

PROPOSED CHANGES TO THE NURSING REGULATIONS

This guidance document provides general information about the proposed regulations that have been posted for the 3 regulated nursing colleges. It is intended to complement the Health Professions Act, and the nursing regulation, but it is not a substitute for legal advice. If in any doubt as to how to proceed, please consult the legislation directly or obtain legal advice.

WHY CHANGE?

From 2001 to 2011, individual profession-specific statutes were repealed and most regulated health professions were brought under the ‘umbrella’ legislative framework of the *Health Professions Act*.

Registered Nurses (RNs) fully transitioned under the *Health Professions Act* (HPA) effective August 19, 2005, and in the course of that transition, Nurse Practitioners (NPs) became a recognized category of Registered Nurse under the new College of Registered Nurses of BC. This transition included passing Scope of Practice regulations for Registered Nurses and Nurse Practitioners under the HPA. To date Licensed Practical Nurses (LPNs) and Registered Psychiatric Nurses (RPN) have not been updated to reflect the HPA model.

WHAT THE REGULATIONS DO

The general intention of the proposed Nursing regulations is to:

- Fully transition Licensed Practical Nurses (LPNs), and Registered Psychiatric Nurses (RPN) into the *Health Professions Act* model;
- Clarify the scope of practice for LPNs, RNs, RPNs and NPs;
- Clarify restricted activities pertaining to LPNs, RNs, RPNs and NPs and;
- Clarify the legal authority for relationships between the types of nurses (who can give an order to whom, in what circumstances and who can implement those orders).

The proposed changes to the regulations are intended to bring the regulations up to date with current practices for each nursing profession. The regulations lay out what the professionals’ role encompasses (scope of practice), including those areas of higher risk to public safety that may only be performed by nursing college registrants (restricted activities). The intent is to create a strong, current and clear regulatory foundation for the present, as well as for future conversations about the evolution of roles over time.

WHAT THE REGULATIONS DO NOT DO

The regulations are not intended to prescribe every aspect of a professional’s work. For example:

- They do not address – within the scope of practice set by the regulations - standards, limits and conditions of practice or a code of ethics. This is the responsibility of the nursing colleges.

- They do not set out the specifics of how work is allocated amongst the types of nurses within a workplace or care delivery model. This is the responsibility of the employer or workplace.
- They do not address system or structural barriers to practice, such as outdated policies or funding models. This responsibility is shared by employers and the Ministry.

SHARED SCOPE OF PRACTICE

The overlap (shared) in scope of practice set out in the regulations is intentional. This is not intended to signify that all nurse professions are the same. Rather, this overlap is intended to provide flexibility for employers and workplaces when determining care models and care team composition. As a result, there are also other factors that play a role in determining what each type of nurse, and each individual nurse, does, including:

- The nursing colleges can establish standards, limits or conditions on the practice of nurses themselves. They can also establish conditions or limits on the ability of nurses to delegate or authorize another person (who is not a nurse) to perform duties.
- Employers may also establish standards or limits for the workplace. Employers are responsible for developing policies and practice guidelines to clarify roles and practice expectations in specific work settings and service delivery models.
- Individual nurses are also responsible for ensuring that they only practice in areas where they have the necessary education, training and experience, and are competent to perform.

Each of these plays a role in defining what a nurse can and cannot do in their day-to-day work, and helps to define more specifically the overlapping nature of the nursing roles, along with the distinct and collective contributions of the roles to patient care.

WHAT DOES THIS MEAN TO ME SPECIFICALLY?

Licensed Practical Nurses

Significant changes have been made to the proposed LPN regulations including a new definition of practical nursing that defines an LPN's scope of practice.

New sections have been added giving LPN's a list of restricted activities they can perform independently and restricted activities an LPN can perform with an order from a health professional. Appendix 1 outlines a comparison between different types of nursing professions to help create a better understanding of the differences and similarities between RPNs/RNs/LPNs/NPs scope of practice, restricted activities and restricted activities that can be performed under an order.

Changes have also been made so that LPNs can receive an order from an RN, RPN, NP or other defined health professional and be able to compound, dispense or administer a drug under that order among other things.

Registered Psychiatric Nurses

Significant changes have been made to the proposed RPN regulation including a new definition of psychiatric nursing that defines an RPN's scope of practice.

