

Oklahoma Board of Nursing
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www.nursing.ok.gov

**INSTRUCTIONS for
REINSTATEMENT or RETURN to ACTIVE STATUS of
PRESCRIPTIVE AUTHORITY RECOGNITION**

Application fee = \$80.00

Use this application if:

- You have previously held prescriptive authority recognition for the same advanced practice license in Oklahoma; and
- Your prescriptive authority recognition is currently lapsed, inactive, suspended, voluntarily surrendered, or revoked.

**PLEASE READ THESE INSTRUCTIONS CAREFULLY
BEFORE COMPLETING THE APPLICATION**

Forms referenced may be found in the Forms / Applications link on the Board's website.

Applications for return to active or reinstatement of prescriptive authority recognition must have current Oklahoma licensure as a Registered Nurse and as an Advanced Practice Registered Nurse (CNP, CNS, or CNM), and current national certification.

Advanced Practice Registered Nurses (APRNs) without valid prescriptive authority recognition are hereby notified to cease prescribing immediately until valid prescriptive authority recognition has been obtained. **Please note that prescriptive authority recognition is specific to the Advanced Practice Registered Nurse license (CNP, CNS, or CNM) and the specialty certification held by the Advanced Practice Registered Nurse. Advanced Practice Registered Nurses with more than one APRN license or specialty certification must hold separate prescriptive authority recognitions for each APRN license or specialty certification.** Prescribing drugs and medical supplies without a valid prescriptive authority recognition is considered in violation of the provisions of the *Oklahoma Nursing Practice Act*.

You may obtain a copy of the current *Exclusionary Formulary* on the Board's website: www.nursing.ok.gov. Click on the link for Practice/Advanced Practice to download a copy.

REQUIREMENTS for REINSTATING or RETURNING your PRESCRIPTIVE AUTHORITY RECOGNITION to ACTIVE STATUS

Verification of current Oklahoma and advanced practice licensure: You must possess a current Oklahoma license to practice as a Registered Nurse OR a current multistate Registered Nurse license in a Compact state with multistate privileges in Oklahoma.

Renewal Requirements: Prescriptive authority must be renewed concurrently with your Oklahoma Registered Nurse and Advanced Practice Registered Nurse licenses in even-numbered years.

- If you are applying for reinstatement of your prescriptive authority recognition within 90 days prior to the expiration date of your RN & APRN licenses, you must renew your licenses prior to the date the reinstatement of the prescriptive authority recognition is granted.

Review of criminal charges, disciplinary action, or judicial declaration of incompetence:

Applicants for reinstatement of prescriptive authority recognition are required to notify the Oklahoma Board of Nursing, in writing, specific information related to criminal charges and/or convictions, investigations, disciplinary actions, and/or judicial declaration of mental competence. A “report in writing” means that the applicant/licensee provided a description stating in his/her own words the date, location, and circumstances of the incident, and if applicable, the resulting action taken by the court, agency, or disciplinary board. The report should be in the form of a statement in the provided space on the application. Certified court records or a board order, as applicable, must be uploaded during the application process. A verbal report does not constitute a “report in writing”. A written report not accompanied by a full set of certified court records or the board order(s) does not constitute a “report in writing”. Failure to report such action is a violation of the *Oklahoma Nursing Practice Act*.

Current Supervising Physician Agreements: An *Agreement for Physician Supervising Advanced Practice Prescriptive Authority* must be uploaded with the application for each physician listed on the application.

EXCEPTION for APRN-CNPs, APRN-CNSs, and APRN-CNMs working **ONLY** at a Veterans Affairs facility, please see “Instructions for Completion of the Application”, #6A and #6B.

