

Nevada State Board of

NURSING NEWS

December 2005

**Governor Reappoints
Board Member
Joseph Cortez**

**2005 RN Survey
Results Released**

**Board Member
David Burgio Earns
National Recognition**

**Delegation:
A Guide for Nurses**

UMC

IN ONE PRECISE MOMENT



A MOTHER HOLDS HER FIRST CHILD

A STROKE SURVIVOR TAKES A STEP ON HER OWN

A HEART PATIENT IS FLOWN IN BY CHOPPER

AND A DOCTOR SAYS, "SHE'S GOING TO BE FINE."

SOMETHING HAPPENS WHEN YOU PUT
ELEVEN CENTERS OF EXCELLENCE IN ONE HOSPITAL:
EVERY MOMENT IS CHARGED WITH MEANING.
AND MIRACLES ARE ALL PART OF A DAY'S WORK.

UMC
UNIVERSITY MEDICAL CENTER
THE SYMBOL OF EXCELLENCE

The mission of the Nevada State Board of Nursing is to protect the public's health, safety and welfare through effective regulation of nursing.

Debra Scott, MS, RN, APN
Executive Director

Cindy Kimball, Editor
Public Information Officer

5011 Meadowood Mall Way,
Suite 201
Reno, NV 89502-6547
888-590-6726
nursingboard@nsbn.state.nv.us

The **Nevada State Board of Nursing News** publishes news and information about Board actions, regulations, and activities. Articles may be reprinted without permission; attribution is appreciated.

CONTACT

NEVADA STATE BOARD OF NURSING

5011 Meadowood Mall Way,
Suite 201
Reno, NV 89502-6547
phone—888-590-6726
fax—775-688-2628
nursingboard@nsbn.state.nv.us

2500 W. Sahara Ave., Suite 207
Las Vegas, NV 89102-4392
phone—888-590-6726
fax—702-486-5803
nursingboard@nsbn.state.nv.us

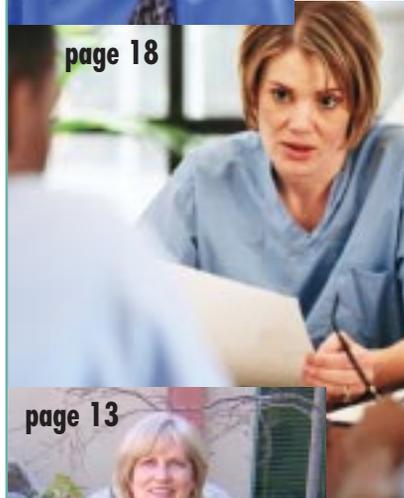
WORLD WIDE WEB

www.nursingboard.state.nv.us

If you're reading a friend's magazine, it's probably because you didn't notify the Board of your correct address.

You may do so by visiting our website and clicking on the "Address Change" link. See page 25 for details.

contents



How to Ensure Continued Competence? **4**

Governor Reappoints Joseph Cortez **6**

Board Member Earns National Recognition **7**

2005 Statewide RN Survey University of Nevada Releases Report **8**

Nevada Has National Voice: Nurses Serve On National Committees **12**

Board Creates New Position: Donna Cowling Named Education Consultant **13**

Delegation: A Guide for Nurses **16**

CNA Training Certificate Cannot Be Used for Inservice Training Hours **21**

Renew Your License or Certificate On Line **26**

Use Website To Verify Active License/Certificate **28**

Board and Advisory Committee Meetings **7**

Do You Have a Question? **11**

You're in Good Company **12**

Toll-Free Hot Line **21**

Mailing List Reminder *You can request to be removed* **21**

Board Members **22**

Moving? *You Must Inform the Board* **25**

Disciplinary Actions **27**

Staff Directory **30**



How to Ensure Continued Competence?

A message from the executive director

In its April 2003 report, *Health Professions Education – A Bridge to Quality*, the Institute of Medicine (IOM) identified five “core competencies” all health care providers need to possess—the ability to deliver **patient-centered care**, as members of an **interdisciplinary team**, emphasizing **evidence-based practice**, **quality improvement** approaches, and **informatics**.

So how do you determine whether nurses possess these core competencies? Or, let’s personalize it, how would you prove that you are competent in these five areas? A lack of discipline against your license? A skills list completed by your employer? The fact that you have practiced “safely” during the last two years? National certification in your nursing specialty? Passing a competency exam which measures these competencies?

Do professionals have to “prove” that they are competent to practice nursing? Is it inherent in being a professional that you “promise” to maintain your competency to practice nursing? When distilled, what do you think the universal competencies that nurses must maintain to be “safe to practice” are?

Recently, the National Council of State Boards of Nursing (NCSBN) formed the Continued Competency Task Force. Their charge is to

- ◆ develop and implement a communication plan on continued competence
- ◆ review the results of a practice analysis study on LPN/VNs and RNs
- ◆ develop a regulatory model that can be used by member boards to ensure the continued competence of the nurse
- ◆ initiate development of assessment(s) that are based on empirical data and meet the requirements of an approved regulatory model

The individuals on the task force are appointed for two years. It is my honor and privilege to have been appointed to this task force and to serve the profession of nursing in this role. Ensuring that nurses are competent to practice nursing has long been the charge of boards of nursing across the country. We have utilized various different methods to assure the public that our nurses are competent to provide the care their licenses give them the authority to give. In Nevada, the Nurse Practice Act requires that nursing graduates take the NCLEX to ensure that they possess entry level nursing

knowledge prior to getting licensed. In order for nurses to renew their licenses every two years, they are required to have completed 30 continuing education hours and to have practiced nursing within the previous five years. Are we certain that this ensures that every nurse in Nevada is competent to practice nursing? That’s the million-dollar question.

In reviewing various international definitions of competence, NCSBN’s task force formulated a definition that we believe encompasses the components of nursing competence. That operational definition is:

“The ongoing ability of a nurse to integrate and apply the knowledge, skills, judgment and personal attributes, including attitudes, values and beliefs required to practice safely, ethically and competently in a designated role and setting within the scope of practice and standards of practice.”

What do you think? Does that statement define your idea of nursing competence? How would you define this nebulous term? Or let’s personalize it—how do you know that you are competent in your nursing practice? What evidence do you have that proves that you are competent to practice nursing? As a nurse regulator, I shudder to think that I would need to prove that I could work in any nursing setting and be safe to practice in order to renew my nursing license. But, as you can see by our Nurse Practice Act, the Board is charged with ensuring that nurses are competent to practice.

So now you are beginning to see the immensity of this challenge . . .and I’m sure that I have not touched on many of the questions that need to be asked, not only by professional nurses, but by regulatory boards and, most importantly, by our patients.

I welcome any ideas you may have on this subject, as the task force begins looking at continued competence from a national perspective. Also, I invite you to join our discussions at the state level. The topic is on the agenda for the December 7 meeting of the Board’s Nursing Practice Advisory Committee, and as with all Board and advisory committee meetings, your participation is welcome and encouraged.

Debra Scott, MS, RN, APN
Executive Director

Competence—what the Nevada Nurse Practice Act has to say about it.

NAC 632.0385 “Competence” defined. Competence” means the ability to transform skill, knowledge, and performance into appropriate action.

NAC 632.039 “Competency evaluation test” defined. “Competency evaluation test” means a system of evaluation which:

1. Complies with federal and state standards;
2. Includes one component consisting of a written or oral examination;
3. Includes one component consisting of a test of manual skills; and
4. Verifies a trainee’s knowledge of and ability to perform the duties of a nursing assistant.

NAC 632.212 Duties included; competency required.

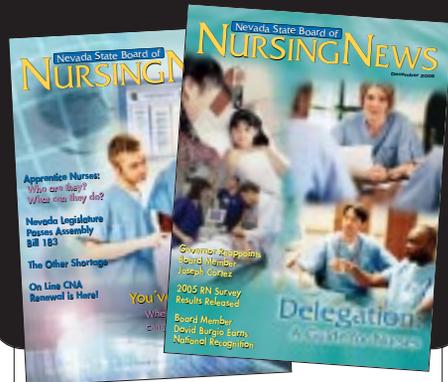
2. A registered nurse shall demonstrate in the performance of those duties competence in:
 - (a) The diagnosis and treatment of human responses to actual or potential health problems;
 - (b) Exercising sound judgment;
 - (c) Making decisions;
 - (d) Carrying out his duties based on an established plan of care;
 - (e) Evaluating, assessing and altering, if appropriate, the established plan of care;
 - (f) Delegating appropriate duties to other nurses;

- (g) Supervising a nurse to whom he has delegated nursing duties;
- (h) Maintaining accountability in the delegation of care;
- (i) Administering medication and carrying out treatments which are properly authorized;
- (j) Determining the necessity and appropriateness of health care services for a patient or prospective patient and determining that patient’s eligibility for payment of those health care services by a licensed insurer;
- (k) Managing the cases of patients assigned to him by coordinating services and collaborating with other health care professionals in the provision of health care services;
- (l) Planning for the discharge of patients; and
- (m) Managing risk in the provision of health care services.

NAC 632.890 Unprofessional Conduct. The Board will consider the following acts, among others, by a licensee or holder of a certificate as unprofessional conduct:

3. Assuming duties and responsibilities within the practice of nursing without adequate training.
4. Assuming duties and responsibilities within the practice of nursing if competency is not maintained, or the standards of competence are not satisfied, or both.

REACH RECRUIT RETAIN



THE NEVADA BOARD OF NURSING MAGAZINE SCHEDULE

- March 2006
- June 2006
- September 2006
- December 2006

to reserve advertising space
jcoker@pcipublishing.com
1-800-561-4686

Our State Board magazines are direct mailed to every licensed nurse in the following states—**one million and growing!**

- | | |
|----------------------------|------------------|
| • Arizona | • New Mexico |
| • Arkansas | • North Carolina |
| • The District of Columbia | • North Dakota |
| • Indiana | • Ohio |
| • Kentucky | • South Carolina |
| • Nebraska | • South Dakota |
| • Nevada | • Tennessee |
| | • Wyoming |



www.thinkaboutitnursing.com

XL Hospice, Inc.

RN's come work with us!
 Providing end of life care.
 F/T Salaried, Per Diem, on call. F/T benefits. New Grads welcome.

Fax resume to
 775-423-9211 or call
 775-423-9511.



Need Representation
 before the State Board?

HAL TAYLOR, Esq.

20 years experience
 representing
 professionals like you.

(775) 825-2223

www.nevadalicenselawyer.com

Governor Reappoints Joseph Cortez

Consumer member appointed to four-year term

Gov. Kenny Guinn recently reappointed Joseph Cortez, an internationally known boxing referee, to the Nevada State Board of Nursing. Cortez was originally appointed in 2004 to fill the unexpired term of a former consumer member.

Joseph Cortez has been a boxing referee for more than 20 years, refereeing 160 World Title Championship fights in more than 11 countries. He has refereed Oscar De La Hoya, Julio Caesar Chavez, Mike Tyson, Roberto Duran, George Foreman, and Lennox Lewis, to name a few. Born and raised in New York City in Spanish Harlem, Cortez began his career in 1960 as an amateur Bantamweight boxer, earning four Golden Gloves in two years. In 1963, he turned professional, fighting as a Bantamweight until 1967. His last professional fight was in 1971, when he retired with a record of 18 wins, one loss.

