

2013 -- S 0614 SUBSTITUTE A

=====
LC01636/SUB A
=====

STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2013

—————
A N A C T

RELATING TO BUSINESSES AND PROFESSIONS -- NURSES

Introduced By: Senators Miller, Doyle, Goldin, Pichardo, and Walaska

Date Introduced: March 06, 2013

Referred To: Senate Health & Human Services

It is enacted by the General Assembly as follows:

1 SECTION 1. Sections 5-34-3, 5-34-4, 5-34-7, 5-34-40 and 5-34-43 of the General Laws
2 in Chapter 5-34 entitled "Nurses" are hereby amended to read as follows:

3 **5-34-3. Definitions.** -- As used in this chapter:

4 (1) "Advanced practice registered nurse" ~~means the status of qualified individuals who~~
5 ~~hold an active license as a registered nurse and an active license as a nurse in an advanced role as~~
6 ~~defined under the provisions of this chapter or chapter 5-34.2.~~

7 (APRN) is the title given to an individual licensed to practice advanced practice
8 registered nursing within one of the following roles: certified nurse practitioner (CNP), certified
9 registered nurse anesthetist (CRNA) as defined in chapter 5-34.2, or certified clinical nurse
10 specialist (CNS), and who functions in a population focus. An APRN may serve as a primary or
11 acute care provider of record.

12 (2) "Advanced practice registered nursing" means an independent and expanded scope of
13 nursing in a role and population focus approved by the Board of Nurse Registration and Nursing
14 Education that includes the registered nurse scope of practice and may include, but is not limited
15 to, performing acts of advanced assessment, diagnosing, prescribing and ordering. Each APRN is
16 accountable to patients, the nursing profession and the Board of Nursing for complying with the
17 requirements of this chapter and the quality of advanced nursing care rendered; recognizing limits
18 of knowledge and experience; planning for the management of situations beyond the APRN's
19 expertise; and for consulting with or referring patients to other health care providers as

1 [appropriate.](#)

2 ~~(2)~~[\(3\)](#) "Approval" means the process where the board of nursing evaluates and grants
3 official recognition to basic nursing education programs meeting established criteria and
4 standards.

5 ~~(3)~~[\(4\)](#) "Certified ~~registered~~ nurse practitioner" is an advanced practice nurse utilizing
6 independent knowledge of physical assessment, [diagnosis](#), and management of health care and
7 illnesses. The practice includes prescriptive privileges. ~~The practice includes collaboration with~~
8 ~~other licensed health care professionals including, but not limited to, physicians, pharmacists,~~
9 ~~podiatrists, dentists and nurses.~~ [Certified nurse practitioners are members of the health care](#)
10 [delivery system practicing in areas including, but not limited to: family practice, pediatrics, adult](#)
11 [health care, geriatrics and women's health care in primary, acute, long-term and critical care](#)
12 [settings in health care facilities and the community. Certified nurse practitioners may be](#)
13 [recognized as the primary care provider or acute care provider of record.](#)

14 [\(5\) "Certified Clinical Nurse Specialist" is an advanced practice registered nurse that](#)
15 [independently provides care to clients, facilitates attainment of health goals, and provides](#)
16 [innovation in nursing practice, based on clinical expertise, evidence-based decision-making, and](#)
17 [leadership skills. The clinical nurse specialist practices with individual clients and populations;](#)
18 [nurses and other multidisciplinary team members; and organizations to effect system-wide](#)
19 [changes to improve programs of care. The practice may include prescriptive privileges.](#)

20 [\(6\) Certified registered nurse anesthetist is as defined in chapter 5-34.2 \("Nurse](#)
21 [Anesthetist"\).](#)

22 ~~(4)~~[\(7\)](#) "Department" means the department of health.

23 ~~(5)~~[\(8\)](#) "Health" means optimum well-being.

24 ~~(6)~~[\(9\)](#) "Healthcare" means those services provided to promote the optimum well-being of
25 individuals.

26 ~~(7)~~[\(10\)](#) "Licensed" means the status of qualified individuals who have completed a
27 designated process by which the board of nursing grants permission to individuals accountable
28 and/or responsible for the practice of nursing and to engage in that practice, prohibiting all others
29 from legally doing so.

30 ~~(8)~~[\(11\)](#) "Nursing" means the provision of services that are essential to the promotion,
31 maintenance, and restoration of health throughout the continuum of life. It provides care and
32 support of individuals and families during periods of wellness, illness, and injury, and
33 incorporates the appropriate ~~medical~~ [health care](#) plan of care prescribed by a [licensed advanced](#)
34 [practice registered nurse, certified nurse midwife,](#) licensed physician, dentist, or podiatrist. It is a

1 distinct component of health services. Nursing practice is based on specialized knowledge,
2 judgment, and nursing skills acquired through educational preparation in nursing and in the
3 biological, physical, social, and behavioral sciences.

