NOTICE: This compilation incorporates the most recent revisions of statutes and administrative rules governing the nursing profession, as of November 1, 2005. Note that this compilation is not an official version of the Indiana Code or the Indiana Administrative Code. It is distributed as a general guide for Indiana’s nursing professionals. It is not intended to be offered as legal advice, and it may contain typographical errors. The Indiana State Board of Nursing and the staff of the Indiana Professional Licensing Agency are prohibited from providing legal advice on issues contained herein. For legal advice, please consult an attorney. To obtain official copies of the Indiana Code or Indiana Administrative Code, contact your nearest public library or visit the website of the Indiana General Assembly at www.in.gov/legislative.

If you wish to obtain additional copies of this law book, they are available for free on our website located at http://www.in.gov/pla/bandc/isbn/. Additional hard copies are available for the cost of copying and mailing from the Indiana Professional Licensing Agency. Please e-mail pla2@pla.in.gov for additional information.
INDIANA STATE BOARD OF NURSING

November 2005 Edition

TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>INDIANA CODE § 25-23 – Nursing</th>
<th>IC 25-23-1</th>
<th>Pages 5 – 13</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chapter 1. Licensing of Nurses; Creation of Board; Education Programs</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Chapter 1. Evidence of License Applicant’s Payment of Personal Property Taxes Required</td>
<td>IC 25-1-1</td>
<td>Page 13</td>
</tr>
<tr>
<td>Chapter 1.1 Effect of Criminal Convictions on Licensed or Registered Persons</td>
<td>IC 25-1-1.1</td>
<td>Pages 13 – 14</td>
</tr>
<tr>
<td>Chapter 1.2 Effect of Delinquency in Child Support Payments on Licensed or Registered Persons</td>
<td>IC 25-1-1.2</td>
<td>Pages 14 - 15</td>
</tr>
<tr>
<td>Chapter 2. Renewal of Licenses Granted by State Agencies; Notice of Expiration</td>
<td>IC 25-1-2</td>
<td>Pages 15-17</td>
</tr>
<tr>
<td>Chapter 3. Civil Immunity of Regulatory Agencies</td>
<td>IC 25-1-3</td>
<td>Page 17</td>
</tr>
<tr>
<td>Chapter 4. Continuing Education</td>
<td>IC 25-1-4</td>
<td>Pages 17 - 18</td>
</tr>
<tr>
<td>Chapter 5. Professional Licensing Agency</td>
<td>IC 25-1-5</td>
<td>Pages 18 - 20</td>
</tr>
<tr>
<td>Chapter 7. Investigation and Prosecution of Complaints Concerning Regulated Occupations</td>
<td>IC 25-1-7</td>
<td>Pages 20 - 22</td>
</tr>
<tr>
<td>Chapter 8. Occupation and Professional Licensure, Registration, and Certification Fees</td>
<td>IC 25-1-8</td>
<td>Pages 22 - 24</td>
</tr>
<tr>
<td>Chapter 9. Health Professions Standards of Practice</td>
<td>IC 25-1-9</td>
<td>Pages 24 - 28</td>
</tr>
<tr>
<td>Chapter 12. Renewal of Licenses Held by Individuals in Military Service</td>
<td>IC 25-1-12</td>
<td>Pages 28 - 29</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>INDIANA ADMINISTRATIVE CODE</th>
<th>848 IAC 1-1</th>
<th>Pages 29 - 32</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rule 1. Definitions; Administration</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rule 2. Accreditation</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Title 848, Article 2 – Standards for the Competent Practice of Registered and Licensed Practical Nursing</th>
<th>848 IAC 2-1</th>
<th>Page 39</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rule 1. Definitions</td>
<td></td>
<td>Page 39</td>
</tr>
<tr>
<td>Rule 2. Registered Nursing</td>
<td></td>
<td>Pages 39 - 40</td>
</tr>
</tbody>
</table>
Rule 3. Licensed Practical Nursing

Title 848, Article 3 – Nurse-Midwives

Rule 1. Definitions
Rule 2. General Provisions
Rule 3. Competent Practice of Nurse-Midwifery
Rule 4. Limitations of Rules
Rule 5. Fees for Nurse-Midwives

Rule 1. Definitions
Rule 2. Competent Practice of Nurse Practitioners
Rule 3. Competent Practice of Clinical Nurse Specialists
Rule 4. Limitations of Rules

Rule 1. Prescriptive Authority
Rule 2. Limitations of Rules
Rule 3. Fees for Prescriptive Authority

Title 848, Article 6 – Interstate Nurse Licensure Compact and Multi-state Licensure Privileges (Repealed)
IC 25-23-1-1. Definitions
Sec. 1. As used in this chapter:
(a) "Board" means the Indiana state board of nursing.
(b) "Advanced practice nurse" means:
(1) a nurse practitioner;
(2) a nurse midwife; or
(3) a clinical nurse specialist;
who is a registered nurse qualified to practice nursing in a
specialty role based upon the additional knowledge and skill
earned through a formal organized program of study and clinical
experience, or the equivalent as determined by the board, which
does not limit but extends or expands the function of the nurse
who may be initiated by the client or provider in settings that
shall include hospital outpatient clinics and health maintenance
organizations.
(c) "Human response" means those signs, symptoms, behaviors,
and processes that denote the individual's interaction with the
environment.
(Formerly: Acts 1949, c.159, s.1; Acts 1971, P.L.376, SEC.1; Acts 1974,
P.L.119, SEC.1.) As amended by Acts 1981, P.L.228, SEC.1; P.L.169-

IC 25-23-1-1.1 Additional definitions
Sec. 1.1. (a) As used in this chapter, "registered nurse" means a
person who holds a valid license issued:
(1) under this chapter; or
(2) by a party state (as defined in IC 25-23.2-1-11); and
who bears primary responsibility and accountability for nursing practices
based on specialized knowledge, judgment, and skill derived from the
principles of biological, physical, and behavioral sciences.
(b) As used in this chapter, "registered nursing" means performance
of services which include but are not limited to:
(1) assessing health conditions;
(2) deriving a nursing diagnosis;
(3) executing a nursing regimen through the selection,
performance, and management of nursing actions based on
nursing diagnoses;
(4) advocating the provision of health care services through
collaboration with or referral to other health professionals;
(5) executing regimens delegated by a physician with an
unlimited license to practice medicine or osteopathic medicine,
a licensed dentist, a licensed chiropractor, a licensed
optometrist, or a licensed podiatrist;
(6) teaching, administering, supervising, delegating, and
evaluating nursing practice;
(7) delegating tasks which assist in implementing the nursing,
medical, or dental regimen; or
(8) performing acts which are approved by the board or by the
board in collaboration with the medical licensing board of Indiana.
(c) As used in this chapter, "assessing health conditions" means the
collection of data through means such as interviews, observation, and
inspection for the purpose of:
(1) deriving a nursing diagnosis;
(2) identifying the need for additional data collection by nursing
personnel; and
(d) As used in this chapter, "nursing regimen" means preventive,
restorative, maintenance, and promotion activities which include meeting
or assisting with self-care needs, counseling, and teaching.
(e) As used in this chapter, "nursing diagnosis" means the
identification of needs which are amenable to nursing regimen.
SEC.64; P.L.181-2002, SEC.3.

IC 25-23-1-1.2 "Licensed practical nurse" defined
Sec. 1.2. As used in this chapter, "licensed practical nurse" means a
person who holds a valid license issued under this chapter or by a party
state (as defined in IC 25-23.2-1-11) and who functions at the direction of:
(1) a registered nurse;
(2) a physician with an unlimited license to practice medicine or
osteopathic medicine;
(3) a licensed dentist;
(4) a licensed chiropractor;
(5) a licensed optometrist; or
(6) a licensed podiatrist
in the performance of activities commonly performed by practical nurses
and requiring special knowledge or skill.

IC 25-23-1-1.3 "Practical nursing" defined
Sec. 1.3. As used in this chapter, "practical nursing" means the
performance of services commonly performed by practical nurses,
including:
(1) contributing to the assessment of the health status of
individuals or groups;
(2) participating in the development and modification of the
strategy of care;
(3) implementing the appropriate aspects of the strategy of care;
(4) maintaining safe and effective nursing care; and
(5) participating in the evaluation of responses to the strategy of
care.

IC 25-23-1-1.4 "Certified registered nurse anesthetist" defined
Sec. 1.4. As used in this chapter, "certified registered nurse
anesthetist" means a registered nurse who:
(1) is a graduate of a nurse anesthesia educational program
accredited by the American Association of Nurse Anesthetists
(referred to as the "AANA" in this chapter) Council on
Accreditation of Nurse Anesthesia Educational Programs or its
predecessor;
(2) is properly certified by successfully completing the
certification examination administered by the AANA's Council on
Certification of Nurse Anesthetists or its successor; and
(3) is properly certified and in compliance with criteria for
biennial recertification, as defined by the AANA Council on
Recertification of Nurse Anesthetists.
As added by P.L.185-1993, SEC.3.

IC 25-23-1-2 Indiana state board of nursing; establishment;
members; term of office; vacancies
Sec. 2. (a) There is established the Indiana state board of nursing
consisting of nine (9) members appointed by the governor, each to serve
a term of four (4) years subject to death, resignation, or removal by the
(b) Six (6) of the board members must be registered nurses who are committed to advancing and safeguarding the nursing profession as a whole. Two (2) of the board’s members must be licensed practical nurses. One (1) member of the board, to represent the general public, must be a resident of this state and not be associated with nursing in any way other than as a consumer.

(c) Each appointed board member may serve until the member’s successor has been appointed and qualified. Any vacancy occurring in the membership of the board for any cause shall be filled by appointment by the governor for the unexpired term. Members of the board may be appointed for more than one (1) term. However, no person who has served as a member of the board for more than six (6) consecutive years may be reappointed. Reappointments of persons who have served six (6) consecutive years as a member of the board may be made after three (3) years have elapsed.

(Formerly: Acts 1949, c.159, s.2; Acts 1971, P.L.376, SEC.2.) As years have elapsed.

Sec. 3. On or before December 1 of each year and at any time there is a vacancy, the Indiana State Nurses’ Association shall recommend to the Governor a list of qualified registered nurses for appointment to the Board in the number of not less than twice the number of registered nurse vacancies to be filled.

On or before December 1 of each year and at any time there is a vacancy, the Indiana Federation of Licensed Practical Nurses’ shall recommend to the Governor a list of qualified licensed practical nurses and nurse educators of Practical Nurse Programs for appointment to the Board in the number of not less than twice the number of vacancies to be filled. The Governor may remove any member from the Board for neglect of any duty required by law or for incompetency or unprofessional or dishonorable conduct.

(Formerly: Acts 1949, c.159, s.3; Acts 1971, P.L.376, SEC.3.)

(c) Before entering upon the discharge of official duties, each member of the board shall file the constitutional oath of office in the office of the secretary of state.

(Formerly: Acts 1949, c.159, s.4; Acts 1971, P.L.376, SEC.4.) As amended by P.L.169-1985, SEC.68.

IC 25-23-1-3 Filling vacancies; removal of board members
Sec. 3. On or before December 1 of each year and at any time there is a vacancy, the Indiana State Nurses’ Association shall recommend to the Governor a list of qualified registered nurses for appointment to the Board in the number of not less than twice the number of registered nurse vacancies to be filled.

On or before December 1 of each year and at any time there is a vacancy, the Indiana Federation of Licensed Practical Nurses’ shall recommend to the Governor a list of qualified licensed practical nurses and nurse educators of Practical Nurse Programs for appointment to the Board in the number of not less than twice the number of vacancies to be filled. The Governor may remove any member from the Board for neglect of any duty required by law or for incompetency or unprofessional or dishonorable conduct.

(Formerly: Acts 1949, c.159, s.2; Acts 1971, P.L.376, SEC.2.) As years have elapsed.

Sec. 4. (a) Each registered nurse member of the board required by section 2 of this chapter must:

(1) be a citizen of the United States;
(2) be a resident of Indiana;
(3) have:
(A) graduated from an accredited educational program for the preparation of practitioners of professional nursing;
(B) been licensed as a registered nurse in Indiana;
(C) had at least five (5) years successful experience since graduation in administering, teaching, or practicing in an educational program to prepare practitioners of nursing or in administering or practicing in nursing service; and
(D) been actively engaged in the activities described in clause (C) for at least three (3) years immediately preceding appointment or reappointment; and
(4) be actively engaged in the activities described in subdivision (3)(C) throughout the member’s term of office.

(b) Each licensed practical nurse member of the board required by section 2 of this chapter must:

(1) be a citizen of the United States;
(2) be a resident of Indiana;
(3) have:
(A) graduated from an accredited educational program for the preparation of practitioners of practical nursing;
(B) been licensed as a licensed practical nurse in Indiana;
(C) had at least five (5) years successful experience as a practitioner of practical nursing since graduation; and
(D) been actively engaged in practical nursing for at least three (3) years immediately preceding appointment to the board; and
(4) be actively engaged in practice throughout the member’s term of office.

(c) Before entering upon the discharge of official duties, each member of the board shall file the constitutional oath of office in the office of the secretary of state.

(Formerly: Acts 1949, c.159, s.4; Acts 1971, P.L.376, SEC.4.) As amended by P.L.169-1985, SEC.68.

IC 25-23-1-5 Meetings; officers; quorum
Sec. 5. (a) The board shall meet annually. At its first meeting of the calendar year, it shall elect from the membership a president, a vice president, and a secretary. It shall hold such other meetings during the year as may be necessary for the transaction of its business.

(b) Five (5) members of the board constitute a quorum. An affirmative vote of a majority of the members appointed to the board is required for action of the board.


IC 25-23-1-6 Repealed
(Repealed by P.L.169-1985, SEC.97.)

