expected to be triple the number over 85 during 1980 (*Aging America*,

American Association of Retired Persons, 1991). Current projections indicate that from 1990 to the year 2005, the nursing home population will increase from 1.5 million to 2.1 million and increase again to 2.6 million by 2020.

When long term care is broadened to home and community based services, the numbers are even more astounding. In 1988, approximately 6.9 million older people needed long term care (*Aging America*, AARP, 1991). By the year 2000, the number will have increased to almost nine million. By the year 2040, the aging of the baby boom generation is projected to increase the population needing long term care to 18 million.

What can be done to enhance the professional image of nurses in long term care? First, more must be done to educate their nursing colleagues about the challenges and rewards in this field. Second, nursing schools should incorporate more geriatric and long term care practice into their curricula. Finally, nursing homes and other organizations wishing to attract and retain nursing professionals must offer a competitive wage, benefits packages and continuing education opportunities.

These enhancements would foster respect in the long term care environment. Nurses in long term care need to gain respect; nurses' colleagues must learn to recognize their specialized expertise; nurses' employers need to value their services. All of this could be aided tremendously by legislative actions that would assure adequate funding and sensible regulation in long term care.

Currently, some of the best opportunities to accomplish the above goals are offered by nursing and long term care associations. The Texas Association of Homes for the Aging, for example, has a nursing section which meets regularly to develop educational programs and to comment on regulatory issues. It also provides a much needed networking opportunity and the chance for these nurses to have a role in charting their own future.

One thing is very apparent: today's long term care nurses need to be joined by more of their nursing colleagues to meet the ever increasing needs of our aging society.

*Editor's Note: The Board of Nurse Examiners Task Force on Long Term Care, the Texas Association of Homes for the Aging and the Texas Health Care Association will cosponsor a three-day course for nurses in long-term facilities entitled "Nursing Facility Nurses: Uncovering the Mysteries". The course is scheduled October 6-8, 1992, in Austin. For information contact TAHA at (512) 477-6994 or THCA Education Department at (512) 458-1257. ♦*



## SYSTEM SPEEDS PROCESSING OF LICENSE RENEWALS

Since 1981, registered nurses have renewed their licenses on a staggered basis every two years. The Board of Nurse Examiners (BNE) processes approximately 5,000 license renewals every month. The majority of renewals are processed through a system called "rapid deposit".

The BNE has contracted with the Texas State Treasury to receive license renewals at a central postal box and process the acceptable documents within one working day. The State Treasury then provides the BNE with a computer tape of accepted renewals. This tape is downloaded onto the computer and licenses are produced and mailed to RNs. The time span for this process varies from two to three working days from receipt of a completed renewal to the actual mailing of the license. The rapid deposit system has reduced the turnaround time of processing a license from seven to four working days.

License renewals are mailed approximately 60 days in advance of the expiration date. If a registered nurse does not receive a renewal, the RN should call the Board's office. Depending upon the license expiration date, the RN will either be sent a second renewal or given pertinent information to submit for a timely renewal. In any case, a registered nurse must have the required information, signature and fee postmarked by the end of the renewal month to be accepted as timely. If the required information is postmarked one to 90 days after the expired renewal date, the Nurse Practice Act states the registered nurse must pay the current renewal fee and one-half the examination fee. If the information is postmarked more than 90 days after the expired renewal date, the BNE must assess the current renewal fee plus the entire examination fee.

It is *always* the responsibility of the registered nurse to renew his/her license in a timely manner, whether or not a renewal form was received. The major reason for registered nurses not receiving a renewal form is an incorrect address. Rule 217.10(b) of the *Rules and Regulations relating to Professional Nurse Education, Licensure and Practice* states, "A registered nurse shall notify the board in writing within ten days of a change of address, providing the old address, the new address and the license number." When the BNE receives an address change from a RN, a postcard acknowledging the change is mailed to the RN at the new address. If this acknowledgement is not received within 10 working days following notification of an address change, please call the BNE Licensing Department at (512) 835-4880.

All renewals are processed through the Licensing and Support Services Department. Currently, this department has a processing and customer service group. The processing section receives all of the renewal information that requires processing by hand. The customer service section will answer any inquiries received by phone or in writing. It is the department's policy to respond to any inquiry that cannot be handled over the phone within three working days.