4 ~~(9)~~(12) "Practical nursing" is practiced by licensed practical nurses (L.P.N.s). It is an
5 integral part of nursing based on a knowledge and skill level commensurate with education. It
6 includes promotion, maintenance, and restoration of health and utilizes standardized procedures
7 leading to predictable outcomes, which are in accord with the professional nurse regimen under
8 the direction of a registered nurse. In situations where registered nurses are not employed, the
9 licensed practical nurse functions under the direction of a licensed physician, dentist, podiatrist or
10 other licensed health care providers authorized by law to prescribe. Each L.P.N. is responsible for
11 the nursing care rendered.

12 (13) "Population foci" means focus of the patient population. Population focus shall
13 include:

14 (i) Family/Individual across the lifespan ;

15 (ii) Adult-gerontology;

16 (iii) Neonatal;

17 (iv) Pediatrics;

18 (v) Women's health/gender-related; and

19 (vi) Psychiatric/mental health.

20 ~~(10)~~(14) "Professional nursing" is practiced by registered nurses (R.N.s). The practice of
21 professional nursing is a dynamic process of assessment of an individual's health status,
22 identification of health care needs, determination of health care goals with the individual and/or
23 family participation and the development of a plan of nursing care to achieve these goals. Nursing
24 actions, including teaching and counseling, are directed toward the promotion, maintenance, and
25 restoration of health and evaluation of the individual's response to nursing actions and the
26 medical regimen of care. The professional nurse provides care and support of individuals and
27 families during periods of wellness and injury, and incorporates where appropriate, the medical
28 plan of care as prescribed by a licensed physician, dentist or podiatrist or other licensed health
29 care providers authorized by law to prescribe. Each R.N. is directly accountable and responsible
30 to the consumer for the nursing care rendered.

31 ~~(11)~~(15) "Psychiatric and mental health nurse clinical specialist" is a certified clinical
32 nurse specialist working in the population foci of psychiatric/mental health as an advanced
33 practice nurse utilizing independent knowledge in psychiatric mental health assessment,
34 diagnosis, health promotion, psychotherapeutic modalities and management of mental health and

1 illnesses. The practice may include prescription privileges within their scope of practice ~~of certain~~
2 ~~legend medications, controlled substances from Schedule II classified as stimulants, and~~
3 ~~controlled substances from Schedule IV within the scope of their practice.~~ The practice may also
4 include consultation and education. ~~collaboration with other licensed health care professionals,~~
5 ~~including, but not limited to, psychiatrists, psychologists, physicians, pharmacists, and nurses.~~
6 ~~The psychiatric and mental health clinical specialist holds the qualifications defined in section 5-~~
7 ~~34-40.1.~~

8 **5-34-4. Board of nursing -- Establishment -- Composition -- Appointment, terms,**
9 **and removal of members -- Director of nurse registration and nursing education. --** (a)

10 Within the division of professional regulation, pursuant to chapter 26 of this title, there is a board
11 of nurse registration and nursing education, sometimes referred to herein as the "board of
12 nursing". The board shall be composed of fifteen (15) members. The term of office shall be for
13 three (3) years. No member shall serve more than two (2) consecutive terms. The member shall
14 serve until a qualified successor is appointed to serve. In making those appointments, the director
15 of the department of health shall consider persons suggested by professional nurse organizations
16 and the practical nurse's association.

17 (b) Present members of the board holding office under the provisions of this chapter
18 shall serve as members of the board until the expiration of their terms or until qualified successors
19 are appointed. The fifteen (15) member board shall include: eleven (11) professional nurses, two
20 (2) practical nurses appointed by the director of health and approved by the governor and two (2)
21 members of the general public appointed by the governor. Three (3) professional nurses shall be
22 from different basic education programs preparing students to become nurses; one professional
23 nurse shall be from a nursing service administration; four (4) professional non-administrative,
24 clinical nurses not licensed as advanced practice nurses, and three (3) professional advanced
25 practice nurses, one who holds a license as a certified registered nurse anesthetist, one who holds
26 a license as a certified registered nurse practitioner, and one who holds a license as a ~~psychiatric~~
27 ~~and mental health~~ certified clinical nurse ~~clinical~~ specialist. No educational program or
28 cooperating agency shall have more than one representative on the board.

