

Nevada State Board of Nursing, 5011 Meadowood Mall Way, Suite 300, Reno, NV 89502-6547 Fax: (775) 687-7707 or (702) 486-4803, Email: nursingboard@nsbn.state.nv.us <a href="www.nevadanursingboard.org">www.nevadanursingboard.org</a>; Toll Free (888) 590-6726

To practice as an APRN in Nevada, you must hold an active Nevada APRN license.

### **Licensure Requirements for Advanced Practice Registered Nurse**

# **Application Instructions:**

- 1. You must hold an active Nevada RN license. Your APRN license will be Issued when you have met all of the requirements for licensure and will expire on the same date as your RN license. At the time of renewal, you must renew both your RN and your APRN.
- 2. A completed application submitted via the Nevada Nurse Portal, including a fee of \$200 (MasterCard<sup>TM</sup>, Visa<sup>TM</sup>, Discover<sup>TM</sup>, or American Express<sup>TM</sup> debit or credit card). *Fees are not refundable*.
- 3. If you are applying for licensure by endorsement, submit a copy of your active certificate of recognition or license from another state.
- 4. Submit a copy of your certification as an Advanced Practice Registered Nurse by a nationally recognized certification agency approved by the Board. (All applicants are encouraged to send the Board a copy of their national certification, even if it is not required for licensure based on their initial qualifications.)
- 5. Submit an official transcript with degree posted sent directly from your advanced nursing education program. The program must be at least one academic year in length, and must include didactic instruction and clinical experience with a qualified physician (MD or DO) or APRN. The transcript must show your program included basic educational components:
  - a) Advanced Health Assessment,
  - b) Advanced Pathophysiology,
  - c) Advanced Pharmacology,
  - d) Advanced role preparation,
  - e) Specific clinical specialty,
  - f) Clinical preceptorship.

If the above components are not clearly identified as courses on your transcript, you must provide an explanatory letter from an authorized school representative, or copies of the relevant pages of the school catalog from the year(s) of your attendance.

6. If you are applying for prescribing privileges, you must complete the additional information on your application with the Nevada State Board of Nursing. Once your APRN license is issued, and you qualified for prescribing privileges, the Board will notify the Board of Pharmacy that you are eligible for prescribing privileges. Then you must apply for prescribing privileges with the Board of Pharmacy. You may not prescribe any medications until the Board of Pharmacy has issued you a license to prescribe, you have submitted a copy of that license to the Board of Nursing and your status had been updated reflect current active prescribing privileges. Finally, if you wish to prescribe controlled substances you must apply with the Board of Pharmacy and the Drug Enforcement Administration (DEA). You may not prescribe controlled substances until the Board of Pharmacy has issued you a license to prescribe, you have received a DEA certificate to prescribe controlled substances, you have submitted a copy of that license to the Board of Nursing and your status had been updated reflect current your active prescribing privilege.

- \* If you have clinically practiced as an Advanced Practice Registered Nurse less than two (2) years or 2,000 hours and plan to prescribe Schedule II controlled substances you must obtain a formal protocol, with a collaborative physician. Once you have clinically practiced for more than two (2) years or 2,000 hours you are no longer required to have this formal protocol with a collaborating physician and must submit documentary evidence supporting this to the Nevada State Board of Nursing. Documentary evidence may include but is not limited to:
  - \* A signed letter from your employer(s) stating that you have clinically practiced for a total of two (2) years OR 2.000 hours:
  - \* A signed letter from your collaborating physician or another APRN whom you have been working with stating that you have at least 2,000 hours or two (2) years of clinical practice;
  - \* Any other available form of verification. (Will be reviewed individually for acceptance.) If you are not prescribing Schedule II Controlled Substances, you are not required to meet this requirement.

APRN Protocol: An example of this protocol is available on the Board's website. The APRN must keep their protocol at their place of work. Please note: The Board has the authority to conduct random audits of your practice. When audited, the APRN will send a photocopy of the protocol that is kept at their workplace, along with other requested documentation. Failure to comply with the audit requirements within the specified timeframe may result in further investigation and possible disciplinary action against your license. Failing to obtain a protocol with a collaborative physician if required may result in a complaint/investigation against your license for practicing beyond scope and may be grounds for disciplinary action against your license.

