

SECOND REGULAR SESSION

SENATE BILL NO. 826

98TH GENERAL ASSEMBLY

INTRODUCED BY SENATOR WALLINGFORD.

Pre-filed December 21, 2015, and ordered printed.

ADRIANE D. CROUSE, Secretary.

4973S.02I

AN ACT

To repeal sections 195.070, 334.104, 335.016, 335.019, 335.046, 335.056, 335.086, 338.198, section 195.100 as enacted by senate bill no. 491, ninety-seventh general assembly, second regular session, and section 195.100 as enacted by senate bill no. 296, ninety-fifth general assembly, first regular session, RSMo, and to enact in lieu thereof nine new sections relating to professional nursing.

Be it enacted by the General Assembly of the State of Missouri, as follows:

Section A. Sections 195.070, 334.104, 335.016, 335.019, 335.046, 335.056, 335.086, 338.198, section 195.100 as enacted by senate bill no. 491, ninety-seventh general assembly, second regular session, and section 195.100 as enacted by senate bill no. 296, ninety-fifth general assembly, first regular session, RSMo, are repealed and nine new sections enacted in lieu thereof, to be known as sections 195.070, 195.100, 334.104, 335.016, 335.019, 335.046, 335.056, 335.086, and 338.198, to read as follows:

195.070. 1. A physician, podiatrist, dentist, a registered optometrist certified to administer pharmaceutical agents as provided in section 336.220, or an assistant physician in accordance with section 334.037 or **an advanced practice registered nurse as defined in section 335.016** or a physician assistant in accordance with section 334.747 in good faith and in the course of his or her professional practice only, may prescribe, administer, and dispense controlled substances or he or she may cause the same to be administered or dispensed by an individual as authorized by statute.

2. [An advanced practice registered nurse, as defined in section 335.016, but not a certified registered nurse anesthetist as defined in subdivision (8) of section 335.016, who holds a certificate of controlled substance prescriptive

EXPLANATION—Matter enclosed in bold-faced brackets [thus] in this bill is not enacted and is intended to be omitted in the law.

12 authority from the board of nursing under section 335.019 and who is delegated
13 the authority to prescribe controlled substances under a collaborative practice
14 arrangement under section 334.104 may prescribe any controlled substances
15 listed in Schedules III, IV, and V of section 195.017, and may have restricted
16 authority in Schedule II. Prescriptions for Schedule II medications prescribed by
17 an advanced practice registered nurse who has a certificate of controlled
18 substance prescriptive authority are restricted to only those medications
19 containing hydrocodone. However, no such certified advanced practice registered
20 nurse shall prescribe controlled substance for his or her own self or
21 family. Schedule III narcotic controlled substance and Schedule II - hydrocodone
22 prescriptions shall be limited to a one hundred twenty-hour supply without refill.

23 3.] A veterinarian, in good faith and in the course of the veterinarian's
24 professional practice only, and not for use by a human being, may prescribe,
25 administer, and dispense controlled substances and the veterinarian may cause
26 them to be administered by an assistant or orderly under his or her direction and
27 supervision.

28 [4.] 3. A practitioner shall not accept any portion of a controlled
29 substance unused by a patient, for any reason, if such practitioner did not
30 originally dispense the drug.

31 [5.] 4. An individual practitioner shall not prescribe or dispense a
32 controlled substance for such practitioner's personal use except in a medical
33 emergency.

195.100. 1. It shall be unlawful to distribute any controlled substance in
2 a commercial container unless such container bears a label containing an
3 identifying symbol for such substance in accordance with federal laws.

4 2. It shall be unlawful for any manufacturer of any controlled substance
5 to distribute such substance unless the labeling thereof conforms to the
6 requirements of federal law and contains the identifying symbol required in
7 subsection 1 of this section.

8 3. The label of a controlled substance in Schedule II, III or IV shall, when
9 dispensed to or for a patient, contain a clear, concise warning that it is a criminal
10 offense to transfer such narcotic or dangerous drug to any person other than the
11 patient.

12 4. Whenever a manufacturer sells or dispenses a controlled substance and
13 whenever a wholesaler sells or dispenses a controlled substance in a package
14 prepared by him or her, the manufacturer or wholesaler shall securely affix to

15 each package in which that drug is contained a label showing in legible English
16 the name and address of the vendor and the quantity, kind, and form of
17 controlled substance contained therein. No person except a pharmacist for the
18 purpose of filling a prescription under this chapter, shall alter, deface, or remove
19 any label so affixed.