It is our hope that the rapid deposit system will expedite licensure renewal and alleviate any problems a registered nurse might have in renewing his or her license. If you do have a problem or need general information, please do not hesitate to contact our customer service group.—*Mark Majek* ♦

## SUNSET STAFF PLAN ON-SITE REVIEW OF BOARD

Staff from the Sunset Advisory Commission plan to conduct an on-site review of the Board of Nurse Examiners sometime during the months of July through September, 1992. During November, the Sunset Commission plans to hold the public hearing on the Board.

Under the terms of the Texas Sunset Act, the Board must be reauthorized by the legislature, or it will be abolished on September 1, 1993. The Commission's staff is responsible for conducting a review of the Board and its programs for the 73rd Legislature to determine if Board functions continue to be needed, if those functions could be better performed by another agency, and if changes are needed to the agency's statute.

In December, the Commission plans to review the Sunset staff's on-site audit and public testimony in order to decide the future of the Board.

RNs, RN employers, constituencies and the general public who have any comments or suggestions for improving the regulation of professional registered nurses in Texas or would like more information about the Sunset process should contact the Commission's staff at the address listed below:

Sunset Advisory Commission  
P.O. Box 13066  
Austin, Texas 78711  
Fax: (512) 475-2902 ♦

### ATTN: ANPS Nurse Anesthetists, Nurse Midwives, Nurse Practitioners and Clinical Nurse Specialists

RNs who wish to use any of the above advanced practice titles must have prior approval from the Board. The Board's credentialing rules for advanced nurse practitioners assure the public that these practitioners have the appropriate formal post basic education. To obtain an application for Board approval, contact BNE at Box 140466, Austin 78714, (512) 835-8661. Please mark all correspondence Attn: ANP so that it may be routed expeditiously.



## PRACTICE RELATED QUESTIONS AND ANSWERS

The Board receives numerous calls and letters regarding practice issues. In this column, Cady Crismon, MSN, RN, CNS responds to frequently asked questions.

**Q: I have just gone to work in a facility which employs more than 10 registered nurses, but they have no written Peer Review Plan. I know that the Nurse Practice Act requires there to be a plan for Peer Review. What should I do?**

**A:** We recommend that you talk with the nursing administrator in your employing facility and discuss Article 4525b which requires peer review. You might volunteer to assist in developing the plan. If there is opposition to developing the plan and the situation remains unchanged, you should report the nurse administrator who is responsible for assuring the statutes are upheld to the Board. Board staff can then intervene.

**Q: This Spring my facility hired a number of new graduates who had been issued GN permits. I'm unclear about what functions they can perform and I really became concerned when one of the GNs was asked to be in charge on the night shift. What is the appropriate role of the GN?**

**A:** A GN may perform all the nursing functions of a RN with the supervision of a RN. In other words, a GN may assess, provide and document patient care as long as there is a RN readily available to assist the GN.

It is inappropriate for GNs who have not yet proven their own competency to be in charge of other staff and to be the resource to whom these staff turn for guidance and expertise.

If you have a practice related question that you would like to have answered through the Board's newsletter, send your question to:

Cady Crismon, MSN, RN, CNS  
Director, Department of Practice and Compliance  
Board of Nurse Examiners  
Box 140466  
Austin, Texas 78714

### SHARE THIS NEWSLETTER

Please share the information in this newsletter with as many nurses as possible by posting the newsletter, duplicating portions or all of the newsletter, or using excerpts in your own newsletter. If reproduced, we would appreciate a copy of the article as well as credit for any material used.

## LAW MANDATES NON-RENEWAL OF LICENSE FOR LOAN DEFAULT

In February of this year, the Board of Nurse Examiners (BNE) notified all registered nurses in the State of Texas who are in default of a Texas Guaranteed Student Loan that they must present the BNE with a certificate from the Texas Guaranteed Student Loan Corporation (TGSLC) that a repayment agreement has been entered into or that they are no longer in default of their loan. The BNE is required by law, Section 57.491 of the Texas Education Code, to notify registered nurses that renewal of their license will be denied if they do not enter into a repayment agreement with TGSLC prior to their next renewal.

The initial list of registered nurses in default numbered 901. Since issuing the initial notice of default, the BNE has cleared 140 RNs from the default file.

