Statutes and Regulations

Nursing

September 2025

DEPARTMENT OF COMMERCE, COMMUNITY,
AND ECONOMIC DEVELOPMENT

**DIVISION OF CORPORATIONS, BUSINESS
AND PROFESSIONAL LICENSING**

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CHAPTER 68.
NURSING

Article

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ARTICLE 1.
BOARD OF NURSING

Section

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Sec. 08.68.010. Creation and membership of Board of Nursing. There is created a Board of Nursing, consisting of seven members appointed by the governor as follows:

(1) one member shall be a licensed practical nurse who is currently engaged in licensed practical nursing and has practiced for at least two years immediately preceding appointment;

(2) one member shall be a registered nurse engaged in nursing education at the associate, baccalaureate, or graduate degree level at an institution that holds national nursing accreditation;

(3) one member shall be an advanced practice registered nurse who is currently engaged in advanced practice registered nursing and has practiced for at least four years immediately preceding appointment;

(4) two members shall be registered nurses at large who are currently engaged in registered nursing and have practiced for at least four years immediately preceding appointment; and

(5) two members shall be persons who have no direct financial interest in the health care industry.

Sec. 08.68.060. Qualifications of registered nurse and licensed practical nurse board members. *[Repealed, Sec. 15 ch 29 SLA 2014.]*

Sec. 08.68.070. Election of Officers. The board shall annually elect a chairman and secretary from among its members.

Sec. 08.68.080. Meetings. The board shall meet at least four times a year.

Sec. 08.68.090. Quorum. A majority of the board constitutes a quorum.

Sec. 08.68.100. Duties and powers of board. (a) The board shall

(1) adopt regulations necessary to implement this chapter, including regulations

(A) pertaining to practice as an advanced practice registered nurse, including requirements for an advanced practice registered nurse to practice as a certified registered nurse anesthetist, certified clinical nurse specialist, certified nurse practitioner, or certified nurse midwife; regulations for an advanced practice registered nurse who holds a valid federal Drug Enforcement Administration registration number must address training in pain management and opioid use and addiction;

(B) necessary to implement AS 08.68.331 – 08.68.336 relating to certified nurse aides in order to protect the health, safety, and welfare of clients served by nurse aides;

(C) pertaining to retired nurse status;

(D) establishing criteria for approval of practical nurse education programs that are not accredited by a national nursing accrediting body; and

(E) establishing guidelines for rendering a diagnosis, providing treatment, or prescribing, dispensing, or administering a prescription drug to a person without conducting a physical examination under AS 08.68.710; the guidelines must include a nationally recognized model policy for standards of care of a patient who is at a different location than the advanced practice registered nurse;

(2) approve curricula and adopt standards for basic education programs that prepare persons for licensing under AS 08.68.190;

(3) provide for surveys of the basic nursing education programs in the state at the times it considers necessary;

(4) approve education programs that meet the requirements of this chapter and of the board, and deny, revoke, or suspend approval of education programs for failure to meet the requirements;

(5) examine, license, and renew the licenses of qualified applicants;

(6) prescribe requirements for competence before a former registered, advanced practice registered, or licensed practical nurse may resume the practice of nursing under this chapter;

(7) define by regulation the qualifications and duties of the executive administrator and delegate authority to the executive administrator that is necessary to conduct board business;

(8) develop reasonable and uniform standards for nursing practice;

(9) publish advisory opinions regarding whether nursing practice procedures or policies comply with acceptable standards of nursing practice as defined under this chapter;

(10) require applicants under this chapter to submit fingerprints and the fees required by the Department of Public Safety under AS 12.62.160 for criminal justice information and a national criminal history record check; the department shall submit the fingerprints and fees to the Department of Public Safety for a report of criminal justice information under AS 12.62 and a national criminal history record check under AS 12.62.400;

(11) require that a licensed advanced practice registered nurse who has a federal Drug Enforcement Administration registration number register with the controlled substance prescription database under AS 17.30.200(n).

(b) The board may

(1) conduct hearings upon charges of alleged violations of this chapter or regulations adopted under it;

(2) invoke, or request the department to invoke, disciplinary action against a licensee;

(3) prescribe requirements for competence to continue practice.

Sec. 08.68.111. Executive administrator of the board. (a) The Department of Commerce, Community, and Economic Development, in consultation with the board, shall employ a licensed registered nurse who holds, at a minimum, a master's degree in nursing and who is not a member of the board to serve as executive administrator of the board.

(b) The executive administrator shall perform duties as prescribed by the board.

(c) *[Repealed, Sec. 29 ch 14 SLA 1982.]*

(d) *[Repealed, Sec. 1 ch 129 SLA 1974.]*

Sec. 08.68.140. Applicability of Administrative Procedure Act. Except as specified in AS 08.68.333(f), the board shall comply with AS 44.62 (Administrative Procedure Act).

Sec. 08.68.150. Expenses. Members of the board are entitled to the per diem and travel expenses allowed by law.

ARTICLE 2.
EXAMINATION AND LICENSING

Section

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Sec. 08.68.160. License required. A person practicing or offering to practice registered, advanced practice registered, or practical nursing in the state shall submit evidence of qualification to practice and shall be licensed under this chapter.

Sec. 08.68.170. Qualifications of registered or practical nurse applicants. (a) An applicant for a license to practice registered nursing shall submit to the board, on forms and in the manner prescribed by the board, written evidence, verified by oath, that the applicant has successfully completed a registered nurse education program accredited by a national nursing accrediting body and approved by the board.

(b) An applicant for a license to practice practical nursing shall submit to the board, on forms and in the manner prescribed by the board, written evidence, verified by oath, that the applicant has successfully completed

(1) a practical nurse education program accredited by a national nursing accrediting body;

(2) a practical nurse education program that meets the criteria established by the board under AS 08.68.100; or

(3) a registered nurse education program accredited by a national nursing accrediting body and approved by the board and, if the applicant has failed the registered nurse licensing examination, a practical nurse scope of practice course approved by the board.

(c) An applicant for a license to practice advanced practice registered nursing shall submit to the board, on forms and in the manner prescribed by the board, written evidence, verified by oath, that the applicant

(1) is licensed as a registered nurse in the state; and

(2) has successfully completed an advanced practice registered nurse education program that meets the criteria established by the board under AS 08.68.100.

Sec. 08.68.180. Qualifications of certain practical nurse applicants. *[Repealed, Sec. 15 ch 29 SLA 2014.]*

Sec. 08.68.190. License by examination. (a) An applicant for a license to practice

(1) registered or practical nursing shall pass a registered nursing or practical nursing licensing examination as prescribed by the board;

(2) advanced practice registered nursing shall pass an advanced practice registered nursing certification examination as prescribed by the board.

(b) If an applicant meets the qualifications set out in AS 08.68.170 for the license for which the applicant applied, the board shall issue a license to practice

(1) registered or practical nursing to an applicant who passes the licensing examination to practice registered or practical nursing; or

(2) advanced practice registered nursing to an applicant who passes the advanced practice registered nursing certification examination to practice advanced practice registered nursing.

Sec. 08.68.200. License by endorsement. (a) The board may issue a license by endorsement to practice as a registered, advanced practice registered, or practical nurse, whichever is appropriate, to an applicant who has worked as a nurse within the past five years if the applicant is licensed as a registered, advanced practice registered, or practical nurse under the laws of another state if, in the opinion of the board, the applicant meets the qualifications required for licensing in the state and meets the requirements of AS 08.68.170.

(b) The board may issue a license by endorsement to practice as a registered, advanced practice registered, or practical nurse, whichever is appropriate, to an applicant who has not worked as a nurse within the past five years if the applicant meets the requirements of (a) of this section and

(1) meets the continuing competency requirements of the board; or

(2) completes a course of study approved by the board.

Sec. 08.68.210. Temporary permits. (a) The board may issue a temporary permit, nonrenewable and valid for a period not exceeding six months, to an applicant for a license by endorsement if the applicant

(1) submits proof satisfactory to the board that the applicant is currently licensed in another state under AS 08.68.200(a);

(2) meets the requirements of AS 08.68.170; and

(3) pays the required fee.

(b) The board may issue a nonrenewable permit to an applicant for license by examination if the applicant meets the qualifications of AS 08.68.170. The permit is valid for a period not to exceed six months or the date on which the results of the licensing examination taken by the applicant are received by the applicant, whichever is sooner. If the applicant does not take the examination for which the applicant is scheduled, the permit lapses on the day of the examination.

(c) The board may issue a nonrenewable temporary permit, valid for a period not to exceed six months, to a person applying for reinstatement of a lapsed license under AS 08.68.251 if the person meets the requirements established by the board in regulation.

Sec. 08.68.220. Fees. The Department of Commerce, Community, and Economic Development shall set fees under AS 08.01.065 for each of the following:

(1) registered nursing:

(A) application;

(B) license by examination;

(C) license by endorsement;

(D) license renewal;
(E) temporary permit;
(2) practical nursing:
(A) application;
(B) license by examination;
(C) license by endorsement;
(D) license renewal;
(E) temporary permit;
(3) advanced practice registered nursing:
(A) application;
(B) license by certification examination;
(C) license by endorsement;
(D) license renewal;
(E) temporary permit.

Sec. 08.68.230. Use of title and abbreviation. (a) A person licensed to practice registered nursing in the state may use the title "registered nurse" and the abbreviation "R.N."

(b) A person licensed to practice practical nursing in the state may use the title "licensed practical nurse" and the abbreviation "L.P.N."

(c) *[Repealed, Sec. 15 ch 29 SLA 2014.]*

(d) A person who holds a temporary permit to practice as a licensed practical nurse shall use the title "Temporary Licensed Practical Nurse" and the abbreviation "TLPN."

(e) A person licensed to practice advanced practice registered nursing in the state may use the title "advanced practice registered nurse" and the abbreviation "APRN."

(f) A person licensed to practice advanced practice registered nursing in the state as a

(1) certified registered nurse anesthetist may use the title "certified registered nurse anesthetist" and the abbreviation "CRNA";

(2) certified clinical nurse specialist may use the title "clinical nurse specialist" and the abbreviation "CNS";

(3) certified nurse practitioner may use the title "certified nurse practitioner" and the abbreviation "CNP"; or

(4) certified nurse midwife may use the title "certified nurse midwife" and the abbreviation "CNM."

Sec. 08.68.240. Nurses licensed or holding temporary permits under previous law. *[Repealed, Sec. 15 ch 29 SLA 2014.]*

Sec. 08.68.251. Lapsed licenses. (a) A lapsed license may be reinstated if it has not remained lapsed for more than five years by payment of the license fees for the current renewal period and the penalty fee. The board, by regulation, shall establish continuing competency and criminal background check requirements for reinstatement of a lapsed license.

(b) If a license is lapsed for more than five years, in addition to the requirements in (a) of this section,

(1) the board shall require the applicant to complete a course of study approved by the board or to pass an examination prescribed by the board, and to pay the fees prescribed by this chapter; or

(2) if the board determines that the person applying for reinstatement was actively employed in nursing in another state or jurisdiction during the time that the license has lapsed in this state, the license that has lapsed may be reinstated by payment of fees and completion of the other requirements in (a) of this section.

Sec. 08.68.265. Supervision of practical nurses. A practical nurse shall work under the supervision of a licensed registered or advanced practice registered nurse, a licensed physician, a licensed physician assistant, or a licensed dentist.

Sec. 08.68.270. Grounds for denial, suspension, or revocation. The board may deny, suspend, or revoke the license of a person who

(1) has obtained or attempted to obtain a license to practice nursing by fraud or deceit;

(2) has been convicted of a felony or other crime if the felony or other crime is substantially related to the qualifications, functions, or duties of the licensee;

(3) habitually abuses alcoholic beverages, or illegally uses controlled substances;

(4) has impersonated a registered, advanced practice registered, or practical nurse;

(5) has intentionally or negligently engaged in conduct that has resulted in a significant risk to the health or safety of a client or in injury to a client;

(6) practices or attempts to practice nursing while afflicted with physical or mental illness, deterioration, or disability that interferes with the individual's performance of nursing functions;

(7) is guilty of unprofessional conduct as defined by regulations adopted by the board;

(8) has willfully or repeatedly violated a provision of this chapter or regulations adopted under this chapter or AS 08.01;

(9) is professionally incompetent;

(10) denies care or treatment to a patient or person seeking assistance if the sole reason for the denial is the failure or refusal of the patient or person seeking assistance to agree to arbitrate as provided in AS 09.55.535(a);

(11) has prescribed or dispensed an opioid in excess of the maximum dosage authorized under AS 08.68.705; or

(12) has procured, sold, prescribed, or dispensed drugs in violation of a law, regardless of whether there has been a criminal action or harm to the patient.

Sec. 08.68.275. Disciplinary sanctions. (a) The board may take the following disciplinary actions singly or in combination:

(1) permanently revoke a license or permit to practice;

(2) suspend a license for a stated period of time;

(3) censure a licensee;

(4) issue a letter of reprimand;

(5) impose limitations or conditions on the professional practice of a licensee;

(6) impose peer review;

(7) impose professional education requirements until a satisfactory degree of skill has been attained in those aspects of professional practice determined by the board to need improvement;

(8) impose probation and require the licensee to report regularly to the board upon matters involving the basis for the probation;

(9) accept a voluntary surrender of a license.

(b) The board may withdraw probation status if it finds that the deficiencies that required the sanction have been remedied.

(c) The board may summarily suspend a licensee before final hearing or during the appeals process if the board finds that the licensee poses a clear and immediate danger to the public health and safety. A person whose license is suspended under this section is entitled to a hearing conducted by the office of administrative hearings (AS 44.64.010) within seven days after the effective date of the order. If, after a hearing, the board upholds the suspension, the licensee may appeal the suspension to a court of competent jurisdiction.

(d) The board may reinstate a license that has been suspended or revoked if the board finds, after a hearing, that the applicant is able to practice with skill and safety.

(e) The board may return a license that has been voluntarily surrendered if the board determines that the licensee is competent to resume practice and that the applicable renewal fees are paid.

(f) The board shall seek consistency in the application of disciplinary sanctions. A significant departure from prior decisions involving similar situations shall be explained in the findings of fact or order.

Sec. 08.68.276. Continuing competence required. A license to practice nursing may not be renewed unless the nurse has complied with continuing competence requirements established by the board by regulation. The board shall adopt regulations for renewal of a license of an advanced practice registered nurse. The regulations must require that a licensee receive not less than two hours of education in pain management and opioid use and addiction in the two years preceding an application for renewal of a license unless the licensee has demonstrated to the satisfaction of the board that the licensee does not currently hold a valid federal Drug Enforcement Administration registration number.

Sec. 08.68.277. Duty of employers to report. (a) An employer of a nurse licensed under this chapter or a nurse aide certified under this chapter practicing within the scope of that license or certification that discharges or suspends a nurse or nurse aide or conditions or restricts the practice of a nurse or nurse aide shall, within seven working days after the action, report to the board the name and address of the person and the reason for the action. An employer shall report to the board the name and address of a nurse or nurse aide who resigns while under investigation by the employer. The requirement of an employer to report under this section applies only to a discharge, suspension, or restriction of practice that is based on a ground allowing action by the board under AS 08.68.270 or 08.68.334 or for conduct prohibited under AS 08.68.340.

(b) Upon receipt of a report under (a) of this section, the board shall investigate the matter and take appropriate action under AS 08.68.275.

Sec. 08.68.278. Immunity for certain reports to the board. A person who, in good faith, reports information to the board relating to alleged incidents of incompetent, unprofessional, or unlawful conduct of a nurse licensed under this chapter, a nurse aide certified under this chapter, or an employer of a nurse licensed under this chapter or a nurse aide certified under this chapter who reports to the board the information required under AS 08.68.277 is not liable in a civil action for damages resulting from the reporting of the information.

Sec. 08.68.279. Whistleblower protection for nurses concerning delegated duties. An employer may not discharge, threaten, or otherwise discriminate against a nurse employed by the employer regarding the nurse's compensation, terms, conditions, location, or privileges of employment for the nurse's refusal to perform a task involving nursing care delegated to the nurse by the nurse's superior if

(1) the nurse alleges that the task was improperly delegated;

(2) the nurse reports the attempted improper delegation to the board within 24 hours after the attempted delegation was made; and

(3) the board finds that the task was improperly delegated.

ARTICLE 3.
NURSING EDUCATION PROGRAMS

Section

280. Nursing education program prohibited unless approved
290. Application for accreditation
330. List of approved programs

Sec. 08.68.280. Nursing education program prohibited unless approved. A person, institution, or agency may not conduct a nursing education program that prepares persons for examination or licensing unless the program is approved by the board. A program may be approved by the board only if it is established through an approved postsecondary educational institution.

Sec. 08.68.290. Application for accreditation. An institution desiring to conduct a nursing education program to prepare registered, advanced practice registered, or practical nurses shall apply to the board and submit evidence that it is prepared to

(1) carry out the curriculum approved by the board for registered nursing, advanced practice registered nursing, or practical nursing; and

(2) meet other standards established by law and by the board.

Sec. 08.68.330. List of approved programs. The board shall prepare, maintain, and from time to time publish a list of approved nursing education programs in the state.

ARTICLE 4.
CERTIFIED NURSE AIDES

Section

331. Certification of nurse aides
332. Use of title
333. Registry of certified nurse aides
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335. Immunity for certain reports to the board
336. Fees

Sec. 08.68.331. Certification of nurse aides. (a) The board or the Department of Commerce, Community, and Economic Development, as designated by the board, shall issue certification as a nurse aide to qualified applicants. The board, after consultation with affected agencies, may adopt regulations regarding the certification of nurse aides, including

(1) the training, educational, and other qualifications for certification that will ensure that the nurse aides are competent to perform the tasks of their occupation;

(2) application, certification, renewal, and revocation procedures; and

(3) maintenance of a registry of certified nurse aides.

(b) The board may

(1) conduct hearings upon charges of alleged violations of this chapter or regulations adopted under it; and

(2) invoke, or request the department to invoke, disciplinary action under AS 08.01.075 against a certified nurse aide.

Sec. 08.68.332. Use of title. (a) A person may not use the title "certified nurse aide" or the abbreviation "C.N.A." unless the person is certified under this chapter.

(b) A person who knowingly violates this Section is guilty of a class B misdemeanor. In this subsection, "knowingly" has the meaning given in AS 11.81.900(a)

Sec. 08.68.333. Registry of certified nurse aides. (a) The board shall maintain a registry of certified nurse aides. At a minimum, this registry must include the information required under federal regulations that are applicable to nurse aides found to have committed abuse, neglect, or misappropriation of property in connection with their employment by a facility participating in the Medicaid or Medicare program.

(b) If the board finds that a certified nurse aide has committed abuse, neglect, or misappropriation of property in connection with employment as a nurse aide, the board shall revoke the nurse aide's certification and enter the finding in the registry.

(c) Upon receiving a notice of a finding under AS 47.05.055 that a certified nurse aide has committed abuse, neglect, or misappropriation of property, the board shall immediately revoke the nurse aide's certification without a hearing, enter the finding in the registry, and notify the nurse aide of the revocation and entry of the finding. Notice is considered given when delivered personally to the nurse aide or deposited in the United States mail addressed to the nurse aide's last known mailing address on file with the board. The department shall retain proof of mailing.

(d) If the certified nurse aide is employed in a skilled nursing facility or a nursing facility, other than an intermediate care facility for persons with intellectual and developmental disabilities, that is participating in the Medicaid or Medicare program, only the state survey and certification agency may make, and report to the board a finding that the certified nurse aide has committed abuse, neglect, or misappropriation of property in connection with the nurse aide's employment at the facility.

(e) The board shall establish procedures under which a finding under AS 47.05.055 that a certified nurse aide has committed abuse, neglect, or misappropriation of property and the resulting revocation of certification will be removed from the registry if the certified nurse aide requests a hearing and can establish mistaken identity or the finding has been set aside by the reporting agency or by a court of competent jurisdiction.

(f) AS 44.62.330 - 44.62.630 do not apply to actions taken under (c) of this section.

Sec. 08.68.334. Grounds for denial, suspension, or revocation of certificate. The board may deny a certification to, or impose a disciplinary sanction authorized under AS 08.01.075 against, a person who

(1) has obtained or attempted to obtain certification as a nurse aide by fraud, deceit, or intentional misrepresentation;

(2) has been convicted of a crime substantially related to the qualifications, functions, or duties of a certified nurse aide;

(3) has impersonated a registered, advanced practice registered, or practical nurse or other licensed health care provider;

(4) has intentionally or negligently engaged in conduct that has resulted in a significant risk to the health or safety of a client or in injury to a client;

(5) is incapable of working as a certified nurse aide with reasonable skill, competence, and safety for the public because of

(A) professional incompetence;

(B) addiction or severe dependency on alcohol or a drug that impairs the licensee's ability to practice safely;

(C) physical or mental disability; or

(D) other factors determined by the board;

(6) has knowingly or repeatedly failed to comply with this chapter, a regulation adopted under this chapter, or with an order of the board; or

(7) has misappropriated the property of, abused, or neglected a client.

Sec. 08.68.335. Immunity for certain reports to the board. A person who, in good faith, reports information to the board relating to alleged incidents of incompetent, unprofessional, or unlawful conduct of a certified nurse aide is not liable in a civil action for damages resulting from the reporting of the information.

Sec. 08.68.336. Fees. The Department of Commerce, Community, and Economic Development shall set fees under AS 08.01.065 for certified nurse aides for each of the following:

(1) application;

(2) examination;

(3) certification; and

(4) renewal of certification.

ARTICLE 5.
UNLAWFUL ACTS

Section

340. Prohibited conduct
360. Unlicensed practice a public nuisance
370. Application for injunction
380. Issuance of injunction
390. Remedy not exclusive

Sec. 08.68.340. Prohibited conduct. (a) It is a class B misdemeanor for a person to

(1) practice nursing under a diploma, license, or record that is unlawfully obtained, signed, or issued;

(2) practice or offer to practice nursing without a license, unless the person is practicing within the scope of a delegation properly made under AS 08.68.805 or is giving necessary aid to the ill, injured, or infirm in an emergency;

(3) employ as a nurse a person who is not licensed to practice nursing;

(4) use in connection with the person's name a designation that implies that the person is a licensed nurse unless the person is licensed;

(5) practice nursing during the time that the person's license is suspended or revoked;

(6) practice nursing with knowledge that the person's license has lapsed;

(7) conduct a nursing education program and represent or imply that it is accredited by the board, unless the program has been accredited by the board.

(b) It is a class A misdemeanor for a person to knowingly or intentionally do any of the acts described in (a)(1) - (5) and (7) of this section.

(c) It is a violation for a person to practice nursing during the time that the person's license has lapsed if the person does not know that the license has lapsed.

Sec. 08.68.360. Unlicensed practice a public nuisance. The practice of registered, advanced practice registered, or practical nursing for compensation by a person who is not licensed, or whose license is suspended, or revoked, or expired, is declared to be inimical to the public welfare and to constitute a public nuisance.

Sec. 08.68.370. Application for injunction. The board may apply for an injunction in a competent court to enjoin a person not licensed or whose license is suspended or revoked or expired from practicing registered, advanced practice registered, or practical nursing. The court may issue a temporary injunction enjoining the defendant from practicing registered, advanced practice registered, or practical nursing.

Sec. 08.68.380. Issuance of injunction. If it is established that the defendant has been or is practicing registered, advanced practice registered, or practical nursing without a license or has been or is practicing nursing after the defendant's license has been suspended or revoked, or has expired, the court may enjoin the defendant from further practice.

Sec. 08.68.390. Remedy not exclusive. If a person violates an injunction issued under this section, the person may be punished for contempt of court. The injunction proceeding is in addition to other penalties and remedies provided in this chapter.

ARTICLE 6.
MISCELLANEOUS PROVISIONS

Section

700. Determination of death by registered nurse
705. Maximum dosage for opioid prescriptions
710. Prescription of drugs without physical examination

Sec. 08.68.700. Determination of death by registered nurse. (a) A registered nurse licensed under this chapter may make a determination and pronouncement of death of a person under the following circumstances:

(1) an attending physician, an attending advanced practice registered nurse, or an attending physician assistant has documented in the person's medical or clinical record that the person's death is anticipated due to illness, infirmity, or disease; this prognosis is valid for purposes of this section for not more than 120 days from the date of the documentation;

(2) at the time of documentation under (1) of this subsection, the physician, the advanced practice registered nurse, or the physician assistant authorized in writing a specific registered nurse or nurses to make a determination and pronouncement of the person's death; however, if the person is in a health care facility and the health care facility has complied with (d) of this section, the physician, the advanced practice registered nurse, or the physician assistant may authorize all nurses employed by the facility to make a determination and pronouncement of the person's death.

(b) A registered nurse who has determined and pronounced death under this section shall document the clinical criteria for the determination and pronouncement in the person's medical or clinical record and notify the physician, the advanced practice registered nurse, or the physician assistant who determined that the prognosis for the patient was for an anticipated death. The registered nurse shall sign the death certificate, which must include the

(1) name of the deceased;

(2) presence of a contagious disease, if known; and

(3) date and time of death.

(c) Except as otherwise provided under AS 18.50.230, a physician or physician assistant licensed under AS 08.64 or an advanced practice registered nurse licensed under this chapter shall certify a death determined under (b) of this section within 24 hours after the pronouncement by the registered nurse.

(d) In a health care facility in which a physician, an advanced practice registered nurse, or a physician assistant chooses to proceed under (a) of this section, written policies and procedures shall be adopted that provide for the determination and pronouncement of death by a registered nurse authorized by a physician, an advanced practice registered nurse, or a physician assistant under this section. A registered nurse employed by a health care facility and authorized by a physician, an advanced practice registered nurse, or a physician assistant to make a determination and pronouncement of death under this section may not make the determination or pronouncement unless the facility has written policies and procedures implementing and ensuring compliance with this section.

(e) Notwithstanding AS 08.68.800(a)(1), this section applies to a qualified nurse described in AS 08.68.800(a)(1) who is employed by a federal health care facility.

(f) The Department of Health may adopt regulations to implement this section.

(g) In this section

(1) "determination of death" means observation and assessment that a person is dead, as defined in AS 09.68.120;

(2) "health care facility" means a private, municipal, state, or federal hospital, psychiatric hospital, tuberculosis hospital, skilled nursing facility, kidney disease treatment center (excluding freestanding hemodialysis units), intermediate care facility, or Alaska Pioneers' Home or Alaska Veterans' Home administered by the Department of Family and Community Services under AS 47.55.