IC 25-23-1-7 Powers and duties of board
Sec. 7. (a) The board shall do the following:

(1) Adopt under IC 4-22-2 rules necessary to enable it to carry into effect this chapter.
(2) Prescribe standards and approve curricula for nursing education programs preparing persons for licensure under this chapter.
(3) Provide for surveys of such programs at such times as it considers necessary.
(4) Accredit such programs as meet the requirements of this chapter and of the board.
(5) Deny or withdraw accreditation from nursing education programs for failure to meet prescribed curricula or other standards.
(6) Examine, license, and renew the license of qualified applicants.
(7) Issue subpoenas, compel the attendance of witnesses, and administer oaths to persons giving testimony at hearings.
(8) Cause the prosecution of all persons violating this chapter and have power to incur necessary expenses for these prosecutions.
(9) Adopt rules under IC 4-22-2 that do the following:
(A) Prescribe standards for the competent practice of registered, practical, and advanced practice nursing.
(B) Establish with the approval of the medical licensing board created by IC 25-22-5-2-1 requirements that advanced practice nurses must meet to be granted authority to prescribe legend drugs and to retain that authority.
(C) Establish, with the approval of the medical licensing board created by IC 25-22-5-2-1, requirements for the renewal of a practice agreement under section 19.4 of this chapter.
Persons appointed to a subcommittee serve for terms as nursing specialties and interests of the profession of nursing.

(b) Recommendations concerning educational programs duties of the board.

(1) Create ad hoc subcommittees representing the various nursing specialties and interests of the profession of nursing. Persons appointed to a subcommittee serve for terms as determined by the board.

(2) Utilize the appropriate subcommittees so as to assist the board with its responsibilities. The assistance provided by the subcommittees may include the following:

(A) Recommendation of rules necessary to carry out the duties of the board.

(B) Recommendations concerning educational programs and requirements.

(C) Recommendations regarding examinations and licensure of applicants.

(3) Appoint nurses to serve on each of the ad hoc subcommittees.

(4) Withdraw from the interstate compact under IC 25-23.2.

(c) Nurses appointed under subsection (b) must:

(1) be committed to advancing and safeguarding the nursing profession as a whole; and

(2) represent nurses who practice in the field directly affected by a subcommittee's actions.

Sec. 7.1. The board may adopt rules and regulations applicable to nurse practitioners.


IC 25-23-1-8 Repealed

(Repealed by P.L.169-1985, SEC.97.)

IC 25-23-1-9 Repealed

(Repealed by P.L.169-1985, SEC.97.)

IC 25-23-1-10 Compensation of board members

Sec. 10. (a) Each member of the board who is not a state employee is entitled to the minimum salary per diem provided by IC 4-10-11-2.1(b).

Such a member is also entitled to reimbursement for traveling expenses and other expenses actually incurred in connection with the member's duties, as provided in the state travel policies and procedures established by the department of administration and approved by the state budget agency.

(b) Each member of the board who is a state employee but who is not a member of the general assembly is entitled to reimbursement for traveling expenses and other expenses actually incurred in connection with the member's duties, as provided in the state travel policies and procedures established by the department of administration and approved by the state budget agency.
(d) The board may issue by endorsement a license to practice as a registered nurse to an applicant who:

(1) has completed the English version of the Canadian Nurse Association Testing Service Examination;
(2) achieved the passing score required on the examination at the time the examination was taken;
(3) is currently licensed in a Canadian province or in another state; and
(4) meets the other requirements under this section.

(e) Each applicant for examination and registration to practice as a registered nurse shall pay a fee set by the board. The board may set a proctoring fee to be paid by applicants who are graduates of a state accredited school in another state. Payment of the fee or fees shall be made by the applicant prior to the date of examination.

(f) Any person who holds a license to practice as a registered nurse in:

(1) Indiana; or
(2) a party state (as defined in IC 25-23.2-1-11);
may use the title "Registered Nurse" and the abbreviation "R.N.". No other person shall practice or advertise as or assume the title of registered nurse or use the abbreviation of "R.N." or any other words, letters, signs, or figures to indicate that the person using same is a registered nurse.

(A) the prescribed curriculum and met the graduation requirements of a state accredited program of practical nursing that only accepts students who have a high school diploma or its equivalent, as determined by the board; or
(B) the prescribed curriculum and graduation requirements of a nursing education program in a foreign country that is substantially equivalent to a board approved program as determined by the board.

Sec. 12. (a) A person who applies to the board for a license to practice as a licensed practical nurse must:

(1) not have been convicted of:
(A) an act which would constitute a ground for disciplinary sanction under IC 25-1-9; or
(B) a crime that has a direct bearing on the person's ability to practice competently;
(2) have completed:
(A) the prescribed curriculum and met the graduation requirements of a state accredited program of practical nursing that only accepts students who have a high school diploma or its equivalent, as determined by the board; or
(B) the prescribed curriculum and graduation requirements of a nursing education program in a foreign country that is substantially equivalent to a board approved program as determined by the board. The board may by rule adopted under IC 4-22-2 require an applicant under this subsection to successfully complete an examination approved by the board to measure the applicant's qualifications and background in the practice of nursing and proficiency in the English language; and
(3) be physically and mentally capable of, and professionally competent to, safely engage in the practice of practical nursing as determined by the board.

(b) The applicant must pass an examination in such subjects as the board may determine.

(c) The board may issue by endorsement a license to practice as a licensed practical nurse to an applicant who has been licensed as a licensed practical nurse, by examination, under the laws of another state if the applicant presents proof satisfactory to the board that, at the time of application for an Indiana license by endorsement, the applicant possesses credentials and qualifications that are substantially equivalent to requirements in Indiana for licensure by examination. The board may specify by rule what shall constitute substantial equivalence under this subsection.

(d) Each applicant for examination and registration to practice as a practical nurse shall pay a fee set by the board. The board may set a proctoring fee to be paid by applicants who are graduates of a state accredited school in another state. Payment of the fees shall be made by the applicant prior to the date of examination.

(e) Any person who holds a license to practice as a licensed practical nurse in:

(1) Indiana; or
(2) a party state (as defined in IC 25-23.2-1-11);
may use the title "Licensed Practical Nurse" and the abbreviation "L.P.N.". No other person shall practice or advertise as or assume the title of licensed practical nurse or use the abbreviation of "L.P.N." or any other words, letters, signs, or figures to indicate that the person using them is a licensed practical nurse.

Sec. 13.1. (a) An applicant who desires to practice midwifery shall present to the board the applicant's license as a registered nurse and a diploma earned by the applicant from a school of midwifery approved or licensed by the board or licensing agency for midwives that is located in any state.

(b) The applicant shall submit to an examination in midwifery prescribed or administered by the board. If the application and qualifications are approved by the board, the applicant is entitled to receive a limited license that allows the applicant to practice midwifery.

(c) The board shall adopt rules under IC 25-23-1-7:

(1) defining the scope of practice for midwifery; and
(2) for implementing this section.

or before the expiration date will automatically render the license invalid without any action by the board.

(c) The procedures and fee for renewal shall be set by the board.

(d) At the time of license renewal, each registered nurse and each licensed practical nurse shall pay a renewal fee, a portion of which shall be for the rehabilitation of impaired registered nurses and impaired licensed practical nurses. The lesser of the following amounts from fees collected under this subsection shall be deposited in the impaired nurses account of the state general fund established by section 34 of this chapter:

(1) Sixteen percent (16%) of the license renewal fee per license renewed under this section.

(2) The cost per license to operate the impaired nurses program, as determined by the health professions bureau.


IC 25-23-1-17 Receipts; use and disposition

Sec. 17. All moneys received shall be deposited with the treasurer of state at the end of each month and be placed by him in the general fund of the state. The expenses of said board shall be paid from the general fund upon appropriation being made therefrom in the manner provided for the making of such appropriations.


IC 25-23-1-18 Failure to renew license; reinstatement; fee

Sec. 18. (a) Any person who fails to renew a license before it expires shall be reinstated by the board upon meeting the requirements under IC 25-1-8-6.

(b) A person who fails to apply to reinstate a license under this section within three (3) years after the date it expires may be issued a license by the board if the person meets the requirements under IC 25-1-8-6.


IC 25-23-1-19 Repealed

(Repealed by P.L.149-1987, SEC.120.)

IC 25-23-1-19.4 Advanced practice nurses; collaboration with licensed practitioner

Sec. 19.4. (a) As used in this section, “practitioner” has the meaning set forth in IC 16-42-19-5. However, the term does not include the following:

(1) A veterinarian.

(2) An advanced practice nurse.

(b) An advanced practice nurse shall operate in collaboration with a licensed practitioner as evidenced by a practice agreement, or by privileges granted by the governing board of a hospital licensed under IC 16-21 with the advice of the medical staff of the hospital that sets forth the manner in which an advanced practice nurse and a licensed practitioner will cooperate, coordinate, and consult with each other in the provision of health care to their patients.


IC 25-23-1-19.5 Advanced practice nurses; authority to prescribe legend drugs

Sec. 19.5. (a) The board shall establish a program under which advanced practice nurses who meet the requirements established by the board are authorized to prescribe legend drugs, including controlled substances (as defined in IC 35-48-1).

(b) The authority granted by the board under this section:

(1) expires on October 31 of the odd-numbered year following the year the authority was granted or renewed; and

(2) is subject to renewal indefinitely for successive periods of two (2) years.

(c) The rules adopted under section 7 of this chapter concerning the authority of advanced practice nurses to prescribe legend drugs must do the following:

(1) Require an advanced practice nurse or a prospective advanced practice nurse who seeks the authority to submit an application to the board.

(2) Require, as a prerequisite to the initial granting of the authority, the successful completion by the applicant of a graduate level course in pharmacology providing at least two (2) semester hours of academic credit.

(3) Require, as a condition of the renewal of the authority, the completion by the advanced practice nurse of the continuing education requirements set out in section 19.7 of this chapter.


IC 25-23-1-19.6 Advanced practice nurses; prescriptions; identification numbers

Sec. 19.6. (a) When the board grants authority to an advanced practice nurse to prescribe legend drugs under this chapter, the board shall assign an identification number to the advanced practice nurse.

(b) An advanced practice nurse who is granted authority by the board to prescribe legend drugs must do the following:

(1) Enter on each prescription form that the advanced practice nurse uses to prescribe a legend drug:

(A) the signature of the advanced practice nurse;

(B) initials indicating the credentials awarded to the advanced practice nurse under this chapter; and

(C) the identification number assigned to the advanced practice nurse who seeks the authority to prescribe legend drugs.

(2) Comply with all applicable state and federal laws concerning prescriptions for legend drugs.

(c) An advanced practice nurse may be granted authority to prescribe legend drugs under this chapter only within the scope of practice of the advanced practice nurse and the scope of the licensed collaborating health practitioner.


IC 25-23-1-19.7 Renewal of prescriptive authority

Sec. 19.7. (a) This subsection applies to an applicant for renewal who has never received a renewal of prescriptive authority under section 19.5 of this chapter and whose prescriptive authority has never lapsed. If the applicant was initially granted prescriptive authority:

(1) less than twelve (12) months before the expiration date of the prescriptive authority, no continuing education is required; or

(2) at least twelve (12) months before the expiration date of the prescriptive authority, the applicant shall, subject to IC 25-1-4-3, attest to the board that the applicant has successfully completed at least fifteen (15) contact hours of continuing education. The hours must:

(A) be completed after the prescriptive authority was granted and before the expiration of the prescriptive authority;
within the terms of the practice agreement.

(b) This subsection applies to an applicant for renewal of prescriptive authority under section 19.5 of this chapter who is not described in subsection (a). The applicant shall, subject to IC 25-1-4-3, attest to the board that the applicant has successfully completed at least thirty (30) contact hours of continuing education. The hours must:

(1) be completed within the two (2) years immediately preceding the renewal;
(2) include at least eight (8) contact hours of pharmacology; and
(3) be approved by a nationally approved sponsor of continuing education for nurses, approved by the board, and be listed by the health professions bureau as approved hours.


IC 25-23-1-19.8 Audit; procedure; provide information to board; order to show cause; hearing; divulging records to bureau; immunity from liability

Sec. 19.8. (a) Before December 31 of an even-numbered year, the bureau or the bureau's designee shall randomly audit at least one percent (1%) but not more than ten percent (10%) of the practice agreements of advanced practice nurses with authority to prescribe legend drugs under section 19.5 of this chapter to determine whether the practice agreement meets the requirements of this chapter or rules adopted by the board.

(b) The bureau shall establish an audit procedure, which may include the following:

(1) Requiring the advanced practice nurse to provide the bureau with a copy of verification of attendance at or completion of a continuing education course or program the advanced practice nurse attended during the previous two (2) years.
(2) Requiring the advanced practice nurse and the licensed practitioner who have entered into a practice agreement to submit information on a form prescribed by the bureau that must include a sworn statement signed by the advanced practice nurse and the licensed practitioner that the parties are operating within the terms of the practice agreement and the requirements under this chapter or rules adopted by the board.
(3) Reviewing patient health records and other patient information at the practice location or by requiring the submission of accurate copies to determine if the parties are operating within the terms of the practice agreement and the requirements under this chapter or rules adopted by the board.
(4) After a reasonable determination that the advanced practice nurse and the licensed practitioner who have entered into a practice agreement are not operating within the terms of the practice agreement, requiring the parties to appear before the bureau or the bureau's designee to provide evidence of compliance with the practice agreement.

(c) Not more than sixty (60) days after the completion of the audit required in subsection (a), the bureau shall provide the board with the following:

(1) A summary of the information obtained in the audit.
(2) A statement regarding whether an advanced practice nurse and a licensed practitioner who have entered into a practice agreement that is audited under subsection (a) are operating within the terms of the practice agreement.