Current Continuing Education in Prescribing: The Advanced Practice Registered Nurse must upload evidence of either:

1. A minimum of fifteen (15) contact hours, or one academic credit hour of education, or the equivalent, in pharmacotherapeutics, clinical application and use of pharmacological agents in the prevention of illness, and in the restoration and maintenance of health, in a program beyond basic registered nurse preparation, approved by the Board within the (2) two-year period immediately preceding the date of application for reinstatement of prescriptive authority which is applicable to the scope of practice and specialty certification.
 - Please see the “Continuing Education Categories” table below

2. Licensure or recognition as an APRN in the same role with prescriptive authority in another state with employment in a position that requires APRN prescriptive authority licensure or recognition with verification of at least 520 work hours during the past two (2) year period preceding receipt of this application.

Please note that ACLS, PALS, and CPR courses do not meet the requirements for advanced practice prescriptive authority. There are several methods of obtaining educational credits. **Acceptable methods for obtaining the required education are defined by category and the maximum number of credits accepted for each category is identified in the following table:**

CONTINUING EDUCATION CATEGORIES	Maximum Credits
CATEGORY A: Academic Credit: Evidence of completion of coursework in pharmacotherapeutics appropriate for Advanced Practice Registered Nurses.	Up to 100% (1 credit hour)
CATEGORY B: (i) Onsite seminar, lecture, workshop, or course, approved for contact hours, continuing education units, or continuing medical education units by a recognized approver of continuing education. Evidence of attendance at an approved pharmacotherapeutic offering appropriate for advanced practice nurses; (ii) Online continuing education for initial applications must be approved through a recognized approver of continuing education, and includes a minimum of thirty hours obtained from a single provider that is faculty-directed, with processes for interaction of the participant with faculty, evaluating the participant's learning through successful completion of case studies or written assignments and a comprehensive examination using a mechanism to ensure security of the evaluation process. .	Up to 100% (15 contact hours)
CATEGORY C: Online seminars or workshops, or articles in professional journals or other professional references approved for contact hours, continuing education units, or continued medical education units by a recognized approver of continuing education: Evidence of satisfactory performance on an online seminar, workshop, or article related to pharmacotherapeutic continuing education appropriate for Advanced Practice Registered Nurses.	Up to 100 (15 contact hours)
CATEGORY D: Published article in refereed journal, book, or research project. Evidence of publication of one article related to pharmacotherapy appropriate for Advanced Practice Registered Nurses. These will be evaluated on a case-by-case basis.	Up to 20% (3 contact hours)
CATEGORY E: Presenter/Lecturer. Evidence of providing content related to pharmacotherapeutics at an advanced practice level. The presentation / lecture must be approved for contact hours or offered as part of an academic course with a target audience of Advanced Practice Registered Nurses.	Up to 20% (3 contact hours)

Continuing Education Equivalencies

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|--------------------------------|----------------------|
| i. One contact hour | = 50 minutes |
| ii. One academic semester hour | = 15 contact hours |
| iii. One academic quarter hour | = 12.5 contact hours |

Current DEA and OBNDL Registration: The Advanced Practice Registered Nurse with prescriptive authority who prescribes Schedule III-V drugs will comply with state and federal Drug Enforcement Administration (DEA) and Oklahoma Bureau of Narcotics and Dangerous Drug (OBNDL) requirements prior to prescribing controlled substances. If either the OBNDL or the DEA registration lapses or is otherwise in an inactive status, the APRN must immediately notify the Oklahoma Board of Nursing and cease prescribing Schedule III-V drugs.

INSTRUCTIONS FOR COMPLETION OF THE APPLICATION

1. **Completion of application:** The application should be completed and submitted online on the Board's website via your Nurse Portal account.

You must complete all sections of the application **using your name as it appears on your license**. If you have been licensed with this Board under a different name, you must complete a *Name Change Request* found in the [Other Applications link](#) on your Nurse Portal page, upload a certified copy of the legal document changing your name and submit the required fee in order to be licensed under your new name.

You must provide a Social Security number on the application. This information is mandatory, pursuant to 56 O.S. § 240.21A.

Fee: Payment must be made in the form of VISA, MasterCard or electronic fund transfer when completing the application online in the License Registration link.