20 5. Whenever a pharmacist or practitioner sells or dispenses any controlled
21 substance on a prescription issued by a physician, physician assistant, dentist,
22 podiatrist, veterinarian, or advanced practice registered nurse, the pharmacist or
23 practitioner shall affix to the container in which such drug is sold or dispensed
24 a label showing his or her own name and address of the pharmacy or practitioner
25 for whom he or she is lawfully acting; the name of the patient or, if the patient
26 is an animal, the name of the owner of the animal and the species of the animal;
27 the name of the physician, physician assistant, dentist, podiatrist, advanced
28 practice registered nurse, or veterinarian by whom the prescription was written;
29 the name of [the collaborating physician if the prescription is written by an
30 advanced practice registered nurse or] the supervising physician if the
31 prescription is written by a physician assistant, and such directions as may be
32 stated on the prescription. No person shall alter, deface, or remove any label so
33 affixed.

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15 each package in which that drug is contained a label showing in legible English
16 the name and address of the vendor and the quantity, kind, and form of
17 controlled substance contained therein. No person except a pharmacist for the

18 purpose of filling a prescription under sections 195.005 to 195.425, shall alter,
19 deface, or remove any label so affixed.

20 5. Whenever a pharmacist or practitioner sells or dispenses any controlled
21 substance on a prescription issued by a physician, physician assistant, dentist,
22 podiatrist, veterinarian, or advanced practice registered nurse, the pharmacist or
23 practitioner shall affix to the container in which such drug is sold or dispensed
24 a label showing his or her own name and address of the pharmacy or practitioner
25 for whom he or she is lawfully acting; the name of the patient or, if the patient
26 is an animal, the name of the owner of the animal and the species of the animal;
27 the name of the physician, physician assistant, dentist, podiatrist, advanced
28 practice registered nurse, or veterinarian by whom the prescription was written;
29 the name of [the collaborating physician if the prescription is written by an
30 advanced practice registered nurse or] the supervising physician if the
31 prescription is written by a physician assistant, and such directions as may be
32 stated on the prescription. No person shall alter, deface, or remove any label so
33 affixed.

 334.104. 1. A physician may enter into collaborative practice
2 arrangements with registered professional nurses. Collaborative practice
3 arrangements shall be in the form of written agreements, jointly agreed-upon
4 protocols, or standing orders for the delivery of health care
5 services. Collaborative practice arrangements[, which shall be in writing,] may
6 delegate to a registered professional nurse, **who is not an advanced practice**
7 **registered nurse as defined in section 335.016**, the authority to administer
8 or dispense drugs and provide treatment as long as the delivery of such health
9 care services is within the scope of practice of the registered professional nurse
10 and is consistent with that nurse's skill, training and competence.

11 2. [Collaborative practice arrangements, which shall be in writing, may
12 delegate to a registered professional nurse the authority to administer, dispense
13 or prescribe drugs and provide treatment if the registered professional nurse is
14 an advanced practice registered nurse as defined in subdivision (2) of section
15 335.016. Collaborative practice arrangements may delegate to an advanced
16 practice registered nurse, as defined in section 335.016, the authority to
17 administer, dispense, or prescribe controlled substances listed in Schedules III,
18 IV, and V of section 195.017, and Schedule II - hydrocodone; except that, the
19 collaborative practice arrangement shall not delegate the authority to administer
20 any controlled substances listed in Schedules III, IV, and V of section 195.017, or

21 Schedule II - hydrocodone for the purpose of inducing sedation or general
22 anesthesia for therapeutic, diagnostic, or surgical procedures. Schedule III
23 narcotic controlled substance and Schedule II - hydrocodone prescriptions shall
24 be limited to a one hundred twenty-hour supply without refill. Such collaborative
25 practice arrangements shall be in the form of written agreements, jointly
26 agreed-upon protocols or standing orders for the delivery of health care services.

