CHAPTER 6

THE FLORIDA NURSE PRACTICE ACT AND THE SCOPE OF NURSING

I. INTRODUCTION

The Florida Nurse Practice Act, Chapter 464, Florida Statutes, was enacted to ensure that every nurse practicing in Florida meets minimum requirements for safe practice. A nurse who falls below the minimum competency or who otherwise present a danger to the public shall be prohibited from practicing in Florida. The statute speaks primarily to the most common classification of nurses: Registered Nurses (RNs) and Licensed Practical Nurses (LPNs). The requirements for licensure and penalties applicable for misconduct shall be set forth below. Other classifications of nurses (Advanced Registered Nurses, RN First Assistants, Retired Nurse Volunteers and Certified Nursing Assistants) are also provided for statutorily. The requirements of each will be discussed below.

The Nurse Practice Act contains definitions that include the scope of practice for licensed registered nurses, practical nurses and nurse practitioners. Every nurse who practices in the state of Florida must be familiar with these definitions, as they define the limits on what she is allowed to legally do.

II. DEFINITIONS AND SCOPE OF PRACTICE

The Florida Nurse Practice Act, Section 464.003, Florida Statutes, provides definitions and sets forth the scope of practice for nurses in Florida.

Section 464.003(3)(e), Florida Statutes, defines "nursing diagnosis" to mean "the observation and evaluation of physical or mental conditions, behaviors, signs and symptoms of illness, and reactions to treatment and the determination as to whether such conditions, signs, symptoms, and reactions represent a deviation from normal."

Section 464.003(3)(f), Florida Statutes, defines "nursing treatment" to mean "the establishment and implementation of a nursing regimen for the care and comfort of individuals, the prevention of illness, and the education, restoration, and maintenance of health."

It is important to remember that in many instances, where the physician is present and providing direct supervision to the nurse, she may merely act as "the physician's hands" and is not providing services strictly under her nursing license. If, for example, the licensed physician could be supervising a nonlicensed person in performing the same tasks (e.g., a medical student, a surgical technician, or a medical assistant), then it should not be considered to be either exceeding the scope of the nurse's license or the unlicensed practice of medicine, if the nurse performs these. Again, this contemplates that the physician is actually present, looking on and directly supervising and controlling whatever actions the nurse is taking under the physician's direct supervision.

Other definitions and the scope of practice of the different types of nurses are set forth below.
III. REGISTERED NURSES

Registered Nurses are any persons licensed in Florida to practice professional nursing. The terms "professional nurse" and "registered nurse" are used interchangeably in Florida law, to mean the same thing. "'Registered nurse' means any person licensed in this state to practice professional nursing." Section 464.003(4), Florida Statutes.

The scope of practice for a registered nurse is defined in Section 464.003(3)(a), Florida Statutes, as follows:

"Practice of professional nursing" means the performance of those acts requiring substantial specialized knowledge, judgment, and nursing skill based upon applied principles of psychological, biological, physical, and social sciences which shall include, but not be limited to:

1. The observation, assessment, nursing diagnosis, planning, intervention, and evaluation of care; health teaching and counseling of the ill, injured, or infirm; and the promotion of wellness, maintenance of health, and prevention of illness of others.

2. The administration of medications and treatments as prescribed or authorized by a duly licensed practitioner authorized by the laws of this state to prescribe such medications and treatments.

3. The supervision and teaching of other personnel in the theory and performance of any of the above acts.

IV. LICENSED PRACTICAL NURSES

The licensed practical nurse is any person licensed in Florida to practice practical nursing. Florida statutes define practical nursing as the performance of selected acts, including the administration of treatments and medications, in the care of the ill, injured, or infirm and the promotion of wellness, maintenance of health, and prevention of illness of others under the direction of a registered nurse, a licensed physician, a licensed osteopathic physician, a licensed podiatric physician, or a licensed dentist. Section 464.003(b), Florida Statutes.

V. ADVANCED REGISTERED NURSES PRACTITIONERS (ARNPS) AND CLINICAL NURSE SPECIALISTS

The Advanced Registered Nurse Practitioner (ARNP) is a nurse who, in addition to being licensed to practice professional nursing as defined above, has obtained postbasic specialized education, training, and experience and is certified by the Board of Nursing to perform advanced-level nursing acts. Within the context of advanced or specialized nursing practice, the Advanced Registered Nurse Practitioner may
perform acts of nursing diagnosis and nursing treatment of alterations of the health status. The ARNP may also perform acts of medical diagnosis and treatment, prescription, and operation. The requirements for ARNPs and a detailed discussion of their scope of practice are contained in another chapter of this Manual.