7. Submit completed fingerprint card. Once your initial application is received the Board will send you a fingerprint card and instructions, alternately you can call 888-590-6726 to make an appointment to have your fingerprints done electronically in our office. You must complete the fingerprint process prior to receiving a permanent APRN license, unless you have submitted fingerprints for Nevada RN licensure within the past six months. Due to various factors, it may take up to four months for the Board to receive the official fingerprint results from the Department of Public Safety and FBI.

# **Broker/Third Party:**

If you wish to have a third party act upon your behalf for licensure purposes, please sign the authorization form, have it notarized, and returned to the Board.

#### **Qualifications for a License as an APRN:**

#### If you completed a program to prepare an APRN before July 01, 1992:

- \* You must have an active certification/licensure in another state or jurisdiction and have practiced nursing within the last five (5) years.
- \* You must have graduated from or completed a program designed to prepare an Advanced Practice Registered Nurse.
- \* Beginning July 01, 2014, you are highly encouraged to hold current national certification as an Advanced Practice Registered Nurse.
- \* If you are applying to prescribe Schedule II Controlled Substances you must submit proof that you have clinically practiced as an APRN for a minimum of two (2) years or 2,000 OR you will be required to submit a protocol for the prescribing of Schedule II Controlled Substances with a collaborating physician.
- \* If you are applying for an APRN with prescriptive privileges, you must provide documentation of 1,000 hours of active practice prescribing medication in the immediately preceding two (2) years as an APRN.

#### If you completed a program to prepare an APRN between July 01, 1992 and June 01, 2005

- \* You must hold a current national certification as an Advanced Practice Registered Nurse and hold a bachelor's degree in nursing from an accredited school.
- \* You must have an active certificate/licensure in another state or jurisdiction and have practiced nursing within the last five (5) years.
- \* You must have graduated from or completed a program designed to prepare and Advanced Practice Registered Nurse.
- \* Beginning July 01, 2014, you are highly encouraged to hold national certification as an Advanced Practice Registered Nurse.
- \* If you are applying to prescribe Schedule II Controlled Substances you must submit proof that you have clinically practiced as an APRN for a minimum of two (2) years or 2,000 OR you will be required to submit a protocol for the prescribing of Schedule II Controlled Substances with a collaborating physician.
- \* If you are applying for an APRN with prescriptive privileges, you must provide documentation of 1,000 hours of active practice prescribing medication in the immediately preceding two (2) years as an APRN.

### If you completed a program to prepare an APRN after Jun 01, 2005

- \* You must have an active certificate/licensure in another state or jurisdiction and have practiced nursing within the last five (5) years.
- \* You must hold a master's or doctorate degree in nursing.
- \* You must have graduated from or completed a program designed to prepare and Advanced Practice Registered Nurse.
- \* Beginning July 01, 2014, you are highly encouraged to hold national certification as an Advanced Practice Registered Nurse.
- \* If you are applying to prescribe Schedule II Controlled Substances you must submit proof that you have clinically practiced as an APRN for a minimum of two (2) years or 2,000 OR you will be required to submit a protocol for the prescribing of Schedule II Controlled Substances with a collaborating physician.

#### If you completed a program to prepare an APRN after July 01, 2014

- \* You must have an active certification/licensure in another state or jurisdiction and have practiced nursing within the last five years unless you are applying as a new graduate from a program designed to prepare an Advanced Practice Registered Nurse.
- \* You must hold a master's or doctorate degree in nursing or related health field.
- \* You must have graduated from or completed a program designed to prepare an Advanced Practice Registered Nurse.
- \* If you are applying to prescribe Schedule II Controlled Substances you must submit proof that you have clinically practiced as an APRN for a minimum of two (2) years or 2,000 OR you will be required to submit a protocol for the prescribing of Schedule II Controlled Substances with a collaborating physician.
- \* You must provide documentation showing that you are certified as an Advanced Practice Registered Nurse by the American Board of Nursing Specialties, Accreditation Commission for Education in Nursing (formerly the National League for Nursing), Commission on Collegiate Nursing Education, the National Commission for Certifying Agencies of the Institute for Credentialing Excellence or any other nationally recognized certification agency approved by the Board. Other nationally recognized certification agencies include but are not limited to: CCNE, ACNE, AANP and PNCB.