Sec. 08.68.705. Maximum dosage for opioid prescriptions. (a) An advanced practice registered nurse may not issue

(1) an initial prescription for an opioid that exceeds a seven-day supply to an adult patient for outpatient use;

(2) a prescription for an opioid that exceeds a seven-day supply to a minor; at the time an advanced practice registered nurse writes a prescription for an opioid for a minor, the advanced practice registered nurse shall discuss with the parent or guardian of the minor why the prescription is necessary and the risks associated with opioid use.

(b) Notwithstanding (a) of this section, an advanced practice registered nurse may issue a prescription for an opioid that exceeds a seven-day supply to an adult or minor patient if, in the professional judgment of the advanced practice registered nurse, more than a seven-day supply of an opioid is necessary for

(1) the patient's acute medical condition, chronic pain management, pain associated with cancer, or pain experienced while the patient is in palliative care; the advanced practice registered nurse may write a prescription for an opioid for the quantity needed to treat the patient's medical condition, chronic pain, pain associated with cancer, or pain experienced while the patient is in palliative care; the advanced practice registered nurse shall document in the patient's medical record the condition triggering the prescription of an opioid in a quantity that exceeds a seven-day supply and indicate that a nonopioid alternative was not appropriate to address the medical condition; or

(2) a patient who is unable to access a practitioner within the time necessary for a refill of the seven-day supply because of a logistical or travel barrier; the advanced practice registered nurse may write a prescription for an opioid for the quantity needed to treat the patient for the time that the patient is unable to access a practitioner; the advanced practice registered nurse shall document in the patient's medical record the reason for the prescription of an opioid in a quantity that exceeds a seven-day supply and indicate that a nonopioid alternative was not appropriate to address the medical condition; in this paragraph, "practitioner" has the meaning given in AS 11.71.900.

(c) This section does not authorize an advanced practice registered nurse to prescribe a controlled substance if the advanced practice registered nurse is not otherwise authorized to prescribe a controlled substance under policies, procedures, or regulations issued or adopted by the board.

(d) In this section,

(1) "adult" means

(A) an individual who has reached 18 years of age; or

(B) an emancipated minor;

(2) "emancipated minor" means a minor whose disabilities have been removed for general purposes under AS 09.55.590;

(3) "minor" means an individual under 18 years of age who is not an emancipated minor.

Sec. 08.68.710. Prescription of drugs without physical examination. (a) The board may not impose disciplinary sanctions on an advanced practice registered nurse for rendering a diagnosis, providing treatment, or prescribing, dispensing, or administering a prescription drug that is not a controlled substance to a person without conducting a physical examination if

(1) the advanced practice registered nurse or another licensed health care provider in the medical practice is available to provide follow-up care; and

(2) the advanced practice registered nurse requests that the person consent to sending a copy of all records of the encounter to the person's primary care provider if the prescribing advanced practice registered nurse is not the person's primary care provider and, if the person consents, the advanced practice registered nurse sends the records to the person's primary care provider.

(b) The board may not impose disciplinary sanctions on an advanced practice registered nurse for prescribing, dispensing, or administering a prescription drug that is a controlled substance if the requirements under (a) of this section and AS 08.68.705 are met and the advanced practice registered nurse prescribes, dispenses, or administers the controlled substance.

(c) Notwithstanding (a) and (b) of this section, an advanced practice registered nurse may not prescribe, dispense, or administer a prescription drug in response to an Internet questionnaire or electronic mail message to a person with whom the advanced practice registered nurse does not have a prior provider-patient relationship.

(d) In this section,

(1) "controlled substance" has the meaning given in AS 11.71.900;

(2) "prescription drug" has the meaning given in AS 08.80.480;

(3) "primary care provider" has the meaning given in AS 21.07.250.

ARTICLE 7.
GENERAL PROVISIONS

Section

800. Exceptions to application of chapter
805. Delegation of nursing functions
850. Definitions

Sec. 08.68.800. Exceptions to application of chapter. (a) This chapter does not apply to

(1) a qualified nurse licensed in another state employed by the United States Government or a bureau, or agency, or division of the United States Government while in the discharge of official duties;

(2) nursing service given temporarily in the event of a public emergency, epidemic, or disaster;

(3) the practice of nursing by a student enrolled in a nursing education program accredited by the board when the practice is in connection with the student's course of study;

(4) the practice of nursing by an individual enrolled in an approved program or course of study approved by the board to satisfy the requirements of AS 08.68.251;

(5) the practice of nursing by a nurse licensed in another state who engages in nursing education or nursing consultation activities, if these activities and contact with clients do not exceed 20 working days within a licensing period; or

(6) the practice of nursing by a nurse licensed in another state whose employment responsibilities include transporting patients into, out of, or through this state; however, this exception is valid for a period not to exceed 48 hours for each transport.

(b) In this section, the word "nurses" includes registered and practical nurses, and "nursing" means registered and practical nursing.

Sec. 08.68.805. Delegation of nursing functions. A registered, advanced practice registered, or practical nurse licensed under this chapter may delegate nursing duties to other persons, including unlicensed assistive personnel, under regulations adopted by the board. A person to whom the nursing duties are delegated may perform the delegated duties without a license or certificate under this chapter if the person meets the applicable requirements established by the board.

Sec. AS 08.68.850. Definitions. In this chapter

(1) "advanced practice registered nurse" means a registered nurse licensed to practice in the state who, because of specialized education and experience, is certified to perform acts of medical diagnosis and the prescription and dispensing of medical, therapeutic, or corrective measures under regulations adopted by the board;

(2) "board" means the Board of Nursing;

(3) "certified nurse aide" is a person who is certified as a nurse aide by the board;

(4) "incompetent" means that a nurse does not possess the skills, knowledge, and awareness of the nurse's limitations and abilities to safely practice nursing;

(5) "licensed practical nurse" is equivalent to the title "licensed vocational nurse" and to the name suffix abbreviations L.P.N. and L.V.N.;

(6) "licensed registered nurse" is equivalent to the common title "registered nurse" and the name suffix abbreviation R.N.;

(7) *[Repealed, Sec. 60 ch 33 SLA 2016.]*;

(8) "opioid" includes the opium and opiate substances and opium and opiate derivatives listed in AS 11.71.140 and 11.71.160;

(9) "practice of advanced practice registered nursing" includes, in addition to the practice of registered nursing, the performance of acts of medical diagnosis and the prescription and dispensing of medical, therapeutic, or corrective measures under regulations adopted by the board;

(10) "practice of practical nursing" means the performance for compensation or personal profit of nursing functions that do not require the substantial specialized skill, judgment, and knowledge of a registered nurse;

(11) "practice of registered nursing" means the performance for compensation or personal profit of acts of professional service that requires substantial specialized knowledge, judgment, and skill based on the principles of biological, physiological, behavioral, and sociological sciences in assessing and responding to the health needs of individuals, families, or communities through services that include

(A) assessment of problems, counseling, and teaching
(i) clients to maintain health or prevent illness; and
(ii) in the care of the ill, injured, or infirm;
(B) administration, supervision, delegation, and evaluation of nursing practice;
(C) teaching others the skills of nursing;
(D) execution of a medical regimen as prescribed by a person authorized by the state to practice medicine;
(E) performance of other acts that require education and training that are recognized by the nursing profession as properly performed by registered nurses;
(F) performance of acts of medical diagnosis and the prescription of medical therapeutic or corrective measures under regulations adopted by the board;
(12) "unlicensed assistive personnel" means persons, such as orderlies, assistants, attendants, technicians, members of a nursing client's immediate family, or the guardian of a nursing client, who are not licensed to practice practical nursing, registered nursing, medicine, or any other health occupation that requires a license in this state.

CHAPTER 44.
BOARD OF NURSING.

Article

1. **Nursing Education of Registered and Practical Nurses (12 AAC 44.010 — 12 AAC 44.140)**
2. **(Repealed)**
3. **Examinations and Licensure (12 AAC 44.290 — 12 AAC 44.321)**
4. **Advanced Practice Registered Nurse (12 AAC 44.322 — 12 AAC 44.490)**
5. **Certified Registered Nurse Anesthetists (12 AAC 44.500 — 12 AAC 44.560)**
6. **Continuing Competency (12 AAC 44.600 — 12 AAC 44.660)**
7. **Disciplinary Guidelines (12 AAC 44.700 — 12 AAC 44.785)**
8. **Certified Nurse Aide (12 AAC 44.800 — 12 AAC 44.895)**
9. **General Provisions (12 AAC 44.900 — 12 AAC 44.990)**

ARTICLE 1.
NURSING EDUCATION OF REGISTERED AND PRACTICAL NURSES.

Section

10. **Purpose of educational program approval**
20. **Types of program approval**
30. **Survey**
40. **Establishment of nursing education program**
50. **Discontinuance of program**
52. **Denial, revocation, and reinstatement of program approval**
55. **Review of nursing education programs**
60. **Organization and administration**
72. **Resources, facilities, and services**
90. **Faculty**
130. **Curriculum requirements**
135. **Evaluation of nurse practitioner programs**
137. **Licensed practical nurse scope of practice**
140. **Reports**

12 AAC 44.010. PURPOSE OF EDUCATION PROGRAM APPROVAL. The purpose of board approval of educational programs is

(1) to assure the safe practice of nursing by setting minimum requirements for the conduct of nursing education programs that prepare the nurse for practice;

(2) to assure the graduate of educational eligibility for admission to the licensing examination for nurses in Alaska; and

(3) to assure within the nursing education program the implementation of a comprehensive plan for the ongoing evaluation of that program.

Authority: AS 08.68.100(a) AS 08.68.290

12 AAC 44.020. TYPES OF PROGRAM APPROVAL. (a) Full approval is granted to a nursing education program that has met the requirements set out in 12 AAC 44.010 – 12 AAC 44.140.

(b) Provisional approval may be granted to a nursing education program that has not been in operation long enough to meet the requirements set out in 12 AAC 44.010 – 12 AAC 44.140. A nursing education program that is granted provisional approval may conduct the program and offer nursing classes and clinical instruction until the board's final decision on the program's application for full approval under 12 AAC 44.040.

(c) Conditional approval is granted to a nursing education program as described in 12 AAC 44.055.

Authority: AS 08.68.100 AS 08.68.280 AS 08.68.290

12 AAC 44.030. SURVEY. (a) The completed application for provisional approval must be submitted to the board when the nursing education program is ready for a survey visit.

(b) A survey of each nursing education program, including affiliations and statewide facilities, is required for the purpose of provisional approval and full approval. The survey must be made by one or more representatives of the board, and may include an educational consultant, as designated by the board.

(c) Each nursing education program shall permit periodic surveys by the board or its designated representative for the purpose of determining compliance with educational program standards. Each nursing education program shall permit a representative of the board to be included in national accreditation survey visits.

(d) Prior to a survey visit, specific information will be requested by the board.

(e) Repealed 4/2/86.

(f) For purposes of this section, a survey is an evaluation of all aspects of the proposed or existing program, including faculty credentials and facilities. A survey may include site inspections of the program's facilities.

Authority: AS 08.68.100 AS 08.68.290

12 AAC 44.040. ESTABLISHMENT OF NURSING EDUCATION PROGRAM. (a) A university or college wishing to establish a nursing education program must

(1) inform the board in writing of the university or college's intent to establish a nursing education program in the state; and

(2) submit, not later than 120 days before the first day of the board meeting at which the application is considered, a completed application on a form prescribed by the board that shows that the applicant meets the applicable requirements of 12 AAC 44.030 – 12 AAC 44.135.

(b) There shall be information on the availability of clinical facilities and job opportunities for graduates.

(c) Not later than 90 days after receipt of the application, the board or the board's representative will advise the applicant in writing, before consideration by the board, whether additional information is needed to complete the application.

(d) If the board determines that the application is complete and that the nursing education program meets the applicable requirements of 12 AAC 44.010 – 12 AAC 44.135, the board will grant provisional approval to the program.

(e) Not later than 90 days after the board grants provisional approval, the nursing education program must apply for national accreditation from either the Accreditation Commission for Education in Nursing (ACEN), National League for Nursing Accrediting Commission (NLNAC), or the Commission on Collegiate Nursing Education (CCNE).

(f) After the survey under 12 AAC 44.030 has been completed, the board will notify the program if the board has determined that

(1) the program has deficiencies due to noncompliance with any provision of 12 AAC 44.010 – 12 AAC 44.135; and

(2) a follow-up survey, conducted as set out in 12 AAC 44.030, is necessary.

(g) If the board determines that deficiencies exist under (f)(1) of this section, the board or the board's representative will send the nursing education program written notice of the deficiencies. The program shall correct those deficiencies and, not later than 90 days after the date the board sent written notice of the deficiencies, shall notify the board of the program's progress in correcting them. The program, after sending the first progress report, shall send additional reports every 90 days until each deficiency is corrected.

(h) A nursing education program whose application has been denied under this section may request a hearing under AS 44.62.330 – 44.62.630 (Administrative Procedure Act) to appeal the denial.

(i) Every six months, a nursing education program with provisional approval shall submit to the board a report that includes

(1) information about faculty qualifications;

(2) information about student admissions;

(3) information about curriculum development;

(4) faculty meeting minutes;

(5) NCLEX pass rates if appropriate; and

(6) information about progress toward accreditation.

(j) A nursing education program with provisional approval shall provide to the board a copy of each interim report that the program receives from the Accreditation Commission for Education in Nursing, National League for Nursing Accrediting Commission, or the Commission on Collegiate Nursing Education accrediting agency.

(k) Eighteen months after the board grants a nursing education program provisional approval, the board or the board's representative will conduct another survey of the program under 12 AAC 44.030.

(*l*) To receive full approval from the board, a nursing education program must

(1) be fully accredited by the Accreditation Commission for Education in Nursing, National League for Nursing Accrediting Commission, or the Commission on Collegiate Nursing Education; and

(2) attain an 80 percent pass rate for first-time NCLEX test takers for a full year.

(m) If a nursing education program does not attain full accreditation two years after the graduation of the program's first class or earlier, the program may request a one-time, two-year extension of provisional approval. The board will grant the extension if the board determines that the program is making sufficient progress towards full accreditation.

(n) Notwithstanding (f) of this section, the board may withdraw provisional approval at any time if a program deficiency puts the public at risk. Deficiencies that put the public at risk include

(1) a decline in the pass rate for first-time NCLEX test takers;

(2) high student attrition rates;

(3) a reversal of progress toward accreditation; and

(4) significant faculty attrition.

Authority: AS 08.68.100 AS 08.68.290

12 AAC 44.050. DISCONTINUANCE OF PROGRAM. If a university or college with a nursing education program plans on discontinuing its program it shall notify the board in writing as soon as the decision is made.

Authority: AS 08.68.100(a)

12 AAC 44.052. DENIAL, REVOCATION, AND REINSTATEMENT OF PROGRAM APPROVAL. (a) After a hearing under AS 44.62, the board will, in its discretion, deny approval of a nursing education program if it determines that the program fails substantially to meet the standards for nursing education defined by the board.

(b) After a hearing under AS 44.62, the board may revoke approval if

(1) the program has been unable to achieve minimal standards within two years of being placed on conditional approval under 12 AAC 44.055; or

(2) the board determines that a nursing education program has not provided sufficient evidence that the standards of nursing education are being met.

(c) The board will, in its discretion, consider reinstatement of approval of a nursing education program upon submission of satisfactory evidence that the program meets the standards of nursing education.

Authority: AS 08.68.100 AS 08.68.280 AS 08.68.290

12 AAC 44.055. REVIEW OF NURSING EDUCATION PROGRAMS. (a) An approved nursing education program must achieve at least an 80 percent cumulative annual pass rate.

(b) If an approved nursing education program fails to achieve at least an 80 percent cumulative annual pass rate, the board will issue a letter of concern to the program. Within 90 days after receipt of a letter of concern from the board, the approved nursing education program must submit to the board a report that

(1) analyzes the factors that are believed to be contributing to the low pass rate; and

(2) sets out the program's plan to achieve at least an 80 percent cumulative annual pass rate.

(c) After a letter of concern has been issued to an approved nursing education program, the board will reevaluate the program. A program offering the practical nurse certificate will be reevaluated one year after the letter of concern was issued. A program offering the associate degree or the baccalaureate degree in nursing will be reevaluated two years after the letter of concern was issued.

(d) If an approved nursing education program reevaluated by the board after the time period specified in (c) of this section has failed to achieve at least an 80 percent cumulative annual pass rate, the board will issue a letter of warning to the program. Within 90 days after receipt of a letter of warning from the board, the approved nursing education program must submit to the board a report that

(1) analyzes the reasons the program's original plan to improve the low pass rate was unsuccessful; and

(2) sets out the program's additional plan to achieve at least an 80 percent cumulative annual pass rate.

(e) After a letter of warning has been issued to an approved nursing education program, the board will reevaluate the program. A program offering the practical nurse certificate will be reevaluated one year after the letter of warning was issued. A program offering the associate degree or the baccalaureate degree in nursing will be reevaluated two years after the letter of warning was issued.

(f) If an approved nursing education program reevaluated by the board after the time period specified in (e) of this section has failed to achieve at least an 80 percent cumulative annual pass rate, the board will place the nursing education program on conditional approval. The nursing education program will continue on conditional approval until

(1) the nursing education program has achieved at least an 80 percent cumulative annual pass rate during two consecutive years; or

(2) approval of the nursing education program is revoked under 12 AAC 44.052.

(g) As used in this section, "at least an 80 percent cumulative annual pass rate" means that the year-end data published by the National Council of State Boards of Nursing (NCSBN) shows that at least 80 percent of the graduates of the approved nursing education program, taking the National Council Licensure Examination (NCLEX) for the first time, successfully passed the examination.

Authority: AS 08.68.100 AS 08.68.280 AS 08.68.290

12 AAC 44.060. ORGANIZATION AND ADMINISTRATION. (a) A nursing education program must be an integral part of an accredited institution authorized by the state to confer credentials in nursing.

(b) A nursing education program must have statements of purpose, philosophy, and objectives that are consistent with the law governing the practice of nursing.

(c) A nursing education program must be organized with clearly defined authority, responsibility, and channels of communication.

(d) A nursing education program must be administered by a registered nurse who is currently licensed in Alaska and who has at least a master's degree in nursing, and preparation or experience in administration, education, and clinical nursing practice.

(e) The administrator of a nursing education program is responsible for:
(1) the development and implementation of the curriculum;
(2) preparation and administration of the budget;
(3) recommendation for appointment, promotion, tenure, and retention of faculty; and
(4) notifying the board of any major changes in the program or its administration.

Authority: AS 08.68.100 AS 08.68.290

12 AAC 44.072. RESOURCES, FACILITIES, AND SERVICES. (a) Written agreements with cooperating agencies must be mutually developed and maintained, and periodically reviewed.

(b) Cooperating agencies must be approved by any existing appropriate accreditation, evaluation or licensing bodies.

Authority: AS 08.68.100(a)

12 AAC 44.090. FACULTY. (a) There must be a sufficient number of qualified faculty to meet the purposes and objectives of the nursing education program.

(b) Unless waived by the board, the maximum number of students per faculty member is eight in clinical areas involving direct care of patients or clients.

(c) Nursing faculty who teach in a program offering the practical nurse certificate shall
(1) be currently licensed as a registered nurse in Alaska;
(2) have a minimum of a baccalaureate degree in nursing; and
(3) have one year of clinical nursing experience relevant to areas of responsibility.

(d) Nursing faculty who teach in a program offering the associate degree or the baccalaureate degree in nursing shall
(1) be currently licensed as a registered nurse in Alaska;
(2) have a minimum of a masters degree in nursing; and
(3) have one year of clinical nursing experience relevant to areas of responsibility.

(e) Adjunct faculty may be used for instruction of nursing courses and shall
(1) be currently licensed as a registered nurse in Alaska;
(2) have a minimum of a baccalaureate degree in nursing;
(3) have one year of clinical nursing experience relevant to areas of responsibility;
(4) be supervised by qualified nursing faculty.

(f) Faculty with comparable education will, in the board's discretion, be considered to have met the degree requirement of (c)(2), (d)(2), or (e)(2) of this section.

(g) Faculty are responsible for developing, implementing and evaluating the purpose, philosophy and objectives of the nursing program.

(h) For purposes of AS 08.68.800(a)(5), if an education program outside this state has students in this state doing clinical rotations, and if the time that a faculty member spends determining grades for those students, for clinical coursework performed during those rotations, and in combination with the time, if any, that the faculty member spends on other nursing education or nursing consultation activities in this state, exceeds 20 working days within a licensing period, the faculty member must be currently licensed as a registered nurse in this state.

Authority: AS 08.68.100 AS 08.68.290 AS 08.68.800

12 AAC 44.130. CURRICULUM REQUIREMENTS. (a) Curriculum must reflect the philosophy, conceptual framework, purpose, and objectives of the nursing education program, and must be consistent with laws governing the practice of nursing.

(b) The ratio between nursing and nonnursing credit must be based on a rationale to ensure sufficient preparation for the safe and effective practice of nursing.

(c) Learning experiences and methods of instruction must be selected to fulfill curriculum objectives.

(d) Curriculum must be evaluated by the faculty with provisions for student participation.

(e) Support courses must be taught by academic faculty prepared in those disciplines.

(f) Curriculum for programs offering the practical nurse certificate must include
(1) theory and practice in nursing encompassing the attainment and maintenance of physical and mental health and the prevention of illness for individuals and groups throughout the life process;
(2) concepts of anatomy, physiology, chemistry, physics, and microbiology;
(3) concepts of communication, growth and development, interpersonal relations, and cultural diversity;
(4) ethics, nursing history and trends, vocational and legal aspects of nursing;
(5) concepts of pharmacology, nutrition, and diet therapy; and
(6) concepts of the nursing process.

(g) Curriculum for programs offering the associate degree or baccalaureate degree in nursing must include
(1) theory and practice in nursing, encompassing the attainment and maintenance of physical and mental health and the prevention of illness for individuals and groups throughout the life process;

(2) concepts of anatomy, physiology, chemistry, microbiology, and physics;

(3) sociology, psychology, communications, growth and development, interpersonal relations, group dynamics, and cultural diversity;

(4) concepts of pharmacology, nutrition and diet therapy, and pathophysiology;

(5) concepts of ethics, nursing history and trends, and the professional and legal aspects of nursing;

(6) concepts of patient education;

(7) concepts of the nursing process.

Authority: AS 08.68.100(a) AS 08.68.290

12 AAC 44.135. EVALUATION OF NURSE PRACTITIONER PROGRAMS. (a) Beginning September 1, 2004, a nurse practitioner graduate program offered by a university or college in this state must meet the criteria established in (b) of this section.

(b) The criteria contained in the document titled *Criteria for Evaluation of Nurse Practitioner Programs 2016, 5th Edition*, issued by the National Task Force on Quality Nurse Practitioner Education, are adopted by reference as the criteria for approval of a graduate program for nurse practitioners under (a) of this section.

Authority: AS 08.68.100 AS 08.68.280 AS 08.68.290

Editor's note: Copies of the *Criteria for Evaluation of Nurse Practitioner Programs*, prepared by the National Task Force on Quality Nurse Practitioner Education, adopted by reference in 12 AAC 44.135(b) are available from the Division of Corporations, Business and Professional Licensing, Board of Nursing, 550 W. 7th Avenue, Suite 1500, Anchorage, AK 99501-3567, telephone: (907) 269-8161 or the National Organization of Nurse Practitioner Faculties, 1615 M Street, NW, Suite 270, Washington, DC 20036, telephone: (202) 289-8044, email: nonpf@nonpf.org; Internet address: http://c.ymcdn.com/sites/www.nonpf.org/resource/resmgr/Docs/EvalCriteria2016Final.pdf.

12 AAC 44.137. LICENSED PRACTICAL NURSE SCOPE OF PRACTICE. The standards of practice set out in the *Nurse Practice Standards for the Licensed Practical & Licensed Vocational Nurse*, May 30, 2023 edition, of the National Association of Licensed Practical Nurses are adopted by reference as the authorized scope of practice for a practical nurse licensed under this chapter.

Authority: AS 08.68.100

Editor's note: A copy of the *Nurse Practice Standards for the Licensed Practical & Licensed Vocational Nurse*, published by the National Association of Licensed Practical Nurses, May 30, 2023 edition, adopted by reference under 12 AAC 44.137, may be obtained from the National Association of Licensed Practical Nurses, PO Box 1895, Manitowoc, Wisconsin, 54221; telephone: (920) 663-8450; email: nalpnoffice@gmail.com; or on the association's Internet website at https://nalpn.org/wp-content/uploads/2023/06/NURSE-PRACTICE-STANDARDS-05.30.2023.pdf.

12 AAC 44.140. REPORTS. By October 1 of each year, unless otherwise designated by the board, nursing education programs shall submit to the board reports related to faculty, students, and current curriculum, as follows:

(1) changes or new developments in the purpose, philosophy, objectives, conceptual framework, and subsequent curriculum changes;

(2) changes in the administrative structure;

(3) update on faculty membership;

(4) student enrollment statistics;

(5) resources and facilities data update;

(6) a program evaluation and plan for program improvement;

(7) projected changes for the school of nursing and curriculum for the next year;

(8) results of studies of postgraduate activities relative to ongoing employment and accomplishments of graduates.

Authority: AS 08.68.100

ARTICLE 2.
NURSING EDUCATION OF PRACTICAL NURSES.

Repealed 4/2/86.

ARTICLE 3.
EXAMINATIONS AND LICENSURE.

Section

290. Application for examination
300. Examinations
305. License by endorsement
310. Licensure by endorsement for graduates of foreign schools of nursing
311. Retired nurse license status
312. Temporary military courtesy license or certification to practice as a certified nurse aide, licensed practical nurse, registered nurse, or advanced practice registered nurse
315. License renewal
317. Reinstatement of a lapsed or retired status license
318. Emergency courtesy license
319. Criminal justice information
320. Temporary permits
321. (Repealed)

12 AAC 44.290. APPLICATION FOR EXAMINATION. (a) An applicant for license by examination in this state shall

(1) submit a completed application, on a form provided by the department, for approval to take the licensing examination; the completed application must include

(A) for identification purposes, the personal identification information requested on the application form;

(B) an attestation that the applicant graduated from or is eligible to graduate from a nursing education program approved by the board;

(C) the applicant's licensing and examination history;

(D) information on the applicant's physical and mental health related to the grounds for license denial, suspension, or revocation in AS 08.68.270;

(E) information on any criminal convictions related to the grounds for license denial, suspension, or revocation in AS 08.68.270;

(F) the applicant's notarized signature certifying that the information in the application is correct to the best of the applicant's knowledge;

(G) the applicant's fingerprint information described in 12 AAC 44.319(a).