Cortez began a career in the hotel industry after he and his family moved to Puerto Rico in 1969. He worked his way up the ranks from front desk clerk to executive assistant manager of the El Conquistador Hotel in Fajardo. They moved back to New York in 1976, where Cortez served as assistant casino operating manager for the El San Juan Hotel Corporation, The Palace, and El Conquistador Hotels. At the same time, he began his career as a boxing referee.

Cortez also became very involved in the community, serving as both a speaker and a sponsor for several youth

organizations. He then developed and implemented a successful community vision outreach program with leading ophthalmologists in New York, New Jersey, Las Vegas, and Chicago to provide those in need with eye-care services.

“Boxing has afforded me a spot in the limelight and I intend to use the opportunity to help set a good role model to the youth and minorities and help wherever I can,” Cortez explained.

In 1992, he brought his community spirit to Las Vegas, where he and his wife Sylvia reside with their daughters Cindy, Sandy, and Christine, and grandsons Ricky and Bryce.

In addition to helping at-risk youth with a boxing program designed to teach not only boxing, but also discipline and self esteem, he has volunteered time and funds to several health-related organizations in Clark County. Cortez’s current focus is raising awareness and funds for spinal cord research. His daughter, Cindy, is a quadriplegic, after suffering a serious spinal cord injury in a 1996 automobile accident.

Cortez said, “Because of Cindy’s fighting spirit and determination to get better, my focus is now to create awareness and raise research funds for spinal cord injuries.”

Regarding his reappointment to the Board, Cortez said, “I’m very honored to represent the consumers of Nevada. I am proud to serve on such a hard-working Board—as a member of a dedicated team that is truly committed to protecting Nevada’s citizens.”



BOARD MEETINGS

A seven-member board appointed by the governor, the Nevada State Board of Nursing consists of four registered nurses, one practical nurse, one certified nursing assistant and one consumer member. Its meetings are open to the public; agendas are posted on the Board's web site and at community sites.

BOARD MEETING DATES

January 25-27, 2006 - Las Vegas

(February 28, 2006)

March 29-31, 2006 - Reno

(April 26, 2006)

May 17-19, 2006 - Las Vegas

(June 21, 2006)

July 19-21 (annual business meeting) - Elko

(August 23, 2006)

September 20-22, 2006 - Las Vegas

(October 18, 2006)

November 15-17, 2006 - Reno

(December 13, 2006)

(Meetings may be held on dates and in locations in parentheses, depending on Board business.)

ADVISORY COMMITTEES

The Nevada State Board of Nursing is advised by and appoints members to five standing advisory committees. Committee meetings are open to the public; agendas are posted on the Board's website and at community sites. If you are interested in applying for appointment to fill an upcoming opening, please visit the Board's website or call the Reno office for an application.

COMMITTEE MEETING DATES AND OPENINGS

The openings (listed in parentheses) will occur in the next six months. All meetings will be held via videoconference in Reno and Las Vegas, except for the Disability Advisory Committee.

Advanced Practice Advisory Committee (two)

February 7, 2006; May 9, 2006;

August 16, 2006; November 7, 2006

CNA Advisory Committee (one)

February 16, 2006; May 4, 2006;

August 17, 2006; November 2, 2006

Disability Advisory Committee (two)

April 21, 2006—Las Vegas

October 20, 2006—Reno

Education Advisory Committee (none)

Recent appointment: Margaret Puccinelli, Phd, RN

February 10, 2006; May 12, 2006;

August 11, 2006; November 3, 2006

Nursing Practice Advisory Committee (one)

December 7, 2005; February 7, 2006;

April 4, 2006; June 6, 2006;

August 8, 2006; October 3, 2006;

December 5, 2006

Board Member Earns National Recognition

David Burgio receives AANP State Award for Excellence



The American Academy of Nurse Practitioners (AANP) recently honored Board Member David Burgio, MS, RN, APN, at its National Conference awards ceremony. Burgio was the 2005 Nevada recipient of AANP's prestigious State Award of Excellence.

The award, established in 1991, recognizes one nurse practitioner in each state for demonstrating excellence in practice, research, nurse practitioner education, or community affairs. Burgio, a nursing board member since 2003, is the sole nurse practitioner for the HAWC (Health Access Washoe County) Outreach Medical Clinic. The clinic provides free health care to homeless individuals and families.

BOARD TALK

COME TALK TO THE BOARD

During each regularly scheduled meeting of the Nevada State Board of Nursing, Board members hold a Public Comment period for people to talk to them on nursing-related issues.

If you want to speak during the Public Comment period, just check the meeting agenda for the date and time it will be held. Usually, the Board president opens the first day of each meeting by inviting Public Comment. Time is divided equally among those who wish to speak.

For more detailed information regarding the Public Comment period, please call the Reno office.

WE'LL COME TALK TO YOU

Board staff will come speak to your organization on a range of nursing-related topics, including delegation, the impaired nurse, licensure and discipline processes, and the Nurse Practice Act.

2005 Statewide RN Survey

Center for Education and Health Services Outreach (CEHSO) at the University of Nevada School of Medicine releases report

The 2005 Survey of Licensed Registered Nurses in Nevada represents the first comprehensive, statewide assessment of the nature and composition of the RN population and RN workforce in Nevada.

The project was funded in part by the Nevada State Health Division, Nevada Hospital Association, the Health Resources and Services Administration (HRSA) through a cooperative agreement, and the Nevada Rural Hospital Flexibility Program through a HRSA grant.

It was endorsed by the Nursing Institute of Nevada (NIN), which is comprised of a wide-range of statewide nursing education and workforce stakeholders, including the Nevada State Board of Nursing.

The Board is pleased to publish highlights of the survey results, which give insight into the type of work licensed RNs do and where they do it, their ages, educational backgrounds, and job and career satisfaction.

The 2005 RN survey was coordinated by Dr. John Packham, PhD, and Tabor Griswold, MS, from the University of Nevada School of Medicine. Their final report is available on the Center for Education and Health Services Outreach website (www.unr.edu/med/dept/cehso).

statewide survey of licensed registered nurses in Nevada earlier this spring. The survey and forthcoming report provides a wide range of current data on the size and composition of the state's RN workforce.

An accurate understanding of the RN population in Nevada is a major issue of public policy concern for many reasons. Foremost, Nevada continues to face a chronic shortage of registered nurses across all regions of the state and across a wide range of health care settings, including the hospital sector. The shortage continues to exhibit a qualitative dimension characterized by a shortfall of nursing personnel with the skills and experience needed to care for patients with higher levels of acuity and requiring more specialized nursing care. As such, assessing the state's progress in addressing the nursing shortage, as well as predicting the future nursing workforce needs of the state requires accurate data on the nature and composition of the current RN workforce.

According to data obtained from the 2005 RN survey, there are an estimated 547 RNs per 100,000 population in Nevada. This figure represents an improvement over the 520 RNs per 100,000 reported for Nevada in 2000 by the federal government. This improvement reflects both successful efforts to recruit RNs to Nevada and the impact of increased enrollment in state RN education programs resulting from the legislature's support for the doubling of state nursing programs.

The RN survey highlights substantial regional variation in the size of the RN workforce. There are currently an estimated 9,083 RNs employed in nursing in Southern Nevada (Clark County) or 530 RNs per 100,000 population; 3,422 RNs employed in nursing in Northern Nevada (Carson City, Douglas and Washoe Counties) or 702 RNs per 100,000 population; and 701 RNs employed in nursing in rural and frontier Nevada (the remaining 13 counties) or 337 RNs per 100,000 population. Thus, while the per capita number of RNs has improved over the past five years, those gains have barely kept pace with the state's rapid population growth.

2005 Survey of Licensed Registered Nurses in Nevada

John Packham, PhD & Tabor Griswold, MS

In response to growing concern among policy makers, health leaders, and educational institutions about the lack of objective information on the registered nurse population in Nevada, the Center for Education and Health Services Outreach (CEHSO) at the University of Nevada School of Medicine undertook a

Estimated Number of RNs Employed in Nursing per 100,000 Population in Nevada – 2005

TABLE 1

Region	RNs Employed in Nursing						Number of RNs per 100,000 Population
	Full-time		Part-Time		Total		
	Number	Percent	Number	Percent	Number	Percent	
Southern Nevada	7,769	85.5%	1,315	14.5%	9,083	89.4%	530
Northern Nevada	2,709	79.2%	713	20.8%	3,422	89.2%	702
Rural and Frontier	541	77.1%	161	22.9%	701	81.4%	337
Nevada—Total	11,018	82.8%	2,188	17.2%	13,207	88.8%	548

Note: Estimated numbers and percents may not add to totals because of rounding.

The survey revealed that 58.6% of the state's RN workforce is employed in the hospital sector (down from 64.8% reported in 2000) and 14.1% is employed in ambulatory care settings (up from 12.2% reported in 2000).

Estimated Distribution of Employed RNs in Nevada by Place of Employment – 2000 and 2005

TABLE 2

Employment Setting	Nevada – 2005			Nevada 2000*	US 2000*
	Survey Response (N)	Number	Percent		
Hospitals	463	7,953	58.6%	64.8%	59.1%
Ambulatory Care	111	1,907	141.1%	12.2%	9.5%
Community/Public Health	52	893	6.6%	9.9%	12.8%
Home Health Care	31	532	3.9%	—	—
Nursing Homes	24	412	3.0%	3.5%	6.9%
School Health Services	19	326	2.4%	1.5%	3.8%
Nursing Education Programs	14	240	1.8%	1.5%	2.1%
Prisons/Corrections Facilities	15	258	1.9%	—	—
Other	61	1,048	7.7%	6.6%	5.8%
Total	790	13,570	100.0%	100.0%	100.0%

Notes: Estimated numbers and percents may not add to totals because of rounding. The figures presented in this table are based on the 91.3% of Nevada nursing population survey respondents who supplied employment data. *Data for Nevada and the US in 2000 are from the National Sample Survey of Registered Nurses.

Among employed RNs, 8,832 or 64.8% provide direct patient care in either inpatient or outpatient settings.

Estimated distribution of Employed RNs in Nevada by Primary Job Classification – 2005

TABLE 3

Primary Job Classification	Southern Nevada		Northern Nevada		Rural and Frontier		Nevada	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Direct Patient Care	6,093	65.7%	2,172	62.0%	567	72%	8,832	64.8%
Administration	1,029	11.1%	440	12.5%	47	6.0%	1,516	11.6%
Other	2,156	23.2%	892	25.5%	173	22.0%	3,222	23.9%
Total	9,278	100.0%	3,504	100.0%	787	100.0%	13,570	100.0%

Note: Estimated numbers and percents may not add to totals because of rounding.

The survey also provides data on the age distribution and average age of the RN population in Nevada. The average age of the licensed RN population in Nevada is 49.1. While the aging of the RN population in Nevada is evidenced across each region of the state, the average age of the RN population in southern Nevada is 48.5 years as compared to 49.7 in northern Nevada and 50.7 years in rural and frontier counties. Nearly 1 in 3 licensed RNs in Nevada are 56 years or older.

