

Nevada State Board of

NURSING NEWS

June 2013



THE 90 YEAR
Anniversary
CELEBRATION
CONTINUES...



Nurses and the Policy Process
What's YOUR Level of Prevention



Touro University Nevada

School of Nursing

“I had a very positive learning experience while obtaining my Doctor of Nursing Practice Degree at Touro University Nevada. Obtaining this degree not only improved my current practice, but opened doors of opportunity to participate in other professional endeavors such as academia, speaking engagements, and publications.”

~ Teena Harrison, DNP, NP



TAKE YOUR CAREER TO THE NEXT LEVEL!

The Doctor of Nursing Practice Degree from Touro University Nevada further develops your nurse educator skills and knowledge. All coursework is online, providing the flexibility you need to keep working. The degree requires a minimum of 33 credit hours which may be completed in as little as 12 months.

The integrated curriculum is uniquely engineered to dovetail with your practical experience. You will develop your doctoral project throughout the program while experiencing learning opportunities to support your success.

Starting November and July. Apply Now.

www.tun.touro.edu/dnp

702.777.1750

Financial Aid may be available.

874 American Pacific Drive, Henderson NV 89014

Accredited by the Western Association of Schools and Colleges. Licensed in Nevada by the Commission on Post-Secondary Education.

Touro University Nevada is an Equal Opportunity Employer.

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, MSN, RN, FRE
Executive Director

Roseann Colosimo, PhD, MSN, RN
Education Consultant, Editor
888-590-6726

nursingboard@nsbn.state.nv.us

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

Circulation includes more than 35,000 nurses, nursing assistants and student nurses.

CONTACT

NEVADA STATE BOARD OF NURSING
5011 Meadowood Mall Way, Suite 300
Reno, NV 89502-6547

phone—888-590-6726

fax—775-687-7707

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

nevadanursingboard.org

Advertisements do not reflect the opinion of the Nevada State Board of Nursing and are not verified by the Board for their accuracy

Address changed?

You may change your address by visiting our website and clicking the "Address Change" link.

Address change? Name change? Question?

In order to continue uninterrupted delivery of mail from the Board, please notify staff of any change to your name or address

Edition 39



pcipublishing.com

Created by Publishing Concepts, Inc.
David Brown, President • dbrown@pcipublishing.com

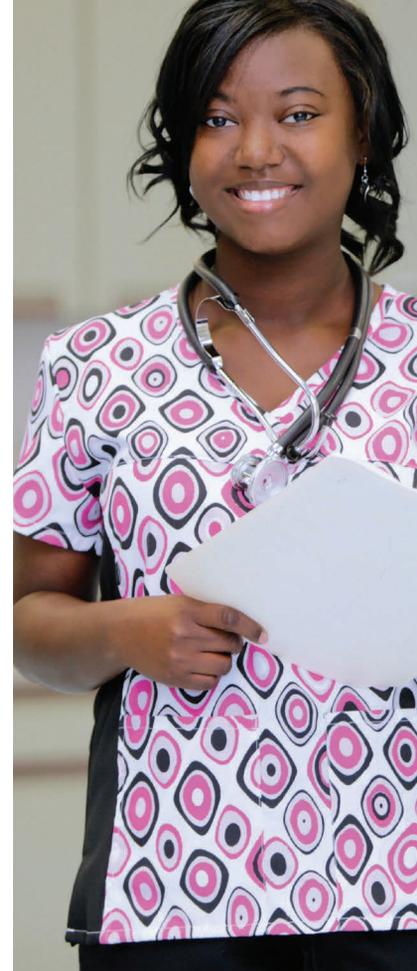
For Advertising info contact
Michelle Gilbert at 800.561.4686 ext.120
mgilbert@pcipublishing.com

ThinkNurse.com



DISCIPLINARY AND LICENSURE/ CERTIFICATION ACTIONS

can be found on the
Board's website:
nevadanursingboard.org



contents

Executive Director's Message	4
President's Message	5
My Role as a New NSBN Board Member	6
Nurses and the Policy Process	8
Board Talk	11
What's Your Level of Prevention	13
Patient Safety Corner	14
MEET THE STAFF	16
Great Basin College	17
Directory	19
Leadership Requires a seat in the Balcony	20
Continuing Education Units	22



MESSAGE

• FROM THE EXECUTIVE DIRECTOR

Debra Scott, MSN, RN, FRE

If nothing ever changed, there'd be no butterflies. ~Author Unknown

It is not the strongest of the species that survive, nor the most intelligent, but the one most responsive to change. ~Author unknown, commonly misattributed to Charles Darwin

If you want to make enemies, try to change something. ~Woodrow Wilson

God grant me the serenity to accept the people I cannot change, the courage to change the one I can, and the wisdom to know it's me. ~Author Unknown

There have been changes that have occurred in the last year that every nurse in Nevada should be aware of... are you? Here they are.

Sexual Assault Nurse Examiner (SANE) Practice Decision

The requirements for a nurse to practice as a SANE were changed by the Board in November, 2012. In August, 2012, the Office of the Attorney General approached the NSBN about a lack of certified SANEs to meet the needs of the citizens of Nevada. Kari Ramos, the Program Director of The Nevada Coalition Against Sexual Violence and Debbi Robison, Medical Coordinator for the Northern Nevada CARES/SART Program met with Board staff to discuss the possibility of deleting the requirement that SANEs be certified to practice within this role in Nevada. Board staff received a letter from the International Association of Forensic Nurses on August 20, 2012, supporting the requested change. The proposed revision to the Practice Decision was presented at the Nurse Practice Advisory Committee on October 30, 2012. On November 7, 2012, the NSBN voted to delete the requirement that SANEs be certified to practice within this role in the State of Nevada.

Cosmetic Procedures Practice Decision

On March 8, 2012, the NSBN rescinded the Cosmetic Procedures Practice Decision based on consultation with the Nevada Board of Pharmacy. After review of the current law related to prescribing, dispensing, and the scope of practice of licensed professional nurses (RNs), the Board deemed that RNs would be practicing outside their scope of practice if they administered dangerous drugs, legend drugs, or controlled substances to a patient that had not been examined and evaluated by a physician, an Advanced Practitioner of Nursing, or a Physician Assistant who had prescribing privileges. The prescribing practitioner must actually be immediately available and must write the prescription for the drugs which then could be administered by the nurse.

Amniotomy Practice Decision

On January 9, 2013, the NSBN rescinded their Amniotomy Practice Decision which means that the Board no longer takes a position on whether or not amniotomy is within the scope of practice for an RN. The Board does not have a new Practice Decision that finds that amniotomy IS NOT within the RN scope of practice. The Board refers nurses to the Scope of Practice Decision Tree which is on our website to decide whether or not amniotomy is within a particular nurse's scope of practice. Of utmost importance is that the Board did not say that it IS NOT within the scope of practice for an RN to perform amniotomy. The rationale for rescinding the decision was based on an AWHONN official position which is that perinatal nurses should not routinely, independently perform amniotomy, since complications such as prolapse of the umbilical cord that may necessitate emergency medical intervention may occur. The Board believed it to be prudent to support the official position statement of the professional nursing association based on the level of in-depth research cited by the association.