29 (c) The director of health may remove any member from the board for cause including,
30 but not limited to, neglect of any duty required by law, or incompetence, or unprofessional
31 conduct, or willful misconduct. A member subject to disciplinary proceedings shall be
32 disqualified from board business until the charge is adjudicated. There shall also be a director of
33 nurse registration and nursing education appointed by the director of health in accordance with
34 the provisions of chapter 4 of title 36.

1 **5-34-7. Board of nursing -- General powers. --** The board of nurse registration and
2 nursing education is authorized, subject to the approval of the director of the department of
3 health, to:

4 (1) Adopt, review, or revise rules, and regulations consistent with the law that may be
5 necessary to effect provisions of the chapter;

6 (2) Approve nursing education programs according to the rules established by the board;

7 (3) Require standards for nursing practice within organized nursing services and the
8 individual practice of licensees;

9 (4) Approve the examinations for licensure;

10 (5) Establish requirements to validate competence for reinstatement to the active list;

11 (6) Conduct hearings upon charges calling for discipline of a licensee or revocation of a
12 license;

13 (7) Issue subpoenas to, compel the attendance of witnesses at, and administer oaths to
14 persons giving testimony at hearings;

15 (8) Cause the prosecution or enjoinder of all persons violating this chapter;

16 (9) Maintain a record of all its proceedings;

17 (10) Submit an annual report to the director of the department of health;

18 (11) Utilize other persons that may be necessary to carry on the work of the board;

19 (12) Conduct public hearings, investigations, and studies of nursing practice, nursing
20 education, and related matters and prepare and issue publications that, in the judgment of the
21 board, allow the nursing profession to provide safe, effective nursing services to the public;

22 (13) Determine qualifications necessary for prescriptive privileges for ~~certified registered~~
23 ~~nurse practitioners~~ advanced practice registered nurses;

24 (14) Grant ~~certified registered nurse practitioners~~ prescriptive privileges to advanced
25 practice registered nurses; and

26 (15) ~~Determine qualification necessary for the prescriptive privileges for psychiatric and~~
27 ~~mental health clinical nurse specialists; and~~

28 (16) ~~Grant certified psychiatric and mental health clinical nurse specialists prescriptive~~
29 ~~privileges.~~

30 (17) Adopt criteria for recognizing national certifying bodies for APRN roles and
31 population foci.

32 **5-34-40. Advanced practice nurse advisory committee. --** (a) The ~~nine (9)~~ seven (7)
33 member committee consists of two (2) certified ~~registered~~ nurse practitioners, two (2) certified
34 registered nurse anesthetists, two (2) ~~psychiatric and mental health~~ certified clinical nurse

1 specialists, ~~one physician and two (2) consumers~~ and one consumer. The director of health shall
2 appoint the committee. In making appointments to the committee, the director shall consider
3 persons recommended by professional nurse organizations and professional medical associations.
4 The professional members of the committee shall be currently engaged in practice. The consumer
5 members shall be: (1) knowledgeable in consumer health concerns; (2) a resident of the state; (3)
6 not licensed as a health care practitioner; (4) not a parent, spouse, sibling, or child of a person
7 licensed as a health care practitioner, and not a student in a professional program; (5) not having a
8 direct financial interest in health care services; (6) not a member or an employee of any board of
9 control of any public or private health care service.

10 (b) Each member appointment shall be for three (3) years, with no member serving more
11 than two (2) consecutive three (3) year terms except that in making the initial appointments the
12 director designates: four (4) members for a term of two (2) years; three (3) members for a term of
13 three (3) years; and the consumer members for three (3) year terms.

14 (c) This committee must meet not fewer than two (2) times per year. The committee has
15 the following functions:

16 (1) To assess advanced nursing practice for the purpose of improving patient care.

17 (2) (i) To review all complaints regarding advanced practice nurses, and recommend any
18 and all disciplinary or corrective action that they deem appropriate, including revocation and
19 suspension of license, upon proof that an advanced practice nurse has:

20 (A) Aided or abetted an uncertified person to practice as an advanced practice nurse;

21 (B) Become addicted to the use of liquor or controlled substances;

22 (C) Negligently, willfully, or intentionally acted in a manner inconsistent with the health
23 and safety of persons entrusted to his or her care;

24 (D) Had his or her authorization to practice as an advanced practice nurse denied,
25 revoked or suspended in another state;

26 (E) Engaged in the performance of medical functions beyond the scope of practice
27 authorized by the provisions of this chapter;

28 (F) Willfully failed to file or record medical records and reports;

29 (G) Mental incompetence; or

30 (H) Willfully failed to maintain standards established by the nursing profession.

31 (ii) The recommendation shall be submitted to the board of nursing for implementation.

32 (3) To advise periodically to the board of nurse registration and nursing education
33 regarding advanced nurse practice.