Estimated Age Distribution of RN Population in Nevada – 2005

TABLE 4

Age Cohort	Southern Nevada		Northern Nevada		Rural and Frontier		Nevada	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
20 to 34 Years	1,414	14.3%	376	9.9%	73	8.8%	1,863	12.1%
35 to 45 Years	2,131	21.6%	843	22.3%	175	21.1%	3,149	21.0%
46 to 55 Years	3,625	36.7%	1,309	34.6%	292	35.1%	5,227	35.0%
56 to 65 Years	2,052	20.8%	1,037	27.4%	219	26.3%	3,308	22.9%
66 Years or Older	657	6.7%	220	5.8%	73	8.8%	951	6.4%
Total	9,880	100.0%	3,785	100.0%	833	100.0%	14,498	100.0%
Average Age in Years	48.5		49.7		50.7		49.1	

Note: Estimated numbers and percents may not add to totals because of rounding.

The survey also provides information on other characteristics of the RN population, including educational preparation, job and career satisfaction, and the willingness and ability of the RN population to respond to disasters and mass casualty events in Nevada. A complete copy of the report is available on the CEHSO website.

Estimated Distribution of the RN population in the Nevada with their Educational Preparation – 2005

TABLE 5

Highest Level of Nursing Education	Southern Nevada		Northern Nevada		Rural and Frontier		Nevada	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Diploma	1,594	15.7%	506	13.2%	131	15.3%	2,231	14.8%
Associate Degree	3,685	36.3%	1,504	39.2%	497	57.6%	5,686	38.7%
Bachelors Degree	3,805	37.5%	1,504	39.2%	190	22.0%	5,498	37.0%
Masters Degree	956	9.4%	272	7.1%	44	5.1%	1,272	8.3%
Doctoral Degree	80	0.8%	39	1.0%	0	0.0%	119	0.8%
Total	10,119	100.0%	3,824	100.0%	862	100.0%	14,805	100.0%

Note: Estimated numbers and percents may not add to totals because of rounding.
 Note: Numbers less than twenty should be carefully interpreted.

Estimated Distribution of the RN population in the Nevada with their Job Satisfaction – 2005

TABLE 6

Job Satisfaction	Southern Nevada		Northern Nevada		Rural and Frontier		Nevada	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Very Dissatisfied	398	4.2%	88	2.5%	60	8.5%	547	4.0%
Somewhat Dissatisfied	1,115	11.7%	213	6.2%	12	1.7%	1,341	9.8%
Somewhat Satisfied	4,582	48.2%	1,682	48.6%	363	50.8%	6,626	48.5%
Very Satisfied	3,406	35.8%	1,481	42.8%	242	33.9%	5,129	37.7%
Total	9,502	100.0%	3,464	100.0%	713	100.0%	13,642	100.0%

Note: Estimated numbers and percents may not add to totals because of rounding.
 Note: Numbers less than twenty should be carefully interpreted.

When reviewing job satisfaction, the 'Somewhat Dissatisfied' and 'Somewhat Satisfied' categories are to be considered the target area for evaluating the sensitivity of this opinion. Those who responded in either of the 'Very' categories have strong opinions about their jobs and careers. The middle group, which encompasses more than half of the nurses, perhaps reflects both satisfaction and dissatisfaction in their opinions. This middle group highlights the need for further study beyond the scope of this survey.

Estimated Distribution of the employed RNs in Nevada with their Career Satisfaction of RN workforce in Nevada – 2005

TABLE 7

Career Satisfaction	Southern Nevada		Northern Nevada		Rural and Frontier		Nevada	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Very Dissatisfied	598	6.0%	97	2.8%	38	5.3%	732	5.2%
Somewhat Dissatisfied	1,035	11.5%	243	7.0%	50	7.0%	1,429	10.0%
Somewhat Satisfied	4,362	44.2%	1,228	35.4%	288	40.4%	5,878	41.7%
Very Satisfied	3,785	38.3%	1,896	54.7%	338	47.0%	6,019	43.1%
Total	9,880	100.0%	3,464	100.0%	713	100.0%	14,057	100.0%

Note: Estimated numbers and percents may not add to totals because of rounding.

As Nevada continues to meet its most pressing health workforce challenge, policy makers and the health care industry will need current and accurate data on the nursing workforce. The 2005 RN Survey represents an important first step in establishing baseline data on the nature and composition of the nursing workforce. Future surveys will allow state leaders to gauge progress made in the recruitment and retention, as well as the educational preparation of registered nurses in Nevada.

This project is financially supported in part by the Nevada State Health Division, Nevada Hospital Association, and the Health Resources and Services Administration (HRSA) through a cooperative agreement (1U3MRC03898-01-00) and the Nevada Rural Hospital Flexibility Program funded through a HRSA grant (H.54RH00015-06-00).

DO YOU HAVE A QUESTION?

If you have questions regarding nursing practice, the first place to look is inside your Nurse Practice Act. If after reading it, you still have questions, call the Board. If it is an issue that needs further definition, you may request the Board issue a practice decision. The Board will then ask its Nursing Practice Advisory Committee to research the issue and make a recommendation.

FOR MORE ANSWERS—GET INTO THE ACT

The Nevada Nurse Practice Act is a 5-1/2" by 8-1/2" booklet. It's just \$5 if you buy it at the Reno or Las Vegas office, and \$8 by mail (make check or money order payable to the Nevada State Board of Nursing).

THE ACT IS ON THE WEB

The Board's website has a link to the state laws (NRS), regulations (NAC), and practice decisions which make up the Nurse Practice Act. It also contains a separate section on practice information, including guidelines for determining scope of practice.

PARTIAL LIST OF PARTICIPATING PHARMACY CHAINS

ABCO Pharmacy
ACME Markets
Allen's Drugtown
A & P
Arrow
Bartell
Bel-Air
Bi-Lo
Bi-Mart
Big Bear
Biggs
Brooks
Brookshire
Brookshire Brothers
Bruno's
Buchler's Foods
Buffalo Pharmacies
City Pharmacies
CostCo
Cubs
CVS
Dahl's
Dan's
Delchamps
Dierbergs
Dillons
Discount Drug Mart
Dominick's Finer Foods
Downeast Pharmacies
Drug Emporium
Drug Mart
Duane Reade
Eagle Pharmacies
Eckerd
Edgehill
Fagen Pharmacies
Family Care Pharmacies
Family Drug/Care Plus
Fischer Pharmacies
Fred's
Fry's Food & Drug
Furr's Supermarkets
Genovese
Giant Eagle
Giant Foods
Grand Union
Green Drug Stores
Greham Drug
HEB
Harvest Drug
Hi School Pharmacy
Hook's-Super X
Horizon Pharmacies
Hy-Vee
Joel N' Jerry's
K-Mart
Kare Drugs
Kash-n-Karry
Keltsch Brothers
Kerr Drugs
Kessel Pharmacies
Keystone Medicine
King Kullen
King Soopers
Kinney Drugs
Klingensmith's
Kroger
Lambda Apothecary
Lehman Drugs
Longs Drug Stores
Lucky Pharmacy
May's Drug
Medco Drug
Medic Discount
Medicap
Med-X
Meijer
Marills Drug
Navarro Discount Drug
Nelson's Drug Stores
No-Frills Pharmacy
Parnida
Parthmark Stores
PharmHouse
PriceCostco
Publix
Quick Chek Food Stores
Randall's
Raley's Drug Center
Rite Aid
Rinderer's Drug
Safeway
Sav-More Drug Stores
Save Mart
Schnuck's Market
Seaway Foods
Sedano's
Shopko
Shop N' Save
Shoprite
Smith's Food/Drug
Smitty's
Snyder Drugs
Star Markets
Super D
Target
The Great A & P
The RX Place
The Pharm
Thrifty Pharmacies
Thrifty White
Thriftway
Tom Thumb
United Drug
USA Drugs
Von's
Walgreens
Weis Markets

Neighborhood Pharmacy 800-800-7616

Obtain the lowest price on short-term acute care prescription drugs.

Use your card at chain and independent pharmacies nationwide.

Save on your out-of-pocket expenses. Discounts range from 10% to 60% on most medications.

Receive the lowest price in the store, on that day, regardless of promotions and discounts.

How To Use

1. Find a pharmacy near you by calling Member Services at 800-800-7616, Monday through Friday, 7 a.m. to 7 p.m. and Saturday, 8 a.m. to 5 p.m., or checking our website at www.rxpricequotes.com. Present your membership card along with your prescriptions to the pharmacist. The pharmacy computer system will compare our contracted discount price with the pharmacy's retail price when the prescription is processed. You pay the lower of the two prices directly to the pharmacy at the point of sale.

2. Please do not call the pharmacy for price quotes. Prices may change from day to day and they cannot be given over the telephone. Visit www.rxpricequotes.com to look up drug prices by location.

3. If your pharmacy happens to be selling any maintenance medications prescribed to treat on-going ailments, such as high blood pressure and arthritis, for less than the contracted price, you will receive the pharmacy's best price.

4. If you experience any difficulties in using the pharmacy program, please call or ask the pharmacist to call our Member Services department at the number located on the back of your membership card.

START saving today
with your... FREE
DISCOUNT
PRESCRIPTION
CARD

cut out & save today




RPI discount
PRESCRIPTION DRUG CARD

Member #101948685
Group #RPI



--- FOLD HERE ---

To locate a provider or for questions call 1-800-800-7616.

Pharmacists: For additional information or assistance please call the Help Desk at 877-448-6182.



THIS IS NOT INSURANCE.
Payment must be made at the time of service.

Nevada Has National Voice

Local nurses serve on national committees

The National Council of State Boards of Nursing (NCSBN) recently recognized Nevada registered nurses Ellen Suzanne House and Filomena Carter for serving as item reviewers for the NCLEX-PN Examination. In its announcement, the National Council said the NCLEX relies on the commitment of nurses such as House and Carter “to maintain high standards for the assessment of nursing com-

petence at entry level.”

The NCSBN recently named Board Executive Director Debra Scott, MS, RN, APN, to its Continued Competence Task Force, a two-year appointment. Scott is also a member of NCSBN’s Institute for Regulatory Excellence.

If you would like to participate in the review or development of items for the national nursing licensure exam, you can

learn more by going to the National Council’s website at www.ncsbn.org, and clicking on *Item Development On-line Application* under the heading *Testing Services Announcements*. If you don’t have web access, call 312-525-3775.

But I don’t even have a child!

We often hear this lament from people whose applications have been returned to them because they didn’t think the child support section applied to them.