During the current Legislative Session, there will be many more changes that will affect our profession and how we practice in Nevada. Be informed of those changes. Read the entire NSBN News Magazine, in print or on the website, and visit our website often.

Our only security is our ability to change. ~John Lilly

Thank you,



WORDS

● FROM THE PRESIDENT

Tish Smyer, DNSc, RN, NSBN President

In our last edition of *Nursing News*, we announced that it is the 90th anniversary of the Nevada State Board of Nursing (NSBN). The mission of the NSBN is to protect the public's health, safety and welfare through effective nursing regulation. After three attempts through the legislature, in 1923 Nevada law finally established this government agency to protect the public from the unsafe practice of nurses. At that time, 104 RNs were licensed. Today the Board is responsible for licensing, certifying and disciplining more than 38,000 individuals, including registered nurses, licensed practical nurses, advanced practice nurses, certified nursing assistants, and certified registered nurse anesthetists. Help us celebrate this landmark date in our profession by attending one of the events planned this year. In reviewing those 90 years, there is one word that stands out: "CHANGE." As the Executive Director states in her message, "change" is something we deal with often as technological and informational advances are made in the health care arena. What has not changed are the values we as a profession hold dear. Values are a specific variable that defines the profession and makes our work different from "just a job." These values include human dignity, integrity, social justice, patient autonomy and altruism. Caring is a major component of our system of values.

Our work connects us to our values. We embrace these values in our everyday practice. For those who work in hospitals, Tye and Schwab (2009) use the analogy of architecture. We may be in a beautiful building with all the latest medical technology, but what matters is the "invisible architecture": the soul of the organization. Tye and Schwab believe that the "invisible architecture, not the buildings, determine whether you are a good hospital, a great hospital, or just another hospital." Patients remember and talk about the care received and not necessarily the beautiful buildings! I would make the case that with over 2.7 million nurses in the United States, with nurses being the single largest group of clinical health care providers, that the national health care system's invisible architecture is dependent on our profession. Please join me in celebrating our profession and the 90 years of "change" in the state of Nevada!

Tye, J. & Schwab, D. (2009) *The Florence prescription: From accountability to ownership*. Solon, IA: Joe Tye.

NSBN BOARD MEMBER

• My role as a new NSBN Board member

by Cathy Dinauer, MSN, RN



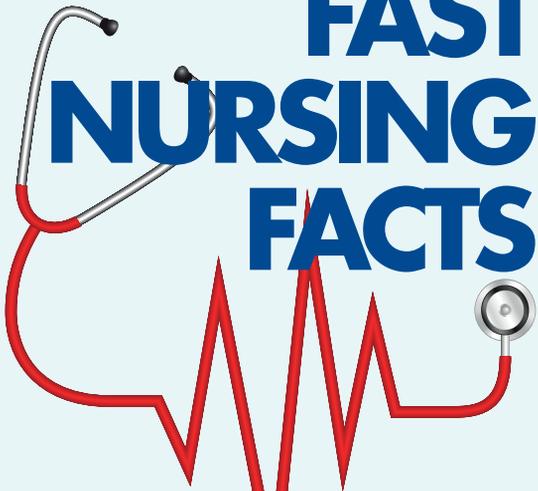
As one of the new Board members, I was appointed to the Nevada State Board of Nursing in December, 2012. As a nurse for 33 years, and a CNO for 15, I am honored to be part of this most prestigious body.

I began my career in the inner city of Los Angeles working as an Emergency Department nurse. After working in the area for 15 years, I moved with my family to Carson City hoping for a bit of a reprieve from the craziness of a large urban city. I fell in love with the area both from a geographic perspective and social one. I found the people of Carson City to be so kind and welcoming of me and my family. I began working in the ED at Carson Tahoe Regional Health while also working in staff education. It was not long, however before I was asked to take on the role of CNO. I had little experience but soon grew to love my new role. It allowed me to experience new challenges and hone in my skills as a nurse. I have always considered myself a nurse's nurse and one that happens to be an administrator rather than an administrator who happens to be a nurse.

During my tenure as a CNO, I have had many opportunities to observe Board of Nursing meetings and always thought what a privilege it would be to be a member of the Board. I watched in the audience how the Board asked very focused and considerate questions to those whose license/certification was in question so that the best decisions are made in preserving the protection of the public. I also had the opportunity to be a member of the nurse practice committee and to see how nursing practice is actually determined. The committee provides nurses, physicians and others in the medical community an opportunity to ask practice questions and then has the responsibility to answer those questions based on evidenced based practice. It was truly an amazing process to witness how practice is changed and revised.

I am new to the Board of Nursing and my hope is to bring my experience in the field of current acute care practice to the table. I often am asked if and why the Board takes the actions that it does. From my brief experience so far, I can say that the Board provides due process for all its investigations. Careful and thoughtful consideration is given to those whose licenses/certifications are in question. It is always important to remember that the role of the Board of Nursing is to protect the public. I look forward to my tenure on the Board.

FAST NURSING FACTS



- According to the latest data available to the World Health Organization, Finland, Norway, Monaco, Ireland and Belarus have, in that order, the highest ratios of nurses per capita of all nations, ranging from 2162.0 to 1182.0 nurses per 100,000 people.
- According to a recent World Health Organization report, the United States spends more money, as a ratio of GNP, on health care than any country, followed closely by Lebanon and Zimbabwe.

Congratulations to APRNs!

Licensure Defense for all Nevada APRNs, Nurses & CNAs



Law Offices of Tracy L. Singh, LLC

Anything you say can and will be used against you... call us first!

Nurse-Attorney

We Handle All Board Matters With Integrity

- Applications/Renewals
- Random Audits/Denials
- Criminal History & Convictions
- Unprofessional Conduct
- Fraud/Falsification of Records
- Abuse/Neglect of a Patient
- DUI/Chemical Dependency/Diversion
- All forms of Disciplinary Action
- Self Reports
- Settlement Negotiations
- Hearings/Appeals/OIG Disputes



Tracy L. Singh, RN, JD

Phone: (702) 444-5520 • Fax: (702) 444-5521

8635 West Sahara Avenue # 437 • Las Vegas, Nevada 89117

Email: tsingh@tlsinghlaw.com • Website: www.tlsinghlaw.com

You realized your nursing dream. Now Realize Your POTENTIAL.

Earn your BSN or MSN Online.