New sections have been added giving RPN's a list of restricted activities they can perform independently and restricted activities an RPN can perform with an order from a health professional. Appendix 1 outlines a comparison between different types of nursing professions to help create a better understanding of the differences and similarities between RPNs/RNs/LPNs/NPs scope of practice, restricted activities and restricted activities that can be performed under an order.

Changes proposed include:

RPN's will have the authority to make a **nursing diagnosis** on a "condition" and then **prescribe**, compound, dispense and administer **without an order** all Schedule II drugs (not requiring a prescription), and a subset of Schedule I drugs (requiring a prescription) to treat a "condition", including treating:

- Anaphylaxis,
- Opiate overdoses,
- Respiratory distress in a known asthmatic, or
- Hypoglycemia.

In the 2012 proposed posted regulation 'prescribe' was originally redefined as meaning to give an instruction or order. This definition conflicted with the definition of 'prescribe' under the *Pharmacy Operations and Drug Scheduling Act*. To avoid this potential confusion, the term 'order' is used to do most of what the term 'prescribe' was set out to do in the 2012 proposed posted regulations.

- Adding RN and RPN to the definition of health professional in the LPN regulations has allowed RNs and RPNs to give an order to LPNs, including to compound, dispense or administer a limited number of Schedule I or Schedule II drugs (as set out above).
- Revising the regulations under the *Pharmacy Operations and Drug Scheduling Act* to include RNs and RPNs as prescribers.

The combined effect is to allow an RPN to prescribe a limited number of Schedule I or Schedule II drugs for the list of conditions outlined above.

Registered Nurses

Because the RN regulations were already amended in 2005 significant changes are not proposed to the RN regulations but rather changes were made to ensure alignment to the other nursing regulations being proposed. However some changes are proposed including:

RNs will have the authority to make a **nursing diagnosis** on a "condition" and then **prescribe**, compound, dispense and administer, **without an order**, all Schedule II drugs (not requiring a prescription), and a subset of Schedule I drugs (requiring a prescription) to treat a "condition", including treating:

- Anaphylaxis;

- Cardiac dysrhythmia;
- Opiate overdoses;
- Respiratory distress in a known asthmatic;
- Hypoglycemia;
- Post-partum hemorrhage; or
- Conditions which are symptomatic of influenza-like illness.

Cardiac dysrhythmia , Post-partum hemorrhage; and conditions which are symptomatic of influenza-like illness are in addition to the list found for the RPNs. The changes also create the authority to prevent a disease using immunoprophylactic agents and post-exposure chemoprophylactic agents.

In the 2012 proposed posted regulation ‘prescribe’ was originally redefined as meaning to give an instruction or order. This definition conflicted with the definition of ‘prescribe’ under the *Pharmacy Operations and Drug Scheduling Act*. To avoid this potential confusion, the term ‘order’ is used to do most of what the term ‘prescribe’ was set out to do. The rest of what was intended is achieved through two additional changes:

- Adding RN and RPN to the definition of health professional in the LPN regulations. This allows RNs and RPNs to give an order to LPNs, including to compound, dispense or administer a limited number of Schedule I or Schedule II drugs (as set out above); and
- Revising the regulations under the *Pharmacy Operations and Drug Scheduling Act* to include RNs and RPNs as prescribers.

The combined effect is to allow an RN to prescribe a limited number of Schedule I or Schedule II drugs for the list of conditions outlined above.

Another addition to the restricted activities an RN can perform includes putting a wearable hearing instrument or accessory into the ear canal up to the eardrum (also found within the RPN and LPN regulations).

Lastly, changes have also been made to create the authority to cast a fracture of a bone under an order given by a health professional.

Nurse Practitioners

When the regulations are deposited NPs will have the ability to prescribe controlled drugs and substances (schedule IA drugs). This change aligns with the changes made to the federal *Controlled Drugs and Substances Act* which added NPs as prescribers among other professionals. The changes federally required provincial regulations to enable this and the proposed regulations do this. A NP will also be able to order a Magnetic Resonance Imaging (MRI).