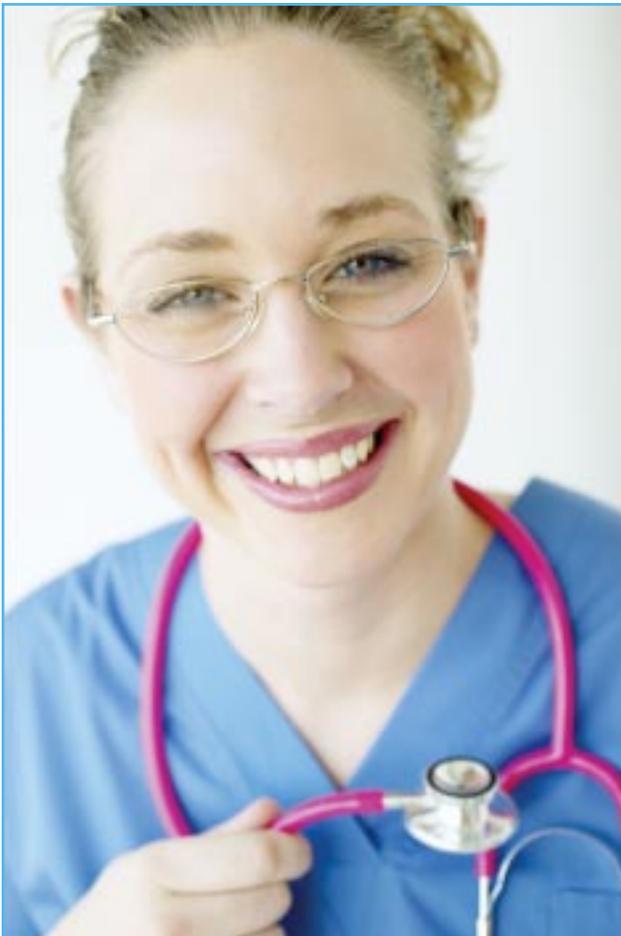
But we don’t have a choice. It’s federal law that requires applicants to complete the child support section, even if they don’t have children.

Your application will not be processed if you do not answer both questions in the child support section of the application.

YOU’RE IN GOOD COMPANY

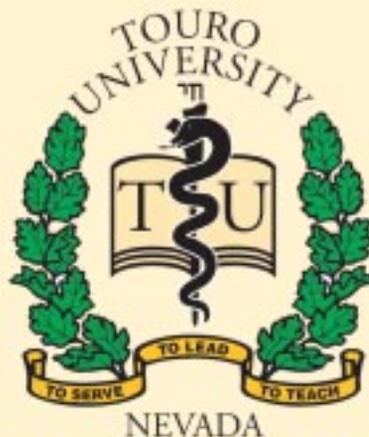
Active Nevada licenses/certificates on November 1, 2005

RN • 21,323
LPN • 3,103
CNA • 6,104



*We are excited to share our newest programs with you!
RN-MSN and BSN-MSN Programs
Come and Visit our new Facility*

***Live your Dream
- Earn your Master’s Degree***



For more information or to schedule a tour please contact:
Gladys Easterling
Phone: 702.777.1746
Fax: 702.777.1747
Email: geasterling@touro.edu

SCHOOL OF NURSING

Board Creates New Position

Donna Cowling named education consultant

Under the laws and regulations of the Nurse Practice Act, the Board is responsible for the oversight and approval of Nevada nursing and nursing assistant education programs. While the members of the Board are responsible for making policy decisions regarding those programs, it is Board staff that carry out the day-to-day responsibilities related to regulating them.

The Board reorganized this year, consolidating the positions of associate executive director for licensure, certification, and education and the positions of associate director for practice and associate director for compliance into one position—director of operations. Chris Sansom, RN, the former associate director for compliance, was named to that position.

While Sansom assumed the management functions of the former associate executive director position, a new position was created to carry out the functions related to education.

After a statewide search, Executive Director Debra Scott named Donna Cowling, MSN, RN, to the new position of education consultant. Cowling reports directly to Scott, and is responsible for overseeing and providing consultation services for all aspects of the Board's nurse and certified nursing assistant education programs.

As education consultant, Cowling reviews all applications for new and revised nursing and CNA education programs in the state, conducts site surveys, chairs the Education Advisory Committee and co-chairs the CNA Advisory Committee, conducts research and uses the Board's advisory committee process to advise the Board on nurse education and CNA training issues, and schedules and performs all approval surveys of nursing education and nursing assistant training programs.

"There has been increased emphasis on nursing education across the nation and in Nevada evidenced by the doubling program in Nevada's System of Higher Education," Scott said. "Our new education consultant position was created to respond to this growing need for a higher level of expertise in the regulation and oversight of nursing education. The Board's focus is to ensure safe and comprehensive nursing education in our

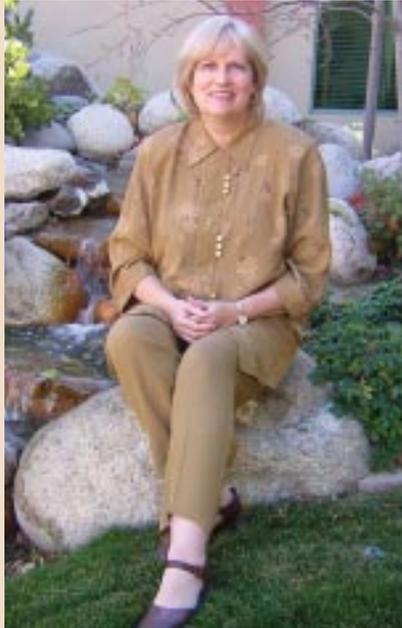


Photo by Doreen Begley

state, and we hired Donna to help us sharpen that focus."

Cowling has extensive experience in nursing and nursing education. She served as an education coordinator at the University of California Irvine Medical Center in Orange, California; and as a faculty member at the University of Nebraska, College of Nursing, in Scottsbluff, Nebraska; the Mohave Community College in Kingman, Arizona; and the Community College of Southern Nevada. Cowling has held director of nursing positions in skilled care, psychiatric, and dialysis facilities. She has been an independent medical-legal nurse consultant, and most recently, worked as an education specialist for Valley Hospital.

"I feel that this position is the defining point of my career in nursing education. Assuring the preparation of safe, competent nurses is vital to every resident of this state, especially at this time of concern over nursing shortages. I am very pleased to be a part of this organization and to work with those individuals in the field of nursing education who share the same goals."

Cowling earned an ASN degree from Olney Central College, Olney, Illinois, in 1978; a BSN degree from the University of Evansville, Evansville, Indiana, in 1983; and an MSN degree in medical/surgical nursing administration from the University of Evansville in 1988.

She served as a member of the Board's Competency Advisory Committee (now the Education Advisory Committee) from 1997-2000. During her service, the Board awarded Cowling a Special Commendation for personally developing the RN Refresher Course for the state of Nevada.

In 1997, Cowling was a member of the Arizona State Board of Nursing's Scope of Practice Committee.

A member of the Sigma Theta Tau International Nursing Honor Society, the National Nursing Staff Development Organization, and the Southern Nevada Society for Healthcare Education and Training, Cowling won the Nursing Institute of Nevada's 2005 Statewide Nursing Essay Contest in the Retention Category.

Infant



Infant Adoption Training Initiative is a one day training intended for professionals providing health and counseling services to pregnant women. The program provides information and develops skills to enable participants to effectively and comfortably present adoption information on an equal basis with all other courses of action for pregnant women. The training is co-facilitated by individuals with healthcare and adoption backgrounds and includes information about the following:

Adoption Practice. Learn how adoption practice has changed with time; understanding birth parent options and identifying individual values.

Adoption Procedures and Laws. Develop an understanding of Nevada and Federal statutes regarding adoption.

Social, Cultural and Personal Influences on Adoption Decision-Making. Understand the various influences impacting a woman's decision.

Non-Directive Techniques/Informed Choices. Review and practice techniques useful for assessing patient's knowledge and for presenting pregnancy options. Participate in many interactive experiences that will help promote skills development and awareness.

Adoption & Decision Counseling Resources. Receive materials to assist in providing patients with information and referrals to resources addressing pregnancy options. Review and separate the most common adoption myths from the realities.

Adoption Training Initiative

Hear what previous participants have said:

“I don’t think I realized how knowing more about adoption would impact the way we counsel clients.”

“This workshop was very relevant to our Family Planning Practice, and it was very worthwhile.”

“It’s never come up in my pregnancy counseling, but I’m wondering how many ‘missed opportunities’ there may have been.”

“An excellent program – full of good information that I can actually use.”



“It was much better than I ever thought it would be, very informative.”

“I now have the tools to present to patients regarding their choices in the pregnancies.”

“I was always afraid to take care of birth parents because of lack of knowledge but after this course, I feel more confident and knowledgeable.”

“Allows me to find opportunities to inform people – make them aware of options.”

More than 1500 healthcare providers have attended our over 100 trainings.



Stipends of \$100 are paid to eligible staff, practitioners or agencies/clinics attending the training.

The training is approved by the Nevada State Board of Nursing for 6.0 continuing education hours. The training is also approved by the State of Nevada Board of Examiners for Social Workers for 6.0 continuing education hours.

Travel is reimbursed when you travel over one hour to attend a training. Lodging will be reimbursed for one night if you travel over one hour and TWO nights if you travel



two or more hours to attend a training. Gas is also reimbursed when

you travel over one hour to attend!

The training is available in one eight hour day or two four hour days.

State resources are provided to participants.

Pamphlets and posters are provided for your clinics and patients at no cost!

The training is free and a continental breakfast and full lunch is provided.

You can also call to schedule a training at your work site or a closer location.



This course is designed to achieve the legislative goals of Title XII as amended, Adoption Awareness of the Children’s Health Act of 2000. This training is in compliance with the best practice guidelines set forth by the Department of Health and Human Services and was made possible through Cooperative Agreement number 90-CG2655.

For more information please contact:
Johanna Cherland
P. 866.573.2542
E. iatinevada@earthlink.net

Delegation: A Guide for Nurses

by *Chris Sansom, RN, Director of Operations
Nevada State Board of Nursing*



Delegation: What does it mean?

Every day at the Nevada State Board of Nursing, we answer inquiries about the responsibilities of nurses and CNAs under the Nurse Practice Act. Some of the most frequently asked questions concern delegation. To help nurses and CNAs understand the meaning of delegation and their legal responsibilities where delegation is concerned, the Board publishes articles and staff members give presentations. This article is based on one of those presentations.

What does it mean?

NAC 632.047 Delegation defined.

“Delegation means entrusting the performance of a delegable nursing duty to a person who is qualified and competent to perform the duty.”

OK, so what does it really mean?

Nurses possess the knowledge, skill and ability to coordinate and supervise the delivery of nursing care, which includes the assignment of nursing tasks to others.

American Nurses Association’s Definition

The transfer of responsibility for the performance of an activity from one individual to another while retaining accountability for the outcome.

Example: The nurse, in delegating an activity to an unlicensed individual, transfers the responsibility for the performance of the activity but retains professional accountability for the overall care.

Still confused?

Think assignment of tasks and supervision

- Right patient?
- Right task?
- Right supervision?

Scope of Practice

Nurses delegate tasks, nurses do not delegate their scope of practice. The Nurse Practice Act says:

NAC 632.222 Delegation and supervision of nursing care.

1. A registered nurse may delegate nursing care to other nurses and supervise other personnel in the provision of care if those persons are qualified to provide that care.
2. A registered nurse shall perform or supervise any act necessary to ensure the quality and sufficiency of the nursing care of a patient which is delegated to or by other nurses under his supervision.
3. Before delegating the care of a patient to another nurse, a registered nurse shall consider the following:
 - (a) The amount of direction required by the nurse to whom the care is being delegated;
 - (b) The complexity of the nursing care needed by the patient, recognizing that simple care may be performed by following an established policy while more complex care requires greater knowledge and a higher level of judgment, direction and supervision;
 - (c) The educational preparation and demonstrated competency of the nurse to whom the care is delegated; and
 - (d) The established policies and procedures relating to the care of the patient and the procedures used to communicate to other providers of health care the patient’s symptoms, reactions and progress.
4. A registered nurse who delegates nursing care to another nurse or assigns duties relating to that care to other personnel is responsible for the actions taken by those persons in carrying out the duties delegated or assigned.