You've come a long way since your first day as an RN. Go even further with one of Jacksonville University's acclaimed nursing programs, offered in a 100% online classroom.

- RN to BSN – Now Offering Scholarships!
- MSN: Leadership in Healthcare Systems
- MSN: Clinical Nurse Educator

📍 JacksonvilleU.com/OnlineProgram Or, talk with a specialist: 800-571-4934 8-week classes | 6 sessions per year



© 2012 All Rights Reserved. Made Available by University Alliance® The Nation's Leading Universities Online. SC: 1917842J1 | MCID: 13186

JACKSONVILLE UNIVERSITY SCHOOL OF NURSING

One of America's Best Colleges U.S. News & World Report

UNIVERSITY OF NEVADA, RENO

Orvis School of Nursing

www.unr.edu/nursing

- B.S. in Nursing
- RN to BSN
- M.S. in Nursing
 - Family Nurse Practitioner
 - Nurse Educator
 - Clinical Nurse Leader
 - Adult Gerontology Acute Care Nurse Practitioner (Opening Fall 2014)
- DNP (Doctor of Nursing Practice)*



University of Nevada, Reno Statewide • Worldwide

*The DNP program is a collaborative program with UNLV. Students admitted through UNR for this program have their DNP degree conferred by UNR.



POLICY PROCESS

• Nurses and the policy process

By Susan S. VanBeuge, DNP, APN, FNP-BC



As the legislative session comes to an end, citizens have an opportunity to reflect on the policy process from the perspective of what new laws will be implemented over the months and years to follow. It is also time to reflect on issues that may not have championed through for change during the same period of time. But the policy process isn't just about the legislative session; the process is embedded in the everyday workings of organizations, groups, and community affiliations.

Nurses have an important role in healthcare as the largest group of providers in the United States, over 3 million nurses provide care in roles from bedside nursing to educators to the highest levels of government. Regardless of the role, nursing practice has influence on the process by nature of education, experience, training, and the values brought to human interaction.

The policy process can sometimes be overwhelming and misunderstood by a muddled system of politics, complex systems, culture, history, values and system organizations. As individuals, we hold values about health, health care, and individual freedoms while operating in a health care system that may conflict with these held notions.

Where does this journey into the policy process begin for nurses? Those involved will say their first venture came from an "Aha" moment where raising awareness for an injustice, inequality or policy was needed because the old ways 'were not working.' Many grassroots movements evolve from a single voice or group coming together in commonality recognizing the need for change, declaring action, deciding the system requires change, and charting a path to do something.

How do nurses get started in the process? One model outlines four stages to how nurses learn the process: buy-in, self-interest, political sophistication, and leading the way (Leavitt, Chaffee, & Vance, 2007). Buy-in is the reactive stage or the "aha" moment where a pivotal event or events happen to promote political awareness and the determination that change is needed.

Stage two is self-interest, where a nurse may become focused on a single issue and develop knowledge about the issue in the context of their practice and the larger system of

healthcare. This is where an individual learns about political activism and the policy development process. At this stage, individuals may come together with others to form a taskforce to bring forth their vision of change, plan strategies, and present recommendations for policy change.

The next stage, political sophistication, is when policy makers and legislators turn to nurses for expertise on health policy. Nurses are often asked to testify, provide consultation, and share knowledge of advisory committees or testify before the legislature. Nurses have important roles on advisory committees in every aspect of the process from local health-related boards, to state level committees, to national organizations creating national health care policy. Nurses have voices as individuals and as groups providing support and expertise in the development, implementation, and policy change process.

The last stage of this model is the highest level of involvement and is described as 'leading the way.' This is where nursing sets the agenda for change. In addition to providing expertise and knowledge, nursing becomes the initiator of policy development and change. As an individual or group, it could be meeting with a manager at the hospital, talking with a Dean at a local college or university, or meeting with a legislator. Nurses are recognized as the most trusted profession and have held this position in our American society for many years. We are recognized for our unique perspective, caring, and altruistic focus on well-being in communities.

In nursing education, patient advocacy is a value taught and nurtured when caring for others. We are considered to be powerful advocates for those entrusted in our care because of our unique perspective to humans at their most frail and vulnerable moments. The American Nurses Association Code of Ethics (2001) outlines responsibility for nurses to advance the profession through involvement in health care policy to advance nursing practice and to promote meeting health care needs and concerns in local, national and international communities.

In Nevada, nurses play an important role in the policy process, advocacy, and leadership. Advocating for patients rights, needs, and concerns happens daily in community

health centers to emergency departments to schools. Nurses are also engaged in committees as experts on health care, nursing issues, and policy development. Individuals can be engaged in the process in many different ways. Membership in local and national organizations provides nurses a voice to express their views in a collaborative one-voice on issues for patients and nurses alike. This is one of the easiest ways to be involved without a big time investment. Perhaps a meeting once a month or quarterly may be expected, but the membership demonstrates your association and solidarity to your profession.

The first step of getting involved often seems overwhelming and perhaps intimidating. Nurses often say “I’m just one person and would not make a difference,” but one voice can be strong and a collective can be stronger.

As a jumping off point, start by volunteering to be on a committee in your own area of employment or specialty practice. These can be hospital committees, or professional organizations such as the Oncology Nurses Society or Emergency Nurses Association. All nurses should attend the Nevada State Board of Nursing meetings when possible. This is the group who determines regulation regarding nursing practice. Be involved, listen, and provide your feedback to the board that represents nursing. There are five advisory committees who report to the board in the areas of advanced practice, certified nursing assistant, disability, education and nursing practice. These are public meetings and committees composed of nurses. Be involved and attend one that fits with your practice. You can also look at the openings and apply for one of the membership positions. This is a terrific way to be involved and to be of service to the profession.

Another important demonstration of the policy process is voting. Your one vote declares beliefs on the side of an issue by electing representatives, voicing opinions on initiatives, and being counted. After the election is over and representatives are seated, the advocacy does not end. Nurses are constituents with knowledge and expertise. Get to know your elected officials and let them know who you are by way of introduction in a letter, email or phone call. Introduce yourself as a constituent and as a nurse. Provide yourself as a reference for any questions they may have regarding health care or nursing, that you are available to provide consultation on health care related issues in the community. Connect with your representatives so a rapport has been established. Find the commonalities and differences so you can work with those representing you. When an issue

arises, a bill is before the legislature, or a concern you have is present, you have already established a connection with this representative in order to open a conversation.

Writing is a great way to disseminate information. This can take the form of a journal article, opinion editorial for a local newspaper, or letter to the editor. Maybe you have some ideas and want to work with others to create a publication as part of the collaborative process. Sharing these ideas in a cogent, logical, factual manner can provide a template to others who could be like-minded or have the same concerns in their communities. It is an excellent way of opening a conversation to concerns in your own community.