34 **5-34-43. Criminal records review.** -- (a) Notwithstanding any provision of law to the

1 contrary contained in any general or public law, rule or regulation, any person seeking a license to
2 practice under this chapter, or who is previously licensed and authorized to practice under this
3 chapter and is seeking employment, shall undergo a federal and statewide criminal background
4 check (BCI), which shall be processed prior to receiving a license to practice or to enter into
5 employment.

6 (b) The applicant shall apply to the bureau of criminal identification for a national
7 criminal records check that shall include fingerprints submitted to the federal bureau of
8 investigation. Upon the discovery of any disqualifying information, the bureau of criminal
9 identification will inform the applicant in writing of the nature of the disqualifying information;
10 and, without disclosing the nature of the disqualifying information, will notify the licensing
11 agency or the potential employer in writing that disqualifying information has been discovered.

12 (c) The applicant against whom disqualifying information has been found, may request
13 that a copy of the criminal background report be sent to the licensing agency or the potential
14 employer. The licensing agency or the potential employer shall make a judgment regarding the
15 issuing of a license.

16 (d) In those situations in which no disqualifying information has been found, the bureau
17 of criminal identification shall inform the applicant and the licensing agency or the potential
18 employer in writing of this fact.

19 (e) It shall be the responsibility of the applicant to pay for the criminal records check.

20 **5-34-44. Advanced practical registered nurses as independent practitioners. --**
21 APRNs are licensed independent practitioners within standards established or recognized by the
22 board of nursing. Each APRN is accountable to patients, the nursing profession and the board of
23 nursing for:

24 (1) Complying with the requirements of this chapter and the quality of advanced nursing
25 care rendered ;

26 (2) Recognizing limits of knowledge and experience;

27 (3) Planning for the management of situations beyond the APRN's expertise;

28 (4) Consulting with or referring patients to other licensed health care providers as
29 appropriate.

30 (5) In the case of CRNAs, comply with the requirements of chapter 5-34.2 of the Rhode
31 Island general laws, including subsection 5-34.2-5(b) regarding scope of practice. In the case of
32 any conflict between this chapter and chapter 5-34.2 with regard to the licensure and practice of
33 CRNAs, chapter 5-34.2 shall control.

34 **5-34-45. Licensure of APRNs. -- (a) An applicant for initial licensure to practice as an**

1 APRN shall:

2 (1) Submit a completed written application and appropriate fees as established by the
3 board of nursing;

4 (2) Hold a current RN license or privilege to practice and shall not hold an encumbered
5 license or privilege to practice as an RN in any state or territory ;

6 (3) Have completed an accredited graduate or post-graduate level APRN program in one
7 of the three roles (RNP, CRNA, or CNS) and at least one population focus;

8 (4) Be currently certified by a national certifying body recognized by the board of nursing
9 in the APRN role and population foci appropriate to educational preparation;

10 (5) Report any criminal conviction, nolo contendere plea, Alford plea or other plea
11 arrangement in lieu of conviction;

12 (6) Have committed no acts or omissions that are grounds for disciplinary action as set
13 forth in this chapter; and

14 (7) Provide other evidence as required by regulation.

15 (b) The board of nursing may issue an initial APRN license to clinical nurse specialists
16 without a certification exam when:

17 (1) A national certification exam does not exist for the current population foci; and

18 (2) The applicant has submitted a portfolio to the board of nursing that includes proof of
19 graduation, course descriptions, official transcript that includes courses in pharmacology,
20 pathophysiology and physical assessment, letters of recommendation from his/her employer
21 attesting to the CNS's practice at the advanced practice level.

22 (c) After January 1, 2015, all clinical nurse specialists seeking initial licensure as a APRN
23 must meet all the criteria as stated in this chapter including national certification in a role and
24 population foci recognized by the board of nursing.

25 (d) The board of nursing may issue a license by endorsement to an APRN licensed under
26 the laws of another state if, in the opinion of the board of nursing, the applicant meets the
27 qualifications for licensure in this jurisdiction. An applicant for APRN licensure by endorsement
28 shall:

29 (1) Submit a completed written application and appropriate fees as established by the
30 board of nursing;

31 (2) Hold a current license or privilege to practice as an RN and APRN in a state or
32 territory;

33 (3) Not have an encumbered license or privilege to practice in any state or territory;

34 (4) Have completed an accredited graduate or post-graduate level APRN program in one

1 of the three roles (CNP, CRNA or CNS) and at least one population focus or meets the standards
2 for grandfathering as described in this chapter;

3 (5) Be currently certified by a national certifying body recognized by the board of nursing
4 in the APRN role and at least one population focus appropriate to educational preparation ;

5 (6) Meet continued competency requirements as set forth in board of nursing regulations ;

6 (7) Report any conviction, nolo contendere plea, Alford plea or other plea arrangement in
7 lieu of conviction ;

8 (8) Have committed no acts or omissions, which are grounds for disciplinary action in
9 another jurisdiction; and

10 (9) Provide other evidence as required by the board of nursing in its regulations.