27 3. The written collaborative practice arrangement shall contain at least
28 the following provisions:

29 (1) Complete names, home and business addresses, zip codes, and
30 telephone numbers of the collaborating physician and the advanced practice
31 registered nurse;

32 (2) A list of all other offices or locations besides those listed in subdivision
33 (1) of this subsection where the collaborating physician authorized the advanced
34 practice registered nurse to prescribe;

35 (3) A requirement that there shall be posted at every office where the
36 advanced practice registered nurse is authorized to prescribe, in collaboration
37 with a physician, a prominently displayed disclosure statement informing
38 patients that they may be seen by an advanced practice registered nurse and
39 have the right to see the collaborating physician;

40 (4) All specialty or board certifications of the collaborating physician and
41 all certifications of the advanced practice registered nurse;

42 (5) The manner of collaboration between the collaborating physician and
43 the advanced practice registered nurse, including how the collaborating physician
44 and the advanced practice registered nurse will:

45 (a) Engage in collaborative practice consistent with each professional's
46 skill, training, education, and competence;

47 (b) Maintain geographic proximity, except the collaborative practice
48 arrangement may allow for geographic proximity to be waived for a maximum of
49 twenty-eight days per calendar year for rural health clinics as defined by P.L.
50 95-210, as long as the collaborative practice arrangement includes alternative
51 plans as required in paragraph (c) of this subdivision. This exception to
52 geographic proximity shall apply only to independent rural health clinics,
53 provider-based rural health clinics where the provider is a critical access hospital
54 as provided in 42 U.S.C. Section 1395i-4, and provider-based rural health clinics
55 where the main location of the hospital sponsor is greater than fifty miles from
56 the clinic. The collaborating physician is required to maintain documentation

57 related to this requirement and to present it to the state board of registration for
58 the healing arts when requested; and

59 (c) Provide coverage during absence, incapacity, infirmity, or emergency
60 by the collaborating physician;

61 (6) A description of the advanced practice registered nurse's controlled
62 substance prescriptive authority in collaboration with the physician, including a
63 list of the controlled substances the physician authorizes the nurse to prescribe
64 and documentation that it is consistent with each professional's education,
65 knowledge, skill, and competence;

66 (7) A list of all other written practice agreements of the collaborating
67 physician and the advanced practice registered nurse;

68 (8) The duration of the written practice agreement between the
69 collaborating physician and the advanced practice registered nurse;

70 (9) A description of the time and manner of the collaborating physician's
71 review of the advanced practice registered nurse's delivery of health care
72 services. The description shall include provisions that the advanced practice
73 registered nurse shall submit a minimum of ten percent of the charts
74 documenting the advanced practice registered nurse's delivery of health care
75 services to the collaborating physician for review by the collaborating physician,
76 or any other physician designated in the collaborative practice arrangement,
77 every fourteen days; and

78 (10) The collaborating physician, or any other physician designated in the
79 collaborative practice arrangement, shall review every fourteen days a minimum
80 of twenty percent of the charts in which the advanced practice registered nurse
81 prescribes controlled substances. The charts reviewed under this subdivision may
82 be counted in the number of charts required to be reviewed under subdivision (9)
83 of this subsection.

84 4. The state board of registration for the healing arts pursuant to section
85 334.125 and the board of nursing pursuant to section 335.036 may jointly
86 promulgate rules regulating the use of collaborative practice arrangements. Such
87 rules shall be limited to specifying geographic areas to be covered, the methods
88 of treatment that may be covered by collaborative practice arrangements and the
89 requirements for review of services provided pursuant to collaborative practice
90 arrangements including delegating authority to prescribe controlled
91 substances. Any rules relating to dispensing or distribution of medications or
92 devices by prescription or prescription drug orders under this section shall be

93 subject to the approval of the state board of pharmacy. Any rules relating to
94 dispensing or distribution of controlled substances by prescription or prescription
95 drug orders under this section shall be subject to the approval of the department
96 of health and senior services and the state board of pharmacy. In order to take
97 effect, such rules shall be approved by a majority vote of a quorum of each
98 board. Neither the state board of registration for the healing arts nor the board
99 of nursing may separately promulgate rules relating to collaborative practice
100 arrangements. Such jointly promulgated rules shall be consistent with guidelines
101 for federally funded clinics. The rulemaking authority granted in this subsection
102 shall not extend to collaborative practice arrangements of hospital employees
103 providing inpatient care within hospitals as defined pursuant to chapter 197 or
104 population-based public health services as defined by 20 CSR 2150-5.100 as of
105 April 30, 2008.