There are many ways nurses can be involved in the policy process at the local level to the national stage. Whatever the forum, nurses have powerful voices to make a difference for our patients and our profession.



References:

American Nurses Association (2001). Code of Ethics with Interpretive Statements. Downloaded May 7, 2013 from <http://nursingworld.org/MainMenuCategories/EthicsStandards/CodeofEthicsforNurses/Code-of-Ethics.pdf>

Mason, D. J., Leavitt, J. K., and Chaffee, M. W., Editors (2007). Policy and Politics in Nursing and Health Care, 5th Edition. Saunders Elsevier: St. Louis, MO



When your **career** is on **the line,**

contact the Healthcare
Professionals Advocacy Group at

HUTCHISON & STEFFEN
ATTORNEYS

- Nursing Board Representation
- Regulatory Requirements and Compliance
- Credentialing and Privileges
- Malpractice Defense

LAS VEGAS

RENO

SALT LAKE CITY

PHOENIX

©2012 Hutchison & Steffen

PECCOLE PROFESSIONAL PARK • 10080 WEST ALTA DRIVE, SUITE 200 • LAS VEGAS, NEVADA 89145
702.385.2500 • HUTCHLEGAL.COM



WILLIAM BEE
RIRIE

CRITICAL ACCESS HOSPITAL
AND RURAL HEALTH CLINIC

JOIN OUR TEAM

**Clinical Informatics Coordinator
Full-Time RN & Full-Time OR RN**

experience preferred; sign on/relocation
bonus available; generous benefits; State re-
tirement (PERS); very competitive salaries.
WBRH is an EOE

Contact: Vicki Pearce
vicki@wbrhely.org • 775-289-3467, ext 229
www.wbrhely.com



CARSON TAHOE
— HEALTH —

Visit our website for current nursing opportunities

www.carsonatahoe.com

Job hot line: 888.547.9357

Carson City, Nevada (Located in Northern Nevada, near Lake Tahoe and Reno)



Featuring

- JCAHO accredited
- Comprehensive healthcare system
- Growth opportunities
- Competitive salaries
- Medical benefits
- Generous 401k
- Vacation / Sick leave
- Paid holidays
- Education assistance



EOE

BOARD TALK

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 website and at community sites.

BOARD MEETING DATES

July 24-26, 2013 Zephyr Cove
September 18-20, 2013 Las Vegas

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 a committee appointment to fill an upcoming opening, please visit the Board's website or call the Board office for an application.

MEETINGS AND OPENINGS

The openings (listed in parentheses) will occur in the next six months. All meetings will be held via video-conference in Reno and Las Vegas.

Advanced Practice Advisory Committee (one)

June 4, 2013

August 6, 2013

Certified Nursing Assistant/MA-C Advisory Committee (two) *

July 11, 2013

Disability Advisory Committee (none)

September 18, 2013

Education Advisory Committee (none)

August 22, 2013

Nursing Practice Advisory Committee (none)

June 4, 2013

August 6, 2013

*One Long Term Care RN and one MAC

• 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 and closes each 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 Board.

• WE'LL COME TALK TO YOU

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

YOU'RE IN GOOD COMPANY

Active Nevada licenses/certificates on May 10, 2013

APN • 838 CNA • 7,864 LPN • 3,333 RN • 28,451 MAC • 3

DON'T SUBMIT A FRAUDULENT APPLICATION!

If you swear you completed CEs, you must be able to prove you did if you're audited

As it states on your renewal application, you must keep copies of your continuing training/education certificates for four years, in case you are selected for random audit. If you cannot prove you met the renewal requirements for nurses (30 continuing education credits) or CNAs (24 hours of continuing training/education), *your application will be considered fraudulent and you may be subject to disciplinary action.*

Nurses: the Board is also auditing for compliance with the one-time renewal requirement for a four-hour bioterrorism course. You must keep a copy of your bioterrorism certificate of completion indefinitely.

MOVING?

Now you can change your address online!

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, date of birth, and email address.

UNLV

UNIVERSITY OF NEVADA LAS VEGAS



Master of Science in Nursing (MSN) and Post Master's Certificates

- Family Nurse Practitioner
- Nurse Educator

Doctor of Nursing Practice (DNP)

University of Nevada Doctor of Nursing Practice (UNDNP)

- ONLINE
- Collaboration with UNR
- Full-Time and Part-Time Options
- Two Tracks Available:
 - Nurse Executive
 - Advanced Practice

PhD in Nursing

- ONLINE
- Full-Time and Part-Time Options
- Three Tracks Available:
 - Teacher Scholar
 - Urban Sustainability: Health
 - Post DNP-PhD

For All Graduate Programs, contact:

Jill Racicot
jill.racicot@unlv.edu
(702) 895-5920



Certified Nursing Assistant Instructor

Milan Institute offers quality short term educational programs in career fields, with hands-on training, a committed staff, and experience faculty. We are motivated to interview candidates for our Sparks and Las Vegas, NV locations.

Qualifications:

The Successful candidate must have a minimum of 3-5 years experience as a RN with an unencumbered, current license; at least 2 years of experience caring for elderly or chronically ill; and documentation of completion of an instructor development course or equivalent.

This is an exciting opportunity for the right candidate as we offer a competitive salary/benefits package. To apply please send a cover letter, resume and salary requirements to milanjobs@milaninstitute.edu EOE



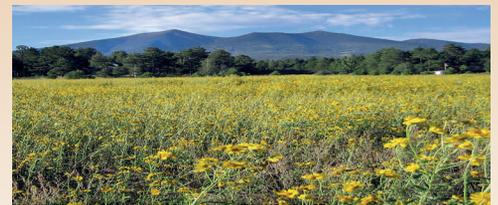
UNLV School of Nursing
4505 Maryland Parkway Box 453018
Las Vegas, NV 89154-3018
1-702-895-3360 <http://nursing.unlv.edu>



Outstanding Careers



Award Winning Care



Flagstaff Medical Center • Verde Valley Medical Center • Sedona Medical Center

Behavioral Health • CVICU • Critical Care • Emergency • Med/Surg • Surgical Services • Women & Infants

If you are looking for more balance in your life and a wealth of professional opportunities we invite you to come to the place where life is grand and careers flourish. Learn more about our career opportunities, facilities and benefit packages at www.nahealth.com/careers.

Follow us on



Northern Arizona Healthcare

WHAT'S YOUR LEVEL OF PREVENTION

By Nancy N. Menzel, PhD, RN, HCNS-BC, CPH, Associate Professor, School of Nursing, University of Nevada, Las Vegas

According to the American Hospital Association (2013), there are approximately 925,000 hospital beds in the United States. So, at maximum occupancy, less than one percent (0.3%) of the 314 million people in the United States are hospitalized on any given day. In one year, there are about 35 million admissions to hospitals. This means that the overwhelming majority of the population stays out of the hospital over a year's time. As nurses, we have a responsibility not only to care for the sick, but also to promote, protect, and optimize health (American Nurses Association, 2013). Accordingly, we must expand our practice to include keeping the 279 million Americans who are not hospitalized (including ourselves) in good health. How do we go about this?