Responsibility of the nurse

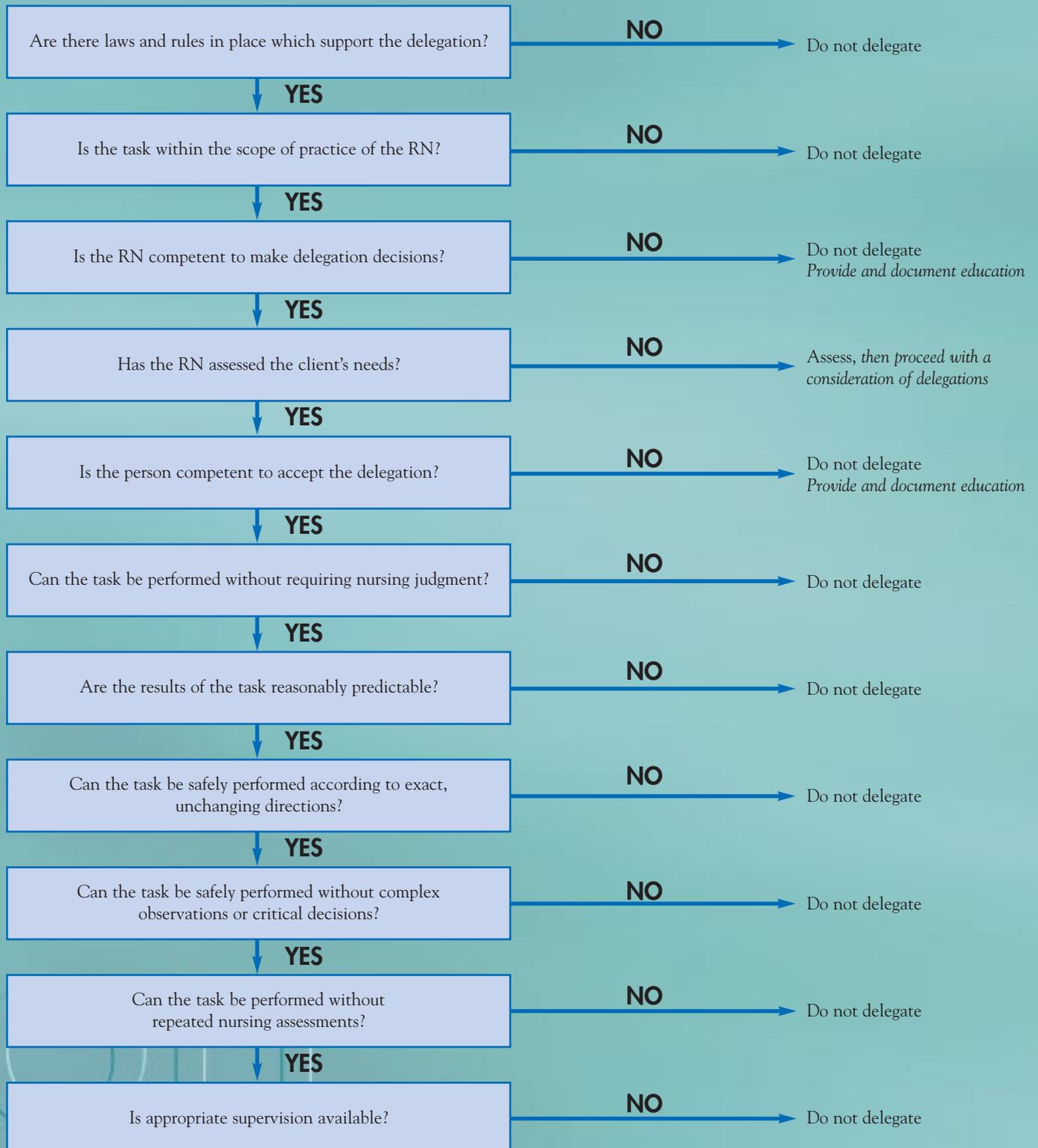
- Patient advocacy
- Maintain accountability
- Choose to delegate (assign) or not to delegate (assign)
- Know the skill level of the healthcare team to provide safe and competent care to your patients

Delegation: A decision-making tree

Adapted from the Delegation Decision Tree developed by the Ohio Board of Nursing

The Delegation Decision-Making Tree is another tool developed to assist nurses in making delegation decisions. Registered Nurses have ultimate accountability for the management and provision of nursing care, including all delegation decisions.

To use the Delegation Decision-Making Tree, start with a specific client, nursing activity, and specific person to whom you are delegating. Beginning at the top of the tree, ask each question as presented in the box. If you answer “no” to the question, follow the instructions listed to the right of the box and arrow. If you answer “yes,” proceed to the next box. If you answer “yes” for any questions, the task is delegable.



Delegation: A case study



The following case study was drawn from the actual records of the Nevada State Board of Nursing. The names have been changed and the details condensed.

The Patient

The patient in this case was a 77-year-old male who had resided in a long-term care facility for approximately six months. He had diagnoses of atherosclerotic heart disease with congestive heart failure, noninsulin dependent diabetes mellitus, chronic hemolytic anemia, and senile dementia. The resident was taking Lasix, Glucotrol, Digoxin, Aldactone, and Coumadin daily.

Day 1—3:00 p.m. to 11:00 p.m. shift

7:30 p.m.

The resident was found on the floor in his room by Nursing Assistant Trainee (NAT) Sandy, who immediately reported to LPN Michelle. LPN Michelle told the NAT Sandy to go and get RN Barbara. LPN Michelle and RN Barbara allegedly did an initial assessment and found the resident to be alert.

Documentation in the medical record by LPN Michelle at 7:30 p.m. indicates that the resident was found *on floor sitting up with large amount blood on left eyebrow area and head, area cleaned. Has a hematoma on left side of head and posterior head, laceration above left eyebrow. Unknown if he lost consciousness or not. Answers questions appropriately alert and oriented per his usual.*

LPN Michelle also noted *Resident may have struck his head on the bookshelf next to his bed as there is blood on it and on the floor next to the shelf.*

A message was left for the physician with the answering service and the family was notified.

10:10 p.m.

LPN Michelle documented only once more at 10:10 p.m. She documented the vital signs at the time of fall, and *he was alert and oriented, had been up twice to use the bath-*

room due to loose stools. His hand grasps were equal, and PERLA.

LPN Michelle alleged that she did do neuro checks, but the neuro check form was never found, or was missing.

RN Barbara did not document in the medical record at any time during the shift, did not initiate a neurological check sheet as per protocol of facility, did not contact the physician directly, and did not document an assessment.

When RN Barbara responded to the Board after the complaint was lodged, she indicated the resident was found to have

clots on the top tip of his nose, along with his left eyebrow. There was a pool of blood at the head of the bed on the floor approximately 7 ft away from where patient was sitting. I would estimate it to have been between 50-70cc. There was no active bleeding. There was a superficial laceration in his left eyebrow, a 5cm size yellowish/purplish hematoma directly on the back of his head which was raised approximately 1cm, and without any open areas, and another hematoma on the left side of his head from about the temple area to the ear, at the temple level. This was also without open areas, raised slightly – approx 1cm and yellowish, purplish and reddish (not bloody) in color.

RN Barbara alleged that she did go back and assess the resident at one other time during the shift, and that she also told LPN Michelle to do half-hour checks for six to eight hours.

Day 2—11:00 p.m. to 7:00 a.m. shift New shift, new nurses

11:30 p.m.

LPN Sarah documented in the medical record at 11:30 p.m. that the resident was complaining of a headache and not feeling well.

11:45 p.m.

LPN Sarah recorded vital signs.

12:45 a.m.

LPN Sarah noted resident had swallowing difficulty as compared to prior swallowing of medications. He was given Tylenol for his headache.

1:00 a.m.

LPN Sarah documented patient's pupils had gone from 6cm to 5cm, aroused slowly, slightly confused responses.

3:00 a.m.

LPN Sarah noted resident continued to complain of headache, PERLA 5-4cm.

4:30 a.m.

LPN Sarah noted Tylenol given, swallowed easily. Appears more confused and slower with verbal response PERLA size 5-4cm. 5:00 a.m. PERL 4cm continues to complain of headache, no further changes noted.

After the complaint was lodged, LPN Sarah alleged in her response to the Board that she communicated the resident's condition to RN Terry.

RN Terry did not document in the resident's medical record during the course of the shift. She alleged she did get report when she came on duty that the resident had fallen but was stable, and *it was not necessary to reassess him and document, as this is not common practice for the supervisor, unless a change in condition has been reported by one of the primary caregivers.*

RN Terry also alleged that she obtained a blank neuro check sheet from the drawer and instructed the LPN to use it for documentation. RN Terry alleged that she twice received verbal report that the resident had no change in status.

Day 2—7:00 a.m. to 3:00 p.m. shift New shift, new nurses

7:45 a.m.

It was documented that the day shift nurse received report regarding the resident's fall of the previous evening, and the changes which occurred at 5:00 a.m. Evaluation noted significant mental changes. Speech garbled, confused, unable to respond to questions appropriately. The physician was contacted and told of the cerebral hematomas, and of bleeding from the resident's nose.

8:00 a.m.

The resident was assessed by the Director of Nursing who ordered a call to 911 for ambulance transfer to a local emergency room.

Conclusion

The resident was admitted via the emergency room with an initial diagnosis of bilateral temporal lobe hemorrhages. He was placed as a "no code" status due to his extremely poor prognosis, and family wishes. The resident died on Day 5 with a cause of death listed from the coroner's office as, *subdural hematoma due to or as a consequence of blunt force trauma (fall).*

The Board revoked the licenses of LPN Michelle, RN Barbara and RN Terry. LPN Sarah voluntarily surrendered her license. The Board also required all the nurses to complete extensive educational requirements before any application for reinstatement would be considered.

The nurses in this case did not follow the delegation guidelines. If they had followed proper delegation procedures, what should have happened?

RN Barbara and RN Terry should have assigned only simple nursing tasks to LPN Michelle and LPN Sarah, making frequent checks on the patient themselves and getting report at least every hour. After assessing the patient, RN Barbara should have spoken directly with the physician, rather than leaving a message with his answering service. RN Terry should have done a complete assessment at change of shift.

Right patient.

This was not the "right patient" to delegate the care of. RN Barbara and RN Terry should not have delegated the care of a patient who was in such a fragile condition. LPN Michelle and LPN Sarah should not have accepted the delegation.

Right task.

Neuro checks should not have been delegated. Only simple nursing tasks should have been delegated.

Right supervision.

Delegation requires continual supervision. RN Barbara and RN Terry should have made frequent checks on the resident's condition, at least every hour, to ensure that the tasks were being done and that the patient's status had not changed.

CE COURSES FOR NURSES

Sign up for a course
anytime, directly online.

You decide when and
where to study.

CE courses are \$12-42
and worth 2.0-7.0 CE credits.