11 (e) APRN licenses issued under this chapter shall be renewed every two (2) years
12 according to a schedule established by the BON. An applicant for APRN license renewal shall:

13 (1) Submit a renewal application as directed by the board of nursing and remit the
14 required fee as set forth in regulation;

15 (2) Maintain national certification in the appropriate APRN role and at least one
16 population focus, authorized by licensure, through an ongoing recertification maintenance
17 program of a nationally recognized certifying body recognized by the board of nursing; and

18 (3) Meet other requirements set forth in regulations.

19 (f) The board of nursing may reactivate or reinstate an APRN license as set forth in BON
20 regulation.

21 **5-34-46. Status of current licensees.** -- (a) Any person holding a license to practice
22 nursing as a certified nurse practitioner ,psychiatric clinical nurse specialists, certified registered
23 nurse anesthetist, as defined in this chapter and chapter 5-34.2, in this state that is valid upon
24 passage of this chapter shall be deemed to be licensed as an APRN, with his or her current
25 privileges and shall be eligible for renewal of such license as defined under the provisions of this
26 chapter and chapter 5-34-2

27 (b) Any person holding a valid license to practice nursing having graduated from an
28 accredited course of study, actively practicing in an advanced role, and holding a national
29 certification related to his or her current practice setting as of (effective date of this act), as
30 defined in chapters 5-35 or 5-34.2, shall be deemed to be eligible for to license as an APRN.

31 (c) After August 1, 2013, all new applicants for APRN licensure must meet the stipulated
32 licensure requirements as stated in this chapter.

33 **5-34-47. Titles and abbreviations.** -- (a) Only those persons who hold a license or
34 privilege to practice as advanced practice registered nurses in this state shall have the right to use

1 the title "advanced practice registered nurse" and the roles of "certified registered nurse
2 anesthetist," "clinical nurse specialist" and "certified nurse practitioner;" and the abbreviations
3 "APRN," "CRNA," "CNS" and "CNP" respectively.

4 (b) The abbreviation for the APRN designation of a certified registered nurse anesthetist,
5 a clinical nurse specialist and for a certified nurse practitioner will be APRN, plus the role title,
6 i.e., CRNA, CNS, and CNP.

7 **5-34-48. APRN education programs. --** (a) The standards for the establishment and
8 outcomes of APRN education programs, including clinical learning experiences, and shall be set
9 by APRN national accrediting agencies recognized by the US Department of Education and the
10 Council for Higher Education Accreditation.

11 (b) Compliance with the standards for the APRN program will be evidenced by official
12 certification of accreditation by the appropriate national accrediting agency, a copy of such shall
13 be submitted to the Board of Nursing. The Board of Nursing will act as the sole custodian of
14 record for any and all documentation used to demonstrate such certification by the appropriate
15 national accrediting agency.

16 **5-34-49. Prescriptive authority. --** (a) The board of nursing shall grant prescribing,
17 ordering, dispensing and furnishing authority.

18 (b) An APRN licensed by the board of nursing may prescribe, order, procure, administer,
19 dispense and furnish over the counter, legend and controlled substances pursuant to applicable
20 state and federal laws, when the APRN has completed an educational program as described in this
21 chapter that includes courses in pathophysiology, pharmacology and physical assessment and is
22 within the APRN's role and population focus.

23 (c) Prescribing, ordering, dispensing and furnishing shall include the authority to:

24 (1) Diagnose, prescribe and institute therapy or referrals of patients to health care
25 agencies, health care providers and community resources;

26 (2) Prescribe, procure, administer, dispense and furnish pharmacological agents,
27 including over the counter, legend and controlled substances; and

28 (3) Plan and initiate a therapeutic regimen that includes ordering and prescribing non-
29 pharmacological interventions, including, but not limited to, durable medical equipment, medical
30 devices, nutrition, blood and blood products, and diagnostic and supportive services including,
31 but not limited to, home health care, hospice, and physical and occupational therapy.

32 (d) Prescriptive privileges for the certified nurse practitioner shall include all the
33 authority under the APRN license including:

34 (1) Prescription of legend medications and prescription of controlled substances from

1 schedules II, III, IV and V that are established in regulation; and

2 (2) May be certified to prescribe controlled substances from Schedule I.