Population-focused nursing uses levels of prevention (primary, secondary, and tertiary) as a framework for interventions (Centers for Disease Control and Prevention, 2007). Primary prevention aims to prevent the disease from occurring and reduces both the incidence (number of new cases) and prevalence (number of existing cases) of disease. An example includes encouraging people to wear sunscreen, particularly in states like Nevada with its damaging solar rays. It is the least expensive and most effective of all the interventions, yet the U.S. spends just a penny or two out of each dollar of its health care expenditures on this level (Center for Science in the Public Interest, 2008).

Secondary prevention involves screening for a disease after it has occurred, but before the person notices anything is wrong (no symptoms). Examples include a physician inspecting for suspicious skin growths and removing them. Early intervention can cure some diseases at

this stage. However, screening comes with its own risks of false positives leading to unnecessary and sometimes dangerous confirmatory procedures. The U.S. Preventive Services Task Force (2008) evaluates the evidence for screening effectiveness and makes recommendations ranging from "A" (net benefit) to "D" (no net benefit or harms outweigh benefits).

Tertiary prevention targets the person with symptoms of disease. It is the least effective and most expensive level, yet it is where almost all of our health care dollars are spent. The goals of tertiary prevention are to slow down or cure the disease and rehabilitate individuals to a previous level of functioning, if possible. An example is treating malignant melanoma to prevent metastases.

With the majority of nurses employed in tertiary prevention settings (i.e., hospitals), work opportunities to practice primary prevention are limited. However, as citizens we can focus our efforts upstream by encouraging elected officials to support health policies that prevent disease (such as clean indoor air regulations) and opposing measures that expand screening and treatment. For example, some state legislatures are now considering laws that will mandate notifying women with denser breasts that they are at risk for cancer (Miller, 2013). However, such notification is likely to result in additional screening tests, such as biopsies, which could be harmful. Such laws are likely to increase greatly the cost of health care while saving relatively few lives.

Additionally, we can educate our communities about ways to reduce the incidence and prevalence of disease, such as flu vaccinations. We can support charitable causes that direct the bulk of their funds towards primary prevention,

not cure. Urge charities that focus on screening and treatment to redirect their funds. For example, in 2011 the Susan B. Komen for the Cure spent only 16% of its \$421 million budget on research on the causes of breast cancer (Orenstein, 2013). Finally, we can be role models for primary prevention ourselves. Let us start by putting down the remotes and lacing up the sneakers!

REFERENCES

- American Hospital Association. (2013). Fast facts on U.S. hospitals. Retrieved from <http://www.aha.org/research/rc/stat-studies/fast-facts.shtml>
- American Nurses Association. (2013). What is nursing? Retrieved from <http://www.nursingworld.org/EpeciallyForYou/What-is-Nursing>
- Center for Science in the Public Interest. (2008). The key to affordable health care reform: Better health through prevention. Retrieved from <http://cspinet.org/new/pdf/prevention.pdf>
- Centers for Disease Control and Prevention. (2007). Skin cancer module: Practice exercises. Retrieved from <http://www.cdc.gov/excite/skincancer/mod13.htm>
- Miller, K. D. (2013) Should states be setting breast screening policy? Medscape News. Retrieved from http://www.medscape.com/viewarticle/802817?src=wnl_edit_specol&uac=98513EV
- Orenstein, P. (2013, April 25). Our feel-good war on breast cancer. New York Times Magazine. Retrieved from http://www.nytimes.com/2013/04/28/magazine/our-feel-good-war-on-breast-cancer.html?_r=0
- U.S. Preventive Services Task Force. (2008). U.S. Preventive Services Task Force grade definitions. <http://www.uspreventiveservicestaskforce.org/uspstf/grades.htm>



PATIENT SAFETY CORNER

The world is overwhelming with all the information available to Nurses to practice safely so here are two references that maybe of help to you.

Linda Flynn and her colleagues from Rutgers College of nursing have published an article in the Journal of Nursing Scholarship, "Nurses' Practice Environments, Error Interception Practices, and Inpatients Medication Errors" in 2012;44:2, 180-186. This research supports the idea that nurse practice environments are significant to whether nurses employ interception practices to enhance their role in providing vital safety functions for the patient. Nurse interception practices consist of (a) independent comparisons between the medication administration record and patient record at the beginning of shift. (b) determining the rationale for each ordered medication, (c) requesting that physicians rewrite when improper abbreviations were used and (d) ensuring that patients and families were knowledgeable regarding the medication regimen so that they can question unexplained variances (p.189) So how are your Interception practices?

Mary Flynn and her colleagues have written an important article in the Critical Care Nurse, April 2013 vol 33 no.2 28-42. "Putting Evidence Into Nursing Practice Four Traditional Practices Not Supported by the Evidence is an excellent article that focuses on four specific topics (1) Noninvasive measurement of blood pressure in children, (2) Oxygen administration for patients with chronic obstructive pulmonary disease, (3) Intravenous catheter size and blood administration and (4) infection control practices to prevent infections. The article also talks about barriers to and facilitators of practicing on the basis best documented evidence. Pediatric nurses will find important information about why using auscultatory method and then compare to measurements with those obtained by Oscillometric method used for trending and treatment would be evidenced based. The sacred cow of hypoxic drive is thoroughly discussed in light of evidence with a great table debunking "hypoxic drive." Benefits of using a smaller gauge needle for administration of nonurgent packed red blood cells infusion are discussed. Lastly, infection control requires compliance and leadership of critical care nurses requires a culture of (1) hand hygiene, (2) Barrier precautions, (3) decontamination of environment, items and equipment and antibiotic stewardship.

Pass NCLEX the 1st Time Guaranteed

Advanced NCLEX Prep Course

Comprehensive, content-based test review

Visit us online at **www.cicnurse.com** for free previews

WE ALSO OFFER RN and PN license applications preparation to all 50 states & Nursing Resume services

Ask about our special offers for the readers of StuNurse

(800) 852-3062

Nursing Networking • The "NEW" Classifieds (1.5" wide x 1" high)

Contact Michelle Gilbert at mgilbert@pcipublishing.com 1-800-561-4686 ext. 120

- **Phlebotomy Training**
- **Medical Assisting**
- **EKG Training**

FREE GRANTS!