HOW THE LEGISLATION WORKS

1. The *Pharmacy Operations and Drug Scheduling Act* (PODSA) defines a **prescription** to mean an authorization from a **practitioner** to dispense a specific drug or device for use by a designated individual.
2. It then defines a **practitioner** as someone who is authorized to practice medicine, dentistry, podiatry or veterinary medicine but also gives the minister the ability to prescribe a class of persons that is authorized under the *Health Professions Act* to **prescribe** drugs or devices.
3. The Minister has created regulations to this effect called the ***Prescribed Health Care Professions Regulation***. These regulations define prescribed health care professionals as Midwives, Nurse Practitioners, Optometrists, Naturopathic Physicians and Pharmacists (only in limited circumstance for emergency contraception of some drugs). However these prescribed health care professionals cannot prescribe drugs or devices until they are authorized under the *Health Professions Act* (as stated in bullet 2). Changes have been made to **add Registered Nurses and Registered Psychiatric Nurses** to the list of prescribed health care workers who can prescribe drugs provided that it is authorized in the profession's regulations under HPA (which the proposed changes to the RN and RPN regulations do).
4. Under the HPA government may designate a health profession through regulation. This regulation is called the *Health Professions Designation Regulation*.
5. Once the health profession is designated, the Minister of Health may then make specific regulations for each designated health profession, and prescribe various things including specifying services that may be provided by the registrant, specifying restricted activities that only a registrant of the professional college can perform, and the use of specific titles.
6. The nursing regulations are broken down into parts:
 - The Registered Nurses Regulations four key sections are:
 - Section 6 – restricted activities that do not require an order;
 - Section 7 – restricted activities that require an order from a health professional (as defined by regulation);
 - Section 8 – identifies certified practice registrants' enhanced scope of practice with certification; and
 - Section 9 – identifies scope of practice for Nurse Practitioners.
 - The Registered Psychiatric Nurses Regulations two key sections are:
 - Section 6 – restricted activities that do not require an order;
 - Section 7 – restricted activities that require an order from a health professional (as defined by regulation);
 - The Licensed Practical Nurses Regulations two key sections are:
 - Section 6 – restricted activities that do not require an order;
 - Section 7 – restricted activities that require an order from a health professional (as defined by regulation);

7. The *Drug Schedules Regulation* under PODSA groups drugs as follows:
 - Schedule I – Drugs that require a prescription;
 - Schedule IA – Drugs that are prescribed and are a controlled substance under the Federal Controlled Drugs and Substances Act;
 - Schedule II – No prescription required, but are over-the-counter medications;
 - Schedule III – No prescription and found on shelves for the public to purchase but still required to be sold in a Pharmacy;
 - Schedule IV – A small number of drugs that can be prescribed by Pharmacists;
 - Unscheduled – Drugs sold by a non-pharmacist to any person.
8. The definition of **health professional** in the *Prescribed Health Care Professions Regulation* has been changed. This change extends the defined list of health professionals who can give an “order” to an individual to provide a service or perform an activity (this would include dispensing, compounding or administering a drug). The list originally included dentistry, medicine, midwifery, naturopathic medicine pharmacy, and podiatric medicine. The proposed changes allow:
 - **Nurse Practitioners** to give an order to Registered Nurses, Registered Psychiatric Nurses, and Licensed Practical Nurses
 - **Registered Nurses (including certified practice registrants) and Registered Psychiatric Nurses** to give an order to Licensed Practical Nurses.
9. Changes to the definition of health professional in each nursing regulation have also been made to allow for a health professional in an adjacent province or territory (Alberta, Yukon, Northwest Territories) to issue an order to a registrant provided:
 - The patient has been assessed by the health professional;
 - The patient has been transferred to BC;
 - The patient requires immediate health services or treatments; and
 - The patient has not been assessed by an equivalent health professional in BC.

One example of this is a person living in a BC border community who went to a Physician in Edmonton, Alberta while visiting the city and received an order for medication, oxygen, nutrition through a feeding tube, etc. which then needed to be implemented by nurses in BC.