3 (e) Prescriptive privileges for APRNs with the population focus of psychiatric/mental
4 health:

5 (1) Shall include prescription of certain psychotropic and certain legend medications,
6 controlled substances from Schedule II classified as stimulants, and controlled substances from
7 Schedule III and IV that are prescribed in regulations;

8 (2) Shall not include controlled substances from Schedules I, II, and V and those certain
9 legend medications not included in subdivision (1) of this subsection.

10 (f) CRNAs may be granted prescriptive privileges in accordance with the provisions of
11 chapter 5-34.2

12 (g) Prescriptive privileges for certified clinical nurse specialist shall include:

13 (1) Diagnosing, prescribing and instituting therapy or referrals of patients to health care
14 agencies, health care providers and community resources; and

15 (2) Planning and initiating a therapeutic regimen that includes ordering and prescribing
16 non-pharmacological interventions, including, but not limited to, durable medical equipment,
17 medical devices, nutrition, blood and blood products, and diagnostic and supportive services
18 including, but not limited to, home health care, hospice, and physical and occupational therapy;
19 and

20 (3) Prescription of over the counter medications within their population foci.

21 SECTION 2. Sections 5-34-35, 5-34-36, 5-34-39, 5-34-40.1, 5-34-40.2, 5-34-40.3, 5-34-
22 40.4 and 5-34-41 of the General Laws in Chapter 5-34 entitled "Nurses" are hereby repealed.

23 ~~**5-34-35. Qualifications of a certified registered nurse practitioner applicant. ---(a)**~~

24 ~~An applicant for licensure to practice as a certified registered nurse practitioner shall submit to~~
25 ~~the board of nurse registration and nursing education written evidence on forms furnished by the~~
26 ~~division of professional regulation, verified by oath, that:~~

27 ~~(1) The applicant is a registered nurse who has completed an accredited educational~~
28 ~~program resulting in a master's degree in nursing and/or an approved nurse practitioner course of~~
29 ~~study. This curriculum must include both a didactic component and supervised clinical~~
30 ~~experience. Effective January 1, 2004, all applicants for initial licensure must complete an~~
31 ~~accredited educational program resulting in a master's degree with a major in nursing.~~

32 ~~(2) The applicant passed a national qualifying examination recognized by the board of~~
33 ~~nurse registration and nursing education.~~

34 ~~(b) A license to practice as a certified registered nurse practitioner may be issued to an~~

1 applicant who is licensed by examination or endorsement as a certified registered nurse
2 practitioner under the laws of another state or territory if, in the opinion of the board, the
3 applicant meets the qualifications required of certified registered nurse practitioners in this state.

4 ~~**5-34-36. Licensing of certified registered nurse practitioners.**~~ A license to practice
5 as a certified nurse practitioner shall be issued if the applicant meets the qualifications for the
6 certified registered nurse practitioner (R.N.P.). Persons who meet the qualifications of a certified
7 registered nurse practitioner, as stated in section 5-34-35, and are currently licensed as certified
8 registered nurse practitioners by examination or endorsement under the laws of another state of
9 the United States and/or the District of Columbia shall be allowed to practice as certified
10 registered nurse practitioners in this state for a period not to exceed ninety (90) days from the date
11 of clearance by the board of nurse registration and nursing education of the department of health,
12 provided that they are licensed in this state within ninety (90) days. The original privilege to work
13 ninety (90) days from the date of clearance shall not be extended or renewed.

14 ~~**5-34-39. Process for prescriptive privileges of certified registered nurse practitioner.**~~

15 ~~---(a) Prescriptive privileges for the certified registered nurse practitioner:~~

16 ~~(1) Shall be granted under the governance and supervision of the department, board of~~
17 ~~nurse registration and nurse education; and~~

18 ~~(2) Shall include prescription of legend medications and prescription of controlled~~
19 ~~substances from schedules II, III, IV and V that are established in regulation; and~~

20 ~~(3) Must not include controlled substances from Schedule I.~~

21 ~~(b) To qualify for prescriptive privileges an applicant must submit on forms provided by~~
22 ~~the board of nurse registration and nursing education, verified by oath, that the applicant has~~
23 ~~evidence of completion of thirty (30) hours of education in pharmacology within the three (3)~~
24 ~~year period immediately prior to date of application. To maintain prescriptive privileges the~~
25 ~~certified registered nurse practitioner (R.N.P.) must submit upon request of the board of nurse~~
26 ~~registration and nursing education evidence of thirty (30) hours continuing education in~~
27 ~~pharmacology every six (6) years.~~

28 ~~**5-34-40.1. Qualifications of a psychiatric and mental health clinical nurse specialist**~~
29 ~~**applicant.**~~ --- (a) An applicant for licensure as a psychiatric and mental health clinical nurse