Section 464.003(6), Florida Statutes, defines "clinical nurse specialist" to mean "any person licensed in this state to practice professional nursing and certified in clinical nurse specialist practice." In Florida, clinical nurse specialists include certified registered nurse anesthetists (CRNAs), certified nurse midwives (CNMs) and nurse practitioners (NPs) or certified nurse practitioners (CNPs). These are all discussed in a separate chapter in this Manual.

VI. MEDICAL ASSISTANTS

In Florida, medical assistants (MAs) are not licensed. In addition, there is no requirement that they be certified, in order to work as a medical assistant. Usually, a medical assistant will have little or no formal training. Usually a medical assistant will have graduated from high school, but even this is not required. There are some schools, institutions, two year colleges, and other educational programs which provide training for medical assistants and offer "certification." Most medical assistants receive on-the-job training from physicians and nurses in physicians' offices or in hospitals.

Section 458.3485(1), Florida Statutes, defines a medical assistant as follows:

DEFINITION.--As used in this section, "medical assistant" means a professional multiskilled person dedicated to assisting in all aspects of medical practice under the direct supervision and responsibility of a physician. This practitioner assists with patient care management, executes administrative and clinical procedures, and often performs managerial and supervisory functions. Competence in the field also requires that a medical assistant adhere to ethical and legal standards of professional practice, recognize and respond to emergencies, and demonstrate professional characteristics.

As you can see from the exact language of the statute itself, there is no requirement that a medical assistant be licensed or certified by anybody. Some medical assistants do take formal course work and some do become certified by private organizations; however, there is no legal requirement to do so.

Section 458.3485(2), Florida Statutes, defines the duties of a medical assistant as follows:

DUTIES.--Under the direct supervision and responsibility of a licensed physician, a medical assistant may undertake the following duties:

(a) Performing clinical procedures, to include:
   1. Performing aseptic procedures.
   2. Taking vital signs.
   3. Preparing patients for the physician’s care.
4. Performing venipunctures and nonintravenous injections.
5. Observing and reporting patients' signs or symptoms.

(b) Administering basic first aid.
(c) Assisting with patient examinations or treatments.
(d) Operating office medical equipment.
(e) Collecting routine laboratory specimens as directed by the physician.
(f) Administering medication as directed by the physician.
(g) Performing basic laboratory procedures.
(h) Performing office procedures including all general administrative duties required by the physician.
(i) Performing dialysis procedures, including home dialysis.

Therefore, it is perfectly permissible and legal for a medical assistant, even though he is unlicensed, to provide many services and perform many activities which a non-healthcare professional might mistakenly consider to be the "practice of medicine." Since the Florida Legislature has specifically authorized the foregoing acts to be performed by medical assistants, even unlicensed, uncertified medical assistants, a person performing such duties for a physician does not commit "unlicensed practice of medicine."

Furthermore, the term "under the direct supervision of a physician," a term used in the statute, does not mean that the physician himself must be present in the room or even within sight of the medical assistant. The term "direct supervision," a medical term and is defined in both various administrative rules and in federal Medicare regulations and guidelines. For example, as defined by the Florida Board of Medicine in Rule 64B8-2.001(1)(a), Florida Administrative Code, the term "direct supervision is defined as follows: "'Direct supervision' shall require the physical presence of the supervising licensee [the licensed physician] on the premises so that the supervising licensee is reasonably available as needed."

The requirement for "direct supervision," even in the medical context, only requires that the supervising physician be present on the premises (i.e., anywhere in the building), and available to answer questions or consult with the medical assistant if needed. Thus, the medical assistant may carry out any of the activities quoted in the Florida Statutes Section above, even if the physician is on another floor of the building or in a different office suite in the building.

However, a medical assistant is not a nurse, is not considered to be nursing personnel, and should never be referred to as "a nurse" or "the nurse." To do so violates Florida law and may subject the
physician or nurse who does this, or the medical assistant himself, to being charged criminally with a violation of Section 464.016(2), Florida Statutes (set forth below). It is the best practice of any physician's office, hospital, nursing home, or other health care facility, to clearly identify any medical assistant with a name tag that clearly states "Medical Assistant" and to have policies and procedures, which are strictly enforced, which prohibit anyone from referring to a medical assistant as a "nurse."