**Call Today
702.645.7900**

www.medicalskillsforlife.com

B&D
Fingerprinting
Services, LLC

CHILD ID KITS
Mobilized
Business to Business

800 N. Rainbow Blvd
Suite 175
Las Vegas, NV 89107
702-485-5256
jenn@bdfingerprinting.com

Electronic Submission
Free Employer Accounts
Call for More Details
www.bdfingerprinting.com



Free Subscription to StuNurse magazine!

Do you know someone who is a student nurse, or someone considering a nursing career? Then let them know about the StuNurse magazine. A subscription to the StuNurse digital magazine is **FREE** and can be reserved by visiting www.StuNurse.com and clicking on the Subscribe button at the upper right corner. **Educators...** let your students know they can subscribe free of charge!

2013 NEVADA HEALTH CONFERENCE:

Presented by Immunize Nevada and Nevada State Health Division's Bureau of Child, Family, and Community Wellness

OCTOBER 28-30, 2013

GREEN VALLEY RANCH RESORT & SPA | HENDERSON, NEVADA



REGISTER TODAY

Early-bird Deadline: Friday, June 28 – \$75/day

Advance Registration Deadline: Friday, August 30 – \$100/day

For information visit www.ImmunizeNevada.org/conference



Use the *past*, in the *present*,
to change *the* **FUTURE**
by **TEACHING!**

Kaplan College Las Vegas — School of Nursing is accepting applications for F/T Pediatric INSTRUCTORS.

Must have MSN and clinical experience.



**KAPLAN
COLLEGE**

Please email resume to
Dr. Katherine Cylke, DON, at kcycke@kaplan.edu or mail
to: Kaplan College, 3535 W. Sahara, Las Vegas 89102

Reach Recruit Retain



Mailed to every nurse in Nevada –
over 38,000 individuals

The Nevada Board of Nursing NEWS

to reserve advertising space
contact **Michelle Gilbert**
mgilbert@pcipublishing.com

1-800-561-4686 ext.120

Our nursing journals are
mailed directly to over 1.5 million
nurses, healthcare professionals
and educators nationwide.

Arizona	North Carolina
Arkansas	North Dakota
The District of Columbia	Ohio
Indiana	Oregon
Kentucky	South Carolina
Mississippi	South Dakota
Montana	StuNurse/Nationwide
Nebraska	Tennessee
Nevada	Washington
New Mexico	West
	Virginia
	Wyoming

ThinkNurse.com



MEET THE STAFF



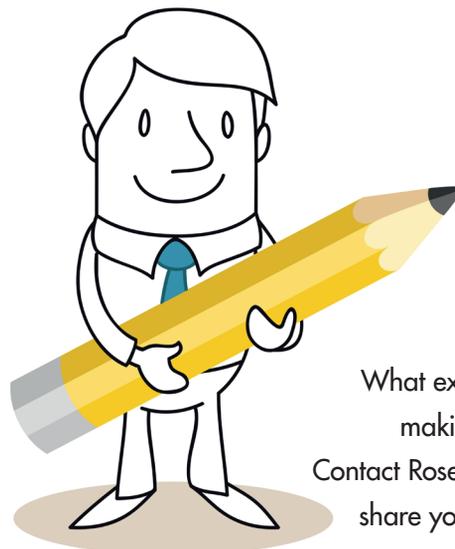
Jill Caldwell, Receptionist

As a receptionist, Jill is responsible for program support including, general information, inquiries and referrals; processing of initial applications, renewals and fingerprinting capture.

Jill began working for the Board in October 2012. Prior to the Nevada State Board of Nursing, Jill worked for her family business and was a part-time stay at home mom. When asked what she enjoyed most about working for the Board, she said “the

supportive staff and helping others achieve their goal in the nursing field.”

Jill is a Nevada native who lives within a 5 mile radius from her whole family. Jill loves to laugh, meet new people and enjoys being outdoors, bike riding and playing softball with her two children.



NURSE AUTHORS NEEDED

What exciting evidenced based changes are you making to nursing practice in Nevada. Please Contact Roseann Colosimo 702 668 4528 so we can share your best practices with all Nevada nurses.

GREAT BASIN COLLEGE

RN TO BSN PROGRAM

Take your career to the next level!

by Kris Miller, PhD, RN



Our rapidly changing health care system needs professional nurses with strong leadership and management skills, the ability to use research, evidence, and informatics to provide care to an increasingly wide variety of vulnerable populations and communities. The GBC RN to BSN program offers the additional level of education and competencies increasingly required in health care settings. In addition, the GBC program will prepare you to work with Nevada's rural populations and communities, as well as agencies focused on all aspects of healthcare, not just acute care.

Through the Great Basin College RN to BSN program, you can select a path to a BSN that fits your schedule, lifestyle, and work life demands. The RN to BSN program is available totally online (including general education requirements). Courses that require a clinical component are project-focused. The projects can be designed and implemented to meet the needs of populations or institutions in your community and have direct impact where it matters to you.

Program Admission

Students are admitted to the program once per year prior to fall semester. The eligibility requirements for admission are:

- graduate of an associate degree or diploma nursing program accredited by NLNAC or CCNE and a college with regional accreditation
- licensed (without restrictions) as a registered nurse at the time of admission and throughout the program, and
- GPA of 3.0 or higher on a 4-point scale

The application for the RN to BSN Program is located at <http://www.gbcnv.edu/programs/BS-NUR.html>. The deadline for applications is July 15, but enrollments are limited, so early application is encouraged.



Take your career to the next level!



All interested students should call the nursing department at 775-753-2301 to schedule an advisement appointment in person or by phone with a nursing faculty member.

Why GBC?

- Nursing faculty are very accessible and classes are small.
- Great Basin College's student services are designed to accommodate students enrolled in all of GBC's many online degree and certificate programs.
- The program prepares you for graduate nursing education. GBC nursing faculty are familiar with and can help you identify the graduate options that might be a good fit for you if you decide to continue your education.
- Costs for the program are among the lowest in Nevada for in-state residents.

The GBC RN to BSN Program can prepare you for the next level in your career—moving into a position to lead change rather than just adapting to change in health care!

The Great Basin College RN to BSN program is approved by the Nevada State Board of Nursing and is accredited by the National League for Nursing Accrediting Commission (NLNAC).

Improve your professional abilities
as well as your physical
and mental health.

Mindfulness-Based Stress Reduction (MBSR)

A well-established eight-week training in
mindfulness meditation with proven health
benefits now earning 26 Nursing CE's.

Offered by Leanne L. Earnest, BSN, PHD
StressLessLasVegas.com

New Classes beginning Fall 2013.

Please call Dr. Earnest at 703-222-1812 to
register for a free required introductory lecture.

Seeking EXPERIENCED RN's

for: Emergency Department, ICU, Surgery,
Float, Labor & Delivery, Nursery, Med
Surg, Post Partum, and Home Health.

Full Time benefited and Per Diem shifts
available! Currently offering a Sign on
Bonus and Relocation Assistance!