The bureau shall also provide a copy of the information described in this subsection to the board that regulates the licensed practitioner.

(d) The bureau may cause to be served upon the advanced practice nurse an order to show cause to the board as to why the board should not impose disciplinary sanctions under IC 25-1-9-9 on the advanced practice nurse for the advanced practice nurse's failure to comply with:

(1) an audit conducted under this section; or
(2) the requirements of a practice agreement under this chapter.

(e) The board shall hold a hearing in accordance with IC 4-21.5 and state the date, time, and location of the hearing in the order served under subsection (d).

(f) The board that regulates the licensed practitioner may cause to be served upon the licensed practitioner an order to show cause to the board as to why the board should not impose disciplinary sanctions under IC 25-1-9-9 on the licensed practitioner for the licensed practitioner's failure to comply with:

(1) an audit conducted under this section; or
(2) the requirements of a practice agreement under this chapter.

(g) The board that regulates the licensed practitioner shall hold a hearing in accordance with IC 4-21.5 and state the date, time, and location of the hearing in the order served under subsection (f).

(h) An order to show cause issued under this section must comply with the notice requirements of IC 4-21.5.

(i) The licensed practitioner may divulge health records and other patient information to the bureau or the bureau's designee. The licensed practitioner is immune from civil liability for any action based upon release of the patient information under this section.


IC 25-23-1-20 Application for permission to conduct a nursing education program

Sec. 20. Any institution which desires to conduct a nursing education program shall apply to the board and submit evidence that:

(1) it is prepared to give a minimum curriculum of organized instruction and clinical experience in nursing in conformity to the provisions of this chapter and the rules of the board. Such instruction and experience may be secured in one (1) or more institutions or agencies approved by the board; and
(2) it is prepared to meet other standards established by this chapter and by the board.

(Formerly: Acts 1949, c.159, s.20; Acts 1951, c.34, s.6.) As amended by Acts 1982, P.L.154, SEC.81; P.L.149-1987, SEC.63.

IC 25-23-1-21 Survey of board; approval; surveys of accredited schools

Sec. 21. (a) A survey of the institution or institutions of which the nursing education program is a part and of institutions affiliated with the nursing education program shall be made by the a designated representative of the board. The surveyor shall submit a written report of the survey to the board. If, in the opinion of the board, the requirements for an accredited school of nursing are met, it shall approve the school as an accredited school of nursing.

(b) From time to time as considered necessary by the board, it shall be the duty of the board, through a designated representative of the board, to survey all nursing education programs in the state. Written reports of such surveys shall be submitted to the board. If the board determines that any accredited nursing education program is not maintaining the standards required by the statutes and by the board, notice in writing specifying the defect or defects shall be immediately given to the nursing education program. A nursing education program which fails to correct these conditions to the satisfaction of the board
within a reasonable time shall be removed from the list of accredited nursing education programs.

(c) The board may elect to utilize a nursing education program’s accreditation by a national accrediting body approved by the board and the Council on Postsecondary Accreditation (COPA) as evidence that the program has met all or part of the required state standards and prescribed curricula for continuing accreditation of nursing education programs.


IC 25-23-1-22 Repealed
(Repealed by P.L.149-1987, SEC.120.)

IC 25-23-1-23 Repealed
(Repealed by P.L.149-1987, SEC.120.)

IC 25-23-1-24 Repealed
(Repealed by P.L.169-1985, SEC.97.)

IC 25-23-1-25 Repealed
(Repealed by Acts 1981, P.L.222, SEC.296.)

IC 25-23-1-25.1 Repealed
(Repealed by P.L.152-1988, SEC.30.)

IC 25-23-1-26 Duty of attorney general
Sec. 26. It shall be the duty of the attorney-general to represent the board in any court in which an action may be filed for the review of an order of the board. The attorney-general may, at his discretion, call to his assistance in such action, the prosecuting attorney of the county in which such action is filed.

(Formerly: Acts 1949, c.159, s.26.)

IC 25-23-1-27 Violations; penalty
Sec. 27. A person who:
(1) sells or fraudulently obtains or furnishes any nursing diploma, license or record;
(2) practices nursing under cover of any diploma or license or record illegally or fraudulently obtained or assigned or issued unlawfully or under fraudulent representation;
(3) practices nursing as a registered nurse or licensed practical nurse unless licensed to do so under this chapter or under IC 25-23.2;
(4) uses in connection with the person’s name any designation tending to imply that the person is a registered nurse or a licensed practical nurse unless licensed to practice under this chapter or under IC 25-23.2;
(5) practices nursing during the time the person’s license issued under this chapter or under IC 25-23.2 is suspended or revoked;
(6) conducts a school of nursing or a program for the training of practical nurses unless the school or program has been accredited by the board; or
(7) otherwise violates this chapter;
commits a Class B misdemeanor.


IC 25-23-1-27.1 Limitations on application of chapter; “licensed health professional” defined
Sec. 27.1. (a) As used in this section, “licensed health professional” means:
(1) a registered nurse;
(2) a licensed practical nurse;
(3) a physician with an unlimited license to practice medicine or osteopathic medicine;
(4) a licensed dentist;
(5) a licensed chiropractor;
(6) a licensed optometrist;
(7) a licensed pharmacist;
(8) a licensed physical therapist;
(9) a licensed psychologist;
(10) a licensed podiatrist; or
(11) a licensed speech-language pathologist or audiologist.

(b) This chapter does not prohibit:
(1) furnishing nursing assistance in an emergency;
(2) the practice of nursing by any student enrolled in a board approved nursing education program where such practice is incidental to the student’s program of study;
(3) the practice of any nurse who is employed by the government of the United States or any of its bureaus, divisions, or agencies while in the discharge of the nurse’s official duties;
(4) the gratuitous care of sick, injured, or infirm individuals by friends or the family of that individual;
(5) the care of the sick, injured, or infirm in the home for compensation if the person assists only:
(A) with personal care;
(B) in the administration of a domestic or family remedy; or
(C) in the administration of a remedy that is ordered by a licensed health professional and that is within the scope of practice of the licensed health professional under Indiana law;
(6) performance of tasks by persons who provide health care services which are delegated or ordered by licensed health professionals, if the delegated or ordered tasks do not exceed the scope of practice of the licensed health professionals under Indiana law;
(7) a physician with an unlimited license to practice medicine or osteopathic medicine in Indiana, a licensed dentist, chiropractor, dental hygienist, optometrist, pharmacist, physical therapist, podiatrist, psychologist, speech-language pathologist, or audiologist from practicing the person’s profession;
(8) a school corporation or school employee from acting under IC 34-30-14;
(9) a personal services attendant from providing authorized attendant care services under IC 12-10-17; or
(10) an attendant who provides attendant care services (as defined in IC 16-18-2-28.5).


IC 25-23-1-27.2 Injunction from continuing violation of chapter; punishment
Sec. 27.2. The attorney general, the board, the prosecuting attorney, or any citizen of any county in which a person violates this article may maintain an action in the name of the state to enjoin the person from continuing in violation of this article. A person who is enjoined and who violates an injunction shall be punished for contempt of court. An injunction issued under this section does not relieve a person from criminal prosecution but is in addition to any remedy provided under
IC 25-23-1-27.5 Repealed
(Repealed by Acts 1981, P.L.222, SEC.296.)

IC 25-23-1-28 Transfer of powers and duties to state board of nurses registration and nursing education

Sec. 28. The Indiana state board of examination and registration of nurses is hereby abolished and all rights, powers and duties conferred before March 8, 1949, by law upon it, to the extent they do not conflict with the provisions of this chapter, are continued in full force and effect and are hereby transferred to and conferred upon the Indiana state board of nurses registration and nursing education hereby created. Any investigation, proceedings, hearing or examination or any proceedings in any courts undertaken, commenced or instituted by or before March 8, 1949, may be conducted and continued to a final determination by the board hereby created in the same manner and with the same effect as if this chapter had not been passed; all contractual and other rights, legal or equitable, existing on March 8, 1949, of, or created by, any act of the Indiana state board of examination and registration of nurses are hereby saved and continued and transferred to the board hereby created and all appropriations for and funds held by the Indiana state board of examination and registration of nurses are hereby continued and transferred to the Indiana state board of nurses registration and nursing education hereby created. Students who have already commenced their training on March 8, 1949, may, at their option, qualify pursuant to the laws and rules adopted by the board, except a rule that concerns the following:

(a) The sanitary and safe conditions of the premises.
(b) The cleanliness of operation.
(c) The physical equipment.
(d) The chapter does not apply to a person if:

(1) The person is licensed as a nurse in another jurisdiction;
(2) the person is employed by an individual, an agency, or a legal business entity located in that jurisdiction;
(3) the person's employment responsibilities include transporting a patient between jurisdictions;
(4) no trip made by the person into Indiana for the purpose of transporting a patient lasts more than seventy-two (72) hours; and
(5) the person does not make more than six (6) trips into Indiana for the purpose of transporting a patient during any twelve (12) month period.


IC 25-23-1-29 Practitioners of Church of Christ Scientist

Sec. 29. (a) This chapter does not apply to a nurse practicing in accordance with the practice and principles of the body known as the Church of Christ Scientist;

(b) A sanitarium, nursing home, or rest home provided that it is listed and certified by the Commission for Accreditation of Christian Science Nursing Organizations/Facilities, Inc. does not have to comply with any rule adopted by the board, except a rule that concerns the following:

(1) The sanitary and safe conditions of the premises.
(2) The cleanliness of operation.
(3) The physical equipment.

(c) The chapter does not apply to a person if:

(1) the person is licensed as a nurse in another jurisdiction;
(2) the person is employed by an individual, an agency, or a legal business entity located in that jurisdiction;
(3) the person's employment responsibilities include transporting a patient between jurisdictions;
(4) no trip made by the person into Indiana for the purpose of transporting a patient lasts more than seventy-two (72) hours; and
(5) the person does not make more than six (6) trips into Indiana for the purpose of transporting a patient during any twelve (12) month period.


IC 25-23-1-30 Nurse anesthetists; prescriptive authority not required to administer anesthetics

Sec. 30. Nothing in this chapter shall be construed as requiring a certified registered nurse anesthetist to obtain prescriptive authority to administer anesthesia under IC 25-22.5-1-2(12).

As added by P.L.185-1993, SEC.11.

IC 25-23-1-31 Rehabilitation of impaired registered nurse or licensed practical nurse; use of information after noncompliance

Sec. 31. (a) As used in this section, "impaired registered nurse or licensed practical nurse" means a registered nurse or licensed practical nurse who has been affected by the use or abuse of alcohol or other drugs.

(b) The board shall assist in the rehabilitation of an impaired registered nurse or licensed practical nurse.

(c) The board may do the following:

(1) Enter into agreements, provide grants, and make other arrangements with statewide nonprofit professional associations, foundations, or other entities specifically devoted to the rehabilitation of impaired health care professionals to identify and assist impaired registered nurses and licensed practical nurses.
(2) Accept and designate grants, public and private financial assistance, and licensure fees to fund programs under subdivision (1) to assist impaired registered nurses and licensed practical nurses.
(d) Except as provided in subsection (f), all:

(1) information furnished to a nonprofit professional association, foundation, or other entity specifically devoted to the rehabilitation of impaired health care professionals, including interviews, reports, statements, and memoranda; and
(2) findings, conclusions, or recommendations that result from a proceeding of the professional association, foundation, or other entity specifically devoted to the rehabilitation of impaired health care professionals;

are privileged and confidential.

(e) The records of a proceeding under subsection (d) may be used only in the exercise of proper functions of the board, and may not become public records or subject to a subpoena or discovery proceeding.

(f) Information received by the board from the board designated rehabilitation program for noncompliance by the registered nurse or licensed practical nurse may be used by the board in any disciplinary or criminal proceedings instituted against the impaired registered nurse or licensed practical nurse.

(g) The board designated rehabilitation program shall:

(1) immediately report to the board the name and results of any contact or investigation concerning an impaired registered nurse or licensed practical nurse who the program believes constitutes a certain, immediate, and impending danger to either the public or the impaired registered nurse or licensed practical nurse; and
(2) in a timely fashion report to the board an impaired registered nurse or licensed practical nurse:

(A) who refuses to cooperate with the program;
(B) who refuses to submit to treatment; or
(C) whose impairment is not substantially or significantly alleviated through treatment, as determined by accepted medical standards.


IC 25-23-1-32 Reserved

Reserved
IC 25-23-1-33 Professing to be nurse practitioner or clinical nurse specialist; use of title
Sec. 33. (a) An individual may not:
(1) profess to be a nurse practitioner; or
(2) use the title “nurse practitioner”;
unless the individual is a nurse practitioner.
(b) An individual may not:
(1) profess to be a clinical nurse specialist; or
(2) use the title “clinical nurse specialist”;
unless the individual is a clinical nurse specialist.

IC 25-23-1-34 Impaired nurses account
Sec. 34. (a) The impaired nurses account is established within the state general fund for the purpose of providing money for providing rehabilitation of impaired registered nurses or licensed practical nurses under this article. The account shall be administered by the health professions bureau.

(b) Expenses of administering the account shall be paid from money in the account. The account consists of the following:
(1) Funds collected for the rehabilitation of impaired registered nurses and impaired licensed practical nurses under section 16.1(d) of this chapter.
(2) Funds collected under section 31(c)(2) of this chapter.
(3) Funds collected for the rehabilitation of impaired registered nurses and impaired licensed practical nurses under IC 25-23.2-3-5.
(4) Fines collected from registered nurses or licensed practical nurses under IC 25-1-9-9(a)(6).
(c) The treasurer of state shall invest the money in the account not currently needed to meet the obligations of the account in the same manner as other public money may be invested.
(d) Money in the account is appropriated to the board for the purpose stated in subsection (a).