(2) pay the application fee, the fingerprint processing fee, and the license fee specified in 12 AAC 02.280;

(3) provide to the board, if the applicant is

(A) a graduate of a foreign pre-licensure education program that is not taught in English

(i) verification that the applicant has passed an English proficiency examination that includes components on reading, speaking, writing, and listening;

(ii) an evaluation of the applicant's nursing education by the Commission on Graduates of Foreign Nursing Schools Credentials Evaluation Service, including a full education, course-by-course report that indicates the applicant's nursing education was taught in English; or

(iii) an official International Commission on Healthcare Professions (ICHP) certificate that verifies that the applicant has successfully completed the VisaScreen: Visa Credential Assessment Service;

(B) a practical nurse applicant who is a United States military servicemember on active duty or reserve status, or discharged by means other than a dishonorable discharge not more than five years from the date of application, who has completed a nursing education program provided by the United States military that is equivalent to an accredited practical nurse education program under AS 08.68.170

(i) a complete certified transcript of the applicant's military education, submitted directly to the board from the appropriate military service branch;

(ii) verification of employment on a form provided by the board that the applicant has, within the last five years, worked in the United States military in a nursing role for which the applicant received training equivalent to an accredited practical nurse education program; and

(iii) an attestation that the applicant is familiar with the licensed practical nurse scope of practice set out under 12 AAC 44.136;

(4) repealed 4/27/83;

(5) provide a nursing program verification form; the nursing program verification form must be completed by an official of the school of nursing attended and submitted directly to the department from the school of nursing; and

(6) provide, at the written request of the board, additional information that is necessary to demonstrate that the applicant has met the licensing requirements of AS 08.68 and this chapter.

(b) The application, fees, and all supporting documents required under (a) of this section must be on file with the department before the applicant will be approved to take the licensing examination.

(c) An applicant who is approved to take the licensing examination is eligible for examination for one year after the date the department sends a notice of approval to take the NCLEX to the testing company. An applicant who

does not take the examination within that year shall reapply for approval under (a) of this section and submit the application fee and fingerprint processing fee.

(d) Repealed 5/7/2010.

(e) Repealed 5/7/2010.

Authority: AS 08.68.100 AS 08.68.190 AS 08.68.280
AS 08.68.170 AS 08.68.270

Editor's note: Information regarding the Commission on Graduates of Foreign Nursing Schools Credentials Evaluation Service described in 12 AAC 44.290(a)(3)(A)(ii) and the International Commission on Healthcare Professions (ICHP) certificate described in 12 AAC 44.290(a)(3)(A)(iii) is available at CGFNS International, 3600 Market Street, Suite 400, Philadelphia, Pennsylvania 19104-2651; Telephone: (215) 222-8454; website at www.cgfns.org.

The licensed practical nurse scope of practice advisory opinions referenced in 12 AAC 44.290(a)(3)(B)(iii) are available at https://www.commerce.alaska.gov/web/portals/5/pub/NUR_AdOp_Scope.pdf.

12 AAC 44.300. EXAMINATIONS. (a) Candidates for a license by examination shall take the National Council Licensing Examination.

(b) Registered nurse candidates who receive a grade of "pass" on the examination will be issued a license by the board, provided all other qualifications and requirements outlined in AS 08.68 are also met.

(c) Practical nurse candidates who receive a grade of "pass" on the examination will be issued a license by the board, provided all other qualifications and requirements outlined in AS 08.68 are also met.

(d) Registered nurse candidates or practical nurse candidates who fail the examination may repeat the examination. A candidate who does not pass the examination within two years after the date the examination was first administered to the candidate must complete a remedial course approved by the board. The candidate must provide proof of having fulfilled the requirements of the remedial course before attempting to retake the examination.

(e) To apply for reexamination, a candidate shall submit

(1) a written request for reexamination; and

(2) the reexamination application fee required in 12 AAC 02.280.

(f) An applicant for a registered nurse license by examination who passes the examination but does not obtain licensure in this state or in another licensing jurisdiction within one year after taking the examination shall meet the requirements of 12 AAC 44.600(1) or (2)(A) and (B) in addition to the other licensure requirements.

(g) An applicant who graduated from an accredited nursing program more than two years before an application for licensure by examination must take a remedial nursing course approved by the board before attempting the NCLEX.

Authority: AS 08.68.100 AS 08.68.190

12 AAC 44.305. LICENSE BY ENDORSEMENT. (a) An applicant for nursing license by endorsement shall submit

(1) a completed application on a form provided by the department; the completed application must include

(A) the personal identification information requested on the form;

(B) the name and location of the nursing education program attended by the applicant;

(C) information on the applicant’s physical and mental health related to the grounds for license denial, suspension, or revocation in AS 08.68.270;

(D) information on any criminal convictions related to the grounds for license denial, suspension, or revocation in AS 08.68.270;

(E) attestation of 320 hours of nursing-related employment in the five years immediately before the date of application;

(F) the applicant’s notarized signature certifying that the information in the application is correct to the best of the applicant’s knowledge;

(G) the applicant’s fingerprint information described in 12 AAC 44.319(a); and

(H) if the applicant is a graduate of a foreign pre-licensure education program not taught in English

(i) verification that the applicant has passed an English proficiency examination that includes components on reading, speaking, writing, and listening;

(ii) an evaluation of the applicant's nursing education by the Commission on Graduates of Foreign Nursing Schools Credentials Evaluation Service, including a full education, course-by-course report that indicates the applicant's nursing education was taught in English; or

(iii) an official International Commission on Healthcare Professions (ICHP) certificate that verifies that the applicant has successfully completed the VisaScreen: Visa Credential Assessment Service;

(2) the application fee, fingerprint processing fee, and the license fee specified in 12 AAC 02.280;

(3) verification that the applicant holds a current license, that is in good standing and unencumbered, to practice in another jurisdiction where licensing requirements meet the requirements set out in (b) of this section; and

(4) a reference letter from the applicant's past employer verifying that the applicant has been employed in a nursing capacity for at least 320 hours within the last five years before application; if the applicant has not worked within the preceding five years, the applicant must submit proof of meeting the continuing competency requirements of the board or complete a course of study approved by the board.

(b) In order to qualify for licensure by endorsement, an applicant must secure verification by an official of the licensing jurisdiction in which the applicant was licensed by examination, on a form provided by the department, or through the National Council of State Boards of Nursing online verification system, that the license was obtained by meeting the following qualifications:

(1) successful completion of a recognized nursing education program, the United States Army Practical Nurse Program, or Air Force Basic Medical Technician Corpsman Program (BMTCP) 4N051 (5 Skill Level); and

(2) passing one of the following examinations:

(A) the National Council Licensing Examination given after October 30, 1988 with a "pass";

(B) the National Council Licensing Examination given after June 30, 1982 but before October 30, 1988, with a standard score of 1,600 for a registered nurse candidate or a standard score of 350 for a practical nurse candidate;

(C) the State Board Test Pool examination given before July 1, 1982, with a score of 350 on each section for registered nurses and 350 on the examination for licensed practical nurses; or

(D) an examination constructed by another licensing jurisdiction given before 1953, with a minimum score of 75 percent.

Authority: AS 08.68.100 AS 08.68.200 AS 08.68.270
AS 08.68.170

Editor's note: Information regarding the Commission on Graduates of Foreign Nursing Schools Credentials Evaluation Service described in 12 AAC 44.305(a)(1)(H)(ii) and the International Commission on Healthcare Professions (ICHP) certificate described in 12 AAC 44.305(a)(1)(H)(iii) is available at CGFNS International, 3600 Market Street, Suite 400, Philadelphia, Pennsylvania 19104-2651; Telephone: (215) 222-8454; website at www.cgfns.org.

12 AAC 44.310. LICENSURE BY ENDORSEMENT FOR GRADUATES OF FOREIGN SCHOOLS OF NURSING. (a) Applicants shall submit all required documents accompanied by certified English translations if the original documents are not in English.

(b) Unless otherwise provided by this section, nurses who have received nursing education outside the United States shall write the National Council Licensing Examination.

(c) An applicant who has successfully passed the National Council Licensing Examination in another jurisdiction, is licensed in that jurisdiction, and has met the licensure requirements of AS 08.68 and 12 AAC 44.305 will be licensed by endorsement. If the applicant did not obtain licensure in that jurisdiction, the applicant will be licensed by examination.

(d) The board will, in its discretion, issue a license by endorsement under AS 08.68.200, to an applicant who was licensed in Canada as a result of passing the national Canadian examination

(1) before August 1980, with a score of at least 350 on each of the five parts of the examination; or

(2) after July 1980 but before July 1992, with a score of at least 400.

Authority: AS 08.68.100 AS 08.68.200 AS 08.68.210
AS 08.68.190

12 AAC 44.311. RETIRED NURSE LICENSE STATUS. (a) An individual holding an active unencumbered nursing license that is not under investigation with the board may apply for the conversion of a nursing license to a retired nurse license status. An individual holding a retired nurse license status may use the title "advanced practice registered nurse-retired (APRN, Retired)", "registered nurse-retired (RN, Retired)", or "licensed practical nurse-retired (LPN, Retired)", as appropriate, but may not practice, or indicate that the individual is practicing or soliciting to practice as an advanced practice registered nurse, registered nurse, or licensed practical nurse in the state. A retired nurse license status is valid for the life of the holder and does not require renewal.

(b) The board will issue a retired nurse status to an individual who meets the requirements of (a) of this section if the applicant

(1) submits a completed application on a form provided by the department; and

(2) pays the retired nurse status one-time fee specified in 12 AAC 02.280.

(c) An individual who holds a retired nurse license status who wishes to return to the practice of nursing may request a change from retired nurse status to active licensure by meeting the requirements of 12 AAC 44.317.

Authority: AS 08.01.100 AS 08.68.100

12 AAC 44.312. TEMPORARY MILITARY COURTESY LICENSE OR CERTIFICATION TO PRACTICE AS A CERTIFIED NURSE AIDE, LICENSED PRACTICAL NURSE, REGISTERED NURSE, OR ADVANCED PRACTICE REGISTERED NURSE. (a) The board will issue a temporary military courtesy license or certification to an active duty military member or spouse of an active duty military member of the armed forces of the United States who meets the requirements of AS 08.01.063 and this section not later than 30 days after the board receives a completed application.

(b) An applicant for a temporary military courtesy license or certification under this section

(1) must submit a completed application on a form provided by the department;

(2) must submit the fingerprint information described in 12 AAC 44.319(a);

(3) must submit a copy of

(A) the applicant's current active duty military orders showing assignment to a duty station in this state; or

(B) if the applicant is the spouse of an active duty military member, the applicant's spouse's current active duty military orders showing assignment to a duty station in this state;

(4) must submit documentation showing the applicant is currently licensed or certified in another licensing or certifying jurisdiction and the applicant's license or certification in the other jurisdiction is not suspended, revoked, or otherwise restricted except for failure to apply for renewal or failure to obtain the required continuing education requirements;

(5) may not have been convicted of a crime that affects the applicant's ability to practice nursing or practice as a certified nurse aide competently and safely, as determined by the board; and

(6) must pay

(A) the temporary license application fee and fee for a temporary license set out under 12 AAC 02.105; and

(B) the fingerprint processing fee specified in 12 AAC 02.280 for nurses and advanced practice registered nurses or 12 AAC 02.282 for certified nurse aides.

(c) A temporary military courtesy license or certification issued to an active duty military member or spouse of an active duty military member under this section will be issued for a period of 180 days and may be renewed for one additional 180-day period, at the discretion of the board.

(d) While practicing under a temporary military courtesy license or certification issued under this section, the holder of the temporary military courtesy license or certification must comply with the standards of practice set out in AS 08.68 and this chapter.

(e) The board may refuse to issue a temporary military courtesy license or certification for the same reasons that it may deny, suspend, or revoke a license under AS 08.68.270.

Authority: AS 08.01.062 AS 08.01.063 AS 08.68.100 AS 08.68.270 AS 08.68.275

12 AAC 44.315. LICENSE RENEWAL. (a) A practical nurse license must be renewed biennially on or before September 30 of even-numbered years. A registered nurse license and advanced practice registered nurse license must be renewed biennially on or before a date set by the department. A renewal reminder document will be mailed to each currently licensed nurse at least 60 days before the renewal date.

(b) A license not renewed on or before the last day of the biennial licensing period lapses on the first day of the new licensing period. An applicant whose license has lapsed must meet the requirements under 12 AAC 44.317.

Authority: AS 08.68.100 AS 08.68.251 AS 08.68.276

12 AAC 44.317. REINSTATEMENT OF A LAPSED OR RETIRED STATUS LICENSE. (a) The board will reinstate a license to practice as a registered or practical nurse, that has lapsed or been on a retired status less than one year, if the applicant

(1) submits a completed reinstatement application, on a form provided by the department, that includes

(A) the applicant's name, address, social security number, and date of birth;

(B) the applicant's international nursing license history;

(C) information on the applicant's physical and mental health related to the grounds for license denial, suspension, or revocation in AS 08.68.270;

(D) information regarding criminal convictions related to the grounds for license denial, suspension, or revocation in AS 08.68.270;

(E) information regarding the method used to satisfy the continuing competency requirements in 12 AAC 44.600 – 12 AAC 44.660; and

(F) the applicant's notarized signature certifying that the information in the application is correct to the best of the applicant's knowledge;

(2) pays the biennial license renewal fee established in 12 AAC 02.280;

(3) pays the penalty fee established in 12 AAC 02.280, if the license has lapsed more than 60 days, unless the applicant seeking reinstatement holds a retired status license;

(4) submits documentation of continuing competency activities in accordance with 12 AAC 44.600 – 12 AAC 44.660; the applicant must have completed those activities within the immediate two years before applying for reinstatement; and

(5) submits verification of licensure in good standing and unencumbered for each jurisdiction where the applicant held a license to practice nursing during the time period in which the applicant's license was lapsed in this state; a verification of licensure submitted under this paragraph must be either

(A) obtained through the National Council of State Boards of Nursing online license verification system;

(B) received directly from the licensing authority in the other jurisdiction; or

(C) obtained from an electronic data base maintained by the licensing authority in another jurisdiction that indicates that the electronic data base is a primary source of verification of licensure in that jurisdiction.

(b) The board or executive administrator will reinstate a license to practice as a registered or practical nurse that has been lapsed or on a retired status at least one year, but less than five years, if the applicant

(1) submits a completed application for reinstatement, on a form provided by the department, that includes

(A) the applicant's name, address, social security number, and date of birth;

(B) the applicant's international nursing license history;

(C) information on the applicant's physical and mental health related to the grounds for license denial, suspension, or revocation in AS 08.68.270;

(D) information regarding criminal convictions related to the grounds for license denial, suspension, or revocation in AS 08.68.270;

(E) the applicant's notarized signature certifying that the information in the application is correct to the best of the applicant's knowledge; and

(F) the applicant's fingerprint information described in 12 AAC 44.319(a);

(2) pays the biennial license renewal fee, the fingerprint processing fee, and penalty fee established in 12 AAC 02.280;

(3) submits documentation of continuing competency activities in accordance with 12 AAC 44.600 – 12 AAC 44.660; the applicant must have completed those activities within the immediate two years before applying for reinstatement;

(4) submits verification of licensure in good standing and unencumbered for each jurisdiction where the applicant held a license to practice nursing during the time period in which the applicant's license was lapsed in this state; a verification of licensure submitted under this paragraph must be either

(A) obtained through the National Council of State Boards of Nursing online license verification system;

(B) received directly from the licensing authority in the other jurisdiction; or

(C) obtained from an electronic data base maintained by the licensing authority in another jurisdiction that indicates that the electronic data base is a primary source of verification of licensure in that jurisdiction; and

(5) submits a reference letter, on a form provided by the department, from the applicant's past employer verifying that the applicant has been employed in a nursing capacity for at least 320 hours within the last five years before application; if the applicant has not worked within the preceding five years, the applicant must submit proof of completion of a course of study approved by the board; the course of study must include classroom instruction and a minimum of 100 supervised clinical hours with at least 60 percent of the hours in direct patient care.

(c) The board or executive administrator will reinstate a license to practice as a registered or practical nurse that has been lapsed or on a retired status five years or more, if the applicant meets the requirements of AS 08.68.251 and (b) of this section.

Authority: AS 08.01.100 AS 08.68.251 AS 08.68.276
AS 08.68.100

12 AAC 44.318. EMERGENCY COURTESY LICENSE. (a) In an urgent situation, the board will issue an emergency courtesy license to practice nursing to an applicant who meets the requirements of this section. The board may restrict the license to only those nursing services required to respond to the urgent situation. The licensee may not practice nursing outside the scope of the limited purpose for which the emergency courtesy license is issued.

(b) An applicant for an emergency courtesy license under this section must submit to the department a completed application on a form provided by the department. A complete application includes the applicable application and licensing fees established in 12 AAC 02.280.

(c) An emergency courtesy license issued under this section is valid for the period specified by the board and may not exceed 120 consecutive days. An emergency courtesy license may be renewed for one additional period specified by the board, not to exceed 120 consecutive days, and provided the additional period expires within 18 months of the date the license is first issued.

(d) The board will not issue, and an emergency courtesy license holder may not use, an emergency courtesy license as a substitute for a temporary license or other license required under AS 08.68.

(e) While practicing under an emergency courtesy license issued under this section, the holder of the emergency courtesy license must comply with the standards of practice set out in AS 08.68 and this chapter.

(f) The board may refuse to issue an emergency courtesy license for the same reasons that it may deny, suspend, or revoke a license under AS 08.68.270.

(g) In this section, "urgent situation" means a health crisis requiring an increased availability of nurses or nurses with specialized education.

Authority: AS 08.01.062 AS 08.68.100 AS 08.68.170 AS 08.68.270 AS 08.68.275

12 AAC 44.319. CRIMINAL JUSTICE INFORMATION. (a) If submission of fingerprint information is required by 12 AAC 44.290 ─ 12 AAC 44.320, an applicant shall submit the applicant's fingerprints and other information required by the Department of Public Safety to obtain state and national criminal justice information under AS 12.62 and AS 12.64.

(b) The department shall submit the fingerprints received under this section to the Department of Public Safety and request the Department of Public Safety to

(1) submit the fingerprints to the Federal Bureau of Investigation for a report on national criminal justice information;

(2) perform a check for state criminal justice information; and

(3) report to the department the results of the criminal justice information checks under (1) and (2) of this subsection.

(c) Repealed 5/16/2018.

(d) If an applicant twice has submitted fingerprints as required under this section, that the Department of Public Safety or the Federal Bureau of Investigation have been unable to read, the department will request that the Department of Public Safety and the Federal Bureau of Investigation instead conduct a search of the agency's criminal justice information records based upon the name of the applicant.

(e) Except as provided in (d) of this section, an application for renewal or reinstatement of the applicant's initial license will be denied by the board if

(1) the criminal justice information requested under (b) of this section has not been received by the department;

(2) the department has notified the applicant in writing that the applicant's criminal justice information has not been received by the department and has directed the applicant to resubmit the documents and information required under (a) of this section; and

(3) the applicant has failed to resubmit the documents and information required under (a) of this section as directed by the department.

Authority: AS 08.68.100 AS 08.68.270

12 AAC 44.320. TEMPORARY PERMITS. (a) Repealed 7/28/95.

(b) The board may issue a temporary nonrenewable permit to an applicant for license by endorsement who submits

(1) a completed application as required in 12 AAC 44.305(a)(1)(A) – (G);

(2) the application fee, the fingerprint processing fee, the license by endorsement fee, and the temporary permit fee specified in 12 AAC 02.280;

(3) verification of a current license issued by another licensing jurisdiction to practice as a registered nurse or a practical nurse; the license must be in good standing and unencumbered; and

(4) the applicant's fingerprint information described in 12 AAC 44.319(a).

(c) Repealed 7/28/95.

(d) A temporary nonrenewable permit issued under (b) of this section is valid for six months from the date of issuance or until a permanent license is issued or denied, whichever occurs first.

(e) The board may issue a temporary nonrenewable permit to an applicant by examination who

(1) applies for licensure by examination on a form provided by the department in accordance with 12 AAC 44.290;

(2) has not

(A) failed the NCLEX examination; and

(B) failed to appear and take the NCLEX examination for which the applicant was registered;

(3) pays the application fee, the fingerprint processing fee, the license by examination fee, and the temporary permit fee specified in 12 AAC 02.280;

(4) submits a certified or notarized nursing program verification form directly from the school of nursing attended verifying successful completion of the nursing program;

(5) submits the applicant's fingerprint information described in 12 AAC 44.319(a); and

(6) submits an evaluation of the applicant's nursing education by the Commission on Graduates of Foreign Nursing Schools Credentials Evaluation Service, with a full education, course-by-course report if the applicant is a practical nurse applicant or registered nurse applicant who graduated from a school of nursing outside of the United States or Canada, except Quebec, Canada.

(f) The temporary nonrenewable permit issued under (e) of this section is valid for six months or until the results of the NCLEX are made available to the board and notification of the results is received by the temporary permit holder whichever occurs first.

(g) The board may issue a temporary nonrenewable permit to an applicant for reinstatement who

(1) submits a completed application for reinstatement on a form provided by the department that includes the information required under 12 AAC 44.317(a)(1)(A) - (F);

(2) pays the biennial license renewal fee, the penalty fee, and the temporary permit fee established under 12 AAC 02.280;

(3) submits verification of licensure, in good standing and unencumbered, for each jurisdiction where the applicant held a license to practice nursing during the time period in which the applicant's license was lapsed in this state; verification of licensure must be submitted in accordance with 12 AAC 44.317(a)(5); and

(4) if an applicant's license has been lapsed for a period of over one year, submits a fingerprint card in accordance with 12 AAC 44.319(a).

(h) A temporary nonrenewable permit issued under (g) of this section is valid for six months from the date of issuance or until a permanent license is issued or denied, whichever occurs first. Only one temporary nonrenewable permit may be issued during each period a license is on a lapsed or retired status.

Authority: AS 08.68.100 AS 08.68.200 AS 08.68.210
AS 08.68.170

12 AAC 44.321. REVIEW OF APPLICATIONS. Repealed 3/5/2020.

ARTICLE 4.
ADVANCED PRACTICE REGISTERED NURSE.

Section

380. Advanced practice registered nurse role and population foci
400. Requirements for initial licensure
420. Recognized certification bodies
430. Scope of practice
440. Prescriptive authority
445. Controlled substance prescriptive and dispensing authority
446. Loss of prescriptive authority
447. Advanced practice registered nurse dispensing standards
450. Temporary and nonrenewable advanced practice registered nurse permits
460. Preceptorships
465. (Repealed)
470. Renewal of advanced practice registered nurse license
475. Reinstatement of a lapsed advanced practice registered nurse license
490. Applicability

12 AAC 44.380. ADVANCED PRACTICE REGISTERED NURSE ROLE AND POPULATION FOCI. (a) An advanced practice registered nurse is a licensed independent practitioner who is licensed to practice as a nurse midwife, a clinical nurse specialist, a nurse practitioner, or a certified registered nurse anesthetist, or in more than one role. The individual must be licensed to practice in the role for which the individual has received specialized education.

(b) An advanced practice registered nurse must be licensed to practice in one or more of the following population foci:

(1) family/individual across the lifespan;
(2) adult/gerontology;
(3) neonatal;
(4) pediatric;
(5) women's health/gender related;
(6) psychiatric/mental health.

(c) An advanced practice registered nurse licensed or certified in the following population foci by January 1, 2024 may continue to practice as long as that certification is maintained:

(1) acute care/emergency;
(2) adult health;
(3) adult psychiatric/mental health;
(4) family health;
(5) family psychiatric/mental health;
(6) geriatric nursing;
(7) women’s health.

Authority: AS 08.68.100 AS 08.68.850

12 AAC 44.400. REQUIREMENTS FOR INITIAL LICENSURE. (a) Except as provided in (e) and (f) of this section, an applicant for initial licensure to practice as an advanced practice registered nurse (APRN) as defined in AS 08.68.850

(1) must have satisfactorily completed

(A) a formal accredited graduate educational course of study preparing in one of the APRN roles that

(i) is a minimum of one academic year in length;

(ii) prepares registered nurses to perform an expanded role in the delivery of health care;

(iii) includes a combination of classroom instruction and a minimum of 500 separate, non-duplicated hours of supervised clinical practice;

(iv) for a certified nurse practitioner, a certified nurse midwife, or a certified clinical nurse specialist, if completed on or after January 1, 1998, has distinct graduate level course offerings in advanced pathophysiology, advanced pharmacotherapeutics, and advanced physical assessment, as evidenced by an official transcript or other official documentation received directly from a graduate program accredited by a nursing accrediting body that is recognized by the United States Secretary of Education or that is recognized by the Council for Higher Education Accreditation or its successor organization; and

(v) for a certified registered nurse anesthetist, if completed on or after January 1, 2016, has distinct graduate level course offerings in advanced pathophysiology, advanced pharmacotherapeutics, and advanced physical assessment, as evidenced by an official transcript or other official documentation received directly from a graduate program accredited by a nursing accrediting body that is recognized by the United States Secretary of Education or that is recognized by the Council for Higher Education Accreditation or its successor organization;

(B) repealed 4/27/97;

(2) must hold a current license to practice as a registered nurse in this state;

(3) must hold a current certification of advanced practice registered nurse in the population focus of nursing for which the applicant was educated as provided in (a) of this section, granted by a national certification body recognized by the board and as evidenced by official documentation received directly from the certifying body;

(4) shall, in the absence of a continuing education requirement of the certifying body, submit documented evidence of having obtained 60 contact hours of continuing education in the population focus of the advanced practice registered nurse every two years;

(5) repealed 1/19/2022;

(6) shall submit a completed application on a form provided by the department; the completed application must include

(A) repealed 8/25/2023;

(B) repealed 8/25/2023;

(C) the applicant's notarized signature certifying that the information in the application is correct to the best of the applicant's knowledge;

(D) a certified transcript sent directly to the department from the graduate APRN program of study showing the applicant has satisfactorily completed an educational course of study that meets the requirements of (1) of this subsection; and

(E) if the applicant is a graduate of a foreign pre-licensure education program not taught in English,

(i) verification that the applicant has passed an English proficiency examination that includes components on reading, speaking, writing, and listening;

(ii) an evaluation of the applicant's nursing education by the Commission on Graduates of Foreign Nursing Schools Credentials Evaluation Service, including a full education, course-by-course report that indicates the applicant's nursing education was taught in English; or

(iii) an official International Commission on Healthcare Professions (ICHP) certificate that verifies that the applicant has successfully completed the VisaScreen: Visa Credential Assessment Service; and

(7) shall submit the initial biennial licensure fee established by 12 AAC 02.280.