- Fees submitted are not refundable

2. **Agreements with supervising physicians:** An *Agreement for Physician Supervising Advanced Practice Prescriptive Authority* must be uploaded for each supervising physician.

- A. **EXCEPTION** for APRN-CNPs, APRN-CNSs, and APRN-CNMs working **ONLY** at a Veterans Affairs facility AND who will **NOT** be prescribing Controlled Dangerous Substances, please note the following:

In 38 C.F.R. § 17.415 which became effective January 13, 2017, the Department of Veterans Affairs (VA) were authorized to grant full practice authority to CNPs, CNSs and CNMs when they are acting within the scope of their VA employment. This rule established that clinical supervision by physicians is NOT required for full practice authority.

If this exception applies, you must,

- i. Upload in your Nurse Portal written verification that VA has granted full practice authority; and
- ii. Indicate on the application that the exception does apply to you, and the listing of a supervising physician(s) name and submission of an *Agreement for Physician Supervising Advanced Practice Prescriptive Authority* form will not be required.

- B. The full practice authority is subject to the limitations imposed by the Controlled Substances Act, 21 U.S.C. 801 et seq. In accordance with 63 O.S. §2-312(C), should an APRN-CNP, APRN-CNS, and/or an APRN-CNM **choose to prescribe controlled dangerous substances**, it becomes the APRN's responsibility to obtain a supervising physician, to submit the required *Agreement for Physician Supervising Advanced Practice Prescriptive Authority* form, and to comply with state and Federal Drug Enforcement Administration (DEA) requirements prior to prescribing controlled substances.

If your employment situation changes and you become employed at a non-VA facility in addition to or instead of a VA facility, or if your full practice authority granted through VA is rescinded, it is your responsibility to obtain a supervising physician and to notify this Board.

3. ***Educational Requirements for Reinstatement/Return to Active Status of Prescriptive Authority:*** Complete the section on educational experience in pharmacology to include all education being submitted for evaluation.
 - a. If choosing the option of completing at least 1 academic credit hour or 15 contact hours of education, upload a photocopy of course content, **including the course title, description, and objectives, and verification of your successful completion of educational requirements** (such as a certificate of completion or transcript to Board office).
 - b. If you are choosing the option of having have licensure or recognition as an APRN in the same role with prescriptive authority in another state with employment in a position that requires APRN prescriptive authority licensure or recognition, please upload evidence of current prescriptive authority in another state and have the employer complete and sign *Employment Verification Form* verifying at least 520 work hours during the past two years that you will upload at the time of application submission.

4. ***Criminal Charges, Disciplinary Action, or Judicial Declaration of Mental Incompetence:*** If you answer “yes” to the questions in the section on *History of Criminal Charges, Disciplinary Action, Mental Incompetence, or Alternative Program* in the application, you must **submit a statement on the application form, describing the date, location and circumstances of each incident, and the resulting action(s) taken by the court or disciplinary board.** In addition, you will be required to upload certified copies of identified documents. If you have more than one incident you are reporting, you must speak to every case/charge that has been filed.
 1. Have you ever had disciplinary action taken against a nursing license, recognition, certificate, or privilege to practice; any professional or occupational license, recognition, or certificate; and/or any application for a nursing or professional or occupational license, recognition, or certificate in any state, territory or country not previously reported **in writing** to the Oklahoma Board of Nursing?
 - a. If you answered “yes”, you must type in the space available a statement describing the date, location, and circumstances of the incident(s), and, if applicable, the resulting action(s) taken by the disciplinary board.
 - b. If you are reporting more than one incident, you must describe every case that has been filed.
 - c. You will need to upload certified copies of the charges/complaints, findings of fact, and orders from the licensing agency.
 2. Is there currently any investigation of your nursing license, recognition, certificate, or privilege to practice; and/or any professional or occupational license, recognition, or certificate; and/or any application for a nursing and/or professional or occupational license, recognition, or certificate in any state, territory or country not previously reported **in writing** to the Oklahoma Board of Nursing?