JOIN OUR TEAM!

Show Low Arizona has four beautiful,
mild seasons — a perfect place for
outdoor adventures year-round!



CONTACT

Stevie Reidhead, Recruiter

office 928-537-6367 fax 928-532-8995

sreidhead@summithealthcare.net

www.summithealthcare.net



Summit Healthcare
REGIONAL MEDICAL CENTER

Summit Healthcare Regional Medical Center

2200 E. Show Low Lake Rd.
Show Low, AZ 85901



RN to BSN Program

Earn Your BSN Degree*
at Bellevue College!

- Offered at BC Main Campus
- Designed for Working RNs
- Full-time and Part-time Options
- High Quality, Accessible Education
- Rigorous, Responsive & Relevant Curriculum
- Evidence-Based Practice
- Experienced Faculty
- Innovative Teaching Methods
- Healthcare Information Technology
- Research
- Management Knowledge & Skills
- Community & Public Health

Contact us at

RNBSN@bellevuecollege.edu or 425.564.5078

3000 Landerholm Circle SE Bellevue WA 98007

* Pending final approval by the Washington State
Nursing Care Quality Assurance Commission.
Expected in April 2013.



Navajo Technical College

P.O. Box 849, Crownpoint, NM 87313-0849

ASSOCIATE DEGREE NURSING PROGRAM

Invitation to apply for the following position:

- Nursing Program Instructor

Excellent benefit package.

MSN, nursing education experience required.

View full job descriptions at <http://www.navajotech.edu/index.php/human-resources>

Contact Human Resources at 505-786-4109

Have a question?
Give us a call.

Nevada State Board of
NURSING NEWS

ADMINISTRATION

5011 Meadowood Mall Way, Suite 300, Reno, NV
89502, 888-590-6726

nursingboard@nsbn.state.nv.us

Debra Scott, MSN, RN, FRE,

Executive Director

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

Chris Sansom, MSN, RN, Director of Operations

Program Management

CNA Advisory Committee Chair

Fred Olmstead, General Counsel

Legal Counsel

Dean Estes, Director of Finance/Technology

Budget, Accounting and Payroll

Technology Support

Programming

Website

Roseann Colosimo, PhD, MSN, RN, Education

Consultant

Nursing Education Programs

CNA Training Programs

Continuing Education Programs

Education Advisory Committee Chair

Advanced Practice and International Graduate

Document Analysis

Patty Shutt, LPN, Site Operations Supervisor

Las Vegas Site Supervision

Advanced Practice Certificate Processing

Gail Trujillo, Executive Assistant

Assistant to the Executive Director

Scheduling

Board Meeting Agenda and Arrangements

SUPPORT STAFF

Christie Daliposon, Management Assistant

Assistant to the Director of Operations

Discipline Investigative Support

Compliance Support

Board Meeting Preparation

Disability Advisory Committee Scheduling

Nursys Data Entry

Wendy Dostal, Management Assistant

Assistant to General Counsel and Compliance

Coordinator

Board Meeting Preparation

Disability Advisory Committee Scheduling

Nursys Data Entry

Cyndie Souza, Management Assistant

Discipline Investigative Support

Yes Answer and Fraudulent Application Processing

Endorsement Forms

Board Meeting Preparation

Nursys Data Entry

Jeannette Calderon, Management Assistant

Assistant to the Education Consultant

Education Advisory Committee Scheduling

APN Audits

Continuing Education Audits

Rhoda Cope, Management Assistant

Assistant to the Director of Finance/Technology

Online Renewals

Personnel List

Fingerprinting Inquiries

PROGRAM STAFF

5011 Meadowood Mall Way, Suite 300,

Reno, NV 89502, 888-590-6726

2500 W. Sahara Ave., Suite 207, Las Vegas, NV

89102, 888-590-6726

nursingboard@nsbn.state.nv.us

Investigations and Monitoring

Linda Aure, BSN, RN-BC, Senior Investigator

Complaint Investigations

Nursing Practice Questions

C. Ryan Mann, BSN, RN, Application Coordinator

Application Review Fraudulent Application Screening

Cindy Peterson, RN, CRRN, CLNC, CHCQM, Investigator

Complaint Investigations

Nursing Practice Questions

Kathleen Reynolds, BHS, RN, Compliance Coordinator

Disability Advisory Committee Chair

Disability Advisory Committee Scheduling

Probation and Alternative Program Monitoring

Reinstatement Applications

Sherri Twedt, RN, CLNC, Investigator

Complaint Investigations

Nursing Practice Questions

Licensure/Certification

Sarah Bowen, Licensure Specialist

Licensure Eligibility Questions

Endorsement and Examination Applications

Continuing Education Providers

International Nurse Graduates and Licensure

Issues

RN/LPN CEU Audits

Patty Towler, Senior Certification Specialist

CNA Registry Maintenance

CNA Certification and Renewals

CNA Program and Instructor Approvals

Certification Audits (CNA, APN, CRNA)

Support

Ariadna Ramos, Program Assistant

Endorsement Applications

Licensure Eligibility Questions

Spanish-speaking Services for Consumers

Program Support of Licensure and Certification

Jill Caldwell

Lisa Hill

Sandy Webb

Demi Hays -Receptionists

Renewal Applications

Program Support

Inquiries, Information and Referrals

Licensure and Certification Applications

BOARD MEMBERS



Patricia "Tish" Smyer, DNSc, RN

President,
Term expires 10/31/2016



Mary-Ann Brown, MSN, RN

RN Member
Term expires 12/31/16



Rhigel Tan, DNP, RN, APN

RN Member
Term expires 10/31/15



Sandra Halley

Consumer Member
Term expires 10/31/13



Rick Carrauthers, LPN

Vice President
Term expires 10/31/13



Cathy Dinauer MSN, RN

RN Member
Term expires 11/31/2016



Jennifer Snidow, CNA

Secretary
Term expires 10/31/15

LEADERSHIP

- Leadership requires a seat in the balcony.



True leadership requires that we have experiences outside our hospital, agency, and school of nursing.

The balcony can let us see hospitals that have robots that pass medications or it may let us see how profoundly health would be changed by The Uganda Nursing School, Bwindi (UNSB) the school is a proud affiliate of Uganda Christian University. Karen Fontaine former director of the Truckee Meadows Community College nursing program just spent a few months in Uganda helping set up the curriculum for this nursing school to start. Karen got a seat in the Balcony because TMCC/s President Sheehan is a Rotarian, she asked the Dean Plagemeyer, interim nursing director Jody Covert and Karen Fontaine if they would be willing to help with the development of a nursing program in Uganda, since the Reno Rotary Club is writing a Rotary International grant to furnish and supply the school, which has been built with private funds. A local member of the Reno Rotary club sponsored Karen Fontaine to go to Uganda to help develop the curriculum, since the program is scheduled to open in November. Karen's blog on the adventure is at <http://bwindinursingschool.blogspot.com/>. The school of nursing is in need of Masters prepared faculty to volunteer preferably for a year (but two to six months considered). For more information contact Executive Director Sally Stillings at sally@kellermanfoundation.org or 214 519-9279.