(b) Repealed 12/1/84.

(c) Repealed 4/27/97.

(d) To meet the requirements of (a)(3) of this section, an applicant for licensure to practice as an adult or family psychiatric mental health nurse practitioner, must submit

(1) certification issued by the American Nurses Credentialing Center before January 1, 2003 certifying that the applicant has passed the examination administered by the American Nurses Credentialing Center for

(A) psychiatric mental health clinical nurse specialist; or

(B) adult or family psychiatric mental health nurse practitioner; or

(2) certification issued by the American Nurses Credentialing Center on or after January 1, 2003 certifying that the applicant has passed the examination administered by the American Nurses Credentialing Center for adult or family psychiatric mental health nurse practitioner or clinical nurse specialist.

(e) Notwithstanding the requirements of this section, an applicant for initial authorization to practice as an advanced practice registered nurse who is a graduate of a foreign advanced practice registered nurse program may satisfy the requirements of (a) of this section by graduation from a foreign graduate level advanced practice registered nurse program that is equivalent to an accredited advanced practice registered nurse education program in the United States. The applicant must submit an official transcript, mailed directly to the department from the

foreign advanced practice registered nurse program, and accompanied by certified English translations if the original documents are not in English. The applicant must also submit a credentials evaluation from the Commission on Graduates of Foreign Nursing Schools verifying that the foreign advanced practice registered nurse education program from which the applicant graduated is equivalent to an accredited advanced practice registered nurse education program in the United States.

(f) Notwithstanding the requirements of this section, the graduate degree requirements of (a) of this section are satisfied by a

(1) certificate-prepared women's health care nurse practitioner, neonatal nurse practitioner, or nurse midwife who completed the individual's advanced nurse practitioner program before January 1, 2006;

(2) certificate-prepared nurse practitioner in a population focus recognized by the board, other than a population focus listed in (1) of this subsection, who completed the individual's advanced practice registered nurse program before January 1, 2003; or

(3) certificate-prepared certified registered nurse anesthetist who completed an accredited program before January 1, 2001.

(g) In this section,

(1) "accredited" means approved by the Commission on Collegiate Nursing Education (CCNE), the Accrediting Commission for Education in Nursing (ACEN), the National League of Nursing Accrediting Commission (NLNAC), the Council on Accreditation of Nurse Anesthesia Program (COA), the Accreditation Commission for Midwifery Education, or another national nursing accrediting organization at the time the applicant attended the program;

(2) "certificate-prepared" means an advanced practice registered nurse who graduated from an advanced practice registered nurse program that awarded a certificate.

Authority: AS 08.68.100 AS 08.68.850

Editor's note: Information on the Psychiatric Mental Health Clinical Nurse Specialist examination and the Adult or Family Psychiatric Mental Health Nurse Practitioner examination referred to in 12 AAC 44.400 may be obtained from the American Nurses Credentialing Center, 8515 Georgia Avenue, Suite 400, Silver Spring, MD 20910-3492; telephone: (800) 284-2378.

Information regarding the Commission on Graduates of Foreign Nursing Schools Credentials Evaluation Service described in 12 AAC 44.400(a)(6)(E)(ii) and the International Commission on Healthcare Professions (ICHP) certificate described in 12 AAC 44.400(a)(6)(E)(iii) is available at CGFNS International, 3600 Market Street, Suite 400, Philadelphia, Pennsylvania 19104-2651; Telephone: (215) 222-8454; website at www.cgfns.org.

12 AAC 44.420. RECOGNIZED CERTIFICATION BODIES. (a) The board may recognize national certification bodies that certify advanced practice registered nurse by exercising responsibility for

(1) approving the basic education course of study in the population focus;

(2) examining graduates of the course of study; and

(3) addressing the issue of ongoing competency.

(b) The board will annually review national certification bodies to assure that board requirements are met.

(c) The board will maintain a current list of certification bodies which it has reviewed and recognized.

(d) An applicant applying for an advanced practice registered nurse license by virtue of certification from a body not on the board's current list of certification bodies shall supply the board with sufficient data to evaluate the authority of the certifying body.

Authority: AS 08.68.100

12 AAC 44.430. SCOPE OF PRACTICE. The board recognizes advanced and specialized acts of nursing practice as those described in the scope of practice statements published by national professional nursing associations recognized by the board for advanced practice registered nurses certified by the national certification bodies recognized by the board.

Authority: AS 08.68.100

12 AAC 44.440. PRESCRIPTIVE AUTHORITY. (a) The board may authorize an advanced practice registered nurse (APRN) to prescribe and dispense legend drugs in accordance with applicable state and federal laws.

(b) An advanced practice registered nurse who applies for authorization to prescribe and dispense drugs

(1) must be currently designated as an APRN in this state at the time of application;

(2) shall provide evidence of completion of 15 contact hours of education in advanced pharmacology and clinical management of drug therapy within the two-year period immediately before the date of application; and

(3) shall submit a completed application as required in 12 AAC 44.400(a)(6) accompanied by the application fee established in 12 AAC 02.280.

(c) Authorized prescriptions by an APRN must comply with all applicable state and federal laws.

(d) The board may limit, restrict, deny, suspend, or revoke prescriptive authorization or APRN licensure if the APRN has

(1) not maintained current licensure as an APRN;

(2) not maintained current national certification from the national certifying body within their scope of practice;

(3) prescribed, dispensed, administered, or distributed drugs in an unsafe manner or without adequate instruction to patients according to acceptable and prevailing standards;

(4) sold, purchased, traded, or offered to sell, purchase, or trade drug samples;

(5) prescribed, dispensed, administered, or distributed drugs for other than therapeutic or prophylactic purposes;

(6) prescribed or dispensed drugs to individuals who are not patients of the APRN or who are not within the nurse's role and population foci; or

(7) violated any provision of state or federal statutes and regulations pertaining to nursing practice.

(e) An APRN's prescriptive authority must be renewed biennially with the APRN licensure.

(f) An APRN may receive, sign for, record, and distribute medication samples to patients. The distribution of drug samples must be in accordance with state laws and United States Drug Enforcement Administration laws guidelines.

(g) Contact hours used for initial licensure as an APRN may not be used again for renewal of the licensure unless the initial licensure is within 180 days of the renewal deadline.

(h) In this section, "prescriptive authority" includes authority to dispense prescriptions.

Authority: AS 08.68.100 AS 08.68.850

12 AAC 44.445. CONTROLLED SUBSTANCE PRESCRIPTIVE AND DISPENSING AUTHORITY. (a) In addition to legend drug prescriptive and dispensing authority under 12 AAC 44.440, the board may authorize an advanced practice registered nurse (APRN) to prescribe and dispense schedule II – V controlled substances in accordance with applicable state and federal laws if an applicant

(1) submits a completed application on a form provided by the department; the completed application must include the applicant's

(A) name, address, and phone number;

(B) license number as an APRN;

(C) date of birth;

(D) repealed 12/27/2012; and

(E) notarized signature certifying that the information in the application is correct to the best of the applicant's knowledge;

(2) repealed 12/27/2012; and

(3) pays the application fee established by 12 AAC 02.280.

(b) All the provisions of 12 AAC 44.440 apply to an APRN with controlled substance prescriptive authority under this section.

(c) Written, verbal, or electronic controlled substance prescriptions and orders must comply with all applicable state and federal laws.

(d) An advanced practice registered nurse with controlled substance prescriptive and dispensing authority must register with the controlled substance prescription database under AS 17.30.200(n).

(e) An advanced practice registered nurse with authority to prescribe controlled substances may only delegate to a registered nurse or licensed practical nurse to access the database on the practitioner's behalf.

(f) When prescribing a drug that is a controlled substance, as defined in AS 11.71.900, the APRN shall create and maintain a complete, clear, and legible written record of care that includes

(1) a patient history and evaluation sufficient to support a diagnosis;

(2) a diagnosis and treatment plan for the diagnosis;

(3) a plan for monitoring the patient for side effects of the drug and results of the drug;

(4) a record of each drug prescribed, administered, or dispensed, including the type of drug, dose, and any authorized refills.

(g) The APRN shall check the controlled substance prescription database, established under AS 17.30.200, before a controlled substance designated schedule II or III under federal law is initially dispensed, prescribed, or administered to a patient, at least once every 30 days for up to 90 days, and at least once every three months if a course of treatment continues for more than 90 days. This subsection does not apply if

(1) the patient is currently receiving treatment in a licensed health care facility and that prescription is non-refillable;

(2) the patient is currently receiving treatment in the emergency room in a licensed health care facility and that prescription is non-refillable;

(3) the controlled substance is dispensed or prescribed to a patient immediately before, during, or within the first 48 hours of undergoing a medical or surgical procedure in a licensed health care facility, and that prescription is non-refillable;

(4) the controlled substance is dispensed or prescribed to a patient currently receiving care in hospice;

(5) the quantity of the controlled substance prescribed does not exceed an amount that is adequate for a single three-day treatment period, the prescription does not allow a refill, and no subsequent prescriptions are written for or dispensed for the next 15 days; or

(6) the controlled substance prescription database is not operational due to a temporary technological or electrical failure or natural disaster.

(h) A licensee treating a patient with a prescription for a controlled substance that was initially written at least 90 days before May 16, 2018 shall check the controlled substance prescription database established under AS 17.30.200 at least once every three months for the duration of the prescription.

(i) An applicant who holds a valid federal Drug Enforcement Administration registration number, shall provide verification that the applicant has

(1) completed no less than two hours of education in pain management and opioid use and addiction within the two-year period immediately before the date of application; and

(2) registered with the prescription drug monitoring program (PDMP) controlled substance prescription database under AS 17.30.200, and 12 AAC 52.855.

(j) In addition to the requirements of this section, when prescribing a controlled substance, an APRN with prescriptive authority shall comply with the maximum dosage for opioid prescriptions under AS 08.68.705. The maximum daily dosage for a patient initial opioid prescription under AS 08.68.705(a) may not exceed 50 morphine milligram equivalents (MME).

Authority: AS 08.68.100 AS 08.68.850

12 AAC 44.446. LOSS OF PRESCRIPTIVE AUTHORITY. The chief investigator for the division shall notify the federal Drug Enforcement Administration (DEA) and the prescription drug monitoring program (PDMP) of any final decision revoking or suspending prescriptive authority for a person licensed under AS 08.68. The chief investigator shall notify the board's executive administrator when notification to the DEA and PDMP has been completed.

Authority: AS 08.68.100

12 AAC 44.447. ADVANCED PRACTICE REGISTERED NURSE DISPENSING STANDARDS. (a) An advanced practice registered nurse (APRN) with prescriptive and dispensing authority may dispense a prescription within the APRN's scope of practice only.

(b) An APRN with prescriptive and dispensing authority may dispense a medication prepackaged by a pharmacy or pharmaceutical manufacturer. A prepackaged medication must be dispensed in its original package.

(c) If an APRN dispenses less than the prepackaged quantity of a medication, the APRN shall adjust the label on the container to show the quantity dispensed. The APRN shall also dispose of the excess medication in accordance with established professional standards.

(d) When dispensing a prescription, an APRN with prescriptive and dispensing authority is responsible for

(1) selection of the medication;

(2) proper labeling of the container as required in (c) and (j) of this section;

(3) delivery of the prescription; and

(4) counseling the client, including giving the client information on

(A) the name, dosage, and purpose of the prescribed drug;

(B) the duration of the prescribed drug therapy;

(C) common side or adverse effects or food or drug interactions that may be encountered, how to avoid those effects or interactions, and what actions should be taken if those effects or interactions occur;

(D) the expected outcome of the prescribed drug therapy; and

(E) the plan for follow-up care.

(e) An APRN with prescriptive and dispensing authority shall keep a readily retrievable written record of prepackaged medication prescriptions dispensed, including lot number.

(f) An APRN may delegate the delivery of a prescription to another individual if

(1) the APRN has developed a protocol on drug delivery and reviewed the protocol with the individual delivering the prescription;

(2) the APRN has provided orientation and training on drug delivery to the individual delivering the prescription;

(3) the APRN supervises the individual delivering the prescription; the supervision may be in person or by telephone; and

(4) the individual to whom the APRN has delegated the delivery of a prescription

(A) is 18 years of age or older; and

(B) can read and write the language of the APRN.

(g) An APRN who delegates the delivery of a prescription and does not meet the requirements of (f) of this section is subject to disciplinary action by the board.

(h) An APRN with prescriptive and dispensing authority may dispense a prescription packaged from a bulk supply of medication if the prescription was packaged according to the following standards:

(1) an individual licensed or certified in the administration of medications packaged the prescription;

(2) a health care professional with prescriptive authority supervised the packaging of the prescription and initialed the prescription on the same day that it was packaged;

(3) at the time of packaging, the prescription package was labeled with the information required in (j) of this section.

(i) An APRN who dispenses a prescription packaged from a bulk supply of medication shall keep a readily retrievable record of packaging procedures for that prescription, including the

(1) date of packaging;

(2) manufacturer, lot number, and expiration date of the medication;

(3) signature of the individual who packaged the prescription; and

(4) signature of the individual with prescriptive authority who supervised the packaging of the prescription.

(j) The label for a prescription that is to be dispensed by an APRN and that

(1) is a prepackaged medication must include

(A) the dispensing APRN's name and address;

(B) directions to the patient or a blank space for the instructions of the prescriber;

(C) a blank space for the name of the patient and, if applicable, the patient's identification number; and

(D) a blank space for the name of the prescriber;

(2) was packaged from a bulk supply of medication must include the information required in (1) of this subsection and

(A) the name, strength, and quantity of the medication in the container;

(B) a blank space for the date of delivery to the patient;

(C) a blank space for the initials of the person delivering the prescription to the patient;

(D) the manufacturer's lot number;

(E) the expiration date;

(F) warning labels appropriate to the specific medication in the container;

(G) the name, address, and phone number of the health care facility at which the prescription was packaged;

(H) the date the prescription was packaged; and

(I) the initials of the health care professional with prescriptive authority who supervised the packaging of the prescription.

(k) For the purposes of this section,

(1) "delivery of a prescription" means completing the blank spaces on the label of the prescription drug container and actually handing the container to the client or an individual who is 18 years of age or older who is designated as the client's representative;

(2) "supervise the packaging of a prescription" means to

(A) be available to assist the individual packaging the prescription; and

(B) examine the prescription when the packaging is completed to verify its accuracy.

Authority: AS 08.68.100 AS 08.68.850

12 AAC 44.450. TEMPORARY AND NONRENEWABLE ADVANCED PRACTICE REGISTERED NURSE PERMITS. (a) The board may grant a temporary permit to practice as an advanced practice registered nurse to an applicant who is currently certified as an advanced practice registered nurse in another state or jurisdiction with requirements at least equivalent to those of this state.

(b) The board may grant a nonrenewable permit to practice as an advanced practice registered nurse to an applicant who meets the requirements of 12 AAC 44.400(a)(1), (2), and (4) – (7); and

(1) has been accepted to take the next specialty board examination; or

(2) is awaiting certification results.

(c) A temporary permit granted under (a) of this section is nonrenewable and is valid for a period not to exceed six months.

(d) Repealed 10/3/2011.

(e) A nonrenewable permit granted under (b)(2) of this section is valid only until the applicant receives notice of certification results.

(f) The holder of a nonrenewable permit as an advanced practice registered nurse who fails to successfully pass the certification examination on the first attempt shall surrender the holder's nonrenewable permit to the board not later than 48 hours after receiving notification of failure.

Authority: AS 08.68.100 AS 08.68.210

12 AAC 44.460. PRECEPTORSHIPS. (a) The board will register an applicant who meets the requirements of this section to engage in clinical practice in order to complete a course of study

(1) based outside of this state that meets the requirements of 12 AAC 44.400(a)(1)(A); or

(2) to fulfill the requirements for reinstatement of a lapsed advanced practice registered nurse license under 12 AAC 44.475.

(b) The applicant shall submit

(1) a completed application on a form provided by the department; the completed application must include

(A) the personal identification information requested on the form;

(B) information on the applicant's physical and mental health related to the grounds for license denial, suspension, or revocation in AS 08.68.270; and

(C) information on any criminal convictions related to the grounds for license denial, suspension, or revocation in AS 08.68.270;

(2) repealed 8/10/2016;

(3) documented evidence of a preceptorship arrangement to be approved by the board;

(4) verification of a current license in good standing to practice as a registered nurse issued by this state or another state licensing jurisdiction; and

(5) documented evidence of current enrollment in an advanced practice registered nurse program as required in 12 AAC 44.400(a)(1)(A).

(c) A registration under this section expires and must be surrendered to the board 12 months from the date of issue or at the time the preceptorship arrangement is terminated, whichever occurs first.

(d) A registration under this section may be renewed one time if the applicant again meets the requirements of (b) of this section.

(e) The board will, in its discretion, after a hearing under the Administrative Procedure Act (AS 44.62), terminate the registration of a person registered under this section who is found to have violated a provision of AS 08.68 or 12 AAC 44.

(f) A preceptor must

(1) hold an active license or privilege to practice as an APRN or physician that is not encumbered and practice in a comparable practice focus; and

(2) function as a supervisor and teacher and evaluate the individual's performance in the clinical setting.

Authority: AS 08.01.075 AS 08.68.270 AS 08.68.850
AS 08.68.100 AS 08.68.275

12 AAC 44.465. IDENTIFICATION. Repealed 1/19/2022.

12 AAC 44.470. RENEWAL OF ADVANCED PRACTICE REGISTERED NURSE LICENSE. An applicant for renewal of an advanced practice registered nurse license shall submit to the board

(1) a completed renewal application on a form provided by the department;

(2) documentation that the applicant

(A) holds national certification for each of the roles and population focus areas in which the applicant is seeking renewal;

(B) if the applicant is seeking to renew prescriptive authority under 12 AAC 44.440, holds a current national certification that indicates completion of the continuing education mandated by that body, and a completed prescriptive authority renewal application and fee;

(3) the biennial authorization renewal fee established by 12 AAC 02.280; and

(4) evidence of a current license in good standing to practice as a registered nurse in this state;

(5) if the applicant holds a valid federal Drug Enforcement Administration registration number and controlled substance prescriptive authority, an attestation that the applicant has

(A) completed no less than two hours of continuing education in pain management and opioid use and addiction during the licensing cycle; and

(B) registered with the Prescription Drug Monitoring Program (PDMP) controlled substance prescription database under AS 17.30.200 and 12 AAC 52.855.

Authority: AS 08.68.100 AS 08.68.276 AS 17.30.200

12 AAC 44.475. REINSTATEMENT OF A LAPSED ADVANCED PRACTICE REGISTERED NURSE LICENSE. (a) The board will reinstate a license to practice as an advanced practice registered nurse that has lapsed if the applicant submits

(1) a completed application for reinstatement, on a form provided by the department;

(2) evidence of national certification for each of the roles and population focus areas in which the applicant seeks reinstatement;

(3) if the applicant seeks reinstatement of prescriptive authority, evidence of compliance with 12 AAC 44.470;

(4) except as provided in (c), (d), or (e) of this section, evidence of 320 hours of clinical practice as an advanced practice registered nurse during the two years before application for reinstatement; and

(5) the biennial licensure renewal fee established by 12 AAC 02.280.

(b) Hours of clinical practice at the advanced practice level may be counted for reinstatement of both the registered nurse license and the advanced practice registered nurse license.

(c) An applicant who has had no clinical practice as an advanced practice registered nurse for a period of two years or more before the date of the reinstatement application, but less than five years, must complete 200 hours of advanced nursing practice under the direct supervision of a preceptor who is a licensed advanced practice registered nurse or licensed physician, and who is practicing in the same population focus area as that of the applicant. At the completion of the supervised practice, the preceptor must submit a statement assessing the applicant's knowledge and advanced practice ability. The lapsed license will not be reinstated unless the preceptor states that the applicant has demonstrated competence to practice as an advanced practice registered nurse.

(d) An applicant who has had no clinical practice as an advanced practice registered nurse for a period of five years or more before the date of the reinstatement application, but less than 10 years, must complete 300 hours of advanced nursing practice under the direct supervision of a preceptor who is a licensed advanced practice registered nurse or licensed physician, and who is practicing in the same population focus area as that of the applicant. At the completion of the supervised practice, the preceptor must submit a statement assessing the applicant's knowledge and advanced practice ability. The lapsed license will not be reinstated unless the preceptor states that the applicant has demonstrated competence to practice as an advanced practice registered nurse.

(e) An applicant who has had no clinical practice as an advanced practice registered nurse for a period of 10 years or more must complete 500 hours of advanced nursing practice under the direct supervision of preceptor who is a licensed advanced practice registered nurse or licensed physician, and who is practicing in the same population focus area as that of the applicant. At the completion of the supervised practice, the preceptor must submit a statement assessing the applicant's knowledge and advanced practice ability. The lapsed license will not be reinstated unless the preceptor states that the applicant has demonstrated competence to practice as an advanced practice registered nurse.

(f) In this section, "clinical practice"

(1) means independent clinical practice in the role and population focus areas for which the applicant is seeking reinstatement, providing health care or related activities that have a clinical focus and are at an advanced practice level;

(2) includes teaching, consulting, supervision, and research related to the role and population focus areas for which the applicant is seeking reinstatement.

Authority: AS 08.68.100

12 AAC 44.490. APPLICABILITY. (a) The provisions of 12 AAC 44.380 – 12 AAC 44.490 are applicable only to an advanced practice registered nurse whose licensure to perform acts of medical diagnosis and prescription of medical, therapeutic, and corrective measures comes from the nurse's educational preparation, national certification, and licensure to practice in compliance with this chapter.

(b) Nothing in 12 AAC 44.380 – 12 AAC 44.490 limits the usual and customary practice of a registered nurse or licensed practical nurse in this state.

Authority: AS 08.68.100 AS 08.68.850

ARTICLE 5.
CERTIFIED REGISTERED NURSE ANESTHETISTS.

Section

500. (Repealed)
510. (Repealed)
525. (Repealed)
530. (Repealed)
540. (Repealed)
545. (Repealed)
560. (Repealed)

12 AAC 44.500. REQUIREMENTS FOR INITIAL AUTHORIZATION. Repealed 5/16/2018.

12 AAC 44.510. SCOPE OF PRACTICE. Repealed 5/16/2018.

12 AAC 44.525. CERTIFIED REGISTERED NURSE ANESTHETIST PRESCRIPTIVE AUTHORITY. Repealed 5/16/2018.

12 AAC 44.530. NONRENEWABLE CERTIFIED REGISTERED NURSE ANESTHETIST PERMITS. Repealed 5/16/2018.

12 AAC 44.540. RENEWAL OF CERTIFIED REGISTERED NURSE ANESTHETIST AUTHORIZATION. Repealed 5/16/2018.

12 AAC 44.545. REINSTATEMENT OF LAPSED CERTIFIED REGISTERED NURSE ANESTHETIST AUTHORIZATION. Repealed 5/16/2018.

12 AAC 44.560. APPLICABILITY. Repealed 5/16/2018.

ARTICLE 6.
CONTINUING COMPETENCY.

Section

600. Purpose of continuing competency requirements
610. Continuing education requirements
620. Professional activities requirement
630. Nursing employment requirement
640. Alternative methods for continuing competency requirements
650. Requirements for new licensees
660. Audit and documentation

12 AAC 44.600. PURPOSE OF CONTINUING COMPETENCY REQUIREMENTS. The purpose of continuing competency requirements is to ensure that nurses maintain the ability to safely and effectively apply nursing knowledge, principles, and concepts in the practice of registered or practical nursing as defined in AS 08.68.850. Before a license can be renewed each biennial period, a registered nurse or a licensed practical nurse must document either

(1) compliance with 12 AAC 44.640; or

(2) completion of two of the following three methods for maintaining continuing competency:

(A) continuing education as prescribed under 12 AAC 44.610;

(B) professional activities as prescribed under 12 AAC 44.620; and

(C) nursing employment as prescribed under 12 AAC 44.630.

Authority: AS 08.68.100 AS 08.68.276

12 AAC 44.610. CONTINUING EDUCATION REQUIREMENTS. (a) Except as provided in (d) of this section, the board will accept continuing education toward fulfillment of the continuing competency requirements set out in 12 AAC 44.600 if the applicant documents

(1) completion of at least 30 contact hours of continuing education for renewal of a license or current certification by a national nursing certification body, during the two years before the licensing period for which the applicant seeks renewal; the applicant shall earn at least 20 of the contact hours in a continuing education program provided

(A) under the accreditation standards established or followed by one of the following organizations:

(i) American Nurses Credentialing Center (ANCC);

(ii) Accreditation Council for Continuing Medical Education (ACCME);

(iii) Accreditation Council for Pharmacy Education (ACPE) – courses with a "P" designation or identification number;

(iv) a nurse practitioner certifying body;

(v) a nurse anesthetist certifying body; or

(B) by a sponsor for which an applicant or the executive administrator obtains board approval; the board will approve only those sponsors who offer continuing education as defined in (c)(2) of this section;

(2) that no more than 10 of the contact hours required under (1) of this subsection were earned through in-service nursing education offered by a licensed health care facility that does not meet the qualifications required under (1) of this subsection; and

(3) that the contact hours required under (1) of this subsection were earned in at least one of the following subject areas:

(A) nursing practice areas and special health care problems;

(B) biological, physical, or behavioral sciences;

(C) legal or ethical aspects of health care;

(D) management or administration of health care personnel and patient care;

(E) subjects approved by the board that are required as part of a formal nursing program but that are more advanced than those completed for original licensure.

(b) The board will accept continuing education contact hours that are part of a mediated learning system such as educational television, audio or video cassettes, the Internet, or printed media, or that are part of an independent study program, if the system or program is accredited by an agency that is approved by a national certifying body.

(c) In this section,

(1) "contact hour" means a minimum of 50 minutes of actual organized instruction; academic credit will be converted to contact hours as follows:

(A) one quarter academic credit equals 10 contact hours;

(B) one semester academic credit equals 15 contact hours;

(2) "continuing education" means a systematic educational experience that grants academic credit or contact hours beyond the basic nursing program preparation.