VII. PENALTIES

The Florida Nurse Practice Act sets forth prohibited conduct by nurses. The list of prohibited conduct includes acts that constitute felonies under Florida law, as well as acts that may result in action against the nurse’s license. First, the following acts constitute a felony of the third degree, punishable by fine or imprisonment:

1. Practicing advanced or specialized, professional or practical nursing, as defined in this part, unless holding an active license or certificate to do so.

2. Using or attempting to use a license or certificate which has been suspended or revoked.


4. Obtaining or attempting to obtain a license or certificate under this part by misleading statements or knowing misrepresentation.

Florida Statutes, specifically Section 464.015, Florida Statutes (2007), states:

(1) Only persons who hold licenses to practice professional nursing in this state or who are performing nursing services pursuant to the exception set forth in s. 464.022(8) shall have the right to use the title "Registered Nurse" and the abbreviation "R.N."

(2) Only persons who hold licenses to practice as licensed practical nurses in this state or who are performing practical nursing services pursuant to the exception set forth in s. 464.022(8) shall have the right to use the title "Licensed Practical Nurse" and the abbreviation "L.P.N."

As stated in Section 464.016(2), Florida Statutes, each of the following acts constitutes a misdemeanor of the first degree under Florida law, and may result in a criminal conviction:

1. Using the name or title "Nurse," "Registered Nurse," "Licensed Practical Nurse," "Advanced Registered Nurse Practitioner," or any other name or title which implies that a person was licensed or certified as same, unless such person is duly licensed or certified.
2. Knowingly concealing information relating to violations of this part. Section 464.016, Florida Statutes.

Under the foregoing, unless the person has an active license as a nurse in the state of Florida, she may not hold herself out to the public as a nurse and her employer may not refer to her as a nurse.

A. SEXUAL MISCONDUCT

The nurse-patient relationship is founded on mutual trust. Sexual misconduct in the practice of nursing is a violation of the nurse-patient relationship through which the nurse uses said relationship to induce or attempt to induce the patient to engage, or to engage or attempt to engage the patient, in sexual activity outside the scope of the practice or the scope of generally accepted examination or treatment of the patient. Sexual misconduct in the practice of nursing is prohibited. Section 464.017, Florida Statutes.

B. DISCIPLINARY ACTION

In addition to judicial measures, the Florida Nursing Practice Act, Section 464.018, also provides for a large number of disciplinary actions that may be taken administratively against a nurse who has committed misconduct. These acts include:

(a) Procuring, attempting to procure, or renewing a license to practice nursing by bribery, by knowing misrepresentations, or through an error of the department or the board.

(b) Having a license to practice nursing revoked, suspended, or otherwise acted against, including the denial of licensure, by the licensing authority of another state, territory, or country.

(c) Being convicted or found guilty of, or entering a plea of nolo contendere to, regardless of adjudication, a crime in any jurisdiction which directly relates to the practice of nursing or to the ability to practice nursing.

(d) Being found guilty, regardless of adjudication, of any of the following Florida offenses:

1. A forcible felony;
2. theft, robbery, and related crimes;
3. fraudulent practices;
4. lewdness and indecent exposure;
5. assault, battery, and culpable negligence;
6. child abuse;
7. protection from abuse, neglect, and exploitation;
8. child abuse, abandonment, and neglect. Section 464.018, Florida Statutes.

Disciplinary actions by the Board of Nursing are discussed in further detail in a different chapter of this Manual.

C. ALCOHOL AND DRUG DEPENDENCY

Being unable to practice nursing with reasonable skill and safety to patients by reason of illness or use of alcohol, drugs, narcotics, or chemicals or any other type of material or as a result of any mental or physical condition. In enforcing this paragraph, the department shall have, upon a finding of the secretary or the secretary’s designee that probable cause exists to believe that the licensee is unable to practice nursing because of the reasons stated in this paragraph, the authority to issue an order to compel a licensee to submit to a mental or physical examination by physicians designated by the department. If the licensee refuses to comply with such order, the department’s order directing such examination may be enforced by filing a petition for enforcement in the circuit court where the licensee resides or does business. The licensee against whom the petition is filed shall not be named or identified by initials in any public court records or documents, and the proceedings shall be closed to the public. The department shall be entitled to the summary procedure provided in Section 51.011, Florida Statutes. A nurse affected by the provisions of this paragraph shall at reasonable intervals be afforded an opportunity to demonstrate that she or he can resume the competent practice of nursing with reasonable skill and safety to patients.