106 5. The state board of registration for the healing arts shall not deny,
107 revoke, suspend or otherwise take disciplinary action against a physician for
108 health care services delegated to a registered professional nurse provided the
109 provisions of this section and the rules promulgated thereunder are satisfied.]
110 Upon the written request of a physician subject to a disciplinary action imposed
111 as a result of an agreement between a physician and a registered professional
112 nurse or registered physician assistant, whether written or not, prior to August
113 28, 1993, all records of such disciplinary licensure action and all records
114 pertaining to the filing, investigation or review of an alleged violation of this
115 chapter incurred as a result of such an agreement shall be removed from the
116 records of the state board of registration for the healing arts and the division of
117 professional registration and shall not be disclosed to any public or private entity
118 seeking such information from the board or the division. The state board of
119 registration for the healing arts shall take action to correct reports of alleged
120 violations and disciplinary actions as described in this section which have been
121 submitted to the National Practitioner Data Bank. In subsequent applications
122 or representations relating to his **or her** medical practice, a physician completing
123 forms or documents shall not be required to report any actions of the state board
124 of registration for the healing arts for which the records are subject to removal
125 under this section.

126 [6.] 3. Within thirty days of any change and on each renewal, the state
127 board of registration for the healing arts shall require every physician to identify
128 whether the physician is engaged in any collaborative practice agreement,

129 including collaborative practice agreements delegating the authority to prescribe
130 controlled substances, or physician assistant agreement and also report to the
131 board the name of each licensed professional with whom the physician has
132 entered into such agreement. The board [may] **shall** make this information
133 available to the public. The board shall track the reported information and may
134 routinely conduct random reviews of such agreements to ensure that agreements
135 are carried out for compliance under this chapter.

136 [7.] 4. Notwithstanding any law to the contrary, a certified registered
137 nurse anesthetist as defined in subdivision (8) of section 335.016 shall be
138 permitted to provide anesthesia services without a collaborative practice
139 arrangement provided that he or she is under the supervision of an
140 anesthesiologist or other physician, dentist, or podiatrist who is immediately
141 available if needed. Nothing in this subsection shall be construed to prohibit or
142 prevent a certified registered nurse anesthetist as defined in subdivision (8) of
143 section 335.016 from entering into a collaborative practice arrangement under
144 this section, except that the collaborative practice arrangement may not delegate
145 the authority to prescribe any controlled substances listed in Schedules III, IV,
146 and V of section 195.017, or Schedule II - hydrocodone.

147 [8. A collaborating physician shall not enter into a collaborative practice
148 arrangement with more than three full-time equivalent advanced practice
149 registered nurses. This limitation shall not apply to collaborative arrangements
150 of hospital employees providing inpatient care service in hospitals as defined in
151 chapter 197 or population-based public health services as defined by 20 CSR
152 2150-5.100 as of April 30, 2008.

153 9. It is the responsibility of the collaborating physician to determine and
154 document the completion of at least a one-month period of time during which the
155 advanced practice registered nurse shall practice with the collaborating physician
156 continuously present before practicing in a setting where the collaborating
157 physician is not continuously present. This limitation shall not apply to
158 collaborative arrangements of providers of population-based public health services
159 as defined by 20 CSR 2150-5.100 as of April 30, 2008.

160 10. No agreement made under this section shall supersede current
161 hospital licensing regulations governing hospital medication orders under
162 protocols or standing orders for the purpose of delivering inpatient or emergency
163 care within a hospital as defined in section 197.020 if such protocols or standing
164 orders have been approved by the hospital's medical staff and pharmaceutical

165 therapeutics committee.

166 11.] **5.** No contract or other agreement shall require a physician to act as
167 a collaborating physician for [an advanced practice] a registered nurse against
168 the physician's will. A physician shall have the right to refuse to act as a
169 collaborating physician, without penalty, for a particular [advanced practice]
170 registered nurse. [No contract or other agreement shall limit the collaborating
171 physician's ultimate authority over any protocols or standing orders or in the
172 delegation of the physician's authority to any advanced practice registered nurse,
173 but this requirement shall not authorize a physician in implementing such
174 protocols, standing orders, or delegation to violate applicable standards for safe
175 medical practice established by hospital's medical staff.