APPENDIX 1

OVERVIEW COMPARISON OF NURSING PROFESSIONS

Nurse Practitioner (NP)	Registered Nurse (RN)	Registered Psychiatric Nurse (RPN)	Licensed Practical Nurse (LPN)
<p>A registrant who is authorized to practise nursing as a nurse practitioner (NP).</p> <p>NPs in BC practise in one of three streams of NP practice: family, adult or pediatric.</p>	<p>Nursing is the health profession in which a person provides health care for the promotion, maintenance and restoration of health, and prevention, treatment and palliation of illness and injury, primarily by assessing health status, planning, implementing and evaluating interventions, and coordinating health services.</p>	<p>Psychiatric nursing is the profession in which a person provides health care for the promotion, maintenance and restoration of health with a focus on psychosocial, mental or emotional health, and prevention, treatment and palliation of illness and injury, with a focus on psychosocial, mental or emotional disorders and conditions and associated or comorbid physiological conditions, primarily by assessing health status, planning, implementing and evaluating interventions, and coordinating health services.</p>	<p>Practical nursing is the profession in which the person provides health care for the promotion, maintenance and restoration of health, with a focus on stable or predictable states of health, and prevention, treatment and palliation of illness and injury, with a focus on stable or predictable disorders or conditions, primarily by assessing health status, planning, implementing and evaluating interventions, and coordinating health services.</p>

Education for Entry-to-practice (Minimum)

Master's degree	Bachelor's degree	Bachelor's degree or diploma	Diploma
-----------------	-------------------	------------------------------	---------

Restricted Activities granted to registrants

NP authorized practice:

NP scope of practice includes all activities within the scope of practice of registered nurses. Additionally, an NP is authorized to:

- Diagnose a disease and manage diseases, disorders and conditions within NPs' scope of practice
- Order diagnostic services: Lab services, Miscellaneous diagnostic services (e.g. B-type Natriuretic Peptide, cardiac stress test), Imaging services (X-rays, ultrasound, CAT scan)
- NPs are **authorized to order MRIs**
- Provide advanced interventions, e.g. suturing, blood and blood products, cast a fracture of a bone, set a closed simple fracture of a bone, reduce a dislocation of a joint
- Prescribe drugs, **including drugs in Schedule IA of the Drug Schedule Regulation, which are controlled substances under the federal *Controlled Drugs and Substances Act*.**

	Registered Nurse (RN)	Registered Psychiatric Nurse (RPN)	Licensed Practical Nurse (LPN)
	Activities that do not require an order	Activities that do not require an order	Activities that do not require an order
	<ul style="list-style-type: none"> – Make a nursing diagnosis – For the purpose of wound care, including suturing of skin lacerations, perform a procedure on tissue below the dermis or below the surface of a mucous membrane – Perform venipuncture <ul style="list-style-type: none"> - for the purposes of collecting a blood sample or donation - for the purposes of establishing intravenous access, maintaining patency or managing hypovolemia – Administer <ul style="list-style-type: none"> - oxygen or humidified air - a mixture of oxygen and nitrous oxide, for the purpose of managing pain during labour - enteral feeds - purified protein derivative for tuberculosis screening - a solution by irrigation or by enteral instillation – For the purpose of assessment or ameliorating or resolving a condition identified through the making of a nursing diagnosis, put an instrument or device, hand or finger <ul style="list-style-type: none"> - into the external ear canal, up to the eardrum - beyond the point in the nasal 	<ul style="list-style-type: none"> – Make a nursing diagnosis – For the purpose of wound care, but no suturing, perform a procedure on tissue below the dermis or below the surface of a mucous membrane – Perform venipuncture <ul style="list-style-type: none"> - for the purposes of collecting a blood sample - for the purposes of establishing intravenous access or maintaining patency – Administer <ul style="list-style-type: none"> - oxygen or humidified air - enteral feeds - purified protein derivative for tuberculosis screening - a solution by irrigation or by enteral instillation – For the purpose of assessment or ameliorating or resolving a condition identified through the making of a nursing diagnosis, put an instrument or device, hand or finger <ul style="list-style-type: none"> - into the external ear canal, up to the eardrum - beyond the point in the nasal 	<ul style="list-style-type: none"> – Make a nursing diagnosis – For the purpose of wound care, but no suturing, perform a procedure on tissue below the dermis or below the surface of a mucous membrane – Administer <ul style="list-style-type: none"> - oxygen or humidified air – For the purpose of assessment, put an instrument or device, hand or finger <ul style="list-style-type: none"> - into the external ear canal, up to the eardrum