The board enforces a “three strikes and your out” policy with regards to the diversion of drugs from patients to personal use. The board shall not reinstate the license of a nurse who has been found guilty by the board on three separate occasions of violations of this part relating to the use of drugs or narcotics, which offenses involved the diversion of drugs or narcotics from patients to personal use or sale.

This Manual contains a separate chapter on the Intervention Project for Nurses (IPN), a program that contracts with the Board of Nursing to evaluate and monitor nurses needing rehabilitation or treatment because of impairment due to drugs, alcohol, mental health or physical conditions. The Intervention Project for Nurses and issues related to impairment are discussed in a separate chapter of this Manual.

VIII. MISCELLANEOUS NURSING CLASSIFICATIONS

A. RETIRED VOLUNTEER NURSE

The Florida Nurse Practice Act provides for the volunteer efforts of retired LPNs and RNs. Section 464.0205. More specifically, retired LPNs and RNs are eligible to volunteer their services in indigent, underserved, or critical need populations in Florida. As with becoming an LPN or RN, there are application requirements imposed on Retired Nurse Volunteers. The RNV must complete an application and meet all of the requirements imposed on RN and LPN applicants as described above. The applicant must also verify that she had been licensed to practice nursing in any jurisdiction in the United States for at least 10 years, had retired or plans to retire, intends to practice nursing only pursuant to the limitations
imposed on RNVs and has not committed any of the violations set forth above. Also, commission of or investigation for any act that would constitute grounds for disciplinary action as set forth above may result in denial of an RNV certificate.

Once a RNV has received certification, further restrictions are imposed on their practice. The RNV is required to work under the direct supervision of the director of a county health department, a physician working under a limited license issued pursuant to Section 458.317, Florida Statutes, or Section 459.0075, Florida Statutes, a physician licensed under chapter 458 or chapter 459, an advanced registered nurse practitioner certified under Section 464.012, Florida Statutes, or a registered nurse licensed under Section 464.008, Florida Statutes, or Section 464.009, Florida Statutes.

The RNV must also comply with the minimum standards of practice for nurses and be subject to disciplinary action for violations of Section 464.018, Florida Statutes, except that the scope of practice for certified volunteers shall be limited to primary and preventive health care, or as further defined by board rule.

RNVs may not administer controlled substances, supervise other nurses, or receive monetary compensation.

B. REGISTERED NURSE FIRST ASSISTANTS

The registered nurse first assistant was intended to provide quality, cost effective surgical intervention to health care recipients in Florida by encouraging the use of registered nurse first assistants who are qualified as “assistants at surgery” by physicians and hospitals during surgery.

To qualify as a registered nurse first assistant one must be licensed as a registered nurse. The nurse must also be certified in perioperative nursing, which is the practice of nursing in which the nurse provides preoperative, intraoperative, and postoperative nursing care to surgical patients. The nurse must also hold a certificate from and successfully complete a recognized program. A recognized program addresses all content of the Association of Operating Room Nurses, Inc. Core curriculum for the registered nurse first assistant and includes one academic year, defined as 45 hours of didactic instruction and 120 hours of clinical internship, or its equivalent of two college semesters. Each health care institution must establish specific procedures for the appointment and reappointment of registered nurse first assistant staff members and for granting, renewing, and revising their clinical privileges. Section 464.027, Florida Statutes.

C. CERTIFIED NURSING ASSISTANTS

Yet another classification under the Florida Nurse Practice Act is the Certified Nursing Assistant. Section 464.203, Florida Statutes. To qualify as a certified nursing assistant, an individual must successfully complete an approved training program and achieve a minimum score, established by rule of the board, on the nursing assistant competency examination, which consists of a written portion and skills-demonstration portion approved by the board and administered at a site and by personnel approved by the department. Certification may be granted to those who have not completed an approved training
program if they have a high school diploma and are at least 18 years old. Certification may also be awarded if the applicant is currently certified in another state and is in good standing.

If an applicant fails to pass the nursing assistant competency exam three times, the applicant must complete a board approved training program before taking the exam again. Once an individual is certified, their certification remains valid until a period of 24 consecutive months has passed during which the nursing assistant fails to perform any nursing-related services for monetary compensation. Should this occur, the individual must complete a new training and competency evaluation program or a new competency evaluation program. Certified nursing assistants are required to complete 18 hours of inservice training during each calendar year.