176 12.] **6.** No contract or other agreement shall require any [advanced
177 practice] registered nurse to serve as a collaborating [advanced practice]
178 registered nurse for any collaborating physician against the [advanced practice]
179 registered nurse's will. [An advanced practice] **A** registered nurse shall have the
180 right to refuse to collaborate, without penalty, with a particular physician. **Any**
181 **refusal to collaborate shall not violate applicable standards for the**
182 **provision of safe practice and patient care.**

335.016. As used in this chapter, unless the context clearly requires
2 otherwise, the following words and terms mean:

3 (1) "Accredited", the official authorization or status granted by an agency
4 for a program through a voluntary process;

5 (2) "Advanced practice registered nurse" **or "APRN"**, a [nurse who has
6 education beyond the basic nursing education and is certified by a nationally
7 recognized professional organization as a certified nurse practitioner, certified
8 nurse midwife, certified registered nurse anesthetist, or a certified clinical nurse
9 specialist. The board shall promulgate rules specifying which nationally
10 recognized professional organization certifications are to be recognized for the
11 purposes of this section. Advanced practice nurses and only such individuals may
12 use the title "Advanced Practice Registered Nurse" and the abbreviation "APRN"]
13 **person who is licensed under the provisions of this chapter to engage**
14 **in the practice of advanced practice nursing;**

15 (3) "Approval", official recognition of nursing education programs which
16 meet standards established by the board of nursing;

17 (4) "Board" or "state board", the state board of nursing;

18 (5) "Certified clinical nurse specialist", a registered nurse who is currently

19 certified as a clinical nurse specialist by a nationally recognized certifying board
20 approved by the board of nursing. **Certified clinical nurse specialist is one**
21 **of four APRN roles;**

22 (6) "Certified nurse midwife", a registered nurse who is currently certified
23 as a nurse midwife by the American College of Nurse Midwives, or other
24 nationally recognized certifying body approved by the board of
25 nursing. **Certified nurse midwife is one of four APRN roles;**

26 (7) "Certified nurse practitioner", a registered nurse who is currently
27 certified as a nurse practitioner by a nationally recognized certifying body
28 approved by the board of nursing. **Certified nurse practitioner is one of**
29 **four APRN roles;**

30 (8) "Certified registered nurse anesthetist", a registered nurse who is
31 currently certified as a nurse anesthetist by the [Council on Certification of
32 Nurse Anesthetists, the Council on] **National Board of Certification and**
33 **Recertification [of] for Nurse Anesthetists**, or other nationally recognized
34 certifying body approved by the board of nursing. **Certified registered nurse**
35 **anesthetist is one of four APRN roles;**

36 (9) "Executive director", a qualified individual employed by the board as
37 executive secretary or otherwise to administer the provisions of this chapter
38 under the board's direction. Such person employed as executive director shall not
39 be a member of the board;

40 (10) "Inactive nurse", as defined by rule pursuant to section 335.061;

41 (11) "Lapsed license status", as defined by rule under section 335.061;

42 (12) "Licensed practical nurse" or "practical nurse", a person licensed
43 pursuant to the provisions of this chapter to engage in the practice of practical
44 nursing;

45 (13) "Licensure", the issuing of a license to practice **advanced practice**,
46 professional or practical nursing to candidates who have met the specified
47 requirements and the recording of the names of those persons as holders of a
48 license to practice **advanced practice**, professional or practical nursing;

49 (14) **"Population focus", one of the six areas of practice for which**
50 **an advanced practice registered nurse has the education and training**
51 **to provide care and services: family/individual across the lifespan,**
52 **adult-gerontology, pediatrics, neonatal, women's health/gender-related,**
53 **and psychiatric/mental health;**

54 (15)(a) "Practice of advanced practice nursing", the practice of

55 **advanced practice nursing includes but is not limited to:**

56 **a. The practice of professional nursing performed with or**
57 **without compensation or personal profit;**

58 **b. Assessing and diagnosing actual or potential human health**
59 **problems;**

60 **c. Planning, initiating, ordering, and evaluating therapeutic**
61 **regimens;**

62 **d. Coordinating, consulting, and referring with a health care**
63 **provider, or when appropriate, referral to a physician or other health**
64 **care provider;**

65 **e. Prescriptive authority for legend drugs and controlled**
66 **substances;**

67 **f. Completing certifications or similar documents that reflect a**
68 **patient's current health status or continuing health needs consistent**
69 **with such advanced practice registered nurse's scope of practice and**
70 **the nurse-patient relationship;**

71 **(b) Advanced practice nursing shall be practiced in accordance**
72 **with the APRN's graduate-level education and certification in one of**
73 **four recognized roles: certified clinical nurse specialist, certified nurse**
74 **midwife, certified nurse practitioner, and certified registered nurse**
75 **anesthetist, with at least one population focus;**

76 **(c) Nothing in this subdivision shall alter the definition of the**
77 **practice of professional nursing;**