Default on a TGSLC loan is considered unprofessional conduct (Rule 217.13) and is grounds for disciplinary action against a licensee in violation of this rule. To avoid disciplinary action, an RN in default of a TGSLC loan must show the BNE a certificate of agreement from TGSLC. The BNE does not have discretionary powers to interpret this law other than to deny licensure if an agreement is not reached; therefore, any registered nurse in default of a TGSLC loan should call TGSLC directly to obtain the certificate required above. You can call TGSLC at 1-800-222-6297 or in Austin at (512) 837-9865, Ext. 3535.—Mark Majek ♦

## COMPLIANCE REMINDERS

- ✓ When calling the Board's office regarding a nurse's license, please have the license or Social Security number readily available.
- ✓ Notify the Board *in writing* within 10 days of an address change. Include the RN license number, Social Security number, and new address.
- ✓ Notify the Board within 10 days of a name change. An affidavit will be mailed to the petitioner. There is a \$10 name change fee if a new license is requested; \$20 for a new license and certificate. Upon receipt of the information a postcard verifying the name change will be sent.
- ✓ Please read and follow directions on all forms carefully. If a fee is required, send the correct amount. Remember to sign your check.
- ✓ It is against the Board's Rule 217.18 to copy a RN's license, permit, or certificate. Licenses may be verified, 24-hours-a-day, 7-days-a-week by calling the Board's office, (512) 835-4880. ♦



## DISCIPLINARY ACTIONS MAY-JULY 1992

NAME	LICENSE #	VIOLATION	DATE
<b>REVOKE</b>			
Michael William Ashley*	521495	4525(a)(2)(3)	7/22/92
Billie J. Hisel Burns*	417405	4525(a)(7)	5/19/92
Rena Szukics Collier++	445261	4525b	7/22/92
Janice M. Hines N. Cook++	214278	4525b	7/22/92
Susan Annette Daugherty++	547705	4525b	5/19/92
Emma L. Darbonne Douglas++	209013	4525b	7/22/92
Michael Dennis Lake	445295	4525(a)(7)	7/21/92
Jolene Daily Larkin	527910	4525(a)(8)(11)	7/21/92
John E. Legg	537515	4525(a)(7)	7/21/92
Claude Bruce Lewis, Jr.++	560007	4525b	5/19/92
Georgina Lozano++	436017	4525b	7/22/92
Judy Gay Bender Markle	433895	4525(a)(7)	7/21/92
Victoria A. Morin++	532041	4525b	7/22/92
Iantha Don M. Murphy	234146	4525(a)(7)	7/21/92
Sandra Lynn Norris	453848	4525(a)(7)	7/21/92
Judith L. Oderkirk++	534298	4525b	5/19/92
Donna Kay Petty	249511	4525(a)(8)(9)	7/21/92
Marilyn K. Risley++	504274	4525b	5/19/92
Annetta J.C. Robertson	410412	4525(a)(7)	7/21/92
Bonnie Adair Sanders-Cole	545546	4525(a)(8)(9)(11)	7/21/92
David Lewis Spence++	257617	4525b	7/22/92
Mary Katherine Summers++	462256	4525b	7/22/92
Janice Lee Teague	231877	4525(a)(8)(9)	7/21/92
Bradford V. Ward++	522719	4525b	7/22/92
Melva R. Shroyer Wharton++	220110	4525b	5/19/92
Elizabeth F.S. Williams++	435406	4525b	5/19/92
David Benjamin Zogg	565071	4525(a)(7)	7/21/92