	<p>passages where they normally narrow</p> <ul style="list-style-type: none"> - beyond the pharynx - beyond the opening of the urethra - beyond the labia majora - beyond the anal verge, or - into an artificial opening into the body <ul style="list-style-type: none"> - Put a wearable hearing instrument, or a part of or accessory for it, into the external ear canal, up to the eardrum - Put into the ear canal, up to the eardrum: <ul style="list-style-type: none"> - air that is under pressure no greater than that created by the use of an otoscope - water that is under pressure no greater than that created by the use of an ear bulb syringe <p>- Manage labour in an institutional setting if the primary maternal care provider is absent</p> <ul style="list-style-type: none"> - Apply <ul style="list-style-type: none"> - ultrasound for bladder volume measurement, blood flow monitoring or fetal heart monitoring - electricity for defibrillation in the course of emergency cardiac care 	<p>passages where they normally narrow</p> <ul style="list-style-type: none"> - beyond the pharynx (oral-pharyngeal suctioning) - beyond the opening of the urethra - beyond the labia majora - beyond the anal verge, or - into an artificial opening into the body <ul style="list-style-type: none"> - Put a wearable hearing instrument, or a part of or accessory for it, into the external ear canal, up to the eardrum - Put into the ear canal, up to the eardrum: <ul style="list-style-type: none"> - air that is under pressure no greater than that created by the use of an otoscope - water that is under pressure no greater than that created by the use of an ear bulb syringe <ul style="list-style-type: none"> - Apply <ul style="list-style-type: none"> - ultrasound for bladder volume measurement or blood flow monitoring - electricity for defibrillation in the course of emergency cardiac care <p>- For the purpose of tuberculosis screening,</p>	<ul style="list-style-type: none"> - beyond the labia majora (hygiene care) - beyond the anal verge (bowel care), or - into an artificial opening into the body <ul style="list-style-type: none"> - Put a wearable hearing instrument, or a part of or accessory for it, into the external ear canal, up to the eardrum - Put into the ear canal, up to the eardrum: <ul style="list-style-type: none"> - air that is under pressure no greater than that created by the use of an otoscope <ul style="list-style-type: none"> - Apply <ul style="list-style-type: none"> - ultrasound for bladder volume measurement or blood flow monitoring - electricity for defibrillation in the course of emergency cardiac care
--	---	---	---

	<ul style="list-style-type: none"> - Issue an instruction or authorization for another person to apply: <ul style="list-style-type: none"> - Ultrasound for diagnostic or imaging purposes, including application of ultrasound to a fetus - X-rays for diagnostic or imaging purposes, except X-rays for the purpose of computerized axial tomography - Schedule I drug, <ul style="list-style-type: none"> - prescribe, compound, dispense or administer the drug by any method for the purposes of treating <ul style="list-style-type: none"> • anaphylaxis • cardiac dysrhythmia • opiate overdose • respiratory distress in a known asthmatic • hypoglycemia • post-partum hemorrhage, or • conditions that are symptomatic of influenza-like illness, or - preventing disease using immunoprophylactic agents and post-exposure chemoprophylactic agents - Schedule II drug, <ul style="list-style-type: none"> - prescribe, compound, dispense or 	<p style="color: red;">issue an instruction or authorization for another person to apply X-rays to a named individual other than X-rays for the purpose of computerized axial tomography</p> <ul style="list-style-type: none"> - Schedule I drug, <ul style="list-style-type: none"> - prescribe, compound, dispense or administer the drug by any method for the purposes of treating <ul style="list-style-type: none"> • anaphylaxis • opiate overdose • respiratory distress in a known asthmatic • hypoglycemia, or - preventing disease using immunoprophylactic agents and post-exposure chemoprophylactic agents - Schedule II drug, <ul style="list-style-type: none"> - prescribe, compound, dispense or 	<ul style="list-style-type: none"> - Schedule I drug, <ul style="list-style-type: none"> - compound, dispense or administer the drug by any method for the purposes of treating <ul style="list-style-type: none"> • anaphylaxis • respiratory distress in a known asthmatic • hypoglycemia - Schedule II drug, <ul style="list-style-type: none"> - compound, dispense or administer - orally,
--	---	---	---