78 **(16) "Practice of practical nursing", the performance for compensation**
79 **of selected acts for the promotion of health and in the care of persons who are ill,**
80 **injured, or experiencing alterations in normal health processes. Such**
81 **performance requires substantial specialized skill, judgment and knowledge. All**
82 **such nursing care shall be given under the direction of a person licensed by a**
83 **state regulatory board to prescribe medications and treatments or under the**
84 **direction of a registered professional nurse. For the purposes of this chapter, the**
85 **term "direction" shall mean guidance or [supervision] oversight provided by a**
86 **person licensed by a state regulatory board to prescribe medications and**
87 **treatments or a registered professional nurse, including, but not limited to, oral,**
88 **written, or otherwise communicated orders or directives for patient care. When**
89 **practical nursing care is delivered pursuant to the direction of a person licensed**
90 **by a state regulatory board to prescribe medications and treatments or under the**

91 direction of a registered professional nurse, such care may be delivered by a
92 licensed practical nurse without direct physical oversight;

93 [(15)] **(17) "Practice of professional nursing"**, the performance for
94 compensation of any act **or function** which requires substantial specialized
95 education, judgment and skill based on knowledge and application of principles
96 derived from the biological, physical, social, **behavioral**, and nursing sciences,
97 including, but not limited to:

98 (a) Responsibility for the **promotion as well as the** teaching of health
99 care and the prevention of illness to the patient and his or her family;

100 (b) Assessment, **data collection**, nursing diagnosis, nursing care,
101 **evaluation**, and counsel of persons who are ill, injured or experiencing
102 alterations in normal health processes;

103 (c) The administration of medications and treatments as prescribed by a
104 person licensed by a state regulatory board to prescribe medications and
105 treatments;

106 (d) The coordination, **initiation, performance**, and assistance in the
107 **determination and** delivery of a plan of health care with all members of a
108 health team;

109 (e) The teaching and supervision of other persons in the performance of
110 any of the foregoing;

111 [(16) A] **(18) "Registered professional nurse" or "registered nurse"**, a
112 person licensed pursuant to the provisions of this chapter to engage in the
113 practice of professional nursing;

114 [(17)] **(19) "Retired license status"**, any person licensed in this state
115 under this chapter who retires from such practice. Such person shall file with the
116 board an affidavit, on a form to be furnished by the board, which states the date
117 on which the licensee retired from such practice, an intent to retire from the
118 practice for at least two years, and such other facts as tend to verify the
119 retirement as the board may deem necessary; but if the licensee thereafter
120 reengages in the practice, the licensee shall renew his or her license with the
121 board as provided by this chapter and by rule and regulation.

335.019. 1. **An advanced practice registered nurse's prescriptive
2 authority shall include authority to:**

3 **(1) Prescribe, dispense, and administer nonscheduled legend
4 drugs and medications as defined in section 338.330, within such
5 APRN's practice and speciality;**

6 **(2) Notwithstanding any other provision of this chapter,**
7 **prescribe and administer nonscheduled legend drugs, and provide**
8 **nonscheduled drug samples from pharmaceutical manufacturers to**
9 **patients at no charge to the patient or any other party.**

10 **2.** The board of nursing may grant a certificate of controlled substance
11 prescriptive authority to an advanced practice registered nurse who[:

12 (1)] submits proof of successful completion of an advanced pharmacology
13 course that shall include [preceptorial experience in] the prescription of drugs,
14 medicines and therapeutic devices[; and

15 (2) Provides documentation of a minimum of three hundred clock hours
16 preceptorial experience in the prescription of drugs, medicines, and therapeutic
17 devices with a qualified preceptor; and

18 (3) Provides evidence of a minimum of one thousand hours of practice in
19 an advanced practice nursing category prior to application for a certificate of
20 prescriptive authority. The one thousand hours shall not include clinical hours
21 obtained in the advanced practice nursing education program. The one thousand
22 hours of practice in an advanced practice nursing category may include
23 transmitting a prescription order orally or telephonically or to an inpatient
24 medical record from protocols developed in collaboration with and signed by a
25 licensed physician; and

26 (4) Has a controlled substance prescribing authority delegated in the
27 collaborative practice arrangement under section 334.104 with a physician who
28 has an unrestricted federal Drug Enforcement Administration registration
29 number and who is actively engaged in a practice comparable in scope, specialty,
30 or expertise to that of the advanced practice registered nurse].