### REPRIMAND WITH STIPULATIONS

Ngozi Alaribe*	532526	4525(a)(9)	7/22/92
Vivian Amaro*	440151	4525(a)(9)	7/22/92
Dorothy E. Andrew**	432738	4525(a)(12)	5/19/92
Tessie Anthanette Anthony**	550966	4525(a)(9)	7/21/92
Jane Patricia Bauersfeld**	544058	4525(a)(8)	5/19/92
Madonna Jean Benson*	569374	4525(a)(12)	5/19/92
Cheryl Ann Chambless-Spaur**	520595	4525(a)(9)	7/21/92
Lela Mae C. Dean**	434364	4525(a)(9)	7/21/92
Elizabeth E. Edwards**	257831	4525(a)(9)	7/21/92
Maureen Ifeoma Egbuchunam**	571712	4525(a)(9)	5/19/92
Jennifer M. Elmore*	253486	4525(a)(1)	5/19/92
Susan K. Eubank**	Applicant	4525(a)(1)	7/21/92
Niles Earl Fisher*	240694	4525(a)(8)	7/22/92
Rosalva Gamboa**	530066	4525(a)(9)&(11)	5/19/92
Thelma Jean Lee Harrison**	458559	4525(a)(9)	5/19/92
Linda Mae Henning**	542417	4525(a)(9)	5/19/92
Eugenia Lee Jones**	554826	4525(a)(9)	5/19/92
Audrey Elaine Kardum*	438053	4525(a)(9)	7/22/92
Toni L. Kaschub**	541668	4525(a)(9)&(12)	5/19/92
Joy D. McAvan**	427797	4525(a)(9)(12)	7/21/92
Kristine Kaye Mitchell**	563604	4525(a)(9)	7/21/92
Patchela Niduaza**	559142	4525(a)(12)	5/19/92
Loida Padrones**	573141	4525(a)(9)	5/19/92
Judy Sue Pearce**	542568	4525(a)(8)&(9)	5/19/92
Aruna M. Sanghavi**	546191	4525(a)(9)	5/19/92

Linda Marie Siemering**	555704	4525(a)(9)	7/21/92
Linda A. Smeltser*	241258	4525(a)(9)	7/22/92
Mary F. Joyce Smith	425791	4525(a)(7)	7/21/92
Mary Cassandra Spurlock**	559813	4525(a)(9)	7/21/92
Mary L. Talley*	240205	4525(a)(7)	5/19/92
Patsy Joan Tibbs**	554835	4525(a)(9)	5/19/92
Betty Jenell Vaughans**	573998	4525(a)(9)	7/21/92
Marcy Gaylin Vickery**	564609	4525(a)(9)	7/21/92
Michael D. Walker**	Applicant	4525(a)(3)	5/19/92
Patricia D. Williams**	434311	4525(a)(9)	7/21/92
Nola J. Wynn**	410481	4525(a)(9)	7/21/92

### REPRIMAND

Rita R. Stroud*	518315	4525(a)(9)	7/22/92
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### WARNING

Diane Spence Bain**	558310	4525(a)(9)	5/19/92
Patricia Gail Copeland**	566100	4525(a)(9)&(12)	5/19/92
Sonja D. Cretney**	229827	4525(a)(12)	5/19/92
Calvin Ivory Felton**	235995	4525(a)(9)	5/19/92
Cynthia Heldt**	255808	4525(a)(9)	7/21/92
Janet G. McDade**	517518	4525(a)(8)	7/21/92
Patti Patricia O'Donnell**	213532	4525(a)(9)	5/19/92
Paulett W. Rozneck**	501450	4525(a)(9)	7/21/92
Ronald G. Sears**	544844	4525(a)(9)&(11)	5/19/92
Laurie Susan Spitzer**	555764	4525(a)(12)	5/19/92
Dixie Treat**	243683	4525(a)(9)(11)	7/21/92

### REINSTATE WITH STIPULATIONS

Robert Merrill Dodgen*	229573		
Brian Desmond Dooley*	444435		
Hal B. Hollingsworth*	517066		
Patricia A.S. Lengyel	414224		
Michelle Ann Thelen*	533759		

The following persons were issued a **Warning** for practicing professional nursing with a delinquent license:

Janice M. Bland**	252615	4525(a)(1)	5/19/92
Barbara Bragg Bradford**	229085	4525(a)(1)	7/21/92
Rebecca Joy Dewald**	545915	4525(a)(1)	7/21/92
Janet A. Flores**	508851	4525(a)(1)	5/19/92
Gina M. Lockart**	505949	4525(a)(1)	7/21/92
Sharon K. Oglesbee**	505965	4525(a)(1)	7/21/92
Hermione Peries**	442532	4525(a)(1)	5/19/92
Nancy Prasad**	454404	4525(a)(1)	7/21/92
Donna Louise Reynolds**	250902	4525(a)(1)	7/21/92
Paula K.C. Riehle**	223169	4525(a)(1)	7/21/92
Deborah A. Shaw**	241959	4525(a)(1)	7/21/92
Clara L. Snow**	220176	4525(a)(1)	5/19/92
Deborah L. Thompson**	253885	4525(a)(1)	5/19/92
Mary E.H. Tomes**	431062	4525(a)(1)	7/21/92
Fe Silagon Valen**	436343	4525(a)(1)	7/21/92
Dina Yvonne Vera**	548716	4525(a)(1)	7/21/92