(d) The board will not accept continuing education contact hours or in-service hours for the completion of courses in cardiopulmonary resuscitation (CPR) or basic life support (BLS). The board will accept continuing education for renewals of licenses of advanced cardiac life support (ACLS), pediatric advanced life support (PALS), and other advanced courses for registered nurses.

Authority: AS 08.68.100 AS 08.68.276 AS 08.68.330

12 AAC 44.620. PROFESSIONAL ACTIVITIES REQUIREMENT. (a) The board will accept professional activities toward fulfillment of the continuing competency requirements set out in 12 AAC 44.600 if the applicant documents

(1) repealed 8/19/2022;

(2) repealed 8/19/2022;

(3) for a practical nurse license, on or before September 30, 2020, completion of at least 60 hours of participation in uncompensated professional activities for renewal of a license, during the two years before the licensing period for which the applicant seeks renewal;

(4) for a registered nurse license, on or before November 30, 2020, completion of at least 60 hours of participation in uncompensated professional activities for renewal of a license, during the two years before the licensing period for which the applicant seeks renewal;

(5) for a practical nurse license, on or after October 1, 2020, completion of at least 30 hours of participation in uncompensated professional activities for renewal of a license, during the two years before the licensing period for which the applicant seeks renewal;

(6) for a registered nurse license, on or after December 1, 2020, completion of at least 30 hours of participation in uncompensated professional activities for renewal of a license, during the two years before the licensing period for which the applicant seeks renewal; and

(7) that the hours of participation in professional activities were earned in at least one of the following ways:

(A) work with a professional nursing or health-related organization;

(B) authoring or contributing to an article, book, or publication related to health care;

(C) development and oral presentation of a paper before a professional or lay group on a subject that explores new or current areas of nursing theory, technique, or philosophy;

(D) the design and conduct of a research study relating to nursing and health care;

(E) other professional activities approved by the board and included on a list that the board maintains; the board will approve only those activities that meet the definition of "professional activities" in (b) of this section.

(b) In this section "professional activities" means activities, performed without compensation, that use nursing knowledge and contribute to the health of individuals or the community.

(c) Providing nursing care to the nurse's immediate family members does not qualify to meet professional activities requirements. In this subsection, "immediate family member" means a parent, sibling, spouse, child, parent-in-law, sibling in-law, stepchild, or same-sex or opposite-sex domestic partner.

Authority: AS 08.68.100 AS 08.68.276 AS 08.68.330

12 AAC 44.630. NURSING EMPLOYMENT REQUIREMENT. The board will accept nursing employment toward fulfillment of the continuing competency requirements set out in 12 AAC 44.600 if the applicant documents at least 320 hours of practice of practical nursing or registered nursing, as defined in AS 08.68.850, during the two years before the licensing period for which the applicant seeks renewal. The applicant shall document those hours on a form provided by the board and shall include the name of the nurse's employer.

Authority: AS 08.68.100 AS 08.68.276

12 AAC 44.640. ALTERNATIVE METHODS FOR CONTINUING COMPETENCY REQUIREMENTS. A nurse may meet continuing competency requirements without meeting the requirements of 12 AAC 44.610 – 12 AAC 44.630 by documenting that after the last renewal date, the nurse has

(1) completed a nursing refresher course approved by the board; or

(2) attained a degree or certificate in nursing, or made progress toward one, beyond the education requirements for the nurse's original license by successfully completing at least six academic credits in courses required for the degree or certificate; or

(3) successfully completed the National Council Licensing Examination.

Authority: AS 08.68.100 AS 08.68.276

12 AAC 44.650. REQUIREMENTS FOR NEW LICENSEES. (a) A licensee who receives his or her original license in the first year of the renewal period must comply with the continuing competency requirements of 12 AAC 44.600 – 12 AAC 44.640 before the first license renewal.

(b) A licensee who receives his or her original license in the second year of the renewal period must comply with the continuing competency requirements of 12 AAC 44.600—12 AAC 44.640 before the second license renewal.

Authority: AS 08.68.100 AS 08.68.276

12 AAC 44.660. AUDIT AND DOCUMENTATION. (a) A licensee must comply with all applicable requirements of 12 AAC 02.960 – 12 AAC 02.965. If selected for an audit of continued competency activities, the licensee must cooperate with the department and must submit all requested verifications of continued competency activities claimed by the licensee.

(b) Repealed 5/16/2018.

Authority: AS 08.68.100 AS 08.68.276

ARTICLE 7.
DISCIPLINARY GUIDELINES.

Section

700. Purpose of disciplinary guidelines
705. Grounds for denial for criminal history
710. Violations
720. Disciplinary guidelines
730. Terms of probation
740. Use of alcohol or drugs and alternative probation
745. Identification of licensed nurse
750. Professional incompetence
760. Mental or physical disabilities
770. Unprofessional conduct
780. Reinstatement of a suspended license
785. Reinstatement of a revoked license

12 AAC 44.700. PURPOSE OF DISCIPLINARY GUIDELINES. To ensure that the board's disciplinary policies are known and are administered consistently and fairly, the disciplinary guidelines in 12 AAC 44.700 – 12 AAC 44.785 are established.

Authority: AS 08.68.100 AS 08.68.270 AS 08.68.275

12 AAC 44.705. GROUNDS FOR DENIAL FOR CRIMINAL HISTORY. (a) As used in AS 08.68.270, AS 08.68.334, and this chapter, crimes that are substantially related to the qualifications, functions, or duties of a certified nurse aide, registered nurse, or practical nurse include

(1) murder;
(2) manslaughter;
(3) criminally negligent homicide;
(4) assault;
(5) sexual assault;
(6) sexual abuse of a minor;
(7) unlawful exploitation of a minor, including possession or distribution of child pornography;
(8) incest;
(9) indecent exposure;
(10) robbery;
(11) extortion;
(12) stalking;
(13) kidnapping;
(14) theft;
(15) burglary;
(16) forgery;
(17) endangering the welfare of a child;
(18) endangering the welfare of a vulnerable adult;

(19) unlawful distribution or possession for distribution of a controlled substance; for purposes of this paragraph, "controlled substance" has the meaning given in AS 11.71.900;

(20) reckless endangerment.

(b) Convictions of an offense in another jurisdiction with elements similar to an offense listed in (a) of this section are substantially related to the qualifications, functions, or duties of a certified nurse aide, registered nurse, or practical nurse.

Authority: AS 08.01.075 AS 08.68.270 AS 08.68.334
AS 08.68.100 AS 08.68.331

12 AAC 44.710. VIOLATIONS. (a) A nurse, who after a hearing under the Administrative Procedure Act (AS 44.62), is found to have violated a provision of AS 08.68 or 12 AAC 44, is subject to the disciplinary penalties listed in AS 08.01.075 and AS 08.68.275, including public notice of the violation and penalty in appropriate publications.

(b) Nothing in the guidelines set out in 12 AAC 44.720 prohibits the board from imposing greater or lesser penalties than those described in 12 AAC 44.720 or restricting the practice of a nurse depending upon the circumstances of a particular case.

Authority: AS 08.68.100 AS 08.68.270 AS 08.68.275

12 AAC 44.720. DISCIPLINARY GUIDELINES. (a) The board may revoke a license if the licensee

(1) commits a violation that is a second offense;

(2) violates the terms of probation from a previous offense;

(3) obtains or attempts to obtain, by fraud or deceit, a license to practice nursing;

(4) is convicted of a felony or other crime, if the felony or other crime is substantially related to the qualification, functions, or duties of the licensee;

(5) habitually abuses alcoholic beverages, or illegally uses a controlled substance, as defined in AS 11.71.900(4), to the extent that the abuse or use interferes with nursing functions, and if the licensee fails or refuses to participate in a rehabilitation program acceptable to the board;

(6) impersonates another health care provider;

(7) intentionally or negligently engages in conduct that results in a significant risk to the health or safety of a client or injury to a client;

(8) engages in unprofessional conduct, as described in 12 AAC 44.770, if the health, safety, or welfare of another person is placed at risk; or

(9) is professionally incompetent, if the incompetence results in risk of injury to a client.

(b) The board may suspend a license for up to two years, followed by probation of not less than two years, if the licensee

(1) habitually abuses alcoholic beverages or illegally uses controlled substances, as defined in AS 11.71.900(4), to the extent that the abuse or use interferes with nursing functions, but the licensee participates in a rehabilitation program acceptable to the board;

(2) willfully or repeatedly violates a statute in AS 08.68 or a regulation of the board; or

(3) is professionally incompetent, if the incompetence results in the public health, safety, or welfare, being placed at risk.

(c) The board may suspend a license for up to one year, followed by probation for not more than one year, if the licensee

(1) engages in unprofessional conduct as described in 12 AAC 44.770; or

(2) denies care or treatment to a person seeking assistance because the person failed to or refused to agree to arbitrate as provided in AS 09.55.535(a).

(d) The board will review, on an individual basis, the need for revocation or limitation of the license of a licensee who practices or attempts to practice while afflicted with a physical or mental illness, deterioration, or disability that interferes with the individual performance of nursing functions.

(e) The board may impose a civil fine not to exceed the amount of $5,000 for each finding the board makes of a cause for discipline under this section.

Authority: AS 08.01.075 AS 08.68.270 AS 08.68.275
AS 08.68.100

12 AAC 44.730. TERMS OF PROBATION. A licensee who is placed on probation will, in the board's discretion, be subject to one or more of the following terms of probation, and to other relevant terms of probation including those set out in 12 AAC 44.740— 12 AAC 44.760:

(1) obey all the laws of the United States, State of Alaska, and all laws pertaining to the practice of nursing in this state;

(2) fully comply with the probation program established by the board, and cooperate with representatives of the board;

(3) notify the board in writing of the dates of departure and return if the licensee leaves Alaska to reside or practice outside the state;

(4) report in person at meetings of the board of nursing, or to its designated representatives, during the period of probation, as directed by the board;

(5) submit written reports and verification of actions as are required by the board during the period of probation;

(6) if employed in nursing at any time during the period of probation, have the employer submit to the board verification that the employer understands the conditions of probation;

(7) be employed as a nurse only in a setting in which full supervision is provided, and not personally function as a supervisor.

Authority: AS 08.01.075 AS 08.68.270 AS 08.68.275
AS 08.68.100

12 AAC 44.740. USE OF ALCOHOL OR DRUGS AND ALTERNATIVE PROBATION. (a) In addition to one or more of the terms of probation set out in 12 AAC 44.730, a licensee placed on probation for the habitual abuse of alcohol or illegal use of controlled substances, as defined in AS 11.71.900(4), will, in the board's discretion, also be subject to one or more of the relevant terms of probation including the following:

(1) physical and mental health examinations, as determined by the board, to evaluate the licensee's ability to perform the professional duties of a nurse;

(2) as determined by the board, participation, until completion, in an ongoing program of rehabilitative counseling, alcoholics anonymous, narcotics anonymous, or an impaired nurse group, which includes progress reports from the care provider when requested by the board;

(3) abstain from the personal use of alcohol;

(4) abstain from the personal use of alcohol or controlled substances, as defined in AS 11.71.900(4), in any form, except when lawfully prescribed by a physician authorized to practice medicine in Alaska;

(5) submit to tests and samples required for the detection of alcohol or controlled substances, as defined in AS 11.71.900(4), at the request of the board or the board's representative.

(b) Access to controlled substances, as defined in AS 11.71.900(4), in the work setting will, in the board's discretion, be restricted.

(c) A licensee may request the opportunity to voluntarily participate in an alternative probation program. Whether a licensee may participate in an alternative probation program is at the discretion of the board. If a licensee is allowed by the board to participate in an alternative probation program, the licensee shall meet the terms of probation required by the board to remain in the alternative probation program. The board will keep the licensee's participation in the alternative probation program confidential, except as required by law. To participate in the alternative probation program, the licensee shall submit

(1) a voluntary disclosure of information relating to the licensee's use of alcohol or controlled substances; and

(2) a written request to participate in the alternative probation program.

(d) Nothing in this section shall limit the authority of the board to impose a summary suspension or other discipline if it determines that a licensee poses a risk to public health or safety.

Authority: AS 08.01.075 AS 08.68.270 AS 08.68.275
AS 08.68.100

12 AAC 44.745. IDENTIFICATION OF LICENSED NURSE. An individual licensed under AS 08.68 and this chapter as a licensed practical nurse or a registered nurse shall conspicuously display on the licensee's uniform or clothing a name tag or identification badge identifying the licensee as a licensed practical nurse or a registered nurse.

Authority: AS 08.68.100 AS 08.68.230

12 AAC 44.750. PROFESSIONAL INCOMPETENCE. In addition to one or more of the terms of probation set out in 12 AAC 44.730, a licensee placed on probation after being found professionally incompetent will, in the board's discretion, be subject to one or more of the following terms of probation:

(1) successful completion of an appropriate course or courses in nursing, as determined by the board, before the end of the probationary period; or

(2) participation in at least 30 contact hours of appropriate continuing competency education in nursing.

Authority: AS 08.01.075 AS 08.68.270 AS 08.68.275
AS 08.68.100

12 AAC 44.760. MENTAL OR PHYSICAL DISABILITIES. (a) In addition to one or more of the terms of probation set out in 12 AAC 44.730, a licensee placed on probation for practicing or attempting to practice nursing while afflicted with a physical or mental illness, deterioration, or disability that interferes with the licensee's

performance of nursing will, in the board's discretion, be subject to a physical or mental health examination to evaluate the licensee's ability to perform the professional duties of a nurse, and, if medically determined, must participate in and complete a recommended treatment program that includes written progress reports from the care provider when requested by the board.

(b) In this section, "care provider" means a person who or an organization that, by the nature of experience and training, is qualified in the opinion of the board to provide substance abuse counseling, rehabilitation, or related services to the public through established and recognized treatment programs.

Authority: AS 08.01.075 AS 08.68.270 AS 08.68.275
AS 08.68.100

12 AAC 44.770. UNPROFESSIONAL CONDUCT. Nursing conduct that could adversely affect the health and welfare of the public constitutes unprofessional conduct under AS 08.68.270(7) and includes the following:

(1) failing to use sufficient knowledge, skills or nursing judgment in the practice of nursing as defined by the level of licensure;

(2) assuming duties and responsibilities, on repeated occasions, without sufficient preparation or for which competency has not been maintained;

(3) knowingly delegating a nursing care function, task, or responsibility to another who is not licensed under AS 08.68 to perform that function, task, or responsibility, when the delegation is contrary to AS 08.68 or 12 AAC 44 or involves a substantial risk or harm to a client;

(4) failing to exercise adequate supervision over persons who are authorized to practice only under the supervision of the licensed professional;

(5) failing to perform acts within the nurse's scope of practice which are necessary to prevent substantial risk or harm to a client;

(6) violating the confidentiality of information or knowledge concerning a client; this paragraph does not apply to

(A) a case conference with other health care professionals or students;

(B) a case in which the client, in writing, authorized the nurse to reveal a communication;

(C) a case where an immediate threat of serious harm to an identifiable victim or client is communicated to the nurse by a client;

(D) information, knowledge, or facts known to the nurse regarding incompetent, unprofessional, or illegal practice of a health care provider, and that if not reported would constitute unprofessional conduct under (13) of this section;

(7) neglecting or abusing a client by one of the following means:

(A) physically;

(B) emotionally;

(C) verbally;

(8) using alcohol or other drugs to the extent that the use interferes with nursing functions;

(9) violating state or federal laws regulating drugs, including forging prescriptions or unlawfully distributing drugs or narcotics, or prescribing controlled substances for self or the nurse's immediate family members; in this paragraph, "immediate family member" means a parent, sibling, spouse, child, parent-in-law, sibling-in-law, stepchild, or same-sex or opposite-sex domestic partner;

(10) failing to maintain a record for each client which accurately reflects the nursing problems and interventions for the client, or falsifying a client's records or intentionally making an incorrect entry in a client's chart;

(11) leaving a nursing assignment without properly notifying appropriate personnel;

(12) permitting another person to use his or her nursing license or permit for any purpose;

(13) failing to report to the appropriate board, through proper channels, facts known to the nurse regarding incompetent, unprofessional, or illegal practice of a health care provider;

(14) engaging in fraud, misrepresentation, or deceit in writing the licensing examination;

(15) for any person not authorized to practice acts of medical diagnosis or medical therapeutics as an advanced practice registered nurse, to use the title nurse practitioner or advanced practice registered nurse, or the abbreviation NP or APRN or any other words, letters, signs, or figures to indicate that the person is an advanced practice registered nurse;

(16) for an advanced practice registered nurse to perform duties other than those specified in 12 AAC 44.430;

(17) for any person not authorized to practice as a certified registered nurse anesthetist to use the title registered nurse anesthetist, nurse anesthetist or certified registered nurse anesthetist or the abbreviation CRNA or any other words, letters, signs, or figures to indicate that the person is a certified registered nurse anesthetist;

(18) repealed 5/16/2018;

(19) discrimination on the basis of race, religious creed, color, national origin, ancestry or sex in the provision of nursing services;

(20) signing a record as a witness attesting to the wastage of controlled substances which the nurse did not actually witness;

(21) exploiting the patient for financial gain or offering, giving, soliciting or receiving fees for referral of a patient or client;

(22) intentionally misappropriating medications, property, supplies, equipment or other resources of the client or agency for personal or unauthorized use;

(23) removal of a patient's life support system without appropriate medical or legal authorization;

(24) untruthful or misleading advertising of nursing services;

(25) knowingly violating laws regulating health insurance including those laws established in AS 21.36.360;

(26) engaging in activities that constitute the unlicensed practice of pharmacy;

(27) for an advanced practice registered nurse with prescriptive and dispensing authority, prescribing or dispensing a prescription outside of the advanced practice registered nurse's scope of practice;

(28) engaging in sexual misconduct with a client;

(29) harassing, disruptive, or abusive behavior by a licensee directed at staff or a client, a client's relative, or a client's guardian;

(30) disruptive behavior by a licensee at the workplace that interferes with the provision of client care;

(31) failing to cooperate with an official investigation by the board's representatives, including failing to timely provide requested information;

(32) accepting healthcare provider orders from unlicensed assistive personnel;

(33) failing to cooperate with the department in an audit under of 12 AAC 02.960 – 12 AAC 02.965 of the continuing competency activities claimed by the licensee;

(34) claiming on an application for a license, or for renewal or reinstatement of a license, continuing competency activities that the licensee or license applicant has not performed;

(35) offering, giving, soliciting, or receiving fees or other benefits, in whole or in part, to a person for bringing in or referring a patient;

(36) prescribing, dispensing, or furnishing a prescription medication to a person without first conducting a physical examination of that person, unless the licensee has a patient-APRN relationship with the person; this paragraph does not apply to prescriptions written or medications issued

(A) for expedited partner therapy for sexually transmitted diseases;

(B) in response to an infectious disease investigation, public health emergency, infectious disease outbreak, or act of bioterrorism; or

(C) by an APRN practicing telehealth under 12 AAC 44.925;

(37) use of electronics or social media to disseminate, or sharing, posting, transmitting, or otherwise disseminating, any information online about a patient or information gained in the nurse-patient relationship unless there is a legal obligation to disclose the information;

(38) failure to register with the controlled substance prescription database established under AS 17.30.200, by a licensee who has a United States Drug Enforcement Administration registration number;

(39) failure to check the controlled substance prescription database established under AS 17.30.200, by a licensee when prescribing or dispensing a controlled substance designated schedule II or III under federal law to a patient;

(40) failure to provide copies of complete patient records in the licensee's custody and control within 30 days after receipt of a written request from the patient or the patient's guardian;

(41) failure to notify the board of the location of patient records within 30 days after a licensee has retired or closed a practice;

(42) failure to maintain patient documentation in compliance with 45 C.F.R. 164.530(j) (Health Insurance Privacy and Accountability Act (HIPAA)).

Authority: AS 08.68.100

12 AAC 44.780. REINSTATEMENT OF A SUSPENDED LICENSE. A suspended license may be reinstated only if the requirements in the suspension order have been met.

Authority: AS 08.68.100

12 AAC 44.785. REINSTATEMENT OF A REVOKED LICENSE. (a) One year after revocation of a license, the nurse or advanced practice registered nurse may apply to the board in writing for reinstatement.

(b) The applicant for reinstatement shall appear before the board.

(c) The board may impose restrictions upon the nurse or advanced practice registered nurse when reinstating a license.

(d) The applicant is responsible for providing a written evaluation from the employer regarding the applicant's performance and will be evaluated by the board to determine whether the license will be reinstated.

Authority: AS 08.68.100

ARTICLE 8.
CERTIFIED NURSE AIDE.

Section

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12 AAC 44.800. CERTIFICATION BY EXAMINATION. (a) An applicant is eligible for certification as a nurse aide by examination if the applicant

(1) meets one of the following requirements:

(A) successful completion, not earlier than two years immediately before the date of application, of a certified nurse aide training program approved under 12 AAC 44.835, or equivalent in content to the requirements of 12 AAC 44.835(c);

(B) possession of an unencumbered nursing license, either current or lapsed, issued by a state or territory of the United States, or by a province or territory of Canada;

(C) successful completion, not earlier than two years immediately before the date of the completed application, of one year or more of nursing education that includes both clinical and classroom instruction in nursing fundamentals from a nursing school approved by a state or territory of the United States or by a province or territory of Canada, and that is equivalent in content to the requirements of 12 AAC 44.835(c);

(D) successful completion, not earlier than five years immediately before the date of the completed application, of a United States military corpsman or medic training program equivalent in content to the requirements of 12 AAC 44.835(c) and service in the United States military forces as a corpsman or medic not earlier than five years immediately before the date of the completed application;

(E) successful completion of a nursing training program in a foreign country other than Canada; an applicant must submit all required documents accompanied by certified English translations if the original documents are not in English; and

(2) applies under (1)(A), (B), (C), or (E) of this subsection is a graduate of a foreign prelicensure education program not taught in English or if the applicant's native language is not English, and submits,

(A) verification that the applicant has passed an English proficiency examination that includes components on reading, speaking, writing, and listening;

(B) an evaluation of the applicant's nursing education by the Commission on Graduates of Foreign Nursing Schools Credentials Evaluation Service, including a full education, course-by-course report that indicates the applicant's nursing education was taught in English; or

(C) an official International Commission on Healthcare Professions (ICHP) certificate that verifies that the applicant has successfully completed the VisaScreen: Visa Credential Assessment Service.

(b) An applicant who meets the requirements of (a) of this section must also successfully complete the certified nurse aide competency evaluation described in 12 AAC 44.850. The board will deny permission to take the

competency evaluation to an applicant who has committed an act or omission that would constitute grounds for denial of certification under 12 AAC 44.818, if the board determines that the gravity of that act or omission supports a denial of permission to take the competency evaluation.

Authority: AS 08.68.100 AS 08.68.331 AS 08.68.334

Editor's note: A list of nursing schools that have been approved by a state or territory of the United States may be obtained by contacting the Commission on Collegiate Nursing Education (CCNE), 655 K Street, NW, Suite 750, Washington, DC 20001; telephone (202) 887-6791; website at www.aacnnursing.org/CCNE, Accreditation Commission for Education in Nursing (ACEN), 3343 Peachtree Road NE, Suite 850, Atlanta, GA 30326; telephone (404) 975-5000; website at www.acenursing.org, or the National League of Nursing, 61 Broadway, 33rd Floor, New York, NY 10006.

Information regarding the Commission on Graduates of Foreign Nursing Schools Credentials Evaluation Service described in 12 AAC 44.800(a)(2)(B) and the International Commission on Healthcare Professions (ICHP) certificate described in 12 AAC 44.800(a)(2)(C) is available at CGFNS International, 3600 Market Street, Suite 400, Philadelphia, Pennsylvania 19104-2651; Telephone: (215) 222-8454; website at www.cgfns.org.

12 AAC 44.805. CERTIFICATION BY ENDORSEMENT. An applicant is eligible for certification as a nurse aide by endorsement if the applicant meets the following requirements:

(1) successful completion of a certified nurse aide training program that meets minimum federal requirements of 42 C.F.R. 483.152;

(2) possession of an unencumbered nurse aide certification or registration that is issued by a state or territory of the United States, or by a province or territory of Canada, and that is current on the date of the completed application;

(3) successful completion of a competency evaluation; and

(4) if the applicant is a graduate of a foreign pre-licensure education program not taught in English, submission of

(A) verification that the applicant has passed an English proficiency examination that includes components on reading, speaking, writing, and listening;

(B) an evaluation of the applicant's nursing education by the Commission on Graduates of Foreign Nursing Schools Credentials Evaluation Service, including a full education, course-by-course report that indicates the applicant's nursing education was taught in English; or

(C) an official International Commission on Healthcare Professions (ICHP) certificate that verifies that the applicant has successfully completed the VisaScreen: Visa Credential Assessment Service.

Authority: AS 08.68.100 AS 08.68.331

Editor's note: Information regarding the Commission on Graduates of Foreign Nursing Schools Credentials Evaluation Service described in 12 AAC 44.805(4)(B) and the International Commission on Healthcare Professions (ICHP) certificate described in 12 AAC 44.805(4)(C) is available at CGFNS International, 3600 Market Street, Suite 400, Philadelphia, Pennsylvania 19104-2651; Telephone: (215) 222-8454; website at www.cgfns.org.

12 AAC 44.806. EMERGENCY COURTESY CERTIFICATION. (a) If the board has identified that an urgent situation exists as defined in (g) of this section, the board may issue an emergency courtesy certification to practice as a certified nurse aide to an applicant who meets the requirements of this section. The board may restrict the certification to only those certified nurse aide services required to respond to the urgent situation. A CNA may not practice with an emergency courtesy certification under this section outside the scope of the limited purpose for which the emergency courtesy certification is issued.

(b) An applicant for an emergency courtesy certification under this section must submit to the department a completed application on a form provided by the department. A complete application includes the application fee set out under 12 AAC 02.105.

(c) An emergency courtesy certification issued under this section is valid for the period specified by the board and may not exceed 120 consecutive days. An emergency courtesy certification may be renewed for one additional period specified by the board, not to exceed 120 days, and provided the additional period expires within 18 months of the date the certification is first issued.

(d) The board will not issue, and an emergency courtesy certification holder may not use, an emergency courtesy certification as a substitute for a temporary certification or other certification required under AS 08.68.

(e) While practicing under an emergency courtesy certification issued under this section, the holder of the emergency courtesy certification must comply with the standards of practice set out in AS 08.68 and this chapter.

(f) The board may refuse to issue an emergency courtesy certification for the same reasons that it may deny, suspend, or revoke a certification under AS 08.68.334.