LEARNINGEXT.COM



ncsbn learning extension

learningext.com



Disciplinary Actions

Diversity

Documentation

End of Life Care Pain Management

Ethics

Medication Errors

Nurse Practice Acts

Patient Privacy

Professional Accountability

Sharpening Critical Thinking Skills



E-LEARNING FOR THE NURSING COMMUNITY

TOLL-FREE CONSUMER HOT LINE CALL 888-590-6726

The Nevada State Board of Nursing has a hot line to help consumers who have questions or concerns about the nursing care they or their loved ones are receiving. Please encourage your friends, families and patients to call the hot line if they have concerns about nursing care. And remember, if you or anyone else wishes to file a complaint against a nursing assistant or nurse, it must be done in writing. Complaint forms can be requested by calling the hot line or can be obtained by visiting the Board's web site.

Have YOU BEEN TRYING TO GET FORMER COLLEAGUES
OR CLASSMATES TO MOVE TO NEVADA?

We can help.

The most comprehensive resource for nurses wanting to relocate to Nevada.



NVNurses.com

Please refer your nursing friends to **www.NVNurses.com**



CNA Training Certificate Cannot Be Used for Inservice Training Hours

Change was effective September 1

If you are renewing your CNA certificate for the first time, please note that effective September 1, 2005, the Board will no longer accept your initial CNA training in place of the 24 hours of inservice training required to renew your CNA certificate. This means that all CNAs must prove they took 24 hours of inservice training within the renewal period to renew their certificates. If you have any questions regarding this change, please feel free to call the Board.

UNLV

Interested in returning to school for a graduate degree in nursing?

The School of Nursing at UNLV offers advanced degrees in:

- Accelerated RN to BSN program
- Master's of Nursing Science in Nursing in:
 - Nursing Education
 - Family Nurse Practitioner
 - Pediatric Nurse Practitioner
- Post-Master's Certificate in:
 - Nursing Education
 - Family Nurse Practitioner
 - Pediatric Nurse Practitioner
 - Geriatric Nurse Practitioner
- Doctorate of Philosophy in Nursing with an emphasis in Nursing Education

Visit our website at: <http://nursing.unlv.edu> or call Dr. Patricia T. Alpert at (702) 895-3810

Mailing List Reminder

You can request to be removed

The Board sells its mailing lists to various organizations, based on their applications. Examples include the Nevada Nurses Association, which mails its newsletter RNformation to all actively licensed Nevada nurses; continuing education providers; uniform companies; and researchers. If you wish to remove your address from the Board's mailing list, you may do so by making a request in writing.

Just send an email to the Board, or mail a signed letter to the Las Vegas office. Please include your full name, address, and license or certificate number. If you choose to remove your address, you will still receive official Board communications such as this magazine, the NSBN News, but you will not receive the material sent by the organizations that purchase the Board's mailing list.

BOARD MEMBERS

The Nevada State Board of Nursing is a seven-member board appointed by the governor of Nevada consisting of four registered nurses, one licensed practical nurse, one certified nursing assistant, and one consumer member.

If you wish to contact a Board member, please write c/o Nevada State Board of Nursing, 5011 Meadowood Mall Way #201, Reno, NV 89502-6547; call 1-888-590-6726; or email nursingboard@nsbn.state.nv.us

BOARD AUTHORITY

The Board has authority only over its licensees and certificate holders and not over the facilities in which these individuals practice. The Board enforces the Nurse Practice Act (the law regulating nursing practice), with funding for all of its activities coming solely from the fees paid to the Board by licensees and certificate holders. The Board does not have authority to take action on issues that are of an employment nature, or those that relate to the nursing profession as a whole. These matters are best dealt with by the state labor commissioner, nursing associations, labor unions, or other similar entities.



Helen Vos, MS, RN
President, RN Member
10/31/2008



David Burgio, MS, RN, APN
Vice President, RN Member
10/31/2007



Dorothy Perkins, CNA
Secretary, CNA Member
10/31/2007



Doreen Begley, MS, RN
RN Member
10/31/2008



Joseph Cortez
Consumer Member
10/31/2009



Mary Ann Lambert, MSN, RN
RN Member
10/31/2008



Patricia Shutt, LPN
LPN Member
10/31/2005



For a breath of fresh air, come check out Northeastern Nevada Regional Hospital. We

are a beautiful 75-bed LifePoint facility nestled near the beautiful Ruby Mountains. Elko has a great small town atmosphere with good schools, low crime, wonderful people, and outdoor activities galore.

House Supervisor RN & Registered Nurses

Opportunities available hospital wide

Check our website www.nnrhospital.com for our current job posting.

GREAT RELOCATION PACKAGE AND EXCELLENT BENEFITS

Submit resume to:

HR, 2001 Errecart Blvd., Elko, NV 89801
Phone (775) 748-2004, fax (775) 748-2079
or email janie.wadford@lpnt.net.

Exciting opportunities for psychiatric nurses in warm, sunny Las Vegas, NV

Southern Nevada Adult Mental Health Services is a State agency that provides services to adults with mental illness. Current acute care setting offers an array of inpatient and outpatient nursing experiences. Future positions, both clinical and supervisory, available spring 2006 in new state of the art 190 bed psychiatric facility.

Psychiatric Nurse II position

requires licensure as an RN in Nevada and 2 years of nursing experience, with at least one year of psychiatric experience.

- Salary range \$53,661–\$67,150 annually
- Excellent benefits package including:
 - health insurance
 - Public Employees Retirement System
 - paid vacation
 - sick leave
 - holidays

For more information or to apply for a position contact:
Penni Smith 702-486-6094 or psmith@snamhs.nv.gov

INTERNET NURSING MARKETPLACE

scrubs & beyond

Shop the Only Scrub Stores with a Fun, Inviting Atmosphere!

for a location near you, visit

www.scrubsandbeyond.com

Ed4Nurses.com

Empowering Nurses through Education 1.800.990.2629

- NCSBN Review for the NCLEX–RN Exam Online
- National Council State Board of Nursing
- www.learningext.com

Like working with family.



www.riverview.org

gifts the easy way



www.thegiftpatch.net



RELOCATE TO THE FASTEST GROWING & MOST EXCITING STATE!
FREE RELOCATION KIT
NVNurses.com
LIVE WORK AND PLAY! NURSES LOVE NEVADA!



COMMUNITY COLLEGE OF SOUTHERN NEVADA

- Nursing Instructors Needed
- MATERNAL-NEWBORN
- MEDICAL SURGICAL
- PEDIATRIC

Website: <http://www.ccsn.edu>

LaTonia Denise Wright, R.N., J.D.

Law Practice Limited to Representing, Counseling, & Advising Nurses in Licensure & Workplace Matters

513-771-7266 Direct Dial
ldw@nursing-jurisprudence.com Email
www.nursing-jurisprudence.com Website
www.advocatefornurses.typepad.com Blog

REACH OVER ONE MILLION NURSES FOR ONLY \$125 PER MONTH

1•800•561•4686 or 501•221•9986

email Laura Norris at: lnorris@pcipublishing.com

www.thinkaboutitnursing.com



 *Las Vegas*
SUNRISE

Your **CAREER**
changes so
many lives.

*Work with people who
will change yours.*

For more than four decades, our community has turned to **Sunrise Hospital & Medical Center** and **Sunrise Children's Hospital** for leading edge technology and excellent, attentive care. We are the first place Southern Nevada's doctors, patients, and even other hospitals turn to in a crisis. This is a great place to do great work.

***Sign-on Bonus: Up to \$8,000 (in-state)**

Up to \$10,000 (out of state)

***Housing assistance up to \$12,000 (out of state)**

***Relocation Assistance up to \$5,000**

RN

- Case Manager
- Cardiac Cath
- Cath Lab Recovery
- Clinical Nurse Specialist
- CVICU
- Diagnostic Radiology
- Emergency Dept. (Adult)
- Float Pool
- IMC
- Infusion Center
- Labor & Delivery
- Medical/Surgical
- MSICU
- NICU
- NMICU
- Nurse Managers
- PACU
- Peds Oncology
- PICU
- PSICU
- Trauma APN
- Trauma Nurse
- Wound Care

LPN

- ER
- Float Pool
- Ortho-Neuro
- Pediatrics

What's in it for you at Sunrise?

Competitive compensation and benefits practices, benefits eligible on your 31st day, including medical/dental/life/LTD, Childcare subsidy, 401(k) and discounted Employee Stock Purchase Plan. Sunrise now has a new flexible sign-on bonus options that allow you to select a plan the best works for you! Contact us for more details.

**Sunrise Hospital & Medical Center and
Sunrise Children's Hospital**

3186 S. Maryland Parkway

Las Vegas, NV 89103

Email: sunrise.humanresources@hcahealthcare.com

Call: (702) 836-8895

Fax: (702) 836-3813

www.Sunrisehospital.com

***Must meet eligibility requirement.**

A drug test and background investigation are required as part of our pre-employment process. EOE M/F/D
HCA is a registered service mark of HCA Inc., Nashville, TN


SUNRISE
HOSPITAL & MEDICAL CENTER


SUNRISE
CHILDREN'S HOSPITAL

Caribbean



Nursing ~~Continuing~~ Education Cruise

WWW.THINKABOUTITNURSING.COM
IN COOPERATION WITH THE ARKANSAS STATE BOARD OF NURSING

Cruise Your Way to Required C.E. Contact Hours

Who said Continuing Education can't be fun? We are changing that forever.

Join **ThinkAboutItNursing** and **Poe Travel** for a CE Cruise that will cure your overworked blues with some *salsa and sun* on board Carnival's "Conquest." While you're soaking up the Caribbean culture, you can earn 15 required C.E. contact hours AND write the trip off on your taxes. How is that for paradise?

Prices for this cruise and conference are based on double-occupancy (bring your friend, spouse or significant other please!) and start **as low as \$923 per person** (not including airfare). A \$250 non-refundable per-person deposit is required to secure your reservation, BUT please ask us about our **Cruise LayAway Plan**.



For more information about the cruise and the curriculum, please log on to our website at www.thinkaboutitnursing.com or call Laura Norris at **501.221.9986** or call Teresa Grace or Jayne White at Poe Travel toll-free at **800.727.1960**.

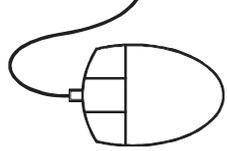
Cruising for C.E. Contact Hours

This eight-day cruise is slated to sail from **Galveston** on **April 23, 2006**, and will visit the following ports:

- ≈ **Day One:** Galveston
- ≈ **Day Two:** At sea (conferences)
- ≈ **Day Three:** At sea (conferences)
- ≈ **Day Four:** Montego Bay, Jamaica
- ≈ **Day Five:** Grand Cayman, Cayman Islands
- ≈ **Day Six:** Cozumel, Mexico
- ≈ **Day Seven:** At sea (conferences)
- ≈ **Day Eight:** Galveston

Your **RX** for **FUN**

RENEW Your License or Certificate **On Line**



Look for the postcard in the mail

All you need to renew your Nevada license or certificate is a MasterCard™, Visa™ or Discover™ debit or credit card, and access to the internet. If you are a CNA, you will also need the full name and license number of your supervising RN or LPN.

Instead of receiving a renewal application in the mail, you'll be mailed a blue (nurse/advanced practitioner) or yellow (nursing assistant) postcard with a Personal Identification Number (PIN) and instructions to access the Board's website at www.nursingboard.state.nv.us for on line renewal. Once you've successfully completed the process, your license or certificate will be renewed within one business day. Your hard card will follow in the mail.