INDIANA CODE § 25-1-1

Chapter 1. Evidence of License Applicant's Payment of Personal Property Taxes Required

IC 25-1-1-1 Issuance of license; evidence of payment of personal property tax
Sec. 1. It is unlawful for any board, officer, or person to issue any license, as defined in section 2 of this chapter, to any person who is a resident of this state, unless the applicant, at the time he applies for such license, submits, in addition to all other requirements prescribed by law, a signed statement from the assessor of the county in which the applicant is a resident that the applicant has paid all personal property taxes assessed against him, including all delinquent personal property tax; or, if the applicant owns no personal property subject to taxation, a signed statement from the assessor of the county in which the applicant resides certifying that he has made an affidavit to the effect that he owes no delinquent personal property tax in any county in Indiana.
(Formerly: Acts 1931, c.124, s.1; Acts 1941, c.61, s.1; Acts 1943, c.124, s.1; Acts 1953, c.208, s.1.) As amended by Acts 1978, P.L.2, SEC.2501.

IC 25-1-1-2 License defined
Sec. 2. The term “license” as used in this chapter shall be construed to mean and include motor vehicle registration licenses, certificates of title showing the ownership of any motor vehicle, except those classed as passenger vehicles.
(Formerly: Acts 1931, c.124, s.2; Acts 1972, P.L.183, SEC.1.)

IC 25-1-1-3 Repealed
(Repealed by Acts 1978, P.L.2, SEC.2570.)

IC 25-1-1-4 Repealed
(Repealed by Acts 1978, P.L.2, SEC.2570.)

INDIANA CODE § 25-1-1.1

Chapter 1.1. Effect of Criminal Convictions on Licensed or Registered Persons

IC 25-1-1.1-1 Denial, revocation, or suspension of license or certificate of registration; conviction of crime
Sec. 1. Except as provided under sections 2 through 3 of this chapter, a license or certificate of registration that an individual is required by law to hold to engage in a business, profession, or occupation may not be denied, revoked, or suspended because the applicant or holder has been convicted of an offense. The acts from which the applicant's or holder's conviction resulted may, however, be considered as to whether the applicant or holder should be entrusted to serve the public in a specific capacity.

IC 25-1-1.1-2 Suspension or revocation of license or certificate; conviction for drug related offense
Sec. 2. A board, a commission, or a committee may suspend or revoke a license or certificate issued under this title by the board, the commission, or the committee if the individual who holds the license or certificate is convicted of any of the following:
(1) Possession of cocaine, a narcotic drug, or methamphetamine under IC 35-48-4-6.
(2) Possession of a controlled substance under IC 35-48-4-7(a).
(3) Fraudulently obtaining a controlled substance under IC 35-48-4-7(b).
(4) Manufacture of paraphernalia as a Class D felony under IC 35-48-4-8.1(b).
(5) Dealing in paraphernalia as a Class D felony under IC 35-48-4-8.5(b).
(6) Possession of paraphernalia as a Class D felony under IC 35-48-4-8.3(b).
(7) Possession of marijuana, hash oil, or hashish as a Class D felony under IC 35-48-4-11.
(8) Maintaining a common nuisance under IC 35-48-4-13.
(9) An offense relating to registration, labeling, and prescription forms under IC 35-48-4-14.
(10) Conspiracy under IC 35-41-5-2 to commit an offense listed in subdivisions (1) through (9).
(11) Attempt under IC 35-41-5-1 to commit an offense listed in subdivisions (1) through (9).
(12) An offense in any other jurisdiction in which the elements of the offense for which the conviction was entered are substantially similar to the elements of an offense described...
IC 25-1-1.1-3  "Applicant" defined
Sec. 1. As used in this chapter, "applicant" means a person who applies for:
(1) an unlimited license, certificate, registration, or permit;
(2) a limited or probationary license, certificate, registration, or permit;
(3) a temporary license, certificate, registration, or permit; or
(4) an intern permit;
issued by a board regulating a profession or an occupation.

IC 25-1-1.1-4  "Board" defined
Sec. 2. As used in this chapter, "board" means an entity that regulates occupations or professions under this title and the department of education as established by IC 20-19-3-1.

IC 25-1-1.1-5  "License" defined
Sec. 3. As used in this chapter, "license" has the meaning set forth in IC 25-1-2-6.

IC 25-1-1.2-1  "Bureau" defined
Sec. 3. As used in this chapter, "bureau" means the child support bureau established by IC 12-17-2-5.

IC 25-1-1.2-2  "Delinquent" defined
Sec. 4. As used in this chapter, "delinquent" means at least:
(1) two thousand dollars ($2,000); or
(2) three (3) months; past due on payment of court ordered child support.

IC 25-1-1.2-3  "Practitioner" defined
Sec. 6. As used in this chapter, "practitioner" means a person that holds:
(1) an unlimited license, certificate, registration, or permit;
(2) a limited or probationary license, certificate, registration, or permit;
(3) a temporary license, certificate, registration, or permit; or
(4) an intern permit;
issued by a board regulating a profession or an occupation.

IC 25-1-1.2-4  Order for suspension or denial of license; notice to practitioner; contents; reinstatement
Sec. 7. (a) Upon receiving an order of a court issued under IC 31-14-12-5 or IC 31-16-12-8 (or IC 31-1-11.5-13(k) or IC 31-6-6.1-16(k) before their repeal), the board shall:
(1) suspend the license of the practitioner; or
(2) deny the application of the applicant; who is the subject of the order.
(b) Upon receiving an order of a court issued under IC 31-14-12-5 or IC 31-16-12-8 (or IC 31-1-11.5-13(k) or IC 31-6-6.1-16(k) before their repeal), the board shall promptly mail a notice to the last known address of the person who is the subject of the order, stating the following:
(1) That the practitioner's license has been suspended, beginning five (5) business days after the date the notice is mailed, and that the suspension will terminate ten (10) business days after the board receives an order allowing reinstatement from the court that issued the suspension order.
(2) That the practitioner has the right to petition for reinstatement of the practitioner's license to the court that issued the order for suspension.
(c) The board may not reinstate a license suspended under this section until the board receives an order allowing reinstatement from the court that issued the order for suspension.

IC 25-1-1.2-5  Notice of delinquency; contents; delinquency finding; probationary status; suspension; reinstatement
Sec. 8. (a) The board shall, upon receiving an order from the bureau under IC 12-17-2-34(e), send a notice to the practitioner identified by the
bureau that includes the following:

(1) Specifies that the practitioner is delinquent and subject to an order placing the practitioner on probationary status.
(2) Describes the amount of child support that the practitioner is in arrears.
(3) Explains that unless the practitioner contacts the bureau and:
   (A) pays the practitioner's child support arrearage in full;
   (B) requests the activation of an income withholding order under IC 31-16-15-2 and establishes a payment plan with the bureau to pay the arrearage; or
   (C) requests a hearing under IC 12-17-2-35;
   (1) paid the person's child support arrearage in full; or
   (2) established a payment plan with the bureau to pay the arrearage and request the activation of an income withholding order under IC 31-16-15-2.
(4) Explains that the practitioner may contest the bureau's determination that the practitioner is delinquent and subject to an order placing the practitioner on probationary status by making written application to the bureau within twenty (20) days after the date the notice is mailed.
(5) Explains that the only basis for contesting the bureau's determination that the practitioner is delinquent and subject to an order placing the practitioner on probationary status is a mistake of fact.
(6) Explains the procedures to:
   (A) pay the practitioner's child support arrearage in full;
   (B) establish a payment plan with the bureau to pay the arrearage;
   (C) request the activation of an income withholding order under IC 31-16-15-2; and
   (D) request a hearing under IC 12-17-2-35.
(7) Explains that the probation will terminate ten (10) business days after the board receives a notice from the bureau that the practitioner has:
   (A) paid the practitioner's child support arrearage in full; or
   (B) established a payment plan with the bureau to pay the arrearage and requested the activation of an income withholding order under IC 31-16-15-2.

(b) If the board is advised by the bureau that the practitioner either requested a hearing and failed to appear or appeared and was found to be delinquent, the board shall promptly mail a notice to the practitioner who is the subject of the order stating the following:

(1) That the practitioner's license has been placed on probationary status, beginning five (5) business days after the date the notice is mailed, and that the probation will terminate ten (10) business days after the board receives a notice from the bureau that the person has:
   (A) paid the person's child support arrearage in full; or
   (B) established a payment plan with the bureau to pay the arrearage and requested the activation of an income withholding order under IC 31-16-15-2.
(2) That if the board is advised by the bureau that the practitioner whose license has been placed on probationary status has failed to:
   (A) pay the person's child support arrearage in full; or
   (B) establish a payment plan with the bureau to pay the arrearage and request the activation of an income withholding order under IC 31-16-15-2;
   (1) pay the person's child support arrearage in full; or
   (2) establish a payment plan with the bureau to pay the arrearage and request the activation of an income withholding order under IC 31-16-15-2; within twenty (20) days after the date the notice is mailed, the board shall suspend the practitioner's license.
(3) Explains that unless the board is advised by the bureau that the person has:
   (B) paid the person's child support arrearage in full; or
   (C) establish a payment plan with the bureau to pay the arrearage and request the activation of an income withholding order under IC 31-16-15-2.


IC 25-1-1.2-9 Repealed
(Repealed by P.L.23-1996, SEC.33.)

IC 25-1-1.2-10 Repealed
(Repealed by P.L.23-1996, SEC.33.)

INDIANA CODE § 25-1-2
Chapter 2. Renewal of Licenses Granted by State Agencies; Notice of Expiration

IC 25-1-2-1 Declaration of intent
Sec. 1. It is the declared intent of the general assembly by the enactment of this law to require those agencies which are authorized to issue the licenses designated in section 2.1 of this chapter, in the interests of efficiency and economy in the administration of government, to issue such designated permits, licenses, certificates of registration, and other evidences of compliance with statute or regulation, and renewals thereof, for periods of two (2) years duration rather than upon an annual basis, and at the time of issuance or reissuance, or at the time designated by law for the collection of fees therefor, to require the payment of such fees for a period of two (2) years rather than for one (1) year.
(Formerly: Acts 1961, c.79, s.1.) As amended by P.L.1-1990, SEC.246.

IC 25-1-2-2 Repealed
(Repealed by P.L.1-1990, SEC.247.)

IC 25-1-2-2.1 Two year or longer period for certain licenses
Sec. 2.1. Rather than being issued annually, the following permits, licenses, certificates of registration, or evidences of authority granted by a state agency must be issued for a period of two (2) years or for the period specified in the article under which the permit, license, certificate of registration, or evidence of authority is issued if the period specified in the article is longer than two (2) years:

(1) Certified public accountants, public accountants, and accounting practitioners.
(2) Architects and landscape architects.
(3) Dry cleaners.
(4) Professional engineers.
(5) Land surveyors.
(6) Real estate brokers.
(7) Real estate agents.
(8) Security dealers' licenses issued by the securities...
commissioner.
(9) Dental hygienists.
(10) Dentists.
(11) Veterinarians.
(12) Physicians.
(13) Chiropractors.
(14) Physical therapists.
(15) Optometrists.
(16) Pharmacists and assistants, drugstores or pharmacies.
(17) Motels and mobile home community licenses.
(18) Nurses.
(19) Podiatrists.
(20) Occupational therapists and occupational therapy assistants.
(21) Respiratory care practitioners.
(22) Social workers, marriage and family therapists, and mental health counselors.
(23) Real estate appraiser licenses and certificates issued by the real estate appraiser licensure and certification board.
(25) Physician assistants.
(26) Dietitians.
(27) Hypnotists.
(28) Athlete agents.
(29) Manufactured home installers.
(30) Home inspectors.


IC 25-1-2-3 Authorization to issue and reissue two year licenses
Sec. 3. Effective October 1, 1961, such licensing agencies as are authorized to issue any of the foregoing shall issue and reissue such licenses and collect the fees for the same on the basis of two (2) years and the dates by month and day which govern the issuance or reissuance of licenses for one (1) year shall govern the issuance or reissuance of licenses for two (2) years; provided, that entire fees for a two (2) year period shall be payable before issuance thereof on the day and month designated for payment of fees for one (1) year licenses.

IC 25-1-2-4 Rebates and proration of fees
Sec. 4. Rebates and proration of fees for fractions of a biennium shall be allowed only with respect to the second year of such license if claim be made therefor before the expiration of the first year for which the license was issued.
(Formerly: Acts 1961, c.79, s.4.)

IC 25-1-2-5 Rules and regulations
Sec. 5. Notice shall be given and forms prepared by such licensing agencies as necessary to execute the provisions of this chapter and in order to expedite and effectuate the conversion from one (1) year licensing periods to those of two (2) years, such licensing agencies may adopt and promulgate such rules and regulations they may deem necessary in the manner prescribed by law.