(g) In this section, "urgent situation" means a health crisis requiring increased availability of certified nurse aides.

Authority: AS 08.01.062 AS 08.68.100 AS 08.68.334

12 AAC 44.810. APPLICATION FOR CERTIFICATION. (a) An applicant for certification as a nurse aide shall submit

(1) a completed application, on a form provided by the department, that verifies that the applicant meets the requirements of 12 AAC 44.800(a) or 12 AAC 44.805; the application must include

(A) the applicant's signature that certifies that the information in the application is correct to the best of the applicant's knowledge;

(B) the applicant's personal identification information requested on the form;

(C) an attestation that the applicant has completed or is eligible to complete a state approved nurse aide training program;

(D) information related to the grounds for license denial, suspension, or revocation set out in AS 08.68.270;

(2) the applicable fees established in 12 AAC 02.282;

(3) the applicant's fingerprint information required by 12 AAC 44.812;

(4) an additional application fee and fingerprint processing fee, if the submitted application has remained dormant for over one year from the original date of application;

(5) the nurse aide program verification form, completed by an official of the program attended; the form must be submitted directly to the department from the nurse aide training program; and

(6) at the written request of the board, additional information that is necessary to demonstrate that the applicant has met the licensing requirements of AS 08.68 and this chapter.

(b) An application for certification under 12 AAC 44.800 is also the application to take the competency evaluation required under 12 AAC 44.800(b).

(c) If an applicant applies for certification by endorsement under 12 AAC 44.805, the applicant shall provide certificate verification on a form provided by the department. The certificate verification must be completed by an official of the certifying jurisdiction in which the applicant was certified by examination and from the jurisdiction in which the applicant is currently certified. The jurisdiction that certified the applicant by examination must verify that the applicant obtained certification by successfully completing

(1) a state-approved nurse aide training program that meets the requirements set out under 42 C.F.R. 483.152; and

(2) a nurse aide competency evaluation that meets the requirements set out under 42 C.F.R. 483.154.

Authority: AS 08.68.100 AS 08.68.331

12 AAC 44.812. CRIMINAL JUSTICE INFORMATION. (a) An applicant for certification as a nurse aide by examination or by endorsement shall submit the applicant's fingerprints and other information required by the Department of Public Safety to obtain state and national criminal justice information under AS 12.62 and AS 12.64.

(b) The department shall submit the fingerprints received under this section to the Department of Public Safety, and request the Department of Public Safety to

(1) submit the fingerprints to the Federal Bureau of Investigation for a report on national criminal justice information;

(2) perform a check for state criminal justice information; and

(3) report to the department the results of the criminal justice information checks under (1) and (2) of this subsection.

(c) Except as provided in 12 AAC 44.814 and (d) of this section, a certificate will not be issued to an applicant until the department receives from the Department of Public Safety a report of state and national criminal justice information regarding the applicant. Reports that include criminal justice information shall be referred to the board for review.

(d) If an applicant twice has submitted fingerprints as required under this section, that the Department of Public Safety or the Federal Bureau of Investigation have been unable to read, the department will request that the Department of Public Safety and the Federal Bureau of Investigation instead conduct a search of the agency's criminal justice information records based upon the name of the applicant.

(e) Except as provided in (d) of this section, an application for reinstatement of the applicant’s initial nurse aide certification will be denied by the board if

(1) the criminal justice information requested under (b) of this section has not been received by the department;

(2) the department has notified the applicant in writing that the applicant’s criminal justice information has not been received by the department and has directed the applicant to resubmit the documents and information required under (a) of this section; and

(3) the applicant has failed to resubmit the documents and information required under (a) of this section as directed by the department

Authority: AS 08.68.100 AS 08.68.331 AS 08.68.334

12 AAC 44.814. TEMPORARY CERTIFICATION. (a) The board may issue a temporary certification to an applicant for certification by endorsement who meets the requirements of 12 AAC 44.805 and 12 AAC 44.810(a) and is waiting for the report of state and national criminal justice information under 12 AAC 44.812.

(b) The board may issue a temporary certification to an applicant for certification by examination who meets the requirements of 12 AAC 44.800 and 12 AAC 44.810(a) and is waiting for the report of state and national criminal justice information under 12 AAC 44.812.

(c) A temporary certification issued under (a) or (b) of this section is valid for six months from the date of issuance or until a permanent certification is issued or denied, whichever occurs first.

Authority: AS 08.68.100 AS 08.68.331

12 AAC 44.815. ISSUANCE AND RENEWAL OF CERTIFICATION. (a) An initial nurse aide certification is valid for the remainder of the current biennial certification period. A nurse aide certification must be renewed biennially on or before a date set by the department. A renewal reminder will be mailed to each currently certified nurse aide at least 60 days before the renewal date. A certification that is not renewed lapses.

(b) To renew a nurse aide certification, a certified nurse aide must submit

(1) a completed application for renewal on a form provided by the department;

(2) the certification renewal fee established in 12 AAC 02.282; and

(3) attestation that the applicant has met the continuing education requirements of 12 AAC 44.825 and the requirements of (c) or (d) of this section; documentation showing completion of continuing education and verification of employment will be required if the certified nurse aide is selected for audit.

(c) A nurse aide certification will be renewed if the applicant was employed in a state or territory of the United States, or in a province or territory of Canada, performing CNA duties for monetary compensation for 160 hours or more during the concluding certification period.

(d) An applicant who was employed as a certified nurse aide for monetary compensation for less than 160 hours during the concluding certification period may not obtain the required experience after the applicant's nurse aide certificate has lapsed and must successfully complete a competency evaluation under 12 AAC 44.850 before the certification will be renewed.

(e) A certified nurse aide who is issued an initial nurse aide certification less than 12 months before the next renewal period is not required to satisfy the requirements of (c) and (d) of this section.

(f) A nurse aide certification that has been lapsed for 12 months or less may be renewed under this section.

(g) An applicant who was not employed as a certified nurse aide for monetary compensation during the concluding certification period and whose certified nurse aide training program was successfully completed more than two years ago, must complete another certified nurse aide training program approved under 12 AAC 44.835, or equivalent in content to the requirements of 12 AAC 44.835(c).

Authority: AS 08.01.100 AS 08.68.331 AS 08.68.336
AS 08.68.100

12 AAC 44.818. DENIAL OF CERTIFICATION. The board will deny certification to an applicant who has committed an act or omission that constitutes grounds for denial of certification under AS 08.68.334, or that would constitute unprofessional conduct by a certified nurse aide under 12 AAC 44.870, if the board determines that the gravity of that act or omission supports a denial of certification.

Authority: AS 08.68.100 AS 08.68.331 AS 08.68.334

12 AAC 44.820. LAPSED CERTIFICATION. (a) The board will reinstate a nurse aide certification that has been lapsed for one day, but less than two years, if the applicant submits

(1) a completed reinstatement application on a form provided by the department;

(2) the certification renewal fee and the fingerprint processing fee established in 12 AAC 02.282;

(3) verification of successful completion of all continuing education requirements in 12 AAC 44.825 that would have been required to maintain a current certification for the entire period the certification was lapsed; continuing education contact hours used for reinstatement under this subsection may not be used to satisfy the continuing education requirements for the next biennial certification period;

(4) verification that the applicant was employed in another state or territory of the United States, or in a province or territory of Canada, performing CNA duties for monetary compensation as required under 12 AAC 44.815(c) for the total number of hours that would have been required to maintain a current certification for the entire period the certification was lapsed; and

(5) the applicant's fingerprint information described in 12 AAC 44.812(a).

(b) An applicant for reinstatement of a nurse aide certification under this section who has successfully completed a competency evaluation under 12 AAC 44.850 within the 24 months immediately preceding application for reinstatement is not required to meet the requirements of (a)(3) and (4) of this section.

(c) The board will reinstate a nurse aide certification that has been lapsed for at least two years, but less than five years, if the applicant submits

(1) a completed reinstatement application on a form provided by the department;

(2) the certification renewal fee and the fingerprint processing fee established in 12 AAC 02.282;

(3) verification of successful completion of all continuing education requirements in 12 AAC 44.825 that would have been required to maintain a current certification for the entire period the certification was lapsed, with at least 24 hours having been completed within the two years immediately preceding the date of application; continuing education contact hours used for reinstatement under this subsection may not be used to satisfy the continuing education requirements for the next biennial certification period;

(4) verification that the applicant was employed in another state or territory of the United States, or in a province or territory of Canada, performing CNA duties for monetary compensation as required under 12 AAC 44.815(c) for the total number of hours that would have been required to maintain a current certification for the entire period the certification was lapsed, with at least 160 hours having been completed during the two years immediately preceding the date of application;

(5) successful completion of a competency evaluation under 12 AAC 44.850 within the 24 months immediately preceding application for reinstatement; and

(6) the applicant's fingerprint information described in 12 AAC 44.812(a).

(d) The board will not reinstate a nurse aide certification that has been lapsed for five years or more. The former holder of a nurse aide certification that has been lapsed for five years or more must reapply for a new initial certification under this chapter.

Authority: AS 08.01.100 AS 08.68.100 AS 08.68.331

12 AAC 44.825. CONTINUING EDUCATION REQUIREMENTS. (a) Except as provided in (b) of this section, an applicant for renewal of a nurse aide certification must have successfully completed 24 contact hours of continuing education during the concluding certification period.

(b) An applicant for renewal of a nurse aide certification for the first time

(1) must have successfully completed 12 contact hours of continuing education during the concluding certification period, if the applicant has been certified for at least one year during that period; and

(2) is not required to complete continuing education requirements for the concluding certification period, if the applicant has been certified for less than one year during that period.

(c) Repealed 12/23/2009.

(d) An applicant for renewal or reinstatement of a nurse aide certification may not submit credit for the same course more than once to meet the continuing education requirements for a certification period.

Authority: AS 08.68.100 AS 08.68.331

12 AAC 44.830. APPLICATION FOR TRAINING PROGRAM APPROVAL. (a) An applicant seeking to establish a certified nursing aide training program must submit, at least 90 days before the date training is expected to begin,

(1) a completed application on a form provided by the department;

(2) any fee established in 12 AAC 02.282;

(3) a copy of the curriculum and other instructional materials; and

(4) a description of the classroom and clinical facilities.

(b) The application must include

(1) a summary of the rationale, philosophy, and purpose of the program;

(2) qualifications of the faculty;

(3) an outline of the program, including the program's title, objectives, content, and teaching methodology, and the number of classroom and clinical instruction hours;

(4) a copy of the nurse aide skills checklist to be used to measure student clinical skills as required in 12 AAC 44.852;

(5) program location;

(6) the name and resume of each classroom instructor;

(7) a schedule of classroom and clinical instruction hours that includes supervised skill and clinical training hours; and

(8) a copy of the final examination.

(c) Within 90 days after receipt of the application the board will advise the applicant whether additional information is needed to complete the application. Once an application is complete, if the program meets the requirements of 12 AAC 44.835 - 12 AAC 44.847 and 12 AAC 44.852, the board will provisionally approve the program. A program that has received provisional approval is authorized to conduct training until the board's final decision on the application for approval.

(d) A registered nurse that is either a member of the board or board staff will conduct an on-site review of the training facilities and personnel of a provisionally approved program during the first training offered by that program. After the on-site review the board will notify the program provider whether the board has determined that

(1) deficiencies in the provisionally approved program exist because of noncompliance with 12 AAC 44.835 - 12 AAC 44.847 and 12 AAC 44.852; and

(2) a follow-up on-site visit is necessary to ensure that the program provider corrects those deficiencies.

(e) If the board determines deficiencies to exist under (d)(1) of this section, the program provider shall correct those deficiencies and notify the board when the deficiencies have been corrected. After any follow-up on-site review that the board requires under (d)(2) of this section, if the board determines that those deficiencies have not been corrected, the board will deny approval of the program.

(f) A program provider whose application has been denied may request a hearing under AS 44.62.330 – 44.62.630 (Administrative Procedure Act) to appeal the denial of training program approval.

Authority: AS 08.68.100 AS 08.68.331

12 AAC 44.835. TRAINING PROGRAM STANDARDS. (a) A certified nurse aide training program must be conducted in a manner to assure that clients receive safe and competent care, and must train a certified nurse aide to

(1) form a relationship, communicate, and interact competently with the client;

(2) demonstrate sensitivity to the emotional, social, and mental health needs of a client through skillful and directed interactions;

(3) assist a client in attaining and maintaining independence;

(4) exhibit behavior that supports and promotes the rights of a client; and

(5) demonstrate the skills of observing, caregiving, and reporting needed to document the health, physical condition, and well-being of a client.

(b) To be approved by the board, a certified nurse aide training program must provide the following:

(1) curriculum that meets the requirements of 12 AAC 44.845 and 12 AAC 44.847;

(2) instructors who meet the requirements of 12 AAC 44.840;

(3) classroom and clinical facilities that meet the requirements of (f) of this section;

(4) maintenance of records showing the disposition of complaints received against the program.

(c) In addition to the requirements of (b) of this section, a certified nurse aide training program must consist of at least 140 hours of training that

(1) includes a minimum of 60 hours of didactic instruction that meets the requirements of 12 AAC 44.845;

(2) includes a minimum of 80 hours of supervised skills and clinical training that meets the requirements of 12 AAC 44.847 and provides an opportunity for students to gain the competencies required in 12 AAC 44.847, as follows:

(A) 48 hours must be in

(i) a long-term care facility;

(ii) an assisted living home licensed in this state that has a registered nurse or practical nurse on staff 24 hours a day; or

(iii) an acute care facility;

(B) at least 32 hours must be in learning and practicing the skills under the direct supervision of an approved instructor under 12 AAC 44.840; and

(3) documents each student's demonstration of skills by completion of the nurse aide skills checklist required under 12 AAC 44.852.

(d) During supervised skill and clinical training, a ratio of 10 students to one instructor may not be exceeded when the student is providing skills demonstration on an individual or clinical care to a client. Before having any direct contact with a client, a student must complete a minimum of 16 hours of classroom training and 16 hours of specific skill training that includes

(1) communication and interpersonal skills;

(2) infection control, including standard precautions;

(3) safety and emergency procedures;

(4) respecting and promoting the rights of the client;

(5) observation, reporting, and documentation of patient status and the care or service furnished;

(6) reading and recording temperature, pulse, and respiration;

(7) basic elements of body functioning and changes in body function that must be reported to a nurse aide's supervisor; and

(8) appropriate and safe techniques in personal hygiene and grooming that includes

(A) bed bath;

(B) sponge, tub, or shower bath;

(C) skin care;

(D) oral hygiene;

(E) toileting and elimination;

(F) safe transfer techniques and ambulation; and

(G) positioning.

(e) The training required under this section is in addition to a nursing facility's initial employee orientation requirements.

(f) Classroom and clinical facilities must provide space, comfort, safety, and equipment sufficient for conducting a professional certified nurse aide training program. When evaluating the sufficiency of classroom and clinical facilities, the board will consider whether

(1) the facilities appear to be clean and in good repair;

(2) a comfortable temperature is maintained;

(3) the lighting is bright enough to allow performance of classroom work, including reading and writing, and whether increased lighting is available as needed for specific clinical instruction;

(4) students have ready access to toilets and lavatories;

(5) space is sufficient to allow each student to be seated and take written notes during lectures, and to provide students with an unobstructed view during demonstrations of clinical skill tasks;

(6) the acoustics allow students to hear the instructor; and

(7) an aspect of the facilities likely could interfere with the effective presentation of a certified nurse aide training program; and

(8) the clinical facility provides access to a sufficient number of clients to allow the student to provide care for more than one client at a time, and for the student to gain the competencies required in 12 AAC 44.847.

(g) Except as provided in (h) of this section, the board will not approve a certified nurse aide training program offered in or by a nursing facility that the state survey and certification agency or the Centers for Medicare and Medicaid Services, United States Department of Health and Human Services, has determined to be ineligible under federal Medicare or Medicaid regulations to offer a nurse aide training and competency evaluation program within the 24 months preceding the board's review of the nursing facility's program.

(h) The board will approve a certified nurse aide training program to be conducted in a nursing facility described under (g) of this section if a program provider other than that nursing facility offers the training program, and if the state survey and certification agency has

(1) determined that a similar program is not offered within a reasonable distance of the facility;

(2) determined that an environment exists that is adequate for the operation of the program in the facility; and

(3) provided notice of its determinations to the office of long term care ombudsman established under AS 44.25.300.

(i) The board will maintain a current list of approved training programs. Those training programs approved by the board as of October 9, 1998 are determined to be in compliance with the requirements of 42 C.F.R. 483.152 and 42 C.F.R. 483.154. The board will review these programs as provided in 12 AAC 44.857.

(j) During classroom instruction, the ratio of students to the instructor may not exceed 20 students for each instructor.

(k) Notwithstanding (c) of this section, during a public health emergency declared by the governor or commissioner of health and social services, or when the board has determined an urgent situation exists as defined in (*l*) of this section, a certified nurse aide training program will allow at least 75 hours of training that includes a minimum of 59 hours of clinical training that meets the requirements of 42 C.F.R. 483.152.

(*l*) In this section, "urgent situation" means a health crisis requiring increased availability of certified nurse aides.

Authority: AS 08.68.100 AS 08.68.331

Editor's note: A list of the certified nurse aide training programs that the board has approved as of October 9, 1998 may be obtained from the Board of Nursing, Department of Commerce, Community, and Economic Development, 550 W. 7th Avenue, Suite 1500, Anchorage, AK 99501.

12 AAC 44.840. PROGRAM INSTRUCTORS. (a) In a non facility-based program,

(1) an instructor must be either a registered nurse or practical nurse licensed under AS 08.68 and have

(A) completed a course in teaching adults; or

(B) obtained experience in teaching adults or supervising nurse aides; and

(2) the program instructor or program director must have at least one year of experience in the provision of long-term care facility services.

(b) In a facility-based program,

(1) the training of nurse aides may be performed under the general supervision of

(A) a registered nurse who has at least two years of nursing experience; or

(B) the director of nursing for the facility who has at least one year of experience in a long-term care facility, but who may be prohibited from performing the actual training; and

(2) other persons may assist the instructor to meet program objectives for specific topics in training nurse aides, including physical and mental health care providers who have at least one year of experience in their fields.

Authority: AS 08.68.100 AS 08.68.331

12 AAC 44.845. CLASSROOM CURRICULUM. The 60 hours of classroom instruction required in 12 AAC 44.835(c)(1) must include the following topics:

(1) the role of a certified nurse aide, including

(A) ethical standards;

(B) legal issues;

(C) the certified nurse aide as a member of the health care team; and

(D) the client's rights and responsibilities;

(2) basic nursing skills, including

(A) monitoring body functions;

(B) taking and recording vital signs;

(C) measuring and recording a client's height and weight;

(D) caring for the client's environment;

(E) non-invasive collection and testing of physical specimens;

(F) measuring and recording fluid and food intake and output;

(G) caring for a client if the client's death is imminent; and

(H) postmortem care;

(3) personal care skills, including

(A) bathing;

(B) oral hygiene;

(C) grooming;

(D) dressing;

(E) toileting;

(F) assisting with eating and hydrating;

(G) proper feeding techniques; and

(H) skin care;

(4) safety concepts related to nursing, including

(A) medical aseptic technique, including isolation;

(B) basic life support;

(C) environment;

(D) body mechanics;

(E) transfer and ambulation;

(F) restraints and other protective devices;

(G) fire and disaster;

(H) food service; and

(I) infection control, including standard precautions;

(5) communication skills, including

(A) psychosocial needs of clients;

(B) verbal and nonverbal communications;

(C) knowledge of communication modifications for clients with limited abilities;

(D) medical and nursing terminology; and

(E) recording and reporting;

(6) hygiene and restorative nursing care, including

(A) personal hygiene;

(B) activities of daily living;

(C) adequate nutrition and fluid intake;

(D) excretory system;

(E) bladder and bowel retraining; and

(F) preventive maintenance and rehabilitative measures;

(7) human growth and development, including

(A) basic needs;

(B) developmental needs;

(C) care of the cognitively impaired, including

(i) techniques for addressing the unique needs and behaviors of an individual with dementia such as Alzheimer's or another neurodegenerative disease;

(ii) communicating with a cognitively impaired individual;

(iii) understanding the behavior of a cognitively impaired individual;

(iv) appropriate responses to the behavior of a cognitively impaired individual; and

(v) methods for reducing the effects of a cognitive impairment;

(D) mental health and social service needs;

(E) cultural factors;

(F) sexuality;

(G) process of aging; and

(H) death and dying.

Authority: AS 08.68.100 AS 08.68.331

12 AAC 44.847. CLINICAL TRAINING CURRICULUM. The 80 hours of supervised skills and clinical training required in 12 AAC 44.835(c)(2) must provide an opportunity for a student to gain the following competencies:

(1) perform according to a nurse aide's role and responsibility by

(A) using ethical and legal concepts in relationships and communication with others, including other health care providers and the client;

(B) maintaining confidentiality of client information;

(C) identifying the lines of authority and reporting problems to the appropriate person;

(D) identifying the range and limitation of certified nurse aide functions;

(E) accepting responsibility for one's actions;

(F) demonstrating promptness and dependability;

(G) seeking assistance when unsure about appropriate action;

(H) participating as a member of the health care team, including providing input to licensed nursing staff in the development and updating of client care plans; and

(I) using the concept of client's rights and responsibilities in client relationships, including the rights described in 7 AAC 12.890;

(2) demonstrate an understanding of the basic nursing skills of

(A) monitoring body functions;

(B) taking and recording vital signs;

(C) non-invasive physical specimen collection and testing, including recognizing and reporting deviations from normal limits;

(D) measuring and recording height and weight;

(E) recognizing abnormal signs and symptoms of common diseases and conditions, including the following:

(i) shortness of breath;

(ii) rapid respiration;

(iii) fever, chills, or coughs;

(iv) pain in the chest or abdomen;

(v) nausea and vomiting;

(vi) blue color to the lips;

(vii) drowsiness;

(viii) excessive thirst or sweating;

(ix) pus, blood, or sediment in urine;

(x) urinating difficulties, urinating in frequent small amounts, pain or burning during urination, or urine with dark color or strong odor;

(F) transfers, positioning, and turning of clients;

(3) demonstrate an understanding of basic personal care skills by assisting clients with

(A) bathing;

(B) oral hygiene;

(C) grooming;

(D) dressing;

(E) toileting;

(F) eating and hydration;

(G) proper feeding techniques; and

(H) skin care;

(4) demonstrate knowledge of safety concepts by

(A) using the principles of medical asepsis and isolation techniques;

(B) showing proficiency in basic life support;

(C) providing adequate ventilation, warmth, light, and therapeutic environment;

(D) using appropriate measures to relieve pain and promote rest and sleep;

(E) maintaining equipment and keeping client space clean and orderly;

(F) identifying and using accident prevention measures;

(G) applying principles of body mechanics in transferring and ambulation of a client;

(H) demonstrating the proper application and release of restraints and other protective devices;

(I) demonstrating the proper care of the client in protective devices;

(J) demonstrating knowledge of fire and disaster procedures; and

(K) applying principles of health and sanitation in the service of food to a client;

(5) demonstrate appropriate communication skills by

(A) listening and responding to a client's verbal and nonverbal communications;

(B) recognizing that the certified nurse aide's own behavior influences a client's behavior;

(C) seeking assistance in understanding a client's behavior;

(D) giving appropriate positive and negative reinforcement;

(E) making adjustments for the physical or mental limitations of a client;

(F) using terminology accepted in the employing facility to record and report observations and pertinent information;

(G) recording and reporting observations, activities, and communications accurately;

(6) demonstrate knowledge of hygiene and restorative nursing care by

(A) providing appropriate personal hygiene services to the client;

(B) using measures that promote good skin care, including the use of anti-pressure procedures and devices;

(C) carrying out preventive maintenance and rehabilitative measures such as therapeutic ambulation, exercise, range of motion, and bed and chair positioning in daily care;

(D) recognizing and promoting opportunities for self-care, according to the client's ability;

(E) helping to provide adequate nutrition, including fluid intake and progressive self-feeding by the client;

(F) identifying and monitoring special dietary needs;

(G) following correct procedures to aid adequate elimination from the bladder and bowel, including measuring output;

(H) demonstrating an understanding of the concepts of bladder and bowel retraining; and

(I) making adjustments for physical or mental limitations;

(7) demonstrate knowledge of growth and development concepts by

(A) identifying basic human needs;

(B) helping to provide for a client's spiritual needs;

(C) recognizing the client's family as an influence on behavior and care;

(D) identifying developmental tasks associated with aging;

(E) identifying cultural factors that may influence behavior;

(F) describing the body responses, including sexuality, in the normal life cycle;

(G) describing the body responses to loss, dying, and death; and

(H) demonstrating knowledge of post mortem care; and

(8) demonstrate behavior that maintains the rights of the client by

(A) providing privacy and maintenance of confidentiality;

(B) promoting the client's right to make personal choices to accommodate individual needs;

(C) helping the client to resolve grievances;

(D) helping the client get to, and participate in, family and other group activities;

(E) helping to care for and maintain the security of a client's personal possessions;

(F) providing care that protects the client from abuse, mistreatment, or neglect;

(G) reporting any instances of abuse, mistreatment, or neglect to the appropriate authorities;

(H) maintaining the client's environment and providing the level of care that will minimize the need for physical and chemical restraints;

(I) acting as an advocate if a client's rights appear to have been violated by reporting to the appropriate supervisory staff.

Authority: AS 08.68.100 AS 08.68.331

12 AAC 44.850. NURSE AIDE COMPETENCY EVALUATION. (a) To be approved by the board a certified nurse aide competency evaluation must include

(1) an examination covering the subjects specified in 12 AAC 44.845 and 12 AAC 44.847; the competency evaluation must offer the applicant a choice between a written examination and an oral examination;

(2) a practical examination demonstrating the applicant's clinical and practical nurse aide skills; and

(3) notification to the applicant of the applicant's performance on the competency evaluation, identifying those portions, if any, of the competency evaluation that the applicant did not pass.

(b) A competency evaluation must be administered and evaluated by a nationally recognized nurse aide credentialing service approved by the board.

(c) Except as provided in (d) of this section, an applicant who does not successfully complete the competency evaluation required under this section may retake that portion of the competency evaluation that the applicant did not pass, upon payment of the examination fee required under 12 AAC 02.282.

(d) An applicant who does not successfully complete the competency evaluation after three attempts must complete a remedial course of training as required by the board. The applicant must provide proof of having fulfilled the requirements of the remedial course of training before the board will approve the applicant to retake the competency evaluation.