- a. If you answered “yes”, you must type in the space available a statement describing the date, location, and circumstances of the incident(s), and, if applicable, the resulting action(s) taken by the disciplinary board.
 - b. If you are reporting more than one incident, you must describe every case that has been filed.
3. Have you been charged and/or convicted in any criminal offense not previously reported **in writing** to the Oklahoma Board of Nursing, including those pending appeal? (You may exclude minor traffic violations, but must report all DUI/DWI charges and/or DUI/DWI convictions)

Check all that apply:

-] been convicted of a misdemeanor?
-] been convicted of a felony?
-] pled nolo contendere, no contest, or guilty?
-] received deferred adjudication, to include but not limited to deferred prosecution agreement?
-] been placed on community supervision or court-ordered probation, whether or not adjudicated guilt?
-] been sentenced to serve jail or prison time? Court-ordered confinement?
-] been granted pre-trial diversion, to include but not limited to Drug Court?
-] have any pending criminal charges?
-] have any pending violation of the law?
-] been subject of a court-martial; Article 15 violation; or received any form of military judgment/punishment/action?
-] No, none of the above applies.

NOTE: Expunged and Sealed Offenses: While expunged or sealed offense, arrests, tickets, or citations need not be disclosed, it is your responsibility to ensure the offense, arrest, ticket or citation has, in fact, been expunged or sealed. It is recommended that you submit a copy of the Court Order expunging or sealing the record in question to our office with your application. Non-disclosure of relevant offenses raises questions related to truthfulness and character.

If you checked any of the above (except “No, none of the above applies”):

- a. If you answered “yes”, you must type in the space available a statement describing the date, location, and circumstances of the incident(s), and, if applicable, the resulting action(s) taken by the court.
- b. If you are reporting more than one incident, you must describe every case that has been filed.
- c. You will need to upload certified copies of Court Records to include the Information Sheet, Incident Report, Complaint, and/or Charges; Affidavit of Probable Cause; Judgment and Sentence; and verification of completion of the Judgment and Sentence. The Court Records must be obtained from the Court(s) in which the offense(s) occurred.

4. Have you ever been judicially declared incompetent in any state, territory or country not previously reported **in writing** to the Oklahoma Board of Nursing?
 - a. If you answered “yes”, you must type in the space available a statement describing the date, location, and circumstances of the incident(s), and, if applicable, the resulting action(s) taken by the court or agency. If you are reporting more than one incident, you must describe every case that has been filed.
 - b. You will need to upload a certified copy of the Court Order.

GENERAL INFORMATION

You are required to notify the Board in writing of any address changes occurring during the application process. This notification must be submitted via your Nurse Portal account.

Your application to the Board is valid for one year after receipt. After that time, a new application and fee must be submitted. Applications are processed in the order they are received. You may view average processing times of a completed application on our website in the Agency Data / Statistics / Quarterly Statistics link. Every effort is made to process applications expeditiously. **Fees submitted are not refundable.**

In accordance with Oklahoma law (59 O.S. §567.7 (E)), the Executive Director shall suspend the license or certificate of a person who submits a check, money draft, or similar instrument for payment of a fee which is not honored by the financial institution named. The suspension becomes effective ten (10) days following delivery by certified mail of written notice of the dishonor and the impending suspension to the person’s address on file. Upon notification of suspension, the person may reinstate the authorization to practice upon payment of the fees and any and all costs associated with notice and collection. The suspension shall be exempt from the *Administrative Procedures Act*.

COMMON MISTAKES THAT DELAY APPLICATION PROCESSING

Common mistakes that delay the processing of your application include failure to:

- **Answer all application questions completely**
- **Provide a Social Security number**
- **Provide the full name under which you were licensed (with the notation “NMN” if there is no middle name)**
- **Upload required documentation of continuing education**
- **Write in the space available for each question a complete description and uploading documentation regarding a history of criminal charges, disciplinary action, or judicial declaration of incompetence**