IC 25-1-2-6 Definitions; application of section; notice to licensee of need to renew
Sec. 6. (a) As used in this section, "license" includes all occupational and professional licenses, registrations, permits, and certificates issued under the Indiana Code, and "licensee" includes all occupational and professional licensees, registrants, permittees, and certificate holders regulated under the Indiana Code.
(b) This section applies to the following entities that regulate occupations or professions under the Indiana Code:
(1) Indiana board of accountancy.
(2) Indiana grain buyers and warehouse licensing agency.
(3) Indiana auctioneer commission.
(4) Board of registration for architects and landscape architects.
(5) State board of barber examiners.
(6) State board of cosmetology examiners.
(7) Medical licensing board of Indiana.
(8) Secretary of state.
(9) State board of dentistry.
(10) State board of funeral and cemetery service.
(11) Worker's compensation board of Indiana.
(12) Indiana state board of health facility administrators.
(13) Committee of hearing aid dealer examiners.
(14) Indiana state board of nursing.
(15) Indiana optometry board.
(16) Indiana board of pharmacy.
(17) Indiana plumbing commission.
(18) Board of podiatric medicine.
(19) Private detectives licensing board.
(20) State board of registration for professional engineers.
(21) Board of environmental health specialists.
(22) State psychology board.
(23) Indiana real estate commission.
(24) Speech-language pathology and audiology board.
(25) Department of natural resources.
(26) State boxing commission.
(27) Board of chiropractic examiners.
(28) Mining board.
(29) Indiana board of veterinary medical examiners.
(30) State department of health.
(31) Indiana physical therapy committee.
(32) Respiratory care committee.
(33) Occupational therapy committee.
(34) Social worker, marriage and family therapist, and mental health counselor board.
(35) Real estate appraiser licensure and certification board.
(36) State board of registration for land surveyors.
(37) Physician assistant committee.
(38) Indiana dietitians certification board.
(39) Indiana hypnotist committee.
(40) Attorney general (only for the regulation of athlete agents).
(41) Manufactured home installer licensing board.
(42) Home inspectors licensing board.
(43) Any other occupational or professional agency created after June 30, 1981.
(c) Notwithstanding any other law, the entities included in subsection (b) shall send a notice of the upcoming expiration of a license to each licensee at least sixty (60) days prior to the expiration of the license. The notice must inform the licensee of the need to renew and the requirement of payment of the renewal fee. If this notice of expiration is not sent by the entity, the licensee is not subject to a sanction for failure to renew if,
IC 25-1-3-4  Regulatory boards covered
Sec. 4. The provisions of this chapter extend to every regulatory board of the state except the disciplinary commission of the supreme court of Indiana which is protected under IC 1971, 33-2-3-1.
(Formerly: Acts 1975, P.L.268, SEC.1.)

IC 25-1-4-0.3  “Board” defined
Sec. 0.3. As used in section 0 of this chapter, “board” means any of the following:

(1) Indiana board of veterinary medical examiners (IC 15-5-1.1).
(2) Indiana athletic trainers board (IC 25-5.1-2-1).
(3) Board of chiropractic examiners (IC 25-10-1).
(4) State board of dentistry (IC 25-14-1).
(5) Indiana dietitians certification board (IC 25-14.5-2-1).
(6) Indiana state board of health facility administrators (IC 25-19-1).
(7) Committee on hearing aid dealer examiners (IC 25-20-1-1.5).
(8) Indiana hypnotist committee (IC 25-20.5-1-7).
(9) Medical licensing board of Indiana (IC 25-22.5-2).
(10) Indiana state board of nursing (IC 25-23-1).
(11) Occupational therapy committee (IC 25-23.5).
(12) Social worker, marriage and family therapist, and mental health counselor board (IC 25-23.6).
(13) Indiana optometry board (IC 25-24).
(14) Indiana board of pharmacy (IC 25-26).
(15) Indiana physical therapy committee (IC 25-27-1).
(16) Physician assistant committee (IC 25-27.5).
(17) Board of podiatric medicine (IC 25-29-2.1).
(18) Board of environmental health specialists (IC 25-32).
(19) State psychology board (IC 25-33).
(20) Respiratory care committee (IC 25-34.5).
(21) Speech-language pathology and audiology board (IC 25-35.6-2).


IC 25-1-4-0.6  “Practitioner” defined
Sec. 0.6. As used in section 3 of this chapter, “practitioner” means any individual who holds:

(1) an unlimited license, certificate, or registration;
(2) a limited or probationary license, certificate, or registration;
(3) a temporary license, certificate, registration, or permit;
(4) an intern permit; or
(5) a provisional license; issued by the board regulating the profession in question.

As added by P.L.269-2001, SEC.3.

IC 25-1-4-1  Requirement
Sec. 1. No board or agency regulating a profession or occupation under this title or under IC 15, IC 16, or IC 22 may require continuing education as a condition of certification, registration, or licensure unless
so specifically authorized or mandated by statute.

IC 25-1-4-2 Promotion
Sec. 2. A board or agency regulating a profession or occupation under this title or under IC 15, IC 16, or IC 22 may cooperate with members of the profession or occupation it regulates to promote continuing education within the profession or occupation.

IC 25-1-4-3 Sworn statements of compliance; retention of copies of certificates of completion; audits
Sec. 3. (a) Notwithstanding any other law, a board that is specifically authorized or mandated to require continuing education as a condition to renew a registration, certification, or license must require a practitioner to comply with the following renewal requirements:

(1) The practitioner shall provide the board with a sworn statement signed by the practitioner that the practitioner has fulfilled the continuing education requirements required by the board.

(2) The practitioner shall retain copies of certificates of completion for continuing education courses for three (3) years from the end of the licensing period for which the continuing education applied. The practitioner shall provide the board with copies of the certificates of completion upon the board's request for a compliance audit.

(b) Every two (2) years the board shall randomly audit for compliance more than one percent (1%) but less than ten percent (10%) of the practitioners required to take continuing education courses.

IC 25-1-4-3.2 Distance learning methods
Sec. 3.2. A board or agency regulating a profession or occupation under this title or under IC 15, IC 16, or IC 22 shall require that at least one-half (50%) of all continuing education requirements must be allowed by distance learning methods, except for doctors, nurses, chiropractors, optometrists and dentists.

IC 25-1-4-4 Hardship waiver
Sec. 4. A board, a commission, a committee, or an agency regulating a profession or occupation under this title or under IC 15, IC 16, or IC 22 may grant an applicant a waiver from all or part of the continuing education requirement for a renewal period if the applicant was not able to fulfill the requirement due to a hardship that resulted from any of the following:

(1) Service in the armed forces of the United States during a substantial part of the renewal period.

(2) An incapacitating illness or injury.

(3) Other circumstances determined by the board or agency.

IC 25-1-5-1 Centralization of staff, functions, and services; purpose
Sec. 1. The centralization of staff, functions, and services contemplated by this chapter shall be done in such a way as to enhance the Indiana professional licensing agency's ability to:

(1) make maximum use of data processing as a means of more efficient operation, and

(2) provide more services and carry out functions of superior quality.

IC 25-1-5-2 Definitions
Sec. 2. As used in this chapter:

(1) "Agency" means the Indiana professional licensing agency established by section 3 of this chapter.

(2) "Board" means any agency, board, advisory committee, or group included in section 3 of this chapter.

IC 25-1-5-3 Indiana professional licensing agency; functions; duties and responsibilities
Sec. 3. (a) There is established the Indiana professional licensing agency. The agency shall perform all administrative functions, duties, and responsibilities assigned by law or rule to the executive director, secretary, or other statutory administrator of the following:

(1) Board of chiropractic examiners (IC 25-10-1).

(2) State board of dentistry (IC 25-14-1).

(3) Indiana state board of health facility administrators (IC 25-19-1).

(4) Medical licensing board of Indiana (IC 25-22-5-2).

(5) Indiana state board of nursing (IC 25-23-1).

(6) Indiana optometry board (IC 25-24).

(7) Indiana board of pharmacy (IC 25-26).

(8) Board of podiatric medicine (IC 25-29-2-1).

(9) Board of environmental health specialists (IC 25-32).

(10) Speech-language pathology and audiology board (IC 25-35-6-2).

(11) State psychology board (IC 25-33).

(12) Indiana board of veterinary medical examiners (IC 15-5-1).

(13) Controlled substances advisory committee (IC 35-48-2-1).

(14) Committee of hearing aid dealer examiners (IC 25-20).

(15) Indiana physical therapy committee (IC 25-27).

(16) Respiratory care committee (IC 25-34-5).

(17) Occupational therapy committee (IC 25-23-5).

(18) Social worker, marriage and family therapist, and mental health counselor board (IC 25-23-6).

(19) Physician assistant committee (IC 25-27-5).

(20) Indiana athletic trainers board (IC 25-5-1-2-1).

(21) Indiana dietitians certification board (IC 25-14-5-2-1).

(22) Indiana hypnotist committee (IC 25-20-5-1-7).

(b) Nothing in this chapter may be construed to give the agency policy making authority, which authority remains with each board.

IC 25-1-5-4 Additional duties and functions; staff
Sec. 4. (a) The agency shall employ necessary staff, including specialists and professionals, to carry out the administrative duties and
functions of the boards, including but not limited to:
(1) notice of board meetings and other communication services;
(2) recordkeeping of board meetings, proceedings, and actions;
(3) recordkeeping of all persons licensed, regulated, or certified
by a board;
(4) administration of examinations; and
(5) administration of license or certificate issuance or renewal.

(b) In addition the agency:
(1) shall prepare a consolidated statement of the budget
requests of all the boards in section 3 of this chapter;
(2) may coordinate licensing or certification renewal cycles,
examination schedules, or other routine activities to efficiently
utilize agency staff, facilities, and transportation resources, and
to improve accessibility of board functions to the public; and
(3) may consolidate, where feasible, office space,
recordkeeping, and data processing services.

(c) In administering the renewal of licenses or certificates under this
chapter, the agency shall send a notice of the upcoming expiration of a
license or certificate to each holder of a license or certificate at least sixty
(60) days before the expiration of the license or certificate. The notice
must inform the holder of the license or certificate of the need to renew
and the requirement of payment of the renewal fee. If this notice of
expiration is not sent by the agency, the holder of the license or
certificate is not subject to a sanction for failure to renew if, once notice is
received from the agency, the license or certificate is renewed within
forty-five (45) days after receipt of the notice.

(d) In administering an examination for licensure or certification,
the agency shall make the appropriate application forms available at
least thirty (30) days before the deadline for submitting an application to
all persons wishing to take the examination.

(e) The agency may require an applicant for license renewal to
submit evidence proving that:
(1) the applicant continues to meet the minimum requirements
for licensure; and
(2) the applicant is not in violation of:
   (A) the statute regulating the applicant's profession; or
   (B) rules adopted by the board regulating the applicant's
       profession.

(f) The agency shall process an application for renewal of a license
or certificate:
(1) not later than ten (10) days after the agency receives all
required forms and evidence; or
(2) within twenty-four (24) hours after the time that an applicant
for renewal appears in person at the agency with all required
forms and evidence.

This subsection does not require the agency to issue a renewal license
or certificate to an applicant if subsection (g) applies.

(g) The agency may delay issuing a license renewal for up to ninety
(90) days after the renewal date for the purpose of permitting the board
to investigate information received by the agency that the applicant for
renewal may have committed an act for which the applicant may be
disciplined. If the agency delays issuing a license renewal, the agency
shall notify the applicant that the applicant is being investigated. Except
as provided in subsection (h), before the end of the ninety (90) day
period, the board shall do one (1) of the following:
(1) Deny the license renewal following a personal appearance
by the applicant before the board.
(2) Issue the license renewal upon satisfaction of all other
conditions for renewal.
(3) Issue the license renewal and file a complaint under IC 25-1-7.

(h) If an individual fails to appear before the board under subsection
(g), the board may take action on the applicant's license allowed under
subsection (g)(1), (g)(2) or (g)(3).

(i) If the board makes a request under subsection (g)(4), the office of
the attorney general shall conduct an investigation. Upon completion of
the investigation, the office of the attorney general
may file a petition alleging that the applicant has engaged in activity
described in IC 25-1-9-4. If the office of the attorney general files a
petition, the board shall set the matter for a hearing. If, after the hearing,
the board finds the practitioner violated IC 25-1-9-4, the board may
impose sanctions under IC 25-1-9-9. The board may delay issuing the
renewal beyond the ninety (90) days after the renewal date until a final
determination is made by the board. The applicant's license remains valid
until the final determination of the board is rendered unless the renewal is
denied or the license is summarily suspended under IC 25-1-9-10.

(j) The license of the applicant for a license renewal remains valid
during the ninety (90) day period unless the license renewal is denied
following a personal appearance by the applicant before the board before
the end of the ninety (90) day period. If the ninety (90) day period expires
without action by the board, the license shall be automatically renewed at
the end of the ninety (90) day period.

(k) Notwithstanding any other statute, the agency may stagger
license or certificate renewal cycles. However, if a renewal cycle for a
specific board or committee is changed, the agency must obtain the
approval of the affected board or committee.

(l) An application for a license, certificate, registration, or permit is
abandoned without an action of the board, if the applicant does not
complete the requirements to complete the application within one (1)
year after the date on which the application was filed. However, the
board may, for good cause shown, extend the validity of the application
for additional thirty (30) day periods. An application submitted after the
abandonment of an application is considered a new application.

SEC.25; P.L.149-1987, SEC.19; P.L.22-1999, SEC.1; P.L.44-2000,

IC 25-1-5-5 Executive director

Sec. 5. (a) The agency shall be administered by an executive
director appointed by the governor who shall serve at the will and
pleasure of the governor.

(b) The executive director must be qualified by experience and
training.

(c) The term “executive director” or “secretary”, or any other statutory
term for the administrative officer of a board listed in section 3 of this
chapter, means the executive director of the agency or the executive
director’s designee.

(d) The executive director is the chief fiscal officer of the agency and
is responsible for hiring of all staff, and for procurement of all services
and supplies in accordance with IC 5-22. The executive director and the
employees of the agency are subject to IC 4-15-1.8 but are not under
IC 4-15-2. The executive director may appoint not to exceed three (3)
deputy directors, who must be qualified to work for the boards which are served by the agency.