MISSION ACCOMPLISHED

By Jeannette Calderon

The Nevada computerized student nurse clinical placement website is up and running. NSBN would like to thank all of the schools and agencies for working so diligently to implement the system. The relatively smooth transition to the system would not have been possible without the constant vigilance during the learning process of Ann Burgess. Ann Burgess is the project director for the San Diego Clinical software which was purchased by NSBN to improve clinical scheduling of student nurses. Nevada nurses are in the lead, across the country many areas are scrambling to have scheduling that maximizes use of clinical facilities. If you need assistance with the system, please call the Board at (888) 590-6726 and ask for Jeannette.

DINOSAUR CORNER MEETS YOUTUBE VIDEOS

BY Roseann Colosimo Education Consultant

I turned one of those dreadful numbers this year where everyone on the continent wants to tell you about their healthcare programs. So I have taken to acknowledging that I am not as in touch with the social media world as many. 43 years ago at Saint John College in Cleveland Ohio I led a senior project that used three slide projectors in a study of group dynamics, at the time it was revolutionary for a small religious college. So now I am enlightened by senior projects that are posted on YouTube. If you have not ever seen the work students do today please sample these.

UNR - Dr Ruchala Director of the Orvis School of Nursing shared that Level III students created a YouTube video focusing on the needs of Reno's homeless population <http://www.youtube.com/watch?v=u82QLiaDBj0> as part of their community health nursing rotation project. This was done last fall and got considerable media coverage in Reno, along with a meeting with the local Realtors' Association and Mayor Cashell's wife, resulting in a significant gift

toward the needs of the homeless in Reno. The students' instructor was Salli Vannucci, and the students in the group creating the video were: Nancy Arrendondo, Ian Braunschneider, Monique Cantie, Jenna Duralde, Jean Marie Gratwohl, Amy Leggett, and Stephanie Lim. All of these students will be graduating with their BSN degree, May, 2013.

Roseman University- Dr Carrion shared this YouTube video called THINK FAST which helps students to remember stroke symptoms and risk factors. This was part of their project for Nursing Research. The students' instructors were Dr. Jene Hurlbut and Dr. Judith Carrion. The credits go to Angelique Fenelon, Anna Martinez, Anna Pineda, Clarissa Christensen, Jeswyn Sy and Jessica McNair, Nursing Class of 2014. They will be graduating March 2014 with their BSN degrees.

<http://www.youtube.com/watch?v=kIGQCicCiOLY&feature=youtu.be>



CONTINUING EDUCATION UNITS

- What is the story?
- What counts for whom?

I affirm (swear) that I am in compliance with the continuing education requirements of NAC 632.540.)

Continuing education is one way of showing that a nurse is maintaining competence to practice nursing.

Certified nursing assistant must do inservice according to the code of Federal regulations. The inservice may or may not be CEU's. The RN on your unit teaches a 1 hour inservice on dehydration and offering fluids more frequently. Written documentation of this education will be accepted toward your 24 hour requirement. CEU from internet providers will be accepted if the courses are relevant to nursing assistant practice.

Major Problem for CNA - Taking a course not within scope like course on pain medications, blood transfusions or neurosurgery.

LPN/ RN must have 30 continuing education units every two years. A onetime requirement of a bioterrorism course must be met. If you lose your certificate as many have taken the bioterrorism course 8 years ago then redo a 4 credit hour course.

Major Problem – Some nurses do not do their CEU even months after being audited. You can be disciplined, fined and placed in a National data bank for not doing your CEU's. It is your professional responsibility. Please help create a culture in Nevada where nurses always want to learn more to be safer, better nurses.

APN must have 45 continuing education units. 15 must be in advanced area of practice.

CRNA needs 45 hours unless their National Certification occurred within 1 year before their birthday in renewal period then we will accept the 40 hrs required for National Certification

Major Problem- Again not doing CEU in the two year renewal timeframe.

FREQUENTLY ASKED QUESTIONS?

1. Can I bank hours from previous renewal? **No**
2. I am going to school for higher degrees in nursing will those courses count? **A two credit hour semester course will meet your renewal CEU requirement.**
3. What about going to an oncology conference for physicians specializing in Chemotherapy? **NSBN accepts CEU that are relevant to your nursing practice that is approved by other healthcare boards.**
4. I don't want to go for further degree in nursing I want an MBA will anything count? **Again a two credit semester course in cultural diversity, communication, sociology, psychology, or computer courses that will also improve your nursing skills will be accepted.**
5. Computerized printouts of courses taken with dates times and titles are now being accepted as many hospitals offer education programs for staff from an online education source.
6. When in doubt call the NSBN and **ask for the education department 702 668-4528.**





Searching for a friendly, family-oriented work environment in the Southwest region?

Picture yourself at MMC

- Las Cruces is a Growing City with Small Town Appeal
- Competitive Pay
- 401K Plan
- Great Benefits
- Relocation Assistance



Visit us at mmclc.org and apply online

Nevada State Board of Nursing
 5011 Meadowood Mall Way, Suite 300
 Reno, NV 89502-6547

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

WELCOME
 TO Fabulous
LAS VEGAS
UNIFORMS

LAS VEGAS UNIFORMS

*Specializing in Medical, Security,
 Construction, Restaurant and more*

734-7070

LAS VEGAS
 Logos & Embroidery

**LAS VEGAS LOGOS
 & EMBROIDERY**

*Logo Digitization, Embroidery,
 Patches, Alterations*

740-7070

LAS VEGAS
TACTICAL

LAS VEGAS TACTICAL

*Law Enforcement, Security, Military,
 EMS, and Firefighters*

739-7070

LasVegasUniforms.com

LVEmbroidery.com

LasVegasTactical.com



KOI CLEARANCE from \$9.99 • Scrubs from \$5.00

**We GUARANTEE our
 warehouse prices to
 be the LOWEST you
 will find!**

10% Off ENTIRE STORE
 July 1, 2013 – September 30, 2013
Sale items not included
 PLEASE PRESENT COUPON AT TIME OF
 PURCHASE
LAS VEGAS UNIFORMS

**Open 7 days a week,
 Mon-Sat 10am-6pm
 Sun Noon-5pm**



LasVegasUniforms.com
LVEmbroidery.com
LasVegasTactical.com

967 E. Sahara Avenue & 953 E. Sahara, Ste B-20
 Las Vegas, NV 89104
One Block West of Maryland Parkway