Certified nursing assistants are subject to disciplinary actions for acts that constitute misconduct. Misconduct includes, obtaining or attempting to obtain certification or an exemption, or possessing or attempting to possess certification or a letter of exemption, by bribery, misrepresentation, deceit, or through an error of the board. Intentionally violating any provision of this chapter, chapter 456, or the rules adopted by the board is also deemed to be misconduct.

If the certified nursing assistant is found guilty of these acts, the board of nursing is authorized to deny, suspend, or revoke that individual’s certification. The board may also impose an administrative fine or probation or restriction of the certification as well.

IX. SCOPE OF PRACTICE

A. WORK ASSIGNMENTS

1. Issues That Accompany Work Assignments

Under the Nurse Practice Act, a registered nurse may assess and determine a patient’s nursing care needs. An RN has the ability to delegate work assignments to other personnel as appropriate for each patient. A nurse may not delegate a nursing care assignment to another person if the delegation would violate the Nurse Practice Act or hospital policy. In health care facilities accredited by the Joint Commission on Accreditation of Health Organizations (JCAHO), delegations may not violate JCAHO standards.

When a nurse receives a work assignment that she does not feel can safely be performed, the nurse has a right and a duty to consult with management to receive a modified work assignment that the nurse can safely perform. A nurse may refuse a work assignment. However, the refusal may be considered insubordination or abandonment. Therefore, a nurse should become familiar with the organization’s policies and procedures regarding refusal to accept an unsafe assignment. If the nurse performs the assignment, she should utilize an assignment dispute objection form. The American Nurses Association has adopted a standard form which may be used. The health care facility may also have an appropriate form. These forms assist the hospital in identifying and following staffing problems.
2. **Legal Issues**

Accepting a work assignment that is beyond a nurse’s scope of practice may be a violation of the Nurse Practice Act. In addition, the absence of adequate supervision may also be a violation of the Nurse Practice Act if a nurse performs an activity that is only supposed to be performed under another’s supervision. A nurse may subject herself to a malpractice action if she accepts a work assignment that she is not competent to perform. On the other hand, refusing to perform an assignment may be considered patient abandonment, which may also bring a malpractice action or government investigation. Abandonment may also be found when a nurse does not observe a patient frequently enough, fails to find adequate coverage when the nurse ceases to treat the patient or fails to bring in a qualified professional when required by the patient’s condition. The liability of the nurse often becomes the liability of the health care facility because nurses often act as agents for the facility.

3. **Responsibility of Administration**

Health care facilities have a responsibility to provide competent care to patients, which includes competent nursing care. The administration has an obligation to assess each nurse’s skills and abilities to provide care to a specific patient population. This often accomplished through orientation programs, job evaluations, training programs, and continuing education courses.

Nursing management should also collaborate with staff nurses when staff assignment issues arise. Management has a responsibility to clarify work assignments for a staff nurse. Nursing management also has a duty to determine and work out options with a staff nurse when the nurse does not feel competent to perform a specific procedure or other patient care function.

The administration also has a responsibility to plan and budget, which includes allocating resources so that adequate and appropriate nursing care is available. Facilities often employ staffing or human resources personnel, who develop appropriate staffing schedules to provide enough personnel at all levels throughout the organization. Estimating necessary staffing levels is an essential part of the organization’s budget planning process each year.

Finally, the administration of a health care facility has a responsibility to take appropriate action to prevent or remedy incompetent care. In the event disciplinary action is warranted, the administration has a duty to follow facility discipline policies.
4. **Responsibility of the Nurse**

A nurse has a duty to provide competent care to patients. This includes clarifying work assignments with management, as well as determining and assessing her own skills, knowledge and abilities.

Providing competent nursing care also includes using informed judgment and decision making. Informed decision making requires a nurse to use her own knowledge and skills, as well as recognizing when the nurse needs additional assistance. The nurse is also required to use skill and judgment when deciding whether to accept a work assignment or whether to delegate a work assignment to another person. Recognizing when you are not competent to perform an assignment is an important function. If a nurse does not feel prepared to perform, she should consult with a supervisor regarding her concerns and work with management to identify appropriate patient care options for the patient. A nurse should only refuse a work assignment after consulting with a supervisor.

X. **QUESTIONS AND ANSWERS REGARDING NURSE LICENSING AND SCOPE OF PRACTICE**

The Board of Nursing has published the following commonly asked questions and answers for nurses as of June 2008. For information, including questions and answers, concerning the professional licensing of nurses in Florida, please see the separate chapter in this Manual on "Professional Licensure of Nurses in Florida."