(5) The executive director shall execute a bond payable to the state, with surety to consist of a surety or guaranty corporation qualified to do business in Indiana, in an amount fixed by the state board of accounts, conditioned upon the faithful performance of duties and the accounting for all money and property that come into the executive director's hands or under the executive director's control. The executive director may likewise cause any employee of the agency to execute a bond if that employee receives, disburses, or in any way handles funds or property of the agency. The costs of any such bonds shall be paid from funds available to the agency.

(f) The executive director may present to the general assembly legislative recommendations regarding operations of the agency and the boards it serves, including adoption of four (4) year license or certificate renewal cycles wherever feasible.

(g) The executive director may execute orders, subpoenas, continuances, and other legal documents on behalf of a board or committee when requested to do so by the board or committee.

(h) The executive director or the executive director's designee may, upon request of a board or committee, provide advice and technical assistance on issues that may be presented to the boards or committees.

(4) Medical licensing board of Indiana (IC 25-22.5-2).

(3) The provider's license, certification, registration, or permit.

(2) The provider's license, certification, registration, or permit was issued.

(1) The provider's name.

(b) The agency shall create and maintain a provider profile for each provider described in subsection (a).

(20) Indiana hypnotist committee (IC 25-20.5-1-7).

(19) Indiana dietitians certification board (IC 25-14.5-2-1).

(18) Indiana athletic trainers board (IC 25-5.1-2-1).

(17) Physician assistant committee (IC 25-27.5).

(16) Social worker, marriage and family therapist, and mental health counselor board (IC 25-23.6).

(15) Occupational therapy committee (IC 25-23.5).

(14) Respiratory care committee (IC 25-34.5).

(13) Indiana physical therapy committee (IC 25-27).

(12) Indiana board of veterinary medical examiners (IC 15-5-1.1).

(11) State psychology board (IC 25-33).

(10) Speech-language pathology and audiology board (IC 25-35.6-2).

(9) Board of environmental health specialists (IC 25-32-1).

(8) Board of podiatric medicine (IC 25-29-2-1).

(7) Indiana board of pharmacy (IC 25-26).

(6) Indiana optometry board (IC 25-24).

(5) Indiana state board of nursing (IC 25-23-1).

IC 25-1-5-6 Executive director; representatives; staff placement

Sec. 6. (a) The executive director may designate certain employees of the agency to represent the executive director of the agency at the board meetings, proceedings, or other activities of the board.

(b) The executive director shall assign staff to individual boards and shall work with the boards to ensure efficient utilization and placement of staff.


IC 25-1-5-7 Repealed

(Repealed by P.L.186-1990, SEC.17.)

IC 25-1-5-8 Repealed

(Repealed by P.L.206-2005, SEC.15.)

IC 25-1-5-9 Submission of certified document as proof of required diploma

Sec. 9. If a board or committee requires an applicant for a certificate or license to submit a certified copy of a diploma showing that the applicant graduated from a school or program as a condition for certification or licensure, the applicant may satisfy this requirement by submitting another certified document that shows that the applicant graduated from or received the required diploma from the applicable school or program.

As added by P.L.177-1996, SEC.1.

IC 25-1-5-10 Provider profiles

Sec. 10. (a) As used in this section, "provider" means an individual licensed, certified, registered, or permitted by any of the following:

(1) Board of chiropractic examiners (IC 25-10-1).

(2) State board of dentistry (IC 25-14-1).

(3) Indiana state board of health facility administrators (IC 25-19-1).

(4) Medical licensing board of Indiana (IC 25-22.5-2).

(5) Indiana state board of nursing (IC 25-23-1).

(6) Indiana optometry board (IC 25-24).

(7) Indiana board of pharmacy (IC 25-26).

(8) Board of podiatric medicine (IC 25-29-2-1).

(9) Board of environmental health specialists (IC 25-32-1).

(10) Speech-language pathology and audiology board (IC 25-35.6-2).

(11) State psychology board (IC 25-33).

(12) Indiana board of veterinary medical examiners (IC 15-5-1.1).

(13) Indiana physical therapy committee (IC 25-27).

(14) Respiratory care committee (IC 25-34.5).

(15) Occupational therapy committee (IC 25-23.5).

(16) Social worker, marriage and family therapist, and mental health counselor board (IC 25-23.6).

(17) Physician assistant committee (IC 25-27.5).

(18) Indiana athletic trainers board (IC 25-5.1-2-1).

(19) Indiana dietitians certification board (IC 25-14.5-2-1).

(20) Indiana hypnotist committee (IC 25-20.5-1-7).

(b) The agency shall create and maintain a provider profile for each provider described in subsection (a).

(c) A provider profile must contain the following information:

(1) The provider's name.

(2) The provider's license, certification, registration, or permit number.

(3) The provider's license, certification, registration, or permit type.

(4) The date the provider's license, certification, registration, or permit was issued.

(5) The date the provider's license, certification, registration, or permit expires.

(6) The current status of the provider's license, certification, registration, or permit.

(7) The provider's city and state of record.

(8) A statement of any disciplinary action taken against the provider within the previous ten (10) years by a board or committee described in subsection (a).

(d) The agency shall make provider profiles available to the public.

(e) The computer gateway administered by the office of technology established by IC 4-13.1-2-1 shall make the information described in subsection (c)(1), (c)(2), (c)(3), (c)(6), (c)(7), and (c)(8) generally available to the public on the Internet.

(f) The agency may adopt rules under IC 4-22-2 to implement this section.


INDIANA CODE § 25-1-7

Chapter 7. Investigation and Prosecution of Complaints Concerning Regulated Occupations

IC 25-1-7-1 Definitions

Sec. 1. As used in this chapter:

"Board" means the appropriate agency listed in the definition of regulated occupation in this section.

"Director" refers to the director of the division of consumer protection.

"Division" refers to the division of consumer protection, office of the attorney general.
"Licensee" means a person who is:
(1) licensed, certified, or registered by a board listed in this section; and
(2) the subject of a complaint filed with the division.

"Person" means an individual, a partnership, a limited liability company, or a corporation.

"Regulated occupation" means an occupation in which a person is licensed, certified, or registered by one (1) of the following:
(1) Indiana board of accountancy (IC 25-2.1-2-1).
(2) Board of registration for architects and landscape architects (IC 25-4-1-2).
(3) Indiana auctioneer commission (IC 25-6.1-2-1).
(4) State board of barber examiners (IC 25-7-5-1).
(5) State boxing commission (IC 25-9-1).
(6) Board of chiropractic examiners (IC 25-10-1).
(7) State board of cosmetology examiners (IC 25-8-3-1).
(8) State board of dentistry (IC 25-14-1).
(9) State board of funeral and cemetery service (IC 25-15-9).
(10) State board of registration for professional engineers (IC 25-31-1-3).
(11) Indiana state board of health facility administrators (IC 25-19-1).
(12) Medical licensing board of Indiana (IC 25-22-5-2).
(13) Indiana state board of nursing (IC 25-23-1).
(14) Indiana optometry board (IC 25-24).
(15) Indiana board of pharmacy (IC 25-26).
(16) Indiana plumbing commission (IC 25-28.5-1-3).
(17) Board of podiatric medicine (IC 25-29-2-1).
(18) Board of environmental health specialists (IC 25-32-1).
(19) State psychology board (IC 25-33).
(20) Speech-language pathology and audiology board (IC 25-35-6-2).
(21) Indiana real estate commission (IC 25-34-1-2).
(22) Indiana board of veterinary medical examiners (IC 15-5-1-1).
(23) Department of natural resources for purposes of licensing water well drillers under IC 25-39-3.
(24) Respiratory care committee (IC 25-34.5).
(25) Private detectives licensing board (IC 25-30-1-5-1).
(26) Occupational therapy committee (IC 25-23.5).
(27) Social worker, marriage and family therapist, and mental health counselor board (IC 25-23.6).
(28) Real estate appraiser licensure and certification board (IC 25-34.1-8).
(29) State board of registration for land surveyors (IC 25-21-5-2-1).
(30) Physician assistant committee (IC 25-27.5).
(31) Indiana athletic trainers board (IC 25-5.1-2-1).
(32) Indiana dietitians certification board (IC 25-14.5-2-1).
(33) Indiana hypnistor committee (IC 25-20.5-1-7).
(34) Indiana physical therapy committee (IC 25-27).
(35) Manufactured home installer licensing board (IC 25-23.7).
(36) Home inspectors licensing board (IC 25-20-2-3-1).
(37) Any other occupational or professional agency created after June 30, 1981.


IC 25-1-7-2 Duties of attorney general
Sec. 2. The office of the attorney general, under the conditions specified in this chapter, may receive, investigate, and prosecute complaints concerning regulated occupations.


IC 25-1-7-3 Investigation of complaints
Sec. 3. The division is responsible for the investigation of complaints concerning licensees.


IC 25-1-7-4 Complaints; requisites; standing
Sec. 4. All complaints must be written and signed by the complainant and initially filed with the director. Except for employees of the attorney general's office acting in their official capacity, a complaint may be filed by any person, including members of any of the boards listed in section 1 of this chapter.


IC 25-1-7-5 Duties and powers of director
Sec. 5. (a) Subsection (b)(1) does not apply to:
(1) a complaint filed by:
(A) a member of any of the boards listed in section 1 of this chapter; or
(B) the Indiana professional licensing agency; or
(2) a complaint filed under IC 25-1-5-4.

(b) The director has the following duties and powers:
(1) The director shall make an initial determination as to the merit of each complaint. A copy of a complaint having merit shall be submitted to the board having jurisdiction over the licensee’s regulated occupation, that board thereby acquiring jurisdiction over the matter except as otherwise provided in this chapter.
(2) The director shall through any reasonable means notify the licensee of the nature and ramifications of the complaint and of the duty of the board to attempt to resolve the complaint through negotiation.
(3) The director shall report any pertinent information regarding the status of the complaint to the complainant.
(4) The director may investigate any written complaint against a licensee. The investigation shall be limited to those areas in which there appears to be a violation of statutes governing the regulated occupation.
(5) The director has the power to subpoena witnesses and to send for and compel the production of books, records, papers, and documents for the furtherance of any investigation under this chapter. The circuit or superior court located in the county where the subpoena is to be issued shall enforce any such subpoena by the director.


IC 25-1-7-6 Statement of settlement; period to resolve
Sec. 6. (a) This section does not apply to:
(1) a complaint filed by:
   (A) a member of any of the boards listed in section 1 of this chapter; or
   (B) the Indiana professional licensing agency; or
(2) a complaint filed under IC 25-1-5-4.

(b) If, at any time before the director files the director's recommendations with the attorney general, the board files with the director a statement signed by the licensee and the complainant that the complaint has been resolved, the director shall not take further action. For a period of thirty (30) days after the director has notified the board and the licensee that a complaint has been filed, the division shall not conduct any investigation or take any action whatsoever, unless requested by the board. If, during the thirty (30) days, the board requests an extension of the thirty (30) day time period, the director shall grant it for a period not exceeding an additional twenty (20) days. If at any time during the thirty (30) day period or an extension thereof, the board notifies the director of its intention not to proceed further to resolve the complaint, the division may proceed immediately under this chapter. For every purpose of this section, a board may designate a board member or staff member to act on behalf of or in the name of the board.


IC 25-1-7-7 Disciplinary sanctions; report to attorney general; prosecution; hearing officer

Sec. 7. (a) If there has been no statement of settlement filed by the board under section 6 of this chapter, and if, after conducting an investigation, the director believes that the licensee should be subjected to disciplinary sanctions by the board of his regulated occupation, then he shall so report to the attorney general. Upon receiving the director's report, the attorney general may prosecute the matter, on behalf of the state of Indiana, before the board. The board may designate any person as a hearing officer to hear the matter.

(b) Notwithstanding subsection (a) of this section, if the board by majority vote so requests, the attorney general shall prosecute the matter before the board, on behalf of the state of Indiana.


IC 25-1-7-8 Witnesses

Sec. 8. At the hearing, the board or hearing officer may call witnesses in addition to those presented by the state or the licensee.


IC 25-1-7-9 Disqualification of board member

Sec. 9. A board member is disqualified from any consideration of the case if the board member filed the complaint or participated in negotiations regarding the complaint. The board member is not disqualified from the board's final determination solely because the board member was the hearing officer or determined the complaint and the information pertaining to the complaint was current significant investigative information (as defined by IC 25-23.2-1-5).


IC 25-1-7-10 Confidentiality of complaints and information

Sec. 10. (a) All complaints and information pertaining to the complaints shall be held in strict confidence until the attorney general files notice with the board of the attorney general's intent to prosecute the licensee.

(b) A person in the employ of the office of attorney general or any of the boards, or any person not a party to the complaint, may not disclose or further a disclosure of information concerning the complaint unless the disclosure is required:
   (1) under law; or
   (2) for the advancement of an investigation.
   (c) Notwithstanding subsections (a) and (b), under IC 25-23.2 the state board of nursing may disclose to the coordinated licensure information system (as defined by IC 25-23.2-1-4) complaints and information concerning complaints that the board determines to be current significant investigative information (as defined by IC 25-23.2-1-5).


IC 25-1-7-11 Administrative orders and procedures

Sec. 11. Nothing in this chapter limits the rights of the licensee or the state under IC 4-21.5.


IC 25-1-7-12 Reimbursement of attorney general

Sec. 12. (a) If:
   (1) a fund is created by statute for the payment of an unpaid judgment against a licensee; and
   (2) the office of the attorney general is required by statute to provide services to the boards that administer the funds described in subdivision (1);
the office of the attorney general is entitled to reimbursement for the costs incurred in providing the services described in subdivision (2).

(b) If:
   (1) more than one (1) fund is established by statute for the payment of an unpaid judgment against a licensee; and
   (2) the office of the attorney general is entitled to reimbursement under subsection (a);
the funds for reimbursement shall be taken in equal amounts from each of the funds described in subdivision (1).