31 **3. The board of nursing may grant a certificate of controlled**
32 **substance prescriptive authority to an advanced practice registered**
33 **nurse to administer, dispense, or prescribe controlled substances listed**
34 **in Schedules II, III, IV, and V of section 195.017, except that an**
35 **advanced practice registered nurse shall not delegate the authority to**
36 **administer any controlled substances listed in Schedules II, III, IV, and**
37 **V of section 195.017 for the purpose of inducing sedation or general**
38 **anesthesia for therapeutic, diagnostic, or surgical procedures.**

39 **4. Advanced practice registered nurses, except for certified**
40 **registered nurse anesthetists, shall not administer any controlled**
41 **substances listed in Schedules II, III, IV, or V of section 195.017 for the**

42 purpose of inducing general anesthesia for procedures that are outside
43 the advanced practice registered nurse's scope of practice.

335.046. 1. An applicant for a license to practice as a registered
2 professional nurse shall submit to the board a written application on forms
3 furnished to the applicant. The original application shall contain the applicant's
4 statements showing the applicant's education and other such pertinent
5 information as the board may require. The applicant shall be of good moral
6 character and have completed at least the high school course of study, or the
7 equivalent thereof as determined by the state board of education, and have
8 successfully completed the basic professional curriculum in an accredited or
9 approved school of nursing and earned a professional nursing degree or
10 diploma. Each application shall contain a statement that it is made under oath
11 or affirmation and that its representations are true and correct to the best
12 knowledge and belief of the person signing same, subject to the penalties of
13 making a false affidavit or declaration. Applicants from non-English-speaking
14 lands shall be required to submit evidence of proficiency in the English
15 language. The applicant must be approved by the board and shall pass an
16 examination as required by the board.
17 The board may require by rule as a requirement for licensure that each applicant
18 shall pass an oral or practical examination. Upon successfully passing the
19 examination, the board may issue to the applicant a license to practice nursing
20 as a registered professional nurse. The applicant for a license to practice
21 registered professional nursing shall pay a license fee in such amount as set by
22 the board. The fee shall be uniform for all applicants. Applicants from foreign
23 countries shall be licensed as prescribed by rule.

24 2. An applicant for license to practice as a licensed practical nurse shall
25 submit to the board a written application on forms furnished to the
26 applicant. The original application shall contain the applicant's statements
27 showing the applicant's education and other such pertinent information as the
28 board may require. Such applicant shall be of good moral character, and have
29 completed at least two years of high school, or its equivalent as established by the
30 state board of education, and have successfully completed a basic prescribed
31 curriculum in a state-accredited or approved school of nursing, earned a nursing
32 degree, certificate or diploma and completed a course approved by the board on
33 the role of the practical nurse. Each application shall contain a statement that
34 it is made under oath or affirmation and that its representations are true and

35 correct to the best knowledge and belief of the person signing same, subject to the
36 penalties of making a false affidavit or declaration. Applicants from
37 non-English-speaking countries shall be required to submit evidence of their
38 proficiency in the English language. The applicant must be approved by the
39 board and shall pass an examination as required by the board. The board may
40 require by rule as a requirement for licensure that each applicant shall pass an
41 oral or practical examination. Upon successfully passing the examination, the
42 board may issue to the applicant a license to practice as a licensed practical
43 nurse. The applicant for a license to practice licensed practical nursing shall pay
44 a fee in such amount as may be set by the board. The fee shall be uniform for all
45 applicants. Applicants from foreign countries shall be licensed as prescribed by
46 rule.

47 **3. (1) An applicant for a license to practice as an advanced**
48 **practice registered nurse shall submit a completed application as**
49 **established by the board. The application shall, at a minimum, contain:**

50 **(a) The applicant's advanced nursing education and other**
51 **pertinent information as the board may require; and**

52 **(b) A statement under oath or affirmation that the applicant is**
53 **of good moral character and that the representations contained in the**
54 **application are true and correct to the best knowledge and belief of the**
55 **applicant, subject to the penalties of making a false affidavit or**
56 **declaration;**

57 **(c) Documentation that demonstrates the following educational**
58 **requirements:**

59 **a. Prior to July 1, 1998, completion of a formal post-basic**
60 **educational program from or formally affiliated with an accredited**
61 **college, university, or hospital of at least one academic year, which**
62 **includes advanced nurse theory and clinical nursing practice, leading**
63 **to a graduate degree or certificate with a concentration in an advanced**
64 **practice nursing clinical specialty area;**