30 ~~specialist shall submit to the board written evidence on forms furnished by the department of~~
31 ~~health, verified by oath, that the applicant:~~

32 ~~(1) Is a registered nurse who has completed an accredited educational program resulting~~
33 ~~in a master's degree in psychiatric and mental health nursing; and/or~~

34 ~~(2) Passed a national qualifying examination recognized by the board.~~

1 ~~(b) All persons who are engaged in the practice of a psychiatric and mental health~~
2 ~~clinical nurse specialist on July 1, 2003, who meet the definition in section 5-34-3(i) may be~~
3 ~~considered to have met the qualifications for licensure providing they have three (3) years~~
4 ~~experience acceptable to the board between January 1, 1997, and January 1, 2003. After January~~
5 ~~1, 2004, all applicants for initial licensure must complete an accredited educational program~~
6 ~~resulting in a master's degree in nursing and must pass a national qualifying examination~~
7 ~~recognized by the board.~~

8 ~~**5-34-40.2. Licensing of psychiatric and mental health clinical nurse specialists.** --- A~~
9 ~~license to practice as a psychiatric clinical nurse specialist shall be issued if the applicant meets~~
10 ~~the qualifications for the psychiatric and mental health clinical nurse specialist. Persons who meet~~
11 ~~the qualifications of a psychiatric and mental health clinical nurse specialist, as stated in section~~
12 ~~5-34-40.1, and are currently licensed as psychiatric and mental health clinical nurse specialists by~~
13 ~~examination or endorsement under the laws of another state or territory of the United States~~
14 ~~and/or the District of Columbia shall be allowed to practice as psychiatric and mental health~~
15 ~~clinical nurse specialists in this state for a period not to exceed ninety (90) days from the date of~~
16 ~~clearance by the board of nurse registration and nursing education of the Rhode Island department~~
17 ~~of health, provided that they are licensed in this state within ninety (90) days. The original~~
18 ~~privilege to work ninety (90) days from the date of clearance shall not be extended or renewed.~~

19 ~~**5-34-40.3. Application fee for psychiatric and mental health clinical nurse**~~
20 ~~**specialists.** --- The initial application fee for licensure as a psychiatric and mental health clinical~~
21 ~~nurse specialist, the renewal fee for a psychiatric and mental health clinical nurse specialist, and~~
22 ~~the application fee for prescriptive privileges shall be as set forth in section 23-1-54.~~

23 ~~**5-34-40.4. Right to use psychiatric and mental health clinical nurse specialist title.** ---~~
24 ~~Any person who holds a license to practice as a psychiatric and mental health clinical nurse~~
25 ~~specialist in this state has the right to use the title psychiatric and mental health clinical nurse~~
26 ~~specialist and use the abbreviation "P.C.N.S." No other person may assume that title or use that~~
27 ~~abbreviation or any other words or letters, signs, figures, or devices to indicate that the person~~
28 ~~using it is a psychiatric and mental health clinical nurse specialist.~~

29 ~~**5-34-41. Process for prescriptive privileges of psychiatric and mental health clinical**~~
30 ~~**nurse specialist.** --- (a) Prescriptive privileges for the psychiatric and mental health clinical nurse~~
31 ~~specialist:~~

32 ~~(1) Shall be granted under the governance and supervision of the division of professional~~
33 ~~regulations, board of nurse registration and nurse education; and~~

34 ~~(2) Shall include prescription of certain psychotropic and certain legend medications,~~

1 ~~controlled substances from Schedule II classified as stimulants, and controlled substances from~~
2 ~~Schedule IV, that are prescribed in regulations;~~

3 ~~(3) Shall not include controlled substances from Schedules I, II, III and V and those~~
4 ~~certain legend medications not included in subdivision (2) of this subsection; and~~

5 ~~(4) Shall be granted for psychiatric and mental health clinical nurse specialists who have~~
6 ~~a master's degree in nursing.~~

7 ~~(b) A psychiatric and mental health clinical nurse specialist as stated in section 5-34-3~~
8 ~~shall be permitted to prescribe in accordance with annually updated guidelines, written in~~
9 ~~collaboration with the medical director or physician consultant of their individual establishments.~~

10 ~~(c) A psychiatric and mental health clinical nurse specialist in independent practice does~~
11 ~~not have prescriptive privileges.~~