As added by P.L.255-1987, SEC.1.

IC 25-1-7-13 Reports; contents

Sec. 13. The office of the attorney general shall submit to each board, at the request of the board, a report that includes the following information concerning that regulated occupation:
   (1) The number of complaints filed.
   (2) The number of cases currently under investigation.
   (3) The number of cases closed.
   (4) The number of cases resolved.
   (5) The age of the complaints.

As added by P.L.177-1997, SEC.1.

INIDANA CODE § 25-1-8

Chapter 8. Occupational and Professional Licensure, Registration, and Certification Fees

IC 25-1-8-1 "Board" defined

Sec. 1. As used in this chapter, "board" means any of the following:
   (1) Indiana board of accountancy (IC 25-2.1-2-1).
   (2) Board of registration for architects and landscape architects (IC 25-4-1-2).
   (3) Indiana auctioneer commission (IC 25-6.1-2-1).
   (4) State board of barber examiners (IC 25-7-5-1).
(5) State boxing commission (IC 25-9-1).
(6) Board of chiropractic examiners (IC 25-10-1).
(7) State board of cosmetology examiners (IC 25-8-3-1).
(8) State board of dentistry (IC 25-14-1).
(9) State board of funeral and cemetery service (IC 25-15).
(10) State board of registration for professional engineers (IC 25-31-1-3).
(11) Indiana state board of health facility administrators (IC 25-19-1).
(12) Medical licensing board of Indiana (IC 25-22.5-2).
(13) Mining board (IC 22-10-1.5-2).
(14) Indiana state board of nursing (IC 25-23-1).
(15) Indiana optometry board (IC 25-24).
(16) Indiana board of pharmacy (IC 25-26).
(17) Indiana plumbing commission (IC 25-28.5-1-3).
(18) Board of environmental health specialists (IC 25-32-1).
(19) State psychology board (IC 25-33).
(20) Speech-language pathology and audiology board (IC 25-35.6-2).
(21) Indiana real estate commission (IC 25-34.1-2-1).
(22) Indiana board of veterinary medical examiners (IC 15-5-1.1-3).
(23) Department of insurance (IC 27-1).
(24) State police department (IC 10-11-2-4), for purposes of certifying polygraph examiners under IC 25-30-2.
(25) Department of natural resources for purposes of licensing water well drillers under IC 25-39-3.
(26) Private detectives licensing board (IC 25-30-1-5.1).
(27) Occupational therapy committee (IC 25-23.5-2-1).
(28) Social worker, marriage and family therapist, and mental health counselor board (IC 25-23.6-2-1).
(29) Real estate appraiser licensure and certification board (IC 25-34.1-8).
(30) State board of registration for land surveyors (IC 25-21.5-2-1).
(31) Physician assistant committee (IC 25-27.5).
(32) Indiana athletic trainers board (IC 25-5.1-2-1).
(33) Board of podiatric medicine (IC 25-29-2-1).
(34) Indiana dietitians certification board (IC 25-14.5-2-1).
(35) Indiana physical therapy committee (IC 25-27).
(36) Manufactured home installer licensing board (IC 25-23.7).
(37) Home inspectors licensing board (IC 25-20.2-3-1).
(38) Any other occupational or professional agency created after June 30, 1981.

Repealed
(Repealed by P.L.19-1986, SEC.43.)

IC 25-1-8-2 Fees; establishment and collection
Sec. 2. (a) Notwithstanding any other provision regarding the fees to be assessed by a board, a board shall establish by rule and cause to be collected fees for the following:
(1) Examination of applicants for licensure, registration, or certification.
(2) Issuance, renewal, or transfer of a license, registration, or certificate.
(3) Restoration of an expired license, registration, or certificate when such action is authorized by law.
(4) Issuance of licenses by reciprocity or endorsement for out-of-state applicants.
(5) Issuance of board or committee reciprocity or endorsements for practitioners licensed, certified, or registered in Indiana who apply to another state for a license.

No fee shall be less than ten dollars ($10) unless the fee is collected under a rule adopted by the board which sets a fee for miscellaneous expenses incurred by the board on behalf of the practitioners the board regulates.

(b) Fees established by statute shall remain in effect until replaced by a new fee adopted by rule under this section.

(c) In no case shall the fees be less than are required to pay all of the costs, both direct and indirect, of the operation of the board.

(d) For the payment of fees, a board shall accept cash, a draft, a money order, a cashier's check, and a certified or other personal check. If a board receives an uncertified personal check for the payment of a fee and if the check does not clear the bank, the board may void the license, registration, or certificate for which the check was received.

(e) Unless designated by rule, a fee is not refundable.

(f) A board shall charge a fee of not more than ten dollars ($10) for the issuance of a duplicate license, registration, or certificate.


IC 25-1-8-3 Quadrennial license or registration cycle; refunds
Sec. 3. (a) A board, operating on a quadrennial license, registration, or certificate renewal cycle, shall refund one-half (1/2) of the amount of the license, registration, or certificate fee if the holder of the license, registration, or certificate surrenders it at least two (2) years before it expires.

(b) This section does not apply to the holder of a license, registration, or certificate revoked or suspended by the board.

IC 25-1-8-4 Quadrennial license renewal system
Sec. 4. (a) Notwithstanding any law establishing a biennial license renewal system, a board operating on such a system may by rule establish a quadrennial license renewal system.

(b) If a board establishes a quadrennial license renewal system, it may provide for a reduction in the fees for the four (4) year license.

IC 25-1-8-5 Employment of professionals for testing; examination on statutes, rules, and regulations; standards of review
Sec. 5. (a) Notwithstanding any statutory provisions regarding the administration of examinations, a board or committee may employ organizations or additional professionals to assist in the preparation, administration, and scoring of licensing examinations.

(b) A board or committee may require applicants for licensure, certification, or registration by examination, endorsement, or reciprocity to pass a test on the state or federal statutes, state rules, and federal regulations that the board or committee determines by rule to be relevant to the practice of a regulated profession.
(c) A board or committee may enter into a contract with a testing company or national association to set the standards of review for an examination by an applicant for licensure, certification, or registration. The standards of review may include:

(1) setting fees for review;
(2) requiring that an examination remain confidential; and
(3) prohibiting the release of the examination or copies of the examination.


IC 25-1-8-6 Reinstatement of delinquent or lapsed licenses
Sec. 6. (a) As used in this section, "board" has the meaning set forth in IC 25-1-4-0.3.

(b) This section does not apply to a license, certificate, or registration that has been revoked or suspended.

(c) Notwithstanding any other law regarding the reinstatement of a delinquent or lapsed license, certificate, or registration, the holder of a license, certificate, or registration that was issued by the board that is three (3) years or less delinquent must be reinstated upon meeting the following requirements:

(1) Submission of the holder's completed renewal application.
(2) Payment of the current renewal fee established by the board under section 2 of this chapter.
(3) Payment of a reinstatement fee established by the Indiana professional licensing agency.
(4) If a law requires the holder to complete continuing education as a condition of renewal, the holder shall provide the board with a sworn statement, signed by the holder, that the holder has fulfilled the continuing education requirements required by the board for the current renewal period.

(d) Notwithstanding any other law regarding the reinstatement of a delinquent or lapsed license, certificate, or registration, unless a statute specifically does not allow a license, certificate, or registration to be reinstated if it has lapsed for more than three (3) years, the holder of a license, certificate, or registration that was issued by the board that is more than three (3) years delinquent must be reinstated upon meeting the following requirements:

(1) Submission of the holder's completed renewal application.
(2) Payment of the current renewal fee established by the board under section 2 of this chapter.
(3) Payment of a reinstatement fee equal to the current initial application fee.
(4) If a law requires the holder to complete continuing education as a condition of renewal, the holder shall provide the board with a sworn statement, signed by the holder, that the holder has fulfilled the continuing education requirements required by the board for the current renewal period.
(5) Complete such remediation and additional training as deemed appropriate by the board given the lapse of time involved.
(6) Any other requirement that is provided for in statute or rule that is not related to fees.


IC 25-1-8-7 Fees and requirements for reinstatement or restoration; exclusions
Sec. 7. (a) As used in this section, "board" includes the entities listed in IC 25-1-6-3.

(b) Notwithstanding any other law regarding fees for reinstatement or restoration of a delinquent or lapsed license, certificate, or registration, a delinquent or lapsed license, certificate, or registration that was issued by the board may not be reinstated or restored unless the holder of the license, certificate, or registration pays:

(1) the fee established by the board under section 2 of this chapter; and
(2) a reinstatement fee established by the Indiana professional licensing agency.

(c) A license, certificate, or registration may not be reinstated or restored unless the holder of the license, certificate, or registration completes all other requirements for reinstatement or restoration of the license, certificate, or registration that are:

(1) provided for in statute or rule; and
(2) not related to fees.

(d) This section does not apply to a license, certificate, or registration if one (1) of the following applies:

(1) The license, certificate, or registration has been revoked or suspended.
(2) A statute specifically does not allow a license, certificate, or registration to be reinstated or restored.


INDIANA CODE § 25-1-9
Chapter 9. Health Professions Standards of Practice

IC 25-1-9-1 "Board" defined
Sec. 1. As used in this chapter, "board" means any of the following:

(1) Board of chiropractic examiners (IC 25-10-1).
(2) State board of dentistry (IC 25-14-1).
(3) Indiana state board of health facility administrators (IC 25-19-1).
(4) Medical licensing board of Indiana (IC 25-22-5-2).
(5) Indiana state board of nursing (IC 25-23-1).
(6) Indiana optometry board (IC 25-24).
(7) Indiana board of pharmacy (IC 25-26).
(8) Board of podiatric medicine (IC 25-29-2-1).
(9) Board of environmental health specialists (IC 25-32).
(10) Speech-language pathology and audiology board (IC 25-35-6-2).
(11) State psychology board (IC 25-33).
(12) Indiana board of veterinary medical examiners (IC 15-5-1-1).
(13) Indiana physical therapy committee (IC 25-27-1).
(14) Respiratory care committee (IC 25-34-5).
(15) Occupational therapy committee (IC 25-23-5).
(16) Social worker, marriage and family therapist, and mental health counselor board (IC 25-23-6).
(17) Physician assistant committee (IC 25-27-5).
(18) Indiana athletic trainers board (IC 25-5-1-2-1).
(19) Indiana dietitians certification board (IC 25-14-5-2-1).
(20) Indiana hypnotist committee (IC 25-20-5-1-7).


IC 25-1-9-2 "Practitioner" defined
Sec. 2. As used in this chapter, "practitioner" means an individual who holds:
(1) an unlimited license, certificate, or registration;
(2) a limited or probationary license, certificate, or registration;
(3) a temporary license, certificate, registration, or permit;
(4) an intern permit; or
(5) a provisional license;
issued by the board regulating the profession in question, including a certificate of registration issued under IC 25-20.
As added by P.L.152-1988, SEC.1.

IC 25-1-9-3 "License" defined
Sec. 3. As used in this chapter, "license" includes a license, certificate, registration, or permit.
As added by P.L.152-1988, SEC.1.

IC 25-1-9-3.5 "Sexual contact" defined
Sec. 3.5. As used in this chapter, "sexual contact" means:
(1) sexual intercourse (as defined in IC 35-41-1-26);
(2) deviate sexual conduct (as defined in IC 35-41-1-9); or
(3) any fondling or touching intended to arouse or satisfy the sexual desires of either the individual performing the fondling or touching or the individual being fondled or touched.

IC 25-1-9-4 Standards of professional practice; findings required for sanctions; evidence of foreign discipline
Sec. 4. (a) A practitioner shall conduct the practitioner's practice in accordance with the standards established by the board regulating the profession in question and is subject to the exercise of the disciplinary sanctions under section 9 of this chapter if, after a hearing, the board finds:
(1) a practitioner has:

(A) engaged in or knowingly cooperated in fraud or material deception in order to obtain a license to practice;
(B) engaged in fraud or material deception in the course of professional services or activities; or
(C) advertised services in a false or misleading manner;
(2) a practitioner has been convicted of a crime that has a direct bearing on the practitioner's ability to continue to practice competently;
(3) a practitioner has knowingly violated any state statute or rule, or federal statute or regulation, regulating the profession in question;
(4) a practitioner has continued to practice although the practitioner has become unfit to practice due to:

(A) professional incompetence that:

(i) may include the undertaking of professional activities that the practitioner is not qualified by training or experience to undertake; and
(ii) does not include activities performed under IC 16-21-2-9;
(B) failure to keep abreast of current professional theory or practice;
(C) physical or mental disability; or
(D) addiction to, abuse of, or severe dependency upon alcohol or other drugs that endanger the public by impairing a practitioner's ability to practice safely;
(5) a practitioner has engaged in a course of lewd or immoral conduct in connection with the delivery of services to the public;
(6) a practitioner has allowed the practitioner's name or a license issued under this chapter to be used in connection with an individual who renders services beyond the scope of that individual's training, experience, or competence;
(7) a practitioner has had disciplinary action taken against the practitioner or the practitioner's license to practice in any other state or jurisdiction on grounds similar to those under this chapter,
(8) a practitioner has diverted:

(A) a legend drug (as defined in IC 16-18-2-199); or
(B) any other drug or device issued under a drug order (as defined in IC 16-42-19-3) for another person;
(9) a practitioner, except as otherwise provided by law, has knowingly prescribed, sold, or administered any drug classified as a narcotic, addicting, or dangerous drug to a habitue or addict;
(10) a practitioner has failed to comply with an order imposing a sanction under section 9 of this chapter;
(11) a practitioner has engaged in sexual contact with a patient under the practitioner's care or has used the practitioner-patient relationship to solicit sexual contact with a patient under the practitioner's care; or
(12) a practitioner who is a participating provider of a health maintenance organization has knowingly collected or attempted to collect from a subscriber or enrollee of the health maintenance organization any sums that are owed by the health maintenance organization.