**RENEWAL OF LICENSE**

Q: My license is expiring soon and I did not receive a renewal notice. What should I do?
A: To renew a license if you did not receive a renewal notice, select the link to Current Licensee located on the board’s homepage (www.doh.state.fl.us/mqa/nursing/index.html), then select Renewal Information. This page will provide you with detailed instructions on how to renew including forms that may be printed and mailed.

Q: How long does it take to renew my license?
A: Renewal notices are sent at least 90 days before the expiration date. You should renew as soon as possible when you receive it. Please allow 4-6 weeks for receipt of your new nursing license.

Q: Can I continue to work if I have not received my new license by the expiration date?
A: Nurses are not permitted to work without proof of current licensure.

Q: Is there a number to call to check on the status of my renewal?
A: If you do not have your new license by the expiration date, your employer can verify the status of your renewal by accessing the www.cebroker.com on the Internet. You can also call the Communication Services Unit, (850) 488-0595, to verify the status of your license.
MANDATORY CONTINUING EDUCATION REQUIREMENT

Q: How many contact hours do I have to have on file and how many more do I have to earn to renew my license?
A: The Board no longer maintains computer records of the individual nurses’ contact hours. It is the responsibility of each nurse to retain all copies of their Certificates of Attendance for a period of at least four years.

Q: Where can I find CE providers?
A: You can find CEs by visiting www.cebroker.com [or see the Appendix to this Manual].

Q: How many contact hours do I need to renew my license? I took the Exam last year.
A: Nurses licensed by examination, in any state, during the current renewal period are exempt from additional continuing education requirements for the first renewal period only. This exemption is lost if the license is not renewed by the renewal deadline.

[Note: If you are audited and you have not met your CE requirements, the Editor recommends that you immediately retain the services of an experienced health law attorney familiar with Board of Nursing matters to represent you.]

Q: How many contact hours do I need to renew my license? I endorsed in from another state.
A: All Florida-licensed RN’s and LPNs are now in a 24-month renewal cycle and must complete 24 hours of appropriate continuing education during each renewal period. One (1) contact hour is required for each calendar month of the licensure cycle, including two (2) hours on Prevention of Medical Errors. HIV/AIDS is now a one-time, 1-hour CE requirement to be completed prior to the first renewal. Domestic Violence CE is now a 2-hour requirement every third renewal. For example, if you renew your license on January 31, 2007, you are required to complete the Domestic Violence CE before the January 31, 2011 renewal.

Q: Can I use college courses for continuing education?
A: Contact hours may be awarded for completion of credit courses in nursing at an accredited institution of higher learning. General education may not be used for C.E. credit.

Q: How do college courses convert to contact hours?
A: One credit hour per quarter converts to ten contact hours. One credit hour per semester converts to fifteen contact hours. In order to receive continuing education credit, retain transcripts or legible dated grade reports for four years in case you are audited.

Q: Can I use hours I have earned in another state?
A: Offerings that are approved by a state or national nursing organization empowered to accredit continuing education standards are approved for continuing education, with the exception of HIV/AIDS and Domestic Violence which must be from a Florida-approved provider.

Q: I have earned over 100 hours. Can I carry the balance over to the next renewal period?
A: No, all hours must be earned within your renewal period and cannot be carried over.
Q: I have received my renewal notice and have not completed my 25 contact hours. Can I mail my renewal in and complete my hours later?
A: No, nurses must complete C.E. requirements within the appropriate biennium. By sending in your renewal and fee you have affirmed that you have complied with all licensure renewal requirements.

Q: How many contact hours can I earn through Home Study?
A: The Board imposes no limit on the number of contact hours earned through Home Study.

Q: Can nurses take courses that offer CME (Continuing Medical Education) credits?
A: Only ARNPs may earn CME for up to half of their mandatory CE requirements.

REPORTING A LICENSEE

Q: How can I file a complaint against a licensee?
A: You may print the Complaint Form with the Authorization for Release of Patient Records form which are available on the Board of Nursing and the Department of Health websites, or call 1-888 419-3456 or (850) 414-1976 to request one by mail. To avoid delays in the process, please complete all sections of the form and attach the requested information. All complaints must be legibly written or typed, and signed.

General Health Care Professions Complaint form
Dental Professions Complaint form
Psychiatric/Psychology Complaint form
Unlicensed Person Complaint form