(e) The board may allow the competency evaluation to be conducted at a facility in which the nurse aide is or will be employed, if the facility meets the requirements for the written and skills portions of the evaluation and is approved by the board.

(f) The board may advise individuals who successfully completed the competency evaluation that a record of their successful completion of the evaluation will be included in the nurse aide registry.

Authority: AS 08.68.100 AS 08.68.331

12 AAC 44.852. NURSE AIDE SKILLS CHECKLIST. (a) A certified nurse aide training program must maintain a nurse aide skills checklist that records the performance of each student. The nurse aide skills checklist must include

(1) each of the skills listed in 12 AAC 44.845 and 12 AAC 44.847;

(2) the date each skill was practiced or demonstrated;

(3) the student's satisfactory or unsatisfactory performance of a skill each time it was practiced or demonstrated; and

(4) the name and signature of the instructor who supervised the student's performance of a skill.

(b) After a student has completed a certified nurse aide training program, the program provider shall provide a copy of the nurse aide skills checklist to the student.

Authority: AS 08.68.100 AS 08.68.331

12 AAC 44.855. CHANGES IN TRAINING PROGRAM. A change in curriculum or a substantive change in an approved certified nurse aide training program may not occur without board approval. The program provider must submit a description of the proposed change in curriculum or other substantive change to the board for review at least 60 days before the provider proposes to implement the changes. The board will base its approval on whether the proposed change meets the requirements of 12 AAC 44.835 – 12 AAC 44.847 and 12 AAC 44.852.

Authority: AS 08.68.100 AS 08.68.331

12 AAC 44.857. TRAINING PROGRAM REVIEW. (a) The board will approve a certified nurse aide training program for a two-year period. Within two years after the date of the initial approval of a certified nurse aide training program, the board will conduct an on-site review of the training program to determine continued compliance with the requirements of 12 AAC 44.835 - 12 AAC 44.847 and 12 AAC 44.852 - 12 AAC 44.860. If the board determines that the training program complies with those requirements, the board will extend its approval of that program for another two years.

(b) After the on-site review under (a) of this section, the board will notify the program provider whether the board has determined that deficiencies in the certified nurse aide training program exist because of noncompliance with 12 AAC 44.835 – 12 AAC 44.847 and 12 AAC 44.852 – 12 AAC 44.860. The program provider must provide the board with proof that those deficiencies have been corrected within 30 days after the notice of deficiency. If a program provider fails to provide proof to the board's satisfaction that the deficiencies have been corrected, and if the board determines that the seriousness of the uncorrected deficiencies supports a withdrawal of approval, the board will withdraw approval of the training program.

(c) During a year in which on-site review is not scheduled, the program provider shall complete a self-evaluation form provided by the board.

(d) The board will, in its discretion, conduct a review of a certified nurse aide training program if the board has reason to believe that the program does not meet the requirements of 12 AAC 44.835 - 12 AAC 44.847 or 12 AAC 44.852 - 12 AAC 44.860, and will, in its discretion, conduct unannounced visits to the program as part of the review.

Authority: AS 08.68.100 AS 08.68.331 AS 08.68.334

12 AAC 44.858. TRAINING PROGRAM PASS RATE. (a) An approved certified nurse aide training program must achieve at least an 80 percent cumulative annual pass rate.

(b) If an approved certified nurse aide training program fails to achieve at least an 80 percent cumulative annual pass rate, the board will issue a letter of concern by certified mail, with return receipt requested, to the program. Within 90 days after receipt of a letter of concern from the board, the approved certified nurse aide training program must submit to the board a report that

(1) analyzes the factors that are believed to be contributing to the low pass rate; and

(2) sets out the program's plan to achieve at least an 80 percent cumulative annual pass rate.

(c) The board will reevaluate the program one year after a letter of concern has been issued to an approved certified nurse aide training program.

(d) If an approved certified nurse aide training program reevaluated by the board under (c) of this section has failed to achieve at least an 80 percent cumulative annual pass rate, the board will issue a letter of warning to the program. Within 90 days after receipt of a letter of warning from the board, the approved certified nurse aide training program must submit to the board a report that

(1) analyzes the reasons the program's original plan to improve the low pass rate was unsuccessful; and

(2) sets out the program's additional plan to achieve at least an 80 percent cumulative annual pass rate.

(e) The board will reevaluate the program one year after a letter of warning has been issued to an approved certified nurse aide training program.

(f) If an approved certified nurse aide training program reevaluated by the board under (e) of this section has failed to achieve at least an 80 percent cumulative annual pass rate, the board will place the certified nurse aide training program on conditional approval. The certified nurse aide training program will continue on conditional approval until

(1) the certified nurse aide training program has achieved at least an 80 percent cumulative annual pass rate during two consecutive years; or

(2) approval of the certified nurse aide training program is withdrawn under 12 AAC 44.862.

(g) For purposes of this section, a certified nurse aide training program achieves at least an 80 percent cumulative annual pass rate if the year-end data shows that at least 80 percent of the graduates of the approved nurse

aide training program, taking the National Nurse Aide Assessment Program competency evaluation for the first time, successfully passed that competency evaluation.

(h) If the training program does not respond to the letter of concern within 90 days, as required under (b) of this section, the board will withdraw approval for the nurse aide program as set out in 12 AAC 44.862.

Authority: AS 08.68.100 AS 08.68.331

12 AAC 44.860. DISCONTINUATION OF A TRAINING PROGRAM. (a) The program provider of a certified nurse aide training program that discontinues operation shall

(1) notify the board in writing of the date the program provider intends to cease operation; and

(2) submit to the board a written list of the names and dates of graduation of students who graduated from that training program within the last two years, and those who are expected to graduate before the program ceases operation.

(b) Students who have started a training program from which approval has been withdrawn may complete the course and receive any credits earned.

Authority: AS 08.68.100 AS 08.68.331

12 AAC 44.862. WITHDRAWAL OF APPROVAL. (a) The board will withdraw approval of a certified nurse aide training program offered by or in a nursing facility described in 12 AAC 44.835(g), but will allow the operation of a training program under the conditions set out in 12 AAC 44.835(h).

(b) The board will withdraw approval of a certified nurse aide training program if the program provider refuses to permit unannounced visits by the board.

(c) The board may withdraw approval of a certified nurse aide training program if the board determines that the program no longer meets the requirements of 12 AAC 44.835 - 12 AAC 44.847 and 12 AAC 44.852 - 12 AAC 44.860, or that the program has been unable to achieve minimal standards within two years after being placed on conditional approval under 12 AAC 44.858. If the board withdraws approval of the training program the board will notify the program provider in writing, indicating the reasons for the action.

(d) The provider of a certified nurse aide training program for which approval has been withdrawn may request a hearing under AS 44.62.330 – 44.62.630 (Administrative Procedure Act) to appeal the withdrawal of program approval.

(e) Students who have started a training program from which approval has been withdrawn may complete the course and receive any credits earned.

Authority: AS 08.68.100 AS 08.68.331

12 AAC 44.865. REGISTRY OF CERTIFIED NURSE AIDES. (a) The board will maintain a registry of certified nurse aides. The information contained in the registry is available to the public upon request. Within 30 days after the board issues an individual a certification under 12 AAC 44.800 – 12 AAC 44.820, the board will place in the registry

(1) the individual's full name;

(2) information necessary to identify the individual; and

(3) the date the board issued the individual the certification.

(b) Except as provided in (c) of this section, the board will remove from the registry the name of an individual holding a nurse aide certification that has been lapsed for more than two years.

(c) Except as provided in (e) of this section, the board will retain in the registry information regarding a finding under AS 08.68.333 or AS 47.05.055 that a person has committed abuse, neglect, or misappropriation of property in connection with employment as a nurse aide. At the request of the individual found to have committed abuse, neglect, or misappropriation of property, the board will also retain in the registry a statement by that individual disputing the finding.

(d) An individual who wishes to have removed from the registry information regarding a finding that the individual has committed abuse, neglect, or misappropriation of property in connection with employment as a nurse aide must apply in writing to the board, specifying grounds that meet the requirements for removal under AS 08.68.333(e). After consideration of the individual's request, the board will decide whether to remove the information regarding the finding from the registry. If the request for removal is denied, the individual may request a hearing under AS 44.62.330 – AS 44.62.630 (Administrative Procedure Act) to appeal the denial.

(e) The board will remove from the registry information regarding a finding that an individual has committed abuse, neglect, or misappropriation of property in connection with employment as a nurse aide, if the board receives notice that the individual has died.

Authority: AS 08.68.100 AS 08.68.331 AS 08.68.333

12 AAC 44.870. UNPROFESSIONAL CONDUCT. (a) A certified nurse aide, who after a hearing under AS 44.62.330 – AS 44.62.630 (Administrative Procedure Act), is found to have committed an act or omission that is

described in AS 08.68.334, or that constitutes unprofessional conduct under this section, is subject to the disciplinary penalties listed in AS 08.01.075.

(b) Unprofessional conduct includes conduct that could adversely affect the health and welfare of a client, including

(1) failing to competently perform the duties of a certified nurse aide;

(2) assuming the duties and responsibilities of a certified nurse aide, on repeated occasions, without sufficient preparation for those duties, or performing duties for which competency has not been maintained;

(3) performing acts beyond the authorized scope or the level for which the person is certified;

(4) failing to perform acts within the certified nurse aide's scope of competence that are necessary to prevent substantial risk of harm to a client;

(5) violating the confidentiality of client information; this paragraph does not apply to reports by a certified nurse aide to the office of the long term care ombudsman established under AS 44.25.300 or to reports by a certified nurse aide under AS 47.24.010 - AS 47.24.015;

(6) failing to respect a client's rights and dignity regardless of the client's social or economic status, the client's personal attributes, or nature of the client's health problems or disability;

(7) neglecting or abusing a client physically, emotionally, or verbally;

(8) using alcohol or other drugs to the extent that the use interferes with nurse aide functions;

(9) violating state or federal laws regulating drugs, including forging prescriptions or unlawfully distributing drugs;

(10) falsifying, altering, or destroying client or facility records;

(11) failing to communicate information regarding a client's status to appropriate individuals in an ongoing and timely manner;

(12) failing to keep accurate or complete records related to client care or action by the facility;

(13) failing to maintain current client records that accurately document management of client care;

(14) leaving a certified nurse aide assignment without notifying appropriate supervisory personnel;

(15) providing or selling information to be used by a person to procure or attempt to procure a certification through fraud or misrepresentation;

(16) permitting another person to use the certified nurse aide's certification for any purpose;

(17) failing to report to the appropriate occupational licensing board facts known to the certified nurse aide regarding incompetent, unprofessional, or illegal conduct by a practitioner of the healing arts, unless the certified nurse aide is aware that the conduct has already been reported and the practitioner is already participating in a treatment or educational program approved by that licensing board;

(18) engaging in sexual misconduct;

(19) discriminating on the basis of a client's race, religion, color, national origin, ancestry, or sex in the provision of certified nurse aide services;

(20) exploiting a client for financial gain;

(21) offering, giving, soliciting, or receiving fees for the referral of a client;

(22) knowingly misappropriating drugs, property, supplies, equipment, or other resources for personal or unauthorized use;

(23) untruthful or misleading advertising of certified nurse aide services;

(24) knowingly violating laws regulating health insurance;

(25) harassing, disruptive, or abusive behavior by a certified nurse aide directed at staff or a client, a client's relative, or a client's guardian;

(26) disruptive behavior by a certified nurse aide at the workplace that interferes with the provision of client care;

(27) failing to cooperate with an official investigation by the board's representatives, including failing to timely provide requested information;

(28) accepting or communicating verbal or written orders from a healthcare provider as defined in 12 AAC 44.945(e)(3);

(29) recording any part of the administration of the nurse aide certification examination or removing copies or photographs of any of the testing documents from the testing environment; and

(30) use of electronics or social media, to disseminate, or sharing, posting, transmitting, or otherwise disseminating, any information online about a patient or information gained in the nurse-patient relationship unless there is a legal obligation to disclose the information.

Authority: AS 08.01.075 AS 08.68.331 AS 08.68.334
AS 08.68.100

12 AAC 44.875. CONDITIONS OF PROBATION. (a) If the board imposes probation on a certified nurse aide, the board will require, as a condition of probation, that the certified nurse aide do one or more of the following:

(1) obey all federal and state laws and regulations pertaining to the practice of a certified nurse aide;

(2) fully comply with orders from the board regarding probation;

(3) notify the board in writing of the dates of departure from and return to the state, if the certified nurse aide leaves the state to practice outside the state;

(4) report in person to the board, according to the conditions of probation;
(5) submit written reports to the board according to the conditions of probation;
(6) be employed as a certified nurse aide only in a setting in which on-site supervision is available, as specified by the board.

(b) If the board imposes probation on a certified nurse aide for the habitual abuse of alcohol or drugs, the board will, in its discretion and as a condition of probation, require that the certified nurse aide do one or more of the following, in addition to a condition imposed under (a) of this section:

(1) submit to physical and mental health examinations as the board determines necessary to evaluate the probationer's ability to competently perform the duties of a certified nurse aide;
(2) as determined by the board, participate in a program of rehabilitative counseling such as
(A) an impaired health care provider treatment program that provides progress reports from the treatment program when requested by the board; or
(B) a 12-step program, such as alcoholics anonymous or narcotics anonymous;
(3) abstain from the personal use of alcohol or drugs in any form, except as lawfully prescribed by a licensed practitioner;
(4) at the request of the board, submit physical specimens to be tested for the presence of alcohol or drugs.

Authority: AS 08.01.075 AS 08.68.331 AS 08.68.334
AS 08.68.100

12 AAC 44.880. REINSTATEMENT OF REVOKED CERTIFICATION. (a) If the board revokes or suspends an individual's certification as a nurse aide, at least one year after revocation or suspension of that certification, the nurse aide may apply to the board in writing for reinstatement of the certification. The board will, in its discretion, reinstate a certification if the board determines that the nurse aide has established that the nurse aide is competent to resume nurse aide duties with skill and safety, considering the reasons for the revocation or suspension.

(b) The board will, in its discretion, require a nurse aide seeking reinstatement to work in a supervised relationship, approved by the board, for a probationary period of time, as a condition of reinstatement. If directed by the board, the nurse aide must provide a written evaluation from the supervisor regarding the nurse aide's performance. The board will, in its discretion, use the evaluation to determine whether to reinstate the nurse aide's certification.

Authority: AS 08.68.100 AS 08.68.331 AS 08.68.334

12 AAC 44.885. IDENTIFICATION OF NURSE AIDES. (a) An individual with certification as a nurse aide under AS 08.68.331 – AS 08.68.336 and 12 AAC 44.800 – 12 AAC 44.895, when working as certified nurse aide, shall conspicuously display on the individual's uniform or clothing a name tag or identification badge identifying the individual as a certified nurse aide.

(b) An individual training to be a certified nurse aide, when working as a student, shall conspicuously display on the individual's uniform or clothing a nameplate that identifies that individual as a nurse aide trainee.

Authority: AS 08.68.100 AS 08.68.331

12 AAC 44.890. DELEGATION TO DEPARTMENT. In 12 AAC 44.800 – 12 AAC 44.895, to the extent consistent with AS 08.68.331, references to "the board" include the board's designee, the Department of Commerce, Community, and Economic Development.

Authority: AS 08.68.100 AS 08.68.331

12 AAC 44.895. DEFINITIONS. As used in AAC 44.800 – 12 AAC 44.895,

(1) repealed 11/10/2002;
(2) "clinical" means based on actual observation and treatment of clients;
(3) "contact hour" means a minimum of 50 minutes of actual organized instruction; academic credit converts to contact hours as follow:
(A) one quarter academic credit equals 10 contact hours;
(B) one semester academic credit equals 15 contact hours.
(4) "continuing education" means a systematic educational experience that contributes directly to the skills and knowledge needed to satisfactorily perform the duties of a certified nurse aide, and that is obtained in a program that offers academic credit or contact hours beyond the basic nurse aide training program;
(5) "department" means the Department of Commerce, Community, and Economic Development;
(6) repealed 11/10/2002;
(7) "exploiting a client for financial gain" means the illegal or improper use of a client's resources for the profit or gain of a person other than the client; "exploiting a client for financial gain" includes borrowing a client's

money, spending a client's money without the client's consent, or, if the client is unable to consent, spending a client's money for items or services which the client cannot appreciate or from which the client cannot benefit;

(8) "facility-based" means a training program offered both in and by a nursing facility;

(9) "home health agency" means a facility that the Department of Health has licensed as a home health agency under 7 AAC 12;

(10) "nursing facility" includes a nursing home licensed under AS 18.20; a Medicare- or Medicaid-certified skilled, intermediate, or long term care facility; and an assisted living home licensed under AS 47.33;

(11) "physical and mental health care providers" include registered nurses, licensed practical nurses, pharmacists, dieticians, social workers, sanitarians, fire safety experts, nursing home administrators, gerontologists, psychologists, physical and occupational therapists, activities specialists, speech therapists, hearing therapists, and experts in client rights;

(12) "practitioner of the healing arts" has the meaning given in AS 47.17.290, as amended as of October 9, 1998, adopted by reference;

(13) "primary instructor" means the individual who will provide the majority of the required hours of instruction to the students;

(14) repealed 11/10/2002;

(15) "state survey and certification agency" means the division of medical assistance, Department of Health;

(16) "supplemental personnel" includes physical and mental health care providers and experts in areas directly related to the safety, comfort, and quality of life of the elderly and chronically ill;

(17) "supervised practical training" means training in which the student demonstrates knowledge while performing tasks on an individual under the direct supervision of a registered nurse or licensed practical nurse;

(18) repealed 12/27/2012;

(19) "certification" means a credential

(A) issued by the board to an individual who meets the requirements of 12 AAC 44.800, 12 AAC 44.805, or 12 AAC 44.814; and

(B) authorizing the individual to use the title "certified nurse aide" or the abbreviation "C.N.A.".

(20) "general supervision" means authoritative procedural guidance by a supervisor who is an approved program instructor for the accomplishment of a function or activity and is on the premises to supervise the individual.

Authority: AS 08.68.100 AS 08.68.331 AS 08.68.332

ARTICLE 9.
GENERAL PROVISIONS.

Section

900. (Repealed)
905. (Relocated)
910. (Relocated)
920. (Relocated)
925. Standards of practice for telehealth
930. Change of name
940. (Relocated)
945. Administration of herbal or non-herbal nutritional supplement
950. Standards for delegation of nursing duties to other persons
955. Delegation of routine nursing duties
960. Delegation of specialized nursing duties
965. Delegation of the administration of medication
966. Delegation of the administration of injectable medication
970. Nursing duties that may not be delegated
975. Exclusions
980. Executive administrator
990. Definitions

Editor's note: As of Register 103, 12 AAC 44.905, 12 AAC 44.910, and 12 AAC 44.920, which had appeared in the General Provisions article, were renumbered as 12 AAC 44.770, 12 AAC 44.780, and 12 AAC 44.785, respectively, and relocated in a new Article 7, titled "Disciplinary Guidelines."

12 AAC 44.900. LICENSE RENEWAL AND REINSTATEMENT OF A LAPSED LICENSE. Repealed 11/2/2001.

12 AAC 44.905. UNPROFESSIONAL CONDUCT. Relocated.

12 AAC 44.910. REINSTATEMENT OF A SUSPENDED LICENSE AND/OR AUTHORIZATION. Relocated.

12 AAC 44.920. REINSTATEMENT OF A REVOKED LICENSE AND/OR AUTHORIZATION. Relocated.

12 AAC 44.925. STANDARDS OF PRACTICE FOR TELEHEALTH. (a) In accordance with the American Association of Nurse Practitioners, *Position Statement: Telehealth*, dated 2022, adopted by reference, an APRN shall, for the purpose of rendering a diagnosis, providing treatment, or prescribing, dispensing, or administering a prescription drug to a person without conducting a physical examination under AS 08.68.710, provide the same standard of care to a patient who is at a different location as would be provided to that patient in person.

(b) An APRN may practice telehealth if

(1) the APRN is licensed by the board; and

(2) the APRN or another licensed health care provider is available to provide follow-up care.

(c) For a telehealth encounter, an APRN must complete and document

(1) the patient's informed consent to use telehealth technologies;

(2) a clinical history and review of systems establishing diagnoses and identifying conditions and contraindications to recommended treatment;

(3) a plan of care that lists all recommendations and prescriptions issued by electronic means;

(4) the patient and provider locations at the time of the telehealth visit; and

(5) the provider-patient relationship prior to prescribing.

(d) An APRN practicing telehealth shall comply with P.L. 104 - 191 (Health Insurance Portability and Accountability Act of 1996 (HIPAA)) and medical record retention rules. Transmissions, including patient electronic mail, prescriptions, and laboratory results must be secure within existing technology, including the use of password-protected, encrypted electronic prescriptions or other reliable authentication techniques.

(e) In this section, a "provider-patient relationship" is established when there is an in-person health examination or examination by telehealth technology of the patient by the APRN or another licensed health care provider and the patient record is available to the treating APRN.

Authority: AS 08.68.100 AS 08.68.710

Editor's note: A copy of the *Position Statement: Telehealth*, published by the American Association of Nurse Practitioners, dated 2022, adopted by reference under 12 AAC 44.925, may be obtained from the American Association of Nurse Practitioners Internet website at https://storage.aanp.org/www/documents/advocacy/position-papers/Telehealth.pdf.

12 AAC 44.930. CHANGE OF NAME. A licensee authorized to practice under this chapter shall notify the board of a change of mailing address or name not later than 30 days after the change. A report of a change of name must be made in writing and must be accompanied by one of the following to verify the change of name:

(1) a completed affidavit supplied by the board;

(2) a certified copy of a marriage certificate;

(3) a certified copy of a divorce decree; or

(4) a certified copy of a court ruling.

Authority: AS 08.68.100

12 AAC 44.940. Relocated 4/2/86.

12 AAC 44.945. ADMINISTRATION OF HERBAL OR NON-HERBAL NUTRITIONAL SUPPLEMENT. (a) A nurse licensed under AS 08.68 may administer an herbal or non-herbal nutritional supplement to a patient if

(1) the patient's health care provider has ordered that an herbal or non-herbal nutritional supplement be administered to the patient;

(2) the patient or the patient's representative has requested that the nurse administer an herbal or non-herbal nutritional supplement to the patient;

(3) the nurse administering the herbal or non-herbal nutritional supplement knows the actions, possible side effects, and possible interactions of the supplement with food, medications, or other substances;

(4) the use of the herbal or non-herbal nutritional supplement and indications are included as part of the nursing care plan for the patient;

(5) the herbal or non-herbal nutritional supplement was commercially manufactured and the container of the nutritional supplement provided for administration to the patient was provided unopened with the manufacturer's seal intact and administered before the expiration date; and

(6) a pharmacist has reviewed all medications taken by the patient including any herbal or non-herbal nutritional supplements ordered by the patient's health care provider or requested by the patient or patient's representative for possible adverse effects or interactions with food, medications, or other substances.

(b) Repealed 8/10/2016.

(c) A nurse licensed under AS 08.68 may not administer to a patient an herbal or non-herbal nutritional supplement that

(1) was compounded for the patient rather than commercially manufactured; or

(2) is a controlled substance under state or federal law.

(d) This section does not apply to United States Food and Drug Administration (FDA) regulated vitamins and minerals. A nurse licensed under AS 08.68 may administer FDA-regulated vitamins and minerals to a patient in the manufacturer's recommended dosage or as ordered by the patient's health care provider.

(e) As used in this section,

(1) "administer" means to provide a nutritional supplement to a patient for ingestion by the patient;

(2) "compounded" means the preparation, mixing, assembling, packaging, or labeling of a nutritional supplement;

(3) "health care provider" includes a licensed

(A) advanced practice registered nurse;

(B) doctor of medicine;

(C) doctor of osteopathy;

(D) physician assistant; and

(E) dentist;

(4) "herb" means a plant grown for its health or medicinal properties; "herb" includes plant parts and extracts;

(5) "non-herbal nutritional supplement" has the meaning given for a "dietary supplement" in 21 U.S.C. 321(ff) (sec. 3(a) of the Dietary Supplement Health and Education Act of 1994), revised as of March 1, 2007, adopted by reference, except that it does not include a dietary supplement that contains one or more herbs;

(6) "nutritional supplement" has the meaning given for a "dietary supplement" in 21 U.S.C. 321(ff), (sec. 3(a) of the Dietary Supplement Health and Education Act of 1994), revised as of March 1, 2007, adopted by reference.

Authority: AS 08.68.100

12 AAC 44.950. STANDARDS FOR DELEGATION OF NURSING DUTIES TO OTHER PERSONS. (a) A nurse licensed under AS 08.68 may delegate the performance of nursing duties to other persons, including unlicensed assistive personnel, if the following conditions are met:

(1) the nursing duty to be delegated must be within the scope of practice of the delegating nurse;

(2) a registered nurse must assess the patient's medical condition and needs to determine if a nursing duty for that patient may be safely delegated to another person;

(3) the patient's medical condition must be stable and predictable;

(4) the person to whom the nursing duty is to be delegated has received the training needed to safely perform the delegated duty, and this training has been documented;

(5) the nurse determines that the person to whom a nursing duty is to be delegated is competent to perform the delegated duty correctly and safely and accepts the delegation of the duty and the accountability for carrying out the duty correctly;

(6) performance of the delegated nursing duty would not require the person to whom it was delegated to exercise professional nursing judgment or knowledge or complex nursing skills;

(7) the nurse provides to the person, with a copy maintained on record, written instructions that include

(A) a clear description of the procedure to follow to perform each task in the delegated duty;

(B) the predicted outcomes of the delegated nursing task;

(C) how the person is to observe and report side effects, complications, or unexpected outcomes in the patient, and the actions appropriate to respond to any of these; and

(D) the procedure to document the performance of the nursing duty in the patient's record.

(b) A nurse who has delegated a nursing duty to another person shall provide appropriate direction and supervision of the person, including the evaluation of patient outcomes. Another nurse may assume delegating responsibilities from the delegating nurse if the substitute nurse has assessed the patient, the skills of the person to whom the delegation was made, and the plan of care. Either the original delegating nurse or the substitute nurse shall remain readily available for consultation by the person, either in person or by telecommunication.

(c) The delegation of a nursing duty to another person under this section is specific to that person and for that patient, and does not authorize any other person to perform the delegated duty.

(d) The nurse who delegated the nursing duty to another person remains responsible for the quality of the nursing care provided to the patient.