	<p>administer the drug by any method</p> <ul style="list-style-type: none"> – if nutrition is administered by enteral instillation, compound or dispense a therapeutic diet 	<p>administer the drug by any method except intravenously</p> <ul style="list-style-type: none"> – if nutrition is administered by enteral instillation, compound or dispense a therapeutic diet 	<p>intranasally, or by intradermal, IM or SC injection, for the purpose of preventing disease using immunoprophylactic agents</p>
	<p>Activities that require an order</p> <ul style="list-style-type: none"> – perform a procedure on tissue below the dermis, below the surface of a mucous membrane or in or below the surface of the cornea – cast a fracture of a bone – administer a substance, by <ul style="list-style-type: none"> - injection - inhalation - mechanical ventilation - irrigation - enteral instillation or parenteral instillation, or - by using a hyperbaric chamber – put an instrument or device, hand or finger <ul style="list-style-type: none"> - into the external ear canal, up to the eardrum - beyond the point in the nasal passages where they normally narrow - beyond the pharynx - beyond the opening of the urethra - beyond the labia majora - beyond the anal verge, or - into an artificial opening into 	<p>Activities that require an order</p> <ul style="list-style-type: none"> – perform a procedure on tissue below the dermis, below the surface of a mucous membrane – administer a substance, by <ul style="list-style-type: none"> - injection - inhalation - mechanical ventilation - irrigation - enteral instillation or parenteral instillation – put an instrument or device, hand or finger <ul style="list-style-type: none"> - into the external ear canal, up to the eardrum - beyond the point in the nasal passages where they normally narrow - beyond the pharynx - beyond the opening of the urethra - beyond the labia majora - beyond the anal verge, or - into an artificial opening into the 	<p>Activities that require an order</p> <ul style="list-style-type: none"> – perform a procedure on tissue below the dermis or below the surface of a mucous membrane – Cast a fracture of a bone – administer a substance, by <ul style="list-style-type: none"> - injection - inhalation - mechanical ventilation - irrigation - enteral instillation or parenteral instillation – put an instrument or device, hand or finger <ul style="list-style-type: none"> - into the external ear canal, up to the eardrum - beyond the point in the nasal passages where they normally narrow - beyond the pharynx (oral pharyngeal suctioning) - beyond the opening of the urethra - beyond the labia majora - beyond the anal verge, or - into an artificial opening into the body

	<p style="text-align: center;">the body</p> <ul style="list-style-type: none"> – put into the external ear canal, up to the ear drum, a substance that is under pressure – apply ultrasound for diagnostic or imaging purposes, including application of ultrasound to a fetus – apply electricity for the purposes of destroying tissue or affecting activity of the heart or nervous system – apply laser for the purpose of destroying tissue – in respect of a drug specified in Schedule I or IA of the Drug Schedules Regulation <ul style="list-style-type: none"> - compound, dispense, or administer the drug by any method – conduct challenge testing for allergies <ul style="list-style-type: none"> - that involves injection, scratch tests or inhalation, if the individual being tested has not had a previous anaphylactic reaction, or - by any method, if the individual being tested has had a previous anaphylactic reaction – conduct desensitizing treatment for allergies <ul style="list-style-type: none"> - that involves injection, scratch tests 	<p style="text-align: center;">body</p> <ul style="list-style-type: none"> – put into the external ear canal, up to the ear drum, a substance that is under pressure – apply electricity for the purpose affecting activity of the nervous system – in respect of a drug specified in Schedule I or IA of the Drug Schedules Regulation <ul style="list-style-type: none"> - compound, dispense, or administer the drug by any method 	<ul style="list-style-type: none"> – put into the external ear canal, up to the ear drum, a substance that is under pressure – apply ultrasound for diagnostic or imaging purposes, except that ultrasound may be applied to a fetus only for the purpose of fetal heart monitoring – apply electricity for the purpose of providing transcutaneous electrical nerve stimulation – in respect of a drug specified in Schedule I or IA or 2 of the Drug Schedules Regulation <ul style="list-style-type: none"> - compound, dispense, or administer the drug by any method – if nutrition is administered by enteral instillation, compound or dispense a therapeutic diet
--	--	---	--

	<p>or inhalation, if the individual being treated has not had a previous anaphylactic reaction</p> <ul style="list-style-type: none"> - by any method, if the individual being treated has had a previous anaphylactic reaction. 		
	<p align="center">Certified practices</p>		
	<ul style="list-style-type: none"> - RNs who are certified practice registrants can carry out many activities normally requiring an order, without an order, provided they have been certified through an education program approved by CRNBC and have been placed on the CRNBC certified practice register. <p>* NPs who wish to work as a CRNBC-certified RN must contact CRNBC to establish their eligibility and be entered on the certified practice register.</p>		