If you don't have a MasterCard™, Visa™ or Discover™ debit or credit card, the postcard will direct you to complete and print a renewal application from the Board's website or call for an application to be mailed to you. Or you can come to either Board office and renew your certificate using the lobby computer set up just for you!

So, make sure the Board has your correct address—and don't throw away that postcard! If you have any questions regarding the on line renewal process, please call the Board at 1-888-590-6726.



MOVING?

Now you can change your address on line!

The law requires you to inform the Board when you change addresses

You're required by law to inform the Board, in writing, of any address change, including a zip code change. The easiest and fastest way for you to make your address change is to go to the Board's website and click on the Address Change link. You may also send an email to nursingboard@nsbn.state.nv.us, call the Board and request an address change form, or mail a signed letter to the Las Vegas office. Remember to include your name, license or certificate type and number, former address, current address, social security number, and date of birth.

Change of address form

Name (Last, First, Middle)

Type of License

License Number

Date of Birth

Social Security #

Former Address

City, State, Zip Code

Current Address

City, State, Zip Code

Telephone

#

Signature

Mail to: Nevada State Board of Nursing
2500 W. Sahara Ave. #207
Las Vegas, NV 89102-4392

Disciplinary Actions

Before disciplinary action is taken, the Board ensures the nurse or nursing assistant is given due process

The following are disciplinary and licensure/certification actions taken by the Nevada State Board of Nursing for the period of May 21, 2005 through September 16, 2005. Please note that this list does not include some outcomes of the September 14-16, 2005 Board meeting due to legal notice requirements. Those outcomes will be reported in a future disciplinary actions list. This list does include some outcomes of previous Board meetings that were not reported earlier due to legal notice requirements

Settlement Agreements and/or Hearing Outcomes

Bailey, Cheryl, RN11659

Agreement for Probation for violation of NRS 632.320 (5) controlled substances and/or alcohol, (7) unprofessional conduct, and NAC 632.890 (9) impaired practice and (10) positive drug screen on duty.

Bell, Carol, LPN04123

Agreement for Suspension and Probation for violation NRS 632.320 (7) unprofessional conduct and (14) failing to comply with Board order, and NAC 632.890 (20) inaccurate recording, falsifying.

Bullock, Cynthia, LPN11020

Agreement for Reprimand for violation of NRS 632.320 (7) unprofessional conduct,

and NAC 632.890 (18) diversion of equipment or drugs and (20) inaccurate recording, falsifying.

Cassaday, Alina, RN35100

Voluntary Surrender of License in Lieu of Other Disciplinary Action for violation of NRS 632.320 (5) controlled substances, and (7) unprofessional conduct, and NAC 632.890 (11) positive drug screen as condition of employment and (35) failing to comply.

Coronado, Trieste, LPN05864

Reprimand, Classes and Fine of \$100 for violating NRS 632.320 (7) unprofessional conduct, and NAC 632.890 (24) failing to collaborate with health care team, and (27) customary standards of practice. Respondent may not work in extended care, home health, or intermediate care for a period of one year.

Crain, Theresa, RN46199

Agreement for Reprimand for violation of NRS 632.320 (7) unprofessional conduct, and NAC 632.890 (27) customary standards and (28) causing harm to patient.

Dean, David, CNA011793

Agreement for Reprimand for violation of NRS 632.320 (7) unprofessional conduct, and NAC 632.890 (27) customary standards.

Franklin, Martin, CNA006872

Agreement for Reprimand for violation of NRS 632.320 (7) unprofessional conduct, and NAC 632.890 (2) practicing beyond scope and (27) customary standards of practice.

ABBREVIATIONS

NRS Nevada Revised Statutes

NAC Nevada Administrative Code

Froyd, Starla, CNA012936

Agreement for Probation for violation of NRS 632.320 (7) unprofessional conduct, and NAC 632.890 (9) impaired practice and (10) positive drug screen on duty.

Hall, Ashley, CNA014976

Certificate revoked for violating NRS 632.320 (7) unprofessional conduct and NAC 632.890 (10) positive drug screen on duty.

Harmon, Kimball, RN40826

Agreement for Reprimand for violation of NRS 632.320 (7) unprofessional conduct, and NAC 632.890 (2) practicing beyond scope and (20) inaccurate recording, falsifying.

Kirk, Theresa, RN18617

Voluntary Surrender of License in Lieu of Other Disciplinary Action pursuant to NRS 632.320 (14) failing to comply with Board order.

Lake, Renee, RN25678

Voluntary Surrender of License in Lieu of Other Disciplinary Action for violation of NRS 632.320 (7) unprofessional conduct, and NAC 632.890 (27) customary standards, (28) causing harm to patient, and (33) abuse of a patient.

Linehan, Dana, RN25746

Agreement for Probation for violation of NRS 632.320 (7) unprofessional conduct, and NAC 632.890 (9) impaired practice, (10) positive drug screen on duty, (18) diversion of equipment or drugs, (21) obtain, possess, furnish prescription drugs without authorization, and (22) patient abandonment.

Please do not use this list of disciplinary actions for verifying licensure or certification status. Other action may have taken place between the time the discipline was imposed and the time of publication. To verify licensure or certification status, please visit our website or call the Las Vegas or Reno office.

ABBREVIATIONS

NRS Nevada Revised Statutes
NAC Nevada Administrative Code

Lowe, Connie, LPN02438

Voluntary Surrender of License in Lieu of Other Disciplinary Action for violation of NRS 632.320 (7) unprofessional conduct, and NAC 632.890 (10) positive drug screen on duty.

Luce, Christina, RN26916

Agreement for Reprimand for violation of NRS 632.320 (7) unprofessional conduct, and NAC 632.890 (20) inaccurate recording, falsifying, and (27) customary standards of practice.

Nesmith, Isabelita, RN35918

Agreement for Reprimand for violation of NRS 632.320 (7) unprofessional conduct, and NAC 632.890 (16) failing to properly document controlled substances, (22) patient abandonment, and (27) customary standards of practice.

Pereda, Elizabeth, LPN09510

Agreement for Reprimand for violation of NRS 632.320 (7) unprofessional conduct, and NAC 632.890 (24) failing to collaborate with health care team and (27) customary standards of practice.

Sands, Vanessa, RN25176

License revoked for violating NRS 632.320 (12) action in another state.

Shy, Camellia, LPN12212

Voluntary Surrender of License in Lieu of Other Disciplinary Action for violation of NRS 632.320 (7) unprofessional conduct, and NAC 632.890 (20) inaccurate recording, falsifying and (27) customary standards of practice.

Smart, Gene, RN42511

Agreement for Reprimand for violation of NRS 632.320 (7) unprofessional conduct, and NAC 632.890 (11) positive drug screen as condition of employment.

Smith, Laura, RN32996

Voluntary Surrender of License in Lieu of Other Disciplinary Action for violation of NRS 632.320 (5) controlled substances, (7) unprofessional conduct, (10) falsified documentation of controlled substances,

and (13) deceive, defraud or endanger a patient, and NAC 632.890 (18) diversion of equipment or drugs, (20) inaccurate recording, falsifying, and (35) failing to comply.

Steelman, MaryAnn, RN16709

Agreement for Reprimand and Fine in the amount of \$3,000.00 for violation of NRS 632.320 (7) unprofessional conduct, and NAC 632.890 (36) practice without active license/certificate.

Trottot, Lisa, LPN10839

Voluntary Surrender of License in Lieu of Other Disciplinary Action for violation of NRS 632.320 (5) controlled substances and (7) unprofessional conduct, and NAC 632.890 (11) positive drug screen as condition of employment.

Tuomy, Georgia, RN applicant

Agreement for Probation for violation of NRS 632.320 (2) criminal conviction, (5) controlled substance and/or alcohol, and (12) action in another state.

Turnage, Sharmaine, CNA applicant

Agreement for Probation for violation of NRS 632.320 (2) criminal conviction.

Van Laecken, Martha, RN applicant

Agreement for Probation for violation of NRS 632.320 (2) criminal conviction.

Denials of Applications for Licensure or Certification

Coover, Mahina, CNA013215

Lata, Roshni, LPN applicant

Maesar, William, RN applicant

Pattarettu, Sabu, CNA applicant

Schultz, Kevin, CNA014868

Smith, Stephanie, CNA applicant

Wickware, Zakiiyah, CNA applicant

Wilson, Margaret, CNA005358

Applications denied for violation of NRS 632.320 (2) is guilty of a felony or any offense (a) involving moral turpitude; or (b) related to the qualifications, functions or duties of a licensee or holder of a certificate, in such case the record of conviction is conclusive evidence thereof.

Brown, Brenda, CNA012772

Cason, Wanda, CNA applicant

Jones, Adell, CNA applicant

Martin, Tameshia, CNA applicant

Applications denied for violation of NRS 632.320 (1) is guilty of fraud or deceit in procuring or attempting to procure a license or certificate pursuant to this chapter.

Harris, James, RN27075

Application denied for violation of NRS 632.320 (5) controlled substances, and (13) deceive, defraud or endanger a patient or general public.

DeFilipps, Darlene, RN applicant

Application denied for violation of NRS 632.320 (1) fraudulent application, (7) unprofessional conduct, and NAC 632.890 (11) positive drug screen as condition of employment.

LeMay, Joseph, RN applicant

Application denied for violation of NRS 632.320 (12) action in another state.

Licenses/Certificates Voided for Nonpayment of Fees

Harris, Mary, CNA008460

Citation for Practicing Without A Certificate

Inocencio, Romeo, \$500 fine.

Who can I call if I have questions about the complaint or disciplinary process? The Board encourages you to call any time you have a question about the disciplinary process or what constitutes a violation of the Nurse Practice Act. Just call the Board and ask for one of the nurse investigators or the director of operations.

Use Website To Verify Active License/Certificate



Employers—when you're verifying that someone has an active license or certificate, the Board encourages you to use our website verification system. It's quick, convenient, and it's updated within one business day of renewal or initial issuance. You can also call the Board for verification at 888-590-6726. Both methods ensure you have the most up-to-date information about the license or certificate status of your employees and potential employees.

What are common types of disciplinary actions?

When considering what kind of disciplinary action it should take, the Board always asks itself, "What is needed to make this person safe to practice?" The answer depends on the nature of the violation, and can range from reprimanding an individual and ordering the person to attend a remedial class to revoking the person's license or certificate. All disciplinary action is reported to national disciplinary data banks. Outlined in the Nurse Practice Act, NRS 632.325, disciplinary actions available to the Board include:

Denial of Application

If the Board denies an application for licensure or certification, it has determined that the individual violated the Nurse Practice Act. In most cases, the denial is due to criminal convictions and/or submitting a fraudulent application.

Reprimand and/or Fine

If the Board reprimands or fines a nurse or CNA, it has determined that the individual violated the Nurse Practice Act. This action does not prohibit or restrict the individual's practice.

Probation

If the Board puts an individual on probation, it means the nurse or CNA may work, but will be working on a restricted license or certificate and monitored by the Board for a specific time period. The probation may also include practice and/or setting restrictions and requirements like classes or random drug tests.

Suspension

If the Board suspends a license or certificate, it means the nurse or CNA is prohibited from practicing for a designated time period.

Voluntary Surrender

This means the nurse or CNA has agreed to voluntarily surrender his or her license or certificate and cannot practice in Nevada. If the person applies for reinstatement, the Board weighs evidence of rehabilitation and remediation when considering the application.