Authority: AS 08.68.100 AS 08.68.805 AS 08.68.850
AS 08.68.340

12 AAC 44.955. DELEGATION OF ROUTINE NURSING DUTIES. (a) Routine nursing duties may be delegated to another person under the standards set out in 12 AAC 44.950. Routine nursing duties are those that

(1) occur frequently in the daily care of a patient or group of patients;

(2) do not require the person to whom the duty is delegated to exercise professional nursing knowledge or judgment;

(3) do not require the exercise of complex nursing skills;

(4) have a standard procedure and predictable results; and

(5) present minimal potential risk to the patient.

(b) Routine nursing duties that may be delegated include

(1) monitoring bodily functions;

(2) taking and recording vital signs;

(3) transporting patients;

(4) non-invasive collection and testing of physical specimens;

(5) measuring and recording fluid and food intake and output; and

(6) personal care tasks such as bathing, oral hygiene, dressing, toileting, assisting with eating, hydrating, and skin care.

Authority: AS 08.68.100 AS 08.68.805 AS 08.68.850

12 AAC 44.960. DELEGATION OF SPECIALIZED NURSING DUTIES. (a) Specialized nursing duties are those duties that do not require professional nursing education to correctly perform, but require more training and skill than routine nursing duties. Specialized nursing duties may be delegated to another person under the standards set out in 12 AAC 44.950.

(b) Specialized nursing tasks that may be delegated include

(1) changing simple, nonsterile dressings using aseptic technique when no wound debridement or packing is involved;

(2) assisting patients with self-medication;

(3) obtaining blood glucose levels;

(4) suctioning of the oral pharynx;

(5) providing tracheostomy care in established, stable patients;

(6) removal of internal or external urinary catheters;

(7) adding fluid to established gastrostomy tube feedings and changing established tube feeding bags; and

(8) placing electrodes and leads for electrocardiogram, cardiac monitoring, and telemetry.

(c) A nurse who delegates a nursing duty to another person under this section shall develop a nursing delegation plan that describes the frequency and methods of evaluation of the performance of the delegated duty by the other person. The delegating nurse shall evaluate a continuing delegation as appropriate, but must perform an evaluation on-site at least once every 90 days after the delegation was made. The delegating nurse shall keep a record of the evaluations conducted.

Authority: AS 08.68.100 AS 08.68.805 AS 08.68.850

12 AAC 44.965. DELEGATION OF THE ADMINISTRATION OF MEDICATION. (a) The administration of medication is a specialized nursing task that may be delegated under the standards set out in 12 AAC 44.950, 12 AAC 44.960, and this section.

(b) Administration of medication may be delegated only to a

(1) "home and community-based services provider" as defined in 7 AAC 43.1110(8);

(2) "residential supported living services provider" as defined in 7 AAC 43.1110(15);

(3) school setting provider; in this paragraph, "school setting provider" means a person who is employed at a school that provides educational services to students age 21 or younger;

(4) certified nurse aide employed by a long-term care facility licensed and certified by the Health Facilities Licensing and Certification section of the Department of Health; or

(5) certified medical assistant.

(c) The person to whom the administration of medication is to be delegated must successfully complete a training course in administration of medication approved by the board. The training course in administration of medication approved by the board in this subsection will be reviewed by the board every two years.

(d) To delegate to another person the administration of routinely scheduled oral, topical, transdermal, nasal, inhalation, optic, otic, vaginal, or rectal medications to a patient the written instructions provided to the person under 12 AAC 44.950(a)(7) must also include

(1) directions for the storage and administration of medication, including the brand and generic name of the medication, the dosage amount and proper measurement, timing of the administration, recording the administration, the expected outcome of administration, and any contraindications to administration;

(2) possible interactions of medications;

(3) how to observe and report side effects, complications, errors, missed doses, or unexpected outcomes of the medications and appropriate response to such developments; and

(4) if the delegating nurse is not available on-site, the action that the person must take when medications are changed by order of a health care provider, including how to notify the delegating nurse of the change, how the delegating nurse will receive verification from the health care provider of the medication change, and how the nurse is to notify the other person if the administration of the change of medication is delegated.

(e) The administration of PRN medication, other than controlled substances, may be delegated under this section if a nurse is not available on-site. Before the administration of PRN medications may be delegated, the nurse shall first assess the patient to determine whether on-site patient assessment will be required before administration of each dose of PRN medication. The written instructions provided to the person under 12 AAC 44.950(a)(7) must meet the requirements of (d) of this section, and must also include

(1) when to administer the PRN medication to the patient;

(2) the procedure to follow for the administration of the PRN medication, including dosage amount, frequency, and duration; and

(3) the circumstances under which the person should contact the delegating nurse.

Authority: AS 08.68.100 AS 08.68.805 AS 08.68.850

12 AAC 44.966. DELEGATION OF THE ADMINISTRATION OF INJECTABLE MEDICATION. (a) The administration of injectable medication is a specialized nursing task that may be delegated under the standards set out in 12 AAC 44.950(a), (c), and (d) and this section.

(b) The administration of injectable medication may be delegated only by an advanced practice registered nurse to a certified medical assistant. The certified medical assistant may only perform the delegated duty in a private or public ambulatory care setting, and the advanced practice registered nurse must be immediately available on site when the certified medical assistant is administering injectable medication.

(c) Repealed 5/16/2018.

(d) To delegate to a certified medical assistant the administration of an injectable medication to a patient the written instructions provided to the certified medical assistant under 12 AAC 44.950(a)(7) must also include the information required in 12 AAC 44.965(d)(1) – (3).

(e) The delegating advanced practice registered nurse is responsible for ensuring that the certified medical assistant maintains a national certification and for reviewing a current criminal background check upon hire, to be reviewed at five-year intervals. If the certified medical assistant has been convicted of a crime that, under AS 08.68.270 and 12 AAC 44.705, is substantially related to the qualifications, functions, or duties of a certified nurse aide, registered nurse, or practical nurse, the advanced practice registered nurse may not delegate the administration of injectable medications to that certified medical assistant.

(f) Repealed 3/19/2014.

(g) The delegating advanced practice registered nurse is responsible for ensuring that the certified medical assistant monitors the patient's response to the injection for a minimum of 15 minutes and reports and responds to any adverse reactions.

(h) In this section,

(1) "certified medical assistant" means a person who is currently nationally certified as a medical assistant by a national body accredited by the National Commission for Certifying Agencies (NCCA) and meets the requirements of this section;

(2) "immediately available on site" means that the advanced practice registered nurse is present on site in the unit of care and not otherwise engaged in a procedure or task that the advanced practice registered nurse may not immediately leave when needed;

(3) repealed 5/16/2018.

(i) An advanced practice registered nurse may not delegate to a certified medical assistant or unlicensed assistive personnel the injection of a controlled substance under state or federal law.

Authority: AS 08.68.100 AS 08.68.805 AS 08.68.850

12 AAC 44.970. NURSING DUTIES THAT MAY NOT BE DELEGATED. Nursing duties that require the exercise of professional nursing knowledge or judgment or complex nursing skills may not be delegated. Nursing duties that may not be delegated include

(1) the comprehensive assessment of the patient by a registered nurse, and referral and follow-up;

(2) the focused assessment of the patient by a licensed practical nurse;

(3) formulation of the plan of nursing care and evaluation of the patient's response to the care provided;

(4) health education and health counseling of the patient and the patient's family or significant others in promoting the patient's health;

(5) receiving or transmitting verbal, telephone, or written orders from the patient's health care provider;

(6) the initiation, administration, and monitoring of intravenous therapy, including blood or blood products;

(7) providing and assessing sterile wound or decubitus ulcer care;

(8) managing and monitoring home dialysis therapy;

(9) oral tracheal suction;
(10) medication management for unstable medical conditions requiring ongoing assessment and adjustment of dosage or timing of administration;
(11) placement and administration of nasogastric tubes and fluids;
(12) initial assessment and management of newly-placed gastrostomy tubes and the patient's nutrition;
(13) except as provided in 12 AAC 44.966, the administration of injectable medications; and
(14) repealed 8/10/2016.

Authority: AS 08.68.100 AS 08.68.805 AS 08.68.850

12 AAC 44.975. EXCLUSIONS. The provisions of 12 AAC 44.950 – 12 AAC 44.970 apply only to the delegation of nursing duties by a nurse licensed under AS 08.68; they do not apply when nursing duties have not been delegated, including when a person is acting
(1) within the scope of the person's own license;
(2) under other legal authority; or
(3) under the supervision of another licensed health care provider.

Authority: AS 08.68.100 AS 08.68.805 AS 08.68.850

12 AAC 44.980. EXECUTIVE ADMINISTRATOR. (a) The duties and responsibilities of the executive administrator include
(1) operational knowledge of the job assignments of all board staff;
(2) the efficient function of the board office, including timely review and issuance of licenses; and
(3) direct assistance in staff functions during times of increased workload;
(4) repealed 5/16/2018;
(5) repealed 5/16/2018.
(b) Repealed 8/10/2016.
(c) The executive administrator may
(1) consult with the division investigators and may issue a license, permit, registration, or authorization sought in an application that contains an affirmative answer to questions about the applicant's disciplinary history, professional conduct, or personal history;
(2) review and approve continuing education competency audits; audits that are not in compliance are to be reviewed by a board member;
(3) review and assist the division's investigative staff with matters for jurisdiction, assess evidence of an alleged violation, and present to the board disciplinary recommendations and recommendations to deny a license, permit, registration, or authorization. Those recommendations must seek consistency with board historical precedent as required under AS 08.01.075(f), and any significant departure from precedent must be thoroughly explained. The board will make each final decision on a disciplinary recommendation or a recommendation to deny a license, permit, registration, or authorization.

Authority: AS 08.68.100 AS 08.68.111

12 AAC 44.990. DEFINITIONS. As used in this chapter, unless the context otherwise requires,
(1) "administration of medication" means the direct application of a medication to the body of a patient by injection, inhalation, ingestion, or other means;
(2) "anesthesia service" means a qualified person or group of people given responsibility by the employing agency for administration of anesthetics and related maintenance of safety controls;
(3) "APRN" means advanced practice registered nurse as defined in AS 08.68.850;
(4) "associate degree program" includes general academic and nursing courses, is conducted within a community or junior college; and prepares a person for an associate degree in nursing;
(5) "baccalaureate program" is a program conducted in a senior college or university and which is in an academic department, division, school or college of the senior college or university, which prepares persons for a baccalaureate degree in nursing;
(6) "board" means Alaska Board of Nursing;
(7) repealed 5/16/2018;
(8) "client" means an individual who receives care from a licensee;
(9) "comprehensive assessment of the patient by a registered nurse" means the initial and ongoing collection of information about the patient to anticipate and recognize changes in the patient's medical conditions or health status, synthesize the biological, psychological, and social aspects of the patient's medical condition, evaluate the impact of health care, make decisions regarding changes in care, plan nursing interventions, evaluate the need for different interventions, and communicate and consult with the other health care providers regarding the patient's medical treatment;
(10) "contact hour" means a 50-minute classroom instructional session or three laboratory or clinical practice hours;

(11) “controlled substance” has the meaning given that term in AS 11.71.900, as revised as of September 19, 2002, adopted by reference;

(12) “cooperating agencies” means any facility which provides clinical experience for the education of students in a nursing education program;

(13) “criminal justice information” has the meaning given in AS 12.62.900;

(14) “delegate the performance of nursing duties” means the assignment by a nurse licensed under AS 08.68 of a specific nursing duty within the nurse’s scope of practice for a specific patient to another person as authorized under AS 08.68.805 and 12 AAC 44.950 – 12 AAC 44.970;

(15) “department” means the Department of Commerce, Community, and Economic Development;

(16) “division” means the division assigned occupational licensing functions in the department;

(17) “drug” has the meaning that term is given in AS 11.71.900, as revised as of September 19, 2002, adopted by reference;

(18) “focused assessment” of a patient by a licensed practical nurse means an appraisal of the patient’s medical status and condition, contributing to ongoing data collection, and deciding who needs to be informed of the information and when to inform;

(19) “on-site” means being physically present at the location where nursing duties are to be performed under a delegation from a nurse to another person;

(20) “preceptorship” is that portion of the APRN course of study consisting of clinical experiences under the auspices of a qualified preceptor for the purpose of correlating theory to practical application of the expanding role of the nurse; the setting must provide an environment that permits observation and active participation in the delivery of health care;

(21) “PRN medication” means medication to be taken as needed by the patient;

(22) “qualified preceptor” means an advanced practice registered nurse currently authorized to practice as an APRN in the state or a currently licensed, practicing physician or a physician specifically exempted by AS 08.64.370(1) and approved by the board; the functions of the preceptor include supervision, teaching, and evaluation of a student’s performance in the clinical setting;

(23) “school” or “program” means a division in a college or university which is responsible for preparing persons for practice of professional or practical nursing;

(24) “sexual contact” has the meaning given that term in AS 11.81.900, as revised as of September 19, 2002, adopted by reference;

(25) “sexual impropriety” means behavior, a gesture, or an expression that is seductive, sexually suggestive, or sexually demeaning to a client; "sexual impropriety" includes

(A) encouraging the client to masturbate in the presence of the licensee or masturbation by the licensee while the client is present;

(B) offering to provide controlled substances or other drugs to the client in exchange for sexual contact;

(C) disrobing or draping practice that is seductive, sexually suggestive, or sexually demeaning to a client, such as deliberately watching a client dress or undress or failing to provide privacy for disrobing; in this subparagraph, "deliberately watching a client dress or undress" does not include observing a client who may need assistance in dressing or undressing due to physical limitations or medical conditions;

(D) making a comment about or to the client that is seductive, sexually suggestive, or sexually demeaning to a client, including

(i) sexual comment about a client's body or underclothing;

(ii) sexualized or sexually-demeaning comment to a client;

(iii) demeaning or degrading comments to the client about the client's sexual orientation, regardless of whether the client is homosexual, heterosexual, or bisexual;

(iv) requesting details of sexual history or sexual likes or dislikes of the client if the details are not clinically indicated for the type of examination or consultation within the scope of practice of the licensee;

(E) initiation by the licensee of conversation with a client regarding the sexual problems, preferences, or fantasies of the licensee;

(F) using the medical or professional relationship with the client to solicit sexual contact or a romantic relationship with the client or another;

(G) kissing a client in a romantic or sexual manner.

(26) “sexual misconduct” means regardless of client's consent or lack of consent,

(A) sexual penetration or attempted sexual penetration with a client;

(B) sexual contact or attempted sexual contact with a client; and

(C) sexual impropriety;

(27) “sexual penetration” has the meaning given that term in AS 11.81.900, as revised as of September 19, 2002, adopted by reference;

(28) repealed 8/10/2016;

(29) “stable and predictable” means that the patient’s medical condition is known, through the nurse’s assessment, to be consistent and nonfluctuating; “stable and predictable” includes a terminally ill patient with a predictable deteriorating condition;

(30) “to perform an expanded role in the delivery of health care” means that the person is qualified, by virtue of specialized training and experience, to provide health care to the consumer through the identification,

management, or referral of the consumer's health problems, and that the person is qualified to maintain the consumer's health by means of preventive and promotive health care actions;

(31) "unencumbered" means, with reference to a license, certification, or registration,

(A) not suspended, revoked, on probation, or otherwise restricted by the issuing authority; and

(B) for which the holder of the license, certification, or registration is not presently under investigation by the issuing authority for disciplinary violations;

(32) "CNA" means certified nurse aide;

(33) "telehealth" has the meaning given in AS 47.05.270(e);

(34) "cognitively impaired individual" means an individual who has been diagnosed with dementia, Alzheimer's, or another neurodegenerative disease.

Authority: AS 08.68.100 AS 08.68.275 AS 08.68.805

APPENDIX

CHAPTER 30.
CONTROLLED SUBSTANCES

Sec. 17.30.200. Controlled substance prescription database. (a) The controlled substance prescription database is established in the Board of Pharmacy. The purpose of the database is to contain data as described in this section regarding every prescription for a schedule II, III, or IV controlled substance under federal law dispensed in the state to a person other than under the circumstances described in (t) of this section.

(b) The pharmacist-in-charge of each licensed or registered pharmacy, regarding each schedule II, III, or IV controlled substance under federal law dispensed by a pharmacist under the supervision of the pharmacist-in-charge, and each practitioner who directly dispenses a schedule II, III, or IV controlled substance under federal law other than those dispensed or administered under the circumstances described in (t) of this section, shall submit to the board, by a procedure and in a format established by the board, the following information for inclusion in the database on at least a daily basis:

(1) the name of the prescribing practitioner and the practitioner's federal Drug Enforcement Administration registration number or other appropriate identifier;

(2) the date of the prescription;

(3) the date the prescription was filled and the method of payment; this paragraph does not authorize the board to include individual credit card or other account numbers in the database;

(4) the name, address, and date of birth of the person for whom the prescription was written;

(5) the name and national drug code of the controlled substance;

(6) the quantity and strength of the controlled substance dispensed;

(7) the name of the drug outlet dispensing the controlled substance; and

(8) the name of the pharmacist or practitioner dispensing the controlled substance and other appropriate identifying information.

(c) The board shall maintain the database in an electronic file or by other means established by the board to facilitate use of the database for identification of

(1) prescribing practices and patterns of prescribing and dispensing controlled substances;

(2) practitioners who prescribe controlled substances in an unprofessional or unlawful manner;

(3) individuals who receive prescriptions for controlled substances from licensed practitioners and who subsequently obtain dispensed controlled substances from a drug outlet in quantities or with a frequency inconsistent with generally recognized standards of dosage for that controlled substance; and

(4) individuals who present forged or otherwise false or altered prescriptions for controlled substances to a pharmacy.

(d) The database and the information contained within the database are confidential, are not public records, are not subject to public disclosure, and may not be shared with the federal government. The board shall undertake to ensure the security and confidentiality of the database and the information contained within the database. The board may allow access to the database only to the following persons, and in accordance with the limitations provided and regulations of the board:

(1) personnel of the board regarding inquiries concerning licensees or registrants of the board or personnel of another board or agency concerning a practitioner under a search warrant, subpoena, or order issued by an administrative law judge or a court;

(2) authorized board personnel or contractors as required for operational and review purposes;

(3) a licensed practitioner having authority to prescribe controlled substances or an agent or employee of the practitioner whom the practitioner has authorized to access the database on the practitioner's behalf, to the extent the information relates specifically to a current patient of the practitioner to whom the practitioner is prescribing or considering prescribing a controlled substance; the agent or employee must be licensed or registered under AS 08;

(4) a licensed or registered pharmacist having authority to dispense controlled substances or an agent or employee of the pharmacist whom the pharmacist has authorized to access the database on the pharmacist's behalf, to the extent the information relates specifically to a current patient to whom the pharmacist is dispensing or considering dispensing a controlled substance; the agent or employee must be licensed or registered under AS 08;

(5) federal, state, and local law enforcement authorities may receive printouts of information contained in the database under a search warrant or order issued by a court establishing probable cause for the access and use of the information;

(6) an individual who is the recipient of a controlled substance prescription entered into the database may receive information contained in the database concerning the individual on providing evidence satisfactory to the board that the individual requesting the information is in fact the person about whom the data entry was made and on payment of a fee set by the board under AS 37.10.050 that does not exceed $10;

(7) a licensed pharmacist employed by the Department of Health who is responsible for administering prescription drug coverage for the medical assistance program under AS 47.07, to the extent that the information relates specifically to prescription drug coverage under the program;

(8) a licensed pharmacist, licensed practitioner, or authorized employee of the Department of Health responsible for utilization review of prescription drugs for the medical assistance program under AS 47.07, to the

extent that the information relates specifically to utilization review of prescription drugs provided to recipients of medical assistance;

(9) the state medical examiner, to the extent that the information relates specifically to investigating the cause and manner of a person's death;

(10) an authorized employee of the Department of Health may receive information from the database that does not disclose the identity of a patient, prescriber, dispenser, or dispenser location, for the purpose of identifying and monitoring public health issues in the state; however, the information provided under this paragraph may include the region of the state in which a patient, prescriber, and dispenser are located and the specialty of the prescriber; and

(11) a practitioner, pharmacist, or clinical staff employed by an Alaska tribal health organization, including commissioned corps officers of the United States Public Health Service employed under a memorandum of agreement; in this paragraph, "Alaska tribal health organization" has the meaning given to "tribal health program" in 25 U.S.C. 1603.

(e) The failure of a pharmacist-in-charge or a pharmacist to register or submit information to the database as required under this section is grounds for the board to take disciplinary action against the license or registration of the pharmacy or pharmacist. The failure of a practitioner to register or review the database as required under this section is grounds for the practitioner's licensing board to take disciplinary action against the practitioner.

(f) The board may enter into agreements with (1) dispensers in this state that are not regulated by the state to submit information to and access information in the database, and (2) practitioners in this state to access information in the database, subject to this section and the regulations of the board. The board shall prohibit a dispenser that is not regulated by the state from accessing the database if the dispenser has accessed information in the database contrary to the limitations of this section, discloses information in the database contrary to the limitations of this section, or allows unauthorized persons access to the database.

(g) The board shall promptly notify the president of the senate and the speaker of the house of representatives if, at any time after September 7, 2008, the federal government fails to pay all or part of the costs of the controlled substance prescription database.

(h) An individual who has submitted information to the database in accordance with this section may not be held civilly liable for having submitted the information. Dispensers or practitioners may not be held civilly liable for damages for accessing or failing to access the information in the database.

(i) A person who has reason to believe that prescription information from the database has been illegally or improperly accessed shall notify an appropriate law enforcement agency.

(j) The board shall notify any person whose prescription information from the database is illegally or improperly accessed.

(k) In the regulations adopted under this section, the board shall provide

(1) that prescription information in the database be purged from the database after two years have elapsed from the date the prescription was dispensed;

(2) a method for an individual to challenge information in the database about the individual that the person believes is incorrect or was incorrectly entered by a dispenser;

(3) a procedure and time frame for registration with the database;

(4) that a practitioner review the information in the database to check a patient's prescription records before dispensing, prescribing, or administering a schedule II or III controlled substance under federal law to the patient; the regulations must provide that a practitioner is not required to review the information in the database before dispensing, prescribing, or administering

(A) a controlled substance to a person who is receiving treatment

(i) in an inpatient setting;

(ii) at the scene of an emergency or in an ambulance; in this sub-subparagraph, "ambulance" has the meaning given in AS 18.08.200;

(iii) in an emergency room;

(iv) immediately before, during, or within the first 48 hours after surgery or a medical procedure;

(v) in a hospice or nursing home that has an in-house pharmacy; or

(B) a nonrefillable prescription of a controlled substance in a quantity intended to last for not more than three days.

(*l*) A person

(1) with authority to access the database under (d) of this section who knowingly

(A) accesses information in the database beyond the scope of the person's authority commits a class A misdemeanor;

(B) accesses information in the database and recklessly discloses that information to a person not entitled to access or to receive the information commits a class C felony;

(C) allows another person who is not authorized to access the database to access the database commits a class C felony;

(2) without authority to access the database under (d) of this section who knowingly accesses the database or knowingly receives information that the person is not authorized to receive under (d) of this section from another person commits a class C felony.

(m) To assist in fulfilling the program responsibilities, performance measures shall be reported to the legislature annually. Performance measures

(1) may include outcomes detailed in the federal prescription drug monitoring program grant regarding efforts to

(A) reduce the rate of inappropriate use of prescription drugs by reporting education efforts conducted by the Board of Pharmacy;

(B) reduce the quantity of pharmaceutical controlled substances obtained by individuals attempting to engage in fraud and deceit;

(C) increase coordination among prescription drug monitoring program partners;

(D) involve stakeholders in the planning process;

(2) shall include information related to the

(A) security of the database; and

(B) reductions, if any, in the inappropriate use or prescription of controlled substances resulting from the use of the database.

(n) A pharmacist who dispenses or a practitioner who prescribes, administers, or directly dispenses a schedule II, III, or IV controlled substance under federal law shall register with the database by a procedure and in a format established by the board.

(o) The board shall promptly notify the State Medical Board, the Board of Nursing, the Board of Dental Examiners, and the Board of Examiners in Optometry, when a practitioner registers with the database under (n) of this section.

(p) The board is authorized to provide unsolicited notification to a pharmacist, practitioner's licensing board, or practitioner if a patient has received one or more prescriptions for controlled substances in quantities or with a frequency inconsistent with generally recognized standards of safe practice. An unsolicited notification to a practitioner's licensing board under this section

(1) must be provided to the practitioner;

(2) is confidential;

(3) may not disclose information that is confidential under this section;

(4) may be in a summary form sufficient to provide notice of the basis for the unsolicited notification.

(q) The board shall update the database on at least a daily basis with the information submitted to the board under (b) of this section.

(r) The Department of Commerce, Community, and Economic Development shall

(1) assist the board and provide necessary staff and equipment to implement this section; and

(2) establish fees for registration with the database by a pharmacist or practitioner required to register under (n) of this section so that the total amount of fees collected by the department equals the total operational costs of the database minus all federal funds acquired for the operational costs of the database; in setting the fee levels, the department shall

(A) set the fees for registration with the database so that the fees are the same for all practitioners and pharmacists required to register; and

(B) consult with the board to establish the fees under this paragraph.

(s) Notwithstanding (p) of this section, the board may issue to a practitioner periodic unsolicited reports that detail and compare the practitioner's opioid prescribing practice with other practitioners of the same occupation and similar specialty. A report issued under this subsection is confidential and the board shall issue the report only to a practitioner. The board may adopt regulations to implement this subsection. The regulations may address the types of controlled substances to be included in an unsolicited report, the quantities dispensed, the medication strength, and other factors determined by the board.

(t) A practitioner or a pharmacist is not required to comply with the requirements of (a) and (b) of this section if a controlled substance is

(1) administered to a patient at

(A) a health care facility; or

(B) a correctional facility;

(2) dispensed to a patient for an outpatient supply of 24 hours or less at a hospital

(A) inpatient pharmacy; or

(B) emergency department.

(u) This section does not apply to a schedule II, III, or IV controlled substance prescribed or dispensed by a veterinarian licensed under AS 08.98 to treat an animal.

(v) In this section,

(1) "board" means the Board of Pharmacy;

(2) "database" means the controlled substance prescription database established in this section;

(3) "knowingly" has the meaning given in AS 11.81.900;

(4) "opioid" includes the opium and opiate substances and opium and opiate derivatives listed in AS 11.71.140 and 11.71.160;

(5) "pharmacist-in-charge" has the meaning given in AS 08.80.480.