65 **b. From July 1, 1998, to June 30, 2009, completion of a graduate**
66 **degree from an accredited college or university with a concentration**
67 **in an advanced practice nursing clinical specialty area, which includes**
68 **advanced nursing theory and clinical nursing practice;**

69 **c. On and after July 1, 2009, completion of an accredited**
70 **graduate-level advanced practice registered nursing program that**

71 **prepared the applicant for one of the four APRN roles in at least one**
72 **population focus;**

73 **(d) Documentation of current certification in one of the four**
74 **APRN roles from a nationally recognized certifying body approved by**
75 **the board or current documentation of recognition as an advanced**
76 **practice registered nurse issued by the board prior to January 1, 2017;**
77 **and**

78 **(e) Other evidence as required by board rule, including as may**
79 **be applicable evidence of proficiency in the English language.**

80 **(2) The applicant for a license to practice as an advanced**
81 **practice registered nurse shall pay a license fee in such amount as set**
82 **by the board that shall be uniform for all such applicants.**

83 **(3) Upon issuance of a license, the license holder's advanced**
84 **practice registered nursing license and his or her professional nursing**
85 **license shall be treated as one license for the purpose of renewal and**
86 **assessment of renewal fees.**

87 4. Upon refusal of the board to allow any applicant to sit for either the
88 registered professional nurses' examination or the licensed practical nurses'
89 examination, as the case may be, the board shall comply with the provisions of
90 section 621.120 and advise the applicant of his or her right to have a hearing
91 before the administrative hearing commission. The administrative hearing
92 commission shall hear complaints taken pursuant to section 621.120.

93 [4.] 5. The board shall not deny a license because of sex, religion, race,
94 ethnic origin, age or political affiliation.

335.056. The license of every person licensed under the provisions of
2 [sections 335.011 to 335.096] **this chapter** shall be renewed as provided. An
3 application for renewal of license shall be mailed to every person to whom a
4 license was issued or renewed during the current licensing period. The applicant
5 shall complete the application and return it to the board by the renewal date with
6 a renewal fee in an amount to be set by the board. The fee shall be uniform for
7 all applicants. The certificates of renewal shall render the holder thereof a legal
8 practitioner of nursing for the period stated in the certificate of renewal. Any
9 person who practices nursing as **an advanced practice registered nurse, as**
10 a registered professional nurse, or as a licensed practical nurse during the time
11 his **or her** license has lapsed shall be considered an illegal practitioner and shall
12 be subject to the penalties provided for violation of the provisions of [sections

13 335.011 to 335.096] **this chapter**.

335.086. No person, firm, corporation or association shall:

2 (1) Sell or attempt to sell or fraudulently obtain or furnish or attempt to
3 furnish any nursing diploma, license, renewal or record or aid or abet therein;

4 (2) Practice [professional or practical] nursing as defined [by sections
5 335.011 to 335.096] **in this chapter** under cover of any diploma, license, or
6 record illegally or fraudulently obtained or signed or issued unlawfully or under
7 fraudulent representation;

8 (3) Practice [professional nursing or practical] nursing as defined [by
9 sections 335.011 to 335.096] **in this chapter** unless duly licensed to do so under
10 the provisions of [sections 335.011 to 335.096] **this chapter**;

11 (4) Use in connection with his **or her** name any designation tending to
12 imply that he **or she** is a licensed **advanced practice registered nurse, a**
13 **licensed** registered professional nurse, or a licensed practical nurse unless duly
14 licensed so to practice under the provisions of [sections 335.011 to 335.096] **this**
15 **chapter**;

16 (5) Practice **advanced practice nursing**, professional nursing, or
17 practical nursing during the time his **or her** license issued under the provisions
18 of [sections 335.011 to 335.096] **this chapter** shall be suspended or revoked; or

19 (6) Conduct a nursing education program for the preparation of
20 professional or practical nurses unless the program has been accredited by the
21 board.

338.198. Other provisions of law to the contrary notwithstanding, a
2 pharmacist may fill a physician's **or advanced practice registered nurse's**
3 prescription [or the prescription of an advanced practice nurse working under a
4 collaborative practice arrangement with a physician,] when it is forwarded to the
5 pharmacist by a registered professional nurse or registered physician's assistant
6 or other authorized agent. The written collaborative practice arrangement shall
7 specifically state that the registered professional nurse or registered physician
8 assistant is permitted to authorize a pharmacist to fill a prescription on behalf
9 of the physician.

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