Revocation

If the Board revokes a license or certificate, it means the nurse or CNA cannot practice in Nevada from a minimum of one to a maximum of 10 years. After that time, the nurse or CNA may apply for reinstatement if all the requirements in the order of revocation have been met. The Board weighs evidence of rehabilitation and remediation when considering the application.

ONE FOR ALL & ALL FOR ONE!

To Be The Greatest Dialysis Company The World Has Ever Seen

IMMEDIATE OPENINGS IN THE LAS VEGAS AREA!

Registered Nurse

Dialysis or 2 years Med-Surg experience preferred.

Contact: Kathleen.Johnson@davita.com
tel: 566.721.4552

Nurse Practitioner

Experience in primary care preferred, but will train new grads.

Contact: goblack@davita.com

We offer a profit sharing, 401K, tuition reimbursement, attendance awards, training programs, medical/dental/vision, PTO and many other unique benefits enjoyed ONLY by DaVita teammates.

Build Your Resume and Apply Online:
www.davita.com/careers

DaVita Kidney Care Services
an affiliate of:



EOE

XL Hospice, Inc.

RN's come work with us!
Providing end of life care.
F/T Salaried, Per Diem,
on call. F/T benefits.

*New Grads
welcome.*



Fax resume to
775-423-9211 or
call 775-423-9511.

**Need Representation
before the State Board?**

HAL TAYLOR, Esq.

*20 years experience
representing
professionals like you.*

(775) 825-2223

www.nevadalicenselawyer.com

*Infant Adoption
Training Initiative*

For more information please contact:
Johanna Cherland
P. 866.573.2542
E. iatinevada@earthlink.net

We can help.

The most comprehensive
resource for nurses
wanting to relocate
to Nevada.

Please refer your
nursing friends to:
www.NVNurses.com

**For Advertising Information
Call Jane Coker at**

1-800-561-4686

jcoker@pcipublishing.com

www.thinkaboutitnursing.com

Emailing the Board? Make sure you have given your email provider permission to receive messages from email addresses ending with @nsbn.state.nv.us. We respond promptly to every email inquiry, but often, our responses are rejected. Sometimes, they're returned as "undeliverable" or they are mistaken for spam. Other times, we're asked to sign in and provide a password to an email screening service, which is against Board policy.

So, if you're wondering why the Board doesn't answer your emails, check to see whether you've screened us out. We want to hear from you and we want you to hear from us!

Administration

5011 Meadowood Mall Way, Suite 201, Reno, NV 89502, 888-590-6726

Debra Scott, MS, RN, APN, Executive Director

Statewide Liaison and Spokesperson
Organizational and Public Management
Fiscal and Human Resource Management
Legislative and Governmental Relations
APN Advisory Committee Chair
Education Advisory Committee Chair
Nursing Practice Advisory Committee Chair

Chris Sansom, RN, Director of Operations

Program Management
CNA Advisory Committee Co-Chair

Donna Cowling, MSN, RN, Education Consultant

Nursing Education Programs
CNA Training Programs
CNA Advisory Committee Co-Chair
Continuing Education Programs
Education Advisory Committee Chair

Fred Olmstead, General Counsel

Legal Counsel

Dean Estes, Accountant/Technology Officer

Budget, Accounting and Payroll
Expense Reports
Technology Support

Cindy Kimball, Public Information Officer

Public Information and Education
Consumer Relations
News Magazine, Web Site, Publications

Teri Troke, Executive Assistant

Assistant to the Executive Director
Scheduling
Board Meeting Agenda and Arrangements
Nurse Practice Act Publication

Program Staff

5011 Meadowood Mall Way, Suite 201, Reno, NV 89502, 888-590-6726
2500 W. Sahara Ave., Suite 207, Las Vegas, NV 89102, 888-590-6726

Investigations and Monitoring

Linda Aure, BSN, RN, C, Senior Investigator

Complaint Investigations
Nursing Practice Questions

Lark Muncy, RN, Investigator

Complaint Investigations
Nursing Practice Questions

Robert Buck, BSN, RN, Application Coordinator

Application Review
Fraudulent Application Screening
APN Certification

Kathleen Reynolds, BHS, RN, Compliance Coordinator

Disability Advisory Committee Chair
Disability Advisory Committee Scheduling
Probation and Alternative Program Monitoring

Licensure

Sarah Long, Licensure Specialist

Licensure Eligibility Questions
Renewal Applications
Endorsement and Examination Applications
Continuing Education Providers
Foreign Nurse Graduates and Licensure Issues

Certification

Patty Towler, Senior Certification Specialist

CNA Registry Maintenance
CNA Certification and Renewals
CNA Program and Instructor Approvals

Support

Sherrie Frederick, Fingerprint Specialist

Fingerprint Processing
Fingerprint Report Screening

Shannon Siner, Management Assistant

Assistant to the Director of Operations
Discipline Investigative Support
Yes Answer and Fraudulent Application Processing
Board Meeting Preparation
NURsys Data Entry

Malinda Baldrige, Management Assistant

Discipline Investigative Support
Compliance Support
Board Meeting Preparation
Disability Advisory Committee Scheduling

Terri Pomeroy, Licensure/Certification Clerk

Renewal Applications

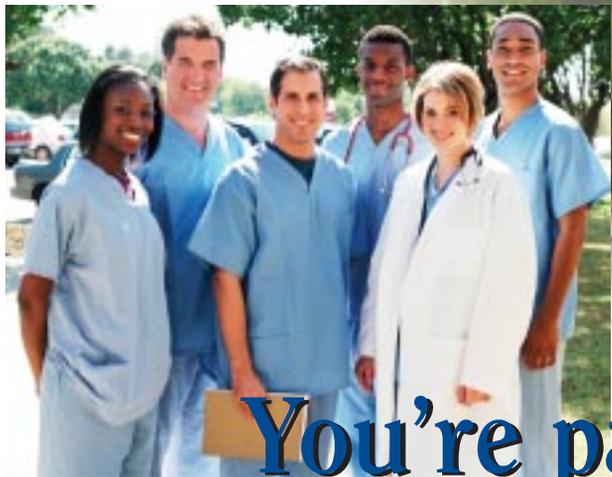
Eve Lawton, Receptionist

Program Support
Inquiries, Information and Referrals
Licensure and Certification Applications
Nursing Personnel Lists

Molly Echandy, Receptionist

Program Support
Inquiries, Information and Referrals
Licensure and Certification Applications

*You're not just part
of a hospital...*



You're part of a community.

MountainView Hospital is a provider of compassionate, quality health care in the heart of Northwest Las Vegas. Our 235 bed, full-service facility is big enough to serve the needs of a rapidly-growing community, but small enough for your contributions to have a definite impact. MountainView is more than a hospital. It's the place our friends and neighbors turn in time of need. We've earned their trust. Let us earn yours. Right now, we have incredible opportunities in our Nursing Departments.

What's in it for you at HCA: Competitive compensation and benefits practices including benefit eligibility on your 31st day; medical/dental/life/LTD; childcare subsidy; 401(k); discounted Employee Stock Purchase Plan; relocation assistance program; and ability to transfer to other HCA affiliated hospitals.



- Cath Lab
- CVOR
- Float Pool: ICU & Med/Surg/Tele
- ICU
- L & D
- Med/Surg/Tele
- Nurse Apprentice: Med/Surg/Tele
- PACU
- Progressive Care Unit

Please send your resume to: MountainView Hospital Care of Human Resources, 3100 N. Tenaya Way, Las Vegas, NV 89128.

Jobline: (702) 255-5135 • Call Natalie Gardner, RN: (702) 562-5508

Fax: (702) 233-5301 www.MountainView-Hospital.com

A drug test and background investigation are required as part of our pre-employment process. EOE M/V/F/D HCA is a registered service mark of HCA Inc., Nashville, TN.

Nevada State Board of Nursing
5011 Meadowood Mall Way, Suite 201
Reno, NV 89502-6547

PRESORTED
STANDARD
U.S. POSTAGE
PAID
LITTLE ROCK, AR
PERMIT NO. 1884



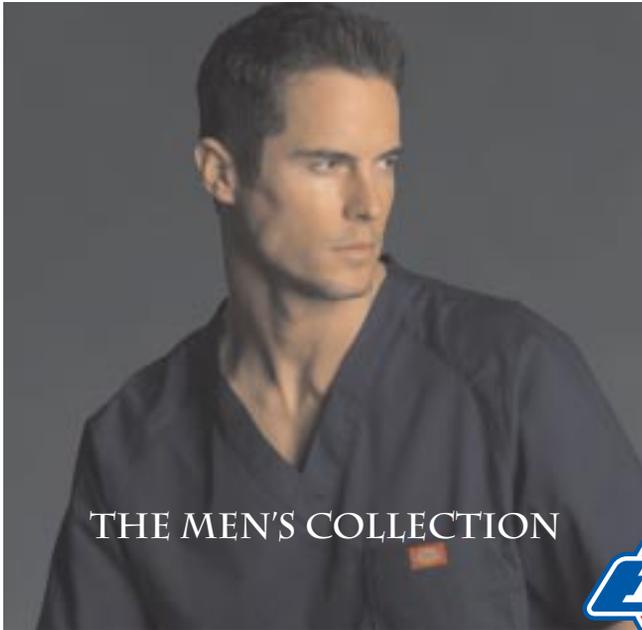
Visit our **12,000 sq. ft.**

SUPERSTORE in Las Vegas...

"Your Best Bet for the Best Prices on the Planet!"

We Are #1 #1 in Customer Service #1 in Price #1 in Selection #1 in Value

967 E. Sahara Ave
Las Vegas, NV 89104
Tel: 702-734-7070
Fax: 702-734-1885
www.laislauniforms.com



THE MEN'S COLLECTION

- Landau
- Cherokee
- Dickies
- Peaches
- Nurse Mates
- Skechers
- Dansko
- Klogs
- Disney
- Barco
- Crest

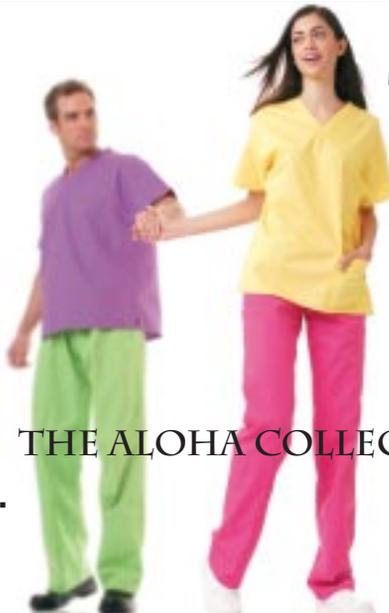


THE SUITABLES COLLECTION

**Largest
SALE
of the
YEAR
Starts
Dec. 1st**



**Comfort,
Value and
Durability...
in Today's
Latest
Styles and
colors.**



THE ALOHA COLLECTION

**A New
Generation
of Workwear...
in Healthcare!**

MEDICAL UNIFORMS



THE PERFECT PANT

AUTHORIZED DEALER

BUY 3 GET 1 FREE

on any Medical Clothing Purchase!

Not Applicable towards Sale Merchandise. One Coupon per Customer. Offer valid until 12/31/2005