++ Voluntary Surrender

\* Agreed Orders

\*\* Consent Orders



## WARNING

The following individuals have failed to return their licenses to the Board. Their licenses have been **Revoked**:

Victoria C. Castro	233644
Malee Charoendee	557667
Bridget Maureen Denny-Shaffer	553409
Martin Ross Flannery	227405
Leigh Ann Guess-Austin	520166
Michael L. Jones	530277
Jerry Kovaly	560771
Pearl Miller	531850
Susan Bruno Moser	235678
Helen S. Monroe Sauget	221570

Other individuals who have failed to return their licenses for appropriate notations:

Irma Victoria Clary	438230	Reprimand with Stipulations
Maureen Ifeoma Egbuchunam	571712	Reprimand with Stipulations
Thelma Jean Lee Harrison	458559	Reprimand with Stipulations
Linda Mae Henning	542417	Reprimand with Stipulations
Aruna Madhu Sanghavi	546191	Reprimand with Stipulations
Judith K. Vance	430842	Reprimand with Stipulations
Sharon A. West	552029	Reprimand with Stipulations

## IMPOSTORS

The following individuals do not hold a valid license to practice professional nursing in the State of Texas:

### Debbie R. Harrison

Debbie R. Harrison was referred to the Board office by two employers in the Dallas area. Ms. Harrison worked for each location briefly and was also reported to the Dallas Police Department by one of the employers for falsifying prescriptions. Ms. Harrison was arrested and placed on court ordered probation. The Board of Nurse Examiners is pursuing legal action through the local authorities.

### Florence Yvette Jackson

Florence Yvette Jackson was hired as a registered nurse at a medical office in the Houston area on April 29, 1991. The Business Manager requested Ms. Jackson's license and she was not able to produce it. The Business Manager contacted the Board office and was told that Ms. Jackson was not licensed to practice professional nursing in the State of Texas. Ms. Jackson was terminated from employment. Ms. Jackson was also hired by another medical office in the Houston area in June, 1991 and was terminated due to attendance problems. The Board of Nurse Examiners is pursuing legal action through the local authorities.

### Jennifer Carol Kunz

Jennifer Carol Kunz was employed as a registered nurse by a health training facility in Austin in March, 1991. Ms. Kunz provided the facility with her sister-in-law's social security number which was used to verify her license. Ms. Kunz was terminated in January, 1992 as a result of student complaints. Ms. Kunz also secured a position as a registered nurse in a health training facility in Austin in November, 1991. The office manager was not able to verify her past employment and contacted the Board office. Ms. Kunz was terminated from employment. Ms. Kunz then applied for employment as a registered nurse with a medical emergency facility in Austin in March, 1992. The Operations Manager called the Board office to verify licensure and did not hire her. The Board of Nurse Examiners is pursuing legal action through the local authorities.

### Cindy McCutchen

Cindy McCutchen was reported to the Board by an employer in the Houston area. Ms. McCutchen was terminated from this position because the employer, upon licensure verification, discovered that she had no valid Texas license. It was later discovered that Ms. McCutchen attempted to pass forged prescriptions for medication. The Board of Nurse Examiners is pursuing legal action through the local authorities.

### Zenaida Blanco Diaz aka: Zenaida Blanco Diaz (Perez)

Zenaida Blanco Diaz submitted an application for employment as a registered nurse at a home health agency in El Paso. Ms. Diaz was not able to present her license to practice professional nursing in Texas, but provided a license number. The agency called the Board office and were informed that Ms. Diaz is not licensed to practice professional nursing in the State of Texas. Ms. Diaz was not employed by the agency.

### Pearl Miller

Pearl Miller had her registered nurse license (#531850) revoked in January, 1992. Since her license was revoked, she has sought employment as a registered nurse with Kimberly Quality Care, Dallas. ♦

## DO YOU KNOW A NURSE WHO NEEDS HELP?

If you know of an RN or LVN who is depressed, drinking more than moderate amounts of alcohol, or is abusing drugs and is not practicing nursing in a manner that is in the public's best interest, give the Texas Peer Assistance Program for Nurses (TPAPN) an opportunity to help. All calls are kept strictly confidential. For information call 1-800-288-5528 or 512/467-7027.



