

Oklahoma Board of Nursing
2915 N. Classen Blvd., Suite 524
Oklahoma City, OK 73106
(405) 962-1800
www.nursing.ok.gov/

Prescriptive Authority Continuing Education Tracking Form

General Information

Advanced Practice Registered Nurses with prescriptive authority recognition must obtain continuing education units in order to be eligible for renewal. At the time of renewal, the Advanced Practice Registered Nurse must certify completion of the required continuing education. The attached form may be used by the Advanced Practice Registered Nurse to maintain a record of hours earned during the renewal cycle. If the advanced practice nurse is audited, the form may be submitted with the required documentation (certificates of successful completion, course objectives, target audience information, course outlines, etc.) to verify completion of continuing education.

Continuing Education Requirements

For CNP, CNM, CNS Prescriptive Authority: “Documentation verifying completion of a minimum of 15 contact hours or one academic hour of education, or the equivalent, in pharmacotherapeutics, clinical application, and use of pharmacological agents in the prevention of illness, and in the restoration and maintenance of health, in a program beyond basic registered nurse preparation, **AND** two (2) hours of education in pain management or two (2) hours of education in opioid use or addiction, **unless** the Advanced Practice Registered Nurse has demonstrated to the satisfaction of the Board that the Advance Practice Registered Nurse does not currently hold a federal Drug Enforcement Administration registration number” [567.4a 3 bold added] within the 2 year period immediately preceding the effective date for renewal of prescriptive authority applicable to the scope of practice. (Do not submit more than the identified percent for each category for prescriptive authority renewal) Documentation may include an official transcript that verifies advanced pharmacology academic credit hours or documentation of pharmacology contact hours (or the equivalent) awarded that verifies the following:

1. Certificate of completion that verifies the date of completion & the number of pharmacology contact hours (or the equivalent) awarded. Attach program information, including the course title, course description, course outline if applicable, presenter credentials and objectives;
2. Pharmacology contact hours are applicable to the scope of practice for your specialty/population served;
3. Indicates the target audience was prescriber-level (*Please note that ACLS, PALS, and CPR do not meet the continuing education requirements for prescriptive authority renewal.*)

The following table indicates acceptable methods by which academic credit or contact hours may be earned:

<u>MAXIMUM CREDITS ALLOWED FOR:</u>	<u>RENEWAL</u>
CATEGORY A: Academic Credit: Evidence of completion of coursework in pharmacotherapeutics appropriate for advanced practice nurses.	Up to 100% (1 credit hour)
CATEGORY B: Onsite seminar, lecture, workshop, or course, approved for contact hours, continuing education units, or continuing medical education units by a recognized approver of continuing education. Evidence of attendance at an approved pharmacotherapeutic offering appropriate for advanced practice nurses.	Up to 100% (15 contact hours)
CATEGORY C: Online seminars or workshops, or articles in professional journals or other professional references approved for contact hours, continuing education units, or continued medical education units by a recognized approver of continuing education: Evidence of satisfactory performance on an article related to pharmacotherapeutic continuing education appropriate for advanced practice nurses.	Up to 100% (15 contact hours)
CATEGORY D: Published article in refereed journal, book, or research project. Evidence of publication of one article related to pharmacotherapy appropriate for advanced practice nurses. These will be evaluated on a case-by-case basis.	Up to 20% (3 contact hours)
CATEGORY E: Presenter/Lecturer. Evidence of providing content related to pharmacotherapeutics at an advanced practice level. The presentation / lecture must be approved for contact hours or offered as part of an academic course with a target audience of advanced practice nurses.	Up to 20% (3 contact hours)

The following equivalencies are used to calculate continuing education contact hours:

One contact hour	=	50 minutes
One academic semester hour	=	15 contact hours
One academic quarter hour	=	12.5 contact hours

For CRNA'S: "Documentation verifying satisfactory completion of a minimum of eight (8) units of continuing education in advanced pharmacology relating to the administration of anesthesia, as recognized by the Council on Certification of Nurse Anesthetists or the Council on Recertification of Nurse Anesthetists, completed during the two (2) years immediately preceding renewal" [485:10-18-3 (2) (B)]. *(Please note that ACLS, PALS, and CPR do not meet the continuing education requirements for prescriptive authority renewal.)* Such documentation must verify:

1. The number of contact hours/units awarded, title of the course and the date of successful completion; or the number of credit hours awarded per official transcript;
2. Approval by the Council on Certification/Recertification of Nurse Anesthetists;
3. The content was advanced pharmacology related to the administration of anesthesia.

CONTINUING EDUCATION FOR PRESCRIPTIVE AUTHORITY RECOGNITION RENEWAL

Please list all education you have completed within the last two years prior to the expiration date of your license to meet requirements for prescriptive authority. The table below must be filled out completely; otherwise, the form will be returned without review. ***It is not acceptable to state "See Attached"***. Attach documentation that supports the education, as described in the instructions. Please highlight in the attached documentation each of the required areas shown in the table below. The evaluator must be able to easily find the information below in the attached documentation and must be able to easily ascertain that the focus of each presentation was pharmacotherapeutics applicable to your specialty area and able to clearly verify the continuing education category.

DATE OF CE/ ACADEMIC OFFERING	TITLE OF PRESENTATION	LENGTH IN MINUTES	# CONTACT HRS REQUESTED*	TYPE OF PRESENTATION**	TARGET AUDIENCE	FOR BOARD USE ONLY: NUMBER OF CONTACT HRS APPROVED

***To calculate number of contact hours, divide the length of the presentation in minutes by 50.**

****Identify the type of presentation (i.e., workshop or seminar, online audiovisual presentation, audiotape, article or other reading material, etc) and category of pharmacology continuing education.)**