12 ~~(d) To qualify for prescriptive privileges a psychiatric and mental health clinical nurse~~
13 ~~specialist, as stated in section 5-34-3, shall submit on forms provided by the board of nurse~~
14 ~~registration and nursing education, verified by oath, that the applicant has evidence of completion~~
15 ~~of thirty (30) hours of education in pharmacology of psychotropic drugs and certain legend~~
16 ~~medications within the three (3) year period immediately prior to date of application. To maintain~~
17 ~~prescriptive privileges the psychiatric and mental health clinical nurse specialist must submit~~
18 ~~upon request of the board of nurse registration and nursing education evidence of thirty (30)~~
19 ~~hours continuing education in pharmacology of psychotropic drugs every six (6) years.~~

20 SECTION 3. Sections 5-34.2-2 and 5-34.2-3 of the General Laws in Chapter 5-34.2
21 entitled "Nurse Anesthetists" are hereby amended to read as follows:

22 **5-34.2-2. Definitions.** -- (a) "Board" means the board of nurse registration and nurse
23 education established in section 5-34-4.

24 (b) "Certified registered nurse anesthetist" (CRNA) means a registered nurse who has
25 successfully met the requirements stated in this chapter.

26 (c) "Practice of certified registered nurse anesthesia" means providing certain health care
27 services ~~under the supervision of~~ in collaboration with anesthesiologists, licensed physicians, or
28 licensed dentists in accordance with section 5-31.1-1(16) which requires substantial specialized
29 knowledge, judgment and skill related to the administration of anesthesia, including preoperative
30 and postoperative assessment of patients; administering anesthetics; monitoring patients during
31 anesthesia; management of fluid in intravenous therapy and management of respiratory care. It
32 also includes, in connection with the immediate perioperative care of a patient, the ability to issue
33 a medication order for drugs or medications to be administered by a licensed, certified, or
34 registered health care provider; to order and evaluate laboratory and diagnostic test results and

1 perform point of care testing that the CRNA is qualified to perform; and order and evaluate
2 radiographic imaging studies that the CRNA is qualified to order and interpret. For the purposes
3 of this section, the immediate perioperative care of a patient shall be defined as the period
4 commencing on the day prior to surgery and ending upon discharge of the patient from post-
5 anesthesia care. CRNAs shall comply with the requirements set forth in this chapter, including
6 subsection 5-34.2-5(b) regarding scope of practice, and the requirements set forth in chapter 5-34,
7 as applicable. In the case of any conflict between this chapter and chapter 5-34 with regard to the
8 licensure and practice of CRNAs, this chapter shall control.

9 **5-34.2-3. Requirements for licensure of the nurse anesthetist.** -- Requirements for
10 licensure as a nurse anesthetist shall consist of the following:

11 (1) Current licensure as a professional registered nurse in the state; and

12 (2) Graduation from an educational program accredited by the ~~American Association of~~
13 ~~Nurse Anesthetists~~ council on accreditation of nurse anesthesia educational programs or its
14 predecessors or successors, and which has as its objective preparation of nurses to practice nurse
15 anesthesia; and

16 (3) Initial certification by the American Association of Nurse Anesthetists council on
17 certification of nurse anesthetists and recertification, as applicable by the American Association
18 of Nurse Anesthetists council on recertification of nurse anesthetists or their predecessors or
19 successors.

20 (4) ~~The requirements stated in subdivision (3) of this section do not apply to a graduate~~
21 ~~nurse anesthetist awaiting initial certification results, providing that initial certification is~~
22 ~~accomplished within ninety (90) days upon completion of an accredited nurse anesthesia~~
23 ~~educational program.~~

24 (5) The requirements stated in subdivisions (2) and (3) of this section do not apply to a
25 professional registered nurse who practices nursing in accordance with the provisions of the
26 Nurse Practice Act, chapter 34 of this title, and who is enrolled as a bona fide student in an
27 accredited nurse anesthesia program providing nurse anesthesia under the supervision of a
28 certified registered nurse anesthetist and anesthesiologist.

29 (6) Beginning July 21, 1992, all nurse anesthetists shall be afforded the same period of
30 time to become licensed. Notwithstanding the provisions of this section, no person practicing as a
31 nurse anesthetist in Rhode Island on July 1, 1991, shall be required to obtain proper certification
32 under this chapter. However, as required by subdivision (3) of this section, persons who become
33 certified under this section shall become recertified as applicable.

34 SECTION 4. This act shall take effect upon passage.

=====
LC01636/SUB A
=====

EXPLANATION
BY THE LEGISLATIVE COUNCIL
OF
A N A C T
RELATING TO BUSINESSES AND PROFESSIONS -- NURSES

- 1 This act would amend and greatly expand the role and duties of certain types of nurses in
- 2 the health care profession, especially the role and authority of advance practice registered nurses.
- 3 This act would take effect upon passage.

=====
LC01636/SUB A
=====