## STAFF ON THE MOVE

The Board of Nurse Examiners welcomes the following new staff members:

**Dona Oliver** joined the BNE staff on July 20, 1992 as a Nursing Consultant. Ms. Oliver earned a Bachelor of Science degree in nursing from St. Olaf College, Northfield, Minnesota and a Master of Science in Nursing from Texas Woman's University at Houston. Areas of practice have included psychiatric-mental health nursing, research and education. She has worked on national research grants sponsored by the National Institute on Drug Abuse and the National Association of Private Psychiatric Hospitals and has done work for the Research and Environmental Affairs Department of Texaco, Inc. Most recently she was a clinical instructor at Incarnate Word College in San Antonio.

**Korena Schaaf** joined the BNE staff on July 6, 1992 as a Secretary in the Department of Practice and Compliance. Ms. Schaaf, who is from Cypress, California, previously worked for a small construction company in Austin, two school districts and a private investigations firm in Southern California. Her interests include the legal system and its responsibilities to children's rights. Ms. Schaaf's responsibilities with the Board will include assisting the investigators with correspondence and keeping track of Board actions and orders.

The Board extends best wishes to **Mariann Rush**, Department of Licensing and Support Services, who will leave the Board in August to join a work/study program while pursuing a degree in nursing at Austin Community College, to **Ethan O'Neil**, part-time mail room clerk, who also leaves the Board in August, and to **Joan Stewart**, General Counsel, who will leave in September. ♦

## DEBITS

As of July 15, 1992, the following nurses appear on the records of the Board of Nurse Examiners as debits for failure to respond to notices of returned checks. Should any of these nurses be employed by or seek employment with your agency/institution, please contact the Board's office.

If any of these nurses are practicing in Texas as a Registered Nurse, they are in violation of the Nurse Practice Act and would be subject to disciplinary action by the Board of Nurse Examiners.

NAME	LICENSE #	PERMIT #
Asble, Alex Walter	564983	
Bablitz, Nancy	553715	
Buol, Kolleen Kay	516233	
Clark, Victoria		50398
Conti, Angela Rose	552231	
Craft, Betty Jane	546665	
Dennis, Patricia Ann	503975	
Farra, Diane Rae	560781	
Felkins, Bettye Lisa	557452	
Filler, Marcia Ann	553220	
Fryer, Renee Marie	578735	
Glisson, James M.	239549	

NAME	LICENSE #	PERMIT #
Handlin, Kathy L.	512842	
Hendren, Jacqueline	575047	
Howell, Sharon	459387	
Jenkins, Victor I.	517158	
Jones, Cherie Lyne	241063	
Jones, Gwendolyn		63362
Kahn, Beatrice	558897	
Kishbaugh, Shari	575583	
Kuntz, Eileen Marie	514331	
Masters, Mary Jane	550218	
Mitchell, Sandra	565160	
Nazal-Barr, Lori Anne	537652	
Nims, Teresa Masadie	565233	
O'Barto, Patricia D.	541134	
Olivier, Marie Claudia	514361	
Owusu, Augustina E.	457100	
Pangilinan, Julie	445792	
Payne, Traci	569734	
Robinson, Lynn	518008	
Rosko, Lisa Marie	538707	
Sanderson, Brenda	538111	
Strouhal, Susan Kay	557026	
Taylor, Maxine	555844	
Tucker, Sherri		58040
Vasquez, Emerald J.D.	207588	
Zutell, Jean		57374

## OFFICE HOURS AND LOCATION

The office of the Board of Nurse Examiners is located at 9101 Burnet Road, Suite 104, at the Intersection of Highway 183 and Burnet Road in Austin, Texas. The mailing address is Box 140466 Austin, Texas 78714. Office hours are 8:00 AM to 5:00 PM Monday through Friday, except for designated holidays. The BNE office will be closed Monday, September 7, for Labor Day.

### Newsletter Committee:

Kathy Vrazel, Editor

### Committee members:

Cady Crismon, Wendy Francik, Mary Anne Hanley, Noemi Leal, and Laura Williford

### Contributors to this issue:

Cady Crismon, Sandy Derron, Tony Diggs, Erlene Fisher, Wendy Francik, Mary Anne Hanley, Noemi Leal, Mark Majek, Eileen Piwetz, Joan Stewart, Kathy Thomas, Kathy Vrazel, Laura Williford, and Louise Waddill

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