(b) A practitioner who provides health care services to the practitioner's spouse is not subject to disciplinary action under subsection (a)(11).

(c) A certified copy of the record of disciplinary action is conclusive evidence of the other jurisdiction's disciplinary action under subsection (a)(7).

IC 25-1-9-5 Optometry employment practice
Sec. 5. In addition to section 4 of this chapter, a practitioner licensed to practice optometry is subject to the exercise of disciplinary sanctions under section 9 of this chapter if, after a hearing, the board finds a practitioner has accepted employment to practice optometry from a person other than:
(1) a corporation formed by an optometrist under IC 23-1.5; or
(2) an individual who is licensed as an optometrist under this article and whose legal residence is in Indiana.
As added by P.L.152-1988, SEC.1.

IC 25-1-9-6 Veterinary practitioners; cruelty to animals
Sec. 6. In addition to section 4 of this chapter, a practitioner licensed to practice veterinary medicine or registered as a veterinary technician is subject to the exercise of the disciplinary sanctions under section 9 of this chapter if, after a hearing, the board finds a practitioner has engaged in cruelty to animals.
As added by P.L.152-1988, SEC.1.

IC 25-1-9-6.5 Chiropractors; waiver of deductible or copayment
Sec. 6.5. (a) In addition to section 4 of this chapter, a practitioner licensed to practice chiropractic is subject to the exercise of the disciplinary sanctions under section 9 of this chapter if, after a hearing, the board regulating the profession finds a practitioner has:
(1) waived a payment of a deductible or a copayment required to be made to the practitioner by a patient under the patient's insurance or health care plan; and
(2) advertised the waiver of a payment described in subdivision (1).
(b) This section does not apply to the waiver of a deductible or a copayment by a practitioner if:
(1) the practitioner determines chiropractic service is necessary for the immediate health and welfare of a patient;
(2) the practitioner determines the payment of a deductible or a copayment would create a substantial financial hardship for the patient; and
(3) the waiver is based on the evaluation of the individual patient and is not a regular business practice of the practitioner.


IC 25-1-9-6.7 Marriage and family therapists; disciplinary sanctions
Sec. 6.7. In addition to the actions listed under section 4 of this chapter that subject a practitioner to the exercise of disciplinary sanctions, a practitioner who is licensed under IC 25-23.6 is subject to the exercise of disciplinary sanctions under section 9 of this chapter if, after a hearing, the board regulating the profession finds that the practitioner has:
(1) performed any therapy that, by the prevailing standards of the mental health professions in the community where the services were provided, would constitute experimentation on human subjects, without first obtaining full, informed, and written consent;
(2) failed to meet the minimum standards of performance in professional activities when measured against generally prevailing peer performance in professional activities, including the undertaking of activities that the practitioner is not qualified by training or experience to undertake;
(3) performed services, including any duties required of the individual under IC 31, in reckless disregard of the best interests of a patient, a client, or the public;
(4) without the consent of the child’s parent, guardian, or custodian, knowingly participated in the child’s removal or precipitated others to remove a child from the child’s home unless:
(A) the child’s physical health was endangered due to injury as a result of the act or omission of the child’s parent, guardian, or custodian;
(B) the child had been or was in danger of being a victim of an offense under IC 35-42-4, IC 35-45-4-1, IC 35-45-4-2, IC 35-46-1-3, IC 35-49-2-2, or IC 35-49-3-2; or
(C) the child was in danger of serious bodily harm as a result of the inability, refusal, or neglect of the child’s parent, guardian, or custodian to supply the child with necessary food, shelter, or medical care, and a court order was first obtained;
(5) willfully made or filed a false report or record, failed to file a report or record required by law, willfully impeded or obstructed the filing of a report or record, or induced another individual to:
(A) make or file a false report or record; or
(B) impede or obstruct the filing of a report or record; or
(6) performed a diagnosis (as defined in IC 25-22.5-1-1.1(c));
(7) provided evidence in an administrative or judicial proceeding that had insufficient factual basis for the conclusions rendered by the practitioner;
(8) willfully planted in the mind of the patient suggestions that are not based in facts known to the practitioner; or
(9) performed services outside of the scope of practice of the

license issued under IC 25-23.6.


IC 25-1-9-6.8 Practitioner guidelines before prescribing stimulant medication for a child for treatment of certain disorders
Sec. 6.8. (a) This section applies to a practitioner who is:
(1) licensed to practice medicine or osteopathic medicine under IC 25-22.5; or
(2) an advanced practice nurse granted prescriptive authority under IC 25-23, and whose practice agreement with a collaborating physician reflects the conditions specified in subsection (b).
(b) Before prescribing a stimulant medication for a child for the treatment of attention deficit disorder or attention deficit hyperactivity disorder, a practitioner described in subsection (a) shall follow the most recent guidelines adopted by the American Academy of Pediatrics or the American Academy of Child and Adolescent Psychiatry for the diagnosis and evaluation of a child with attention deficit disorder or attention deficit hyperactivity disorder.


IC 25-1-9-6.9 Failing to provide or providing false information to agency
Sec. 6.9. In addition to the actions listed under section 4 of this chapter that subject a practitioner to disciplinary sanctions, a practitioner is subject to the exercise of disciplinary sanctions under section 9 of this chapter if, after a hearing, the board finds that the practitioner has:
(1) failed to provide information requested by the Indiana professional licensing agency; or
(2) knowingly provided false information to the Indiana professional licensing agency;
for a provider profile required under IC 25-1-5-10.


IC 25-1-9-7 Physical or mental examination; power to require
Sec. 7. The board may order a practitioner to submit to a reasonable physical or mental examination, at the practitioner’s own expense, if the practitioner’s physical or mental capacity to practice safely is at issue in a disciplinary proceeding.


IC 25-1-9-8 Failure to submit to physical or mental examination; sanctions
Sec. 8. Failure to comply with a board order to submit to a physical or mental examination makes a practitioner liable to summary suspension under section 10 of this chapter.

As added by P.L.152-1988, SEC.1.

IC 25-1-9-9 Disciplinary sanctions
Sec. 9. (a) The board may impose any of the following sanctions, singly or in combination, if it finds that a practitioner is subject to disciplinary sanctions under section 4, 5, 6, 7, or 8 of this chapter or IC 25-1-5-4:
(1) Permanently revoke a practitioner’s license.
(2) Suspend a practitioner’s license.
(3) Censure a practitioner.
(4) Issue a letter of reprimand.
(5) Place a practitioner on probation status and require the practitioner to:
(A) report regularly to the board upon the matters that are the basis of probation;
B) limit practice to those areas prescribed by the board;  
(C) continue or renew professional education under a preceptor, or as otherwise directed or approved by the board, until a satisfactory degree of skill has been attained in those areas that are the basis of the probation; or  
(D) perform or refrain from performing any acts, including community restitution or service without compensation, that the board considers appropriate to the public interest or to the rehabilitation or treatment of the practitioner.

(6) Assess a fine against the practitioner in an amount not to exceed one thousand dollars ($1,000) for each violation listed in section 4 of this chapter, except for a finding of incompetency due to a physical or mental disability. When imposing a fine, the board shall consider a practitioner's ability to pay the amount assessed. If the practitioner fails to pay the fine within the time specified by the board, the board may suspend the practitioner's license without additional proceedings. However, a suspension may not be imposed if the sole basis for the suspension is the practitioner's inability to pay a fine.

(b) The board may withdraw or modify the probation under subsection (a)(5) if it finds, after a hearing, that the deficiency that required disciplinary action has been remedied, or that changed circumstances warrant a modification of the order. As added by P.L.152-1988, SEC.1. Amended by P.L.48-1991, SEC.21; P.L.22-1999, SEC.5; P.L.32-2000, SEC.10; P.L.211-2001, SEC.3.

IC 25-1-9-10 Summary license suspension pending final adjudication; notice; opportunity to be heard

Sec. 10. (a) The board may summarily suspend a practitioner's license for ninety (90) days before a final adjudication or during the appeals process if the board finds that a practitioner represents a clear and immediate danger to the public health and safety if the practitioner is allowed to continue to practice. The summary suspension may be renewed upon a hearing before the board, and each renewal may be for ninety (90) days or less.

(b) Before the board may summarily suspend a license that has been issued under IC 15-5-1.1, IC 25-22.5 or IC 25-14, the consumer protection division of the attorney general's office shall make a reasonable attempt to notify a practitioner of a hearing by the board to suspend a practitioner's license and of information regarding the allegation against the practitioner. The consumer protection division of the attorney general's office shall also notify the practitioner that the practitioner may provide a written or an oral statement to the board on the practitioner's behalf before the board issues an order for summary suspension. A reasonable attempt to reach the practitioner is made if the consumer protection division of the attorney general's office attempts to reach the practitioner by telephone or facsimile at the last telephone number of the practitioner on file with the board.

(c) After a reasonable attempt is made to notify a practitioner under subsection (b):

(1) a court may not stay or vacate a summary suspension of a practitioner's license for the sole reason that the practitioner was not notified; and

(2) the practitioner may not petition the board for a delay of the summary suspension proceedings.


IC 25-1-9-10.1 Retention of clinical consultants and experts to advise on suspension

Sec. 10.1. The attorney general may retain the services of a clinical consultant or an expert to provide the attorney general with advice concerning the acts that are the subject of a suspension under this chapter. As added by P.L.43-1995, SEC.3.

IC 25-1-9-11 Reinstatement of suspended licenses

Sec. 11. The board may reinstate a license which has been suspended under this chapter if, after a hearing, the board is satisfied that the applicant is able to practice with reasonable skill and safety to the public. As a condition of reinstatement, the board may impose disciplinary or corrective measures authorized under this chapter. As added by P.L.152-1988, SEC.1.

IC 25-1-9-12 Reinstatement of revoked license

Sec. 12. The board may not reinstate a license that has been revoked under this chapter. An individual whose license has been revoked under this chapter may not apply for a new license until seven (7) years after the date of revocation. As added by P.L.152-1988, SEC.1.

IC 25-1-9-13 Consistency of sanctions prescribed

Sec. 13. The board shall seek to achieve consistency in the application of the sanctions authorized in this section. Significant departures from prior decisions involving similar conduct must be explained in the board's findings or orders. As added by P.L.152-1988, SEC.1.

IC 25-1-9-14 Surrender of practitioners license instead of hearing; approval

Sec. 14. A practitioner may petition the board to accept the surrender of the practitioner's license instead of a hearing before the board. The practitioner may not surrender the practitioner's license without the written approval of the board, and the board may impose any conditions appropriate to the surrender or reinstatement of a surrendered license. As added by P.L.152-1988, SEC.1.

IC 25-1-9-15 Costs in disciplinary proceedings

Sec. 15. Practitioners who have been subjected to disciplinary sanctions may be required by a board to pay for the costs of the proceedings. The practitioner's ability to pay shall be considered when costs are assessed. If the practitioner fails to pay the costs, a suspension may not be imposed solely upon the practitioner's inability to pay the amount assessed. These costs are limited to costs for the following:

(1) Court reporters.
(2) Transcripts.
(3) Certification of documents.
(4) Photoduplication.
(5) Witness attendance and mileage fees.
(6) Postage.
(7) Expert witnesses.
(8) Depositions.
(9) Notarizations.
(10) Administrative law judges.


IC 25-1-9-16 Refusal of licensure or grant of probationary license

Sec. 16. (a) The board may refuse to issue a license or may issue a probationary license to an applicant for licensure if:

(1) the applicant has been disciplined by a licensing entity of another state or jurisdiction, or has committed an act that would...
have subjected the applicant to the disciplinary process had the applicant been licensed in Indiana when the act occurred; and (2) the violation for which the applicant was, or could have been, disciplined has a direct bearing on the applicant's ability to competently practice in Indiana.

(b) Whenever the board issues a probationary license, the board may impose one (1) or more of the following conditions:
(1) Report regularly to the board upon the matters that are the basis of the discipline of the other state or jurisdiction.
(2) Limit practice to those areas prescribed by the board.
(3) Continue or renew professional education.
(4) Engage in community restitution or service without compensation for a number of hours specified by the board.
(5) Perform or refrain from performing an act that the board considers appropriate to the public interest or to the rehabilitation or treatment of the applicant.

c) The board shall remove any limitations placed on a probationary license under this section if the board finds after a hearing that the deficiency that required disciplinary action has been remedied. As added by P.L.33-1993, SEC.15. Amended by P.L.32-2000, SEC.11.

IC 25-1-9-17 Applicant appearance before board or controlled substances advisory committee
Sec. 17. The board and the controlled substances advisory committee (IC 35-48-2-1) may require an applicant for licensure to appear before the board or committee before issuing a license. As added by P.L.33-1993, SEC.16.

IC 25-1-9-18 Fitness determination of health care provider; filing complaint
Sec. 18. (a) If the insurance commissioner forwards to the board the name of a practitioner under IC 34-18-9-4(a) (or IC 27-12-9-4(a) before its repeal), the board shall consider whether:
(1) the practitioner has become unfit to practice under section 4 of this chapter; and
(2) a complaint should be filed under IC 25-1-7-4.

(b) If the board determines that a complaint should be filed under subsection (a), the board must report to the consumer protection division whether the board will schedule the matter:
(1) for informal negotiation under IC 25-1-7-6;
(2) on the board's agenda for a vote requesting that the attorney general prosecute the matter before the board under IC 25-1-7-7; or
(3) on the board's agenda for a vote on summary suspension of the practitioner's license pending prosecution of the matter before the board under IC 25-1-7-7.

c) A board may designate a board member or staff member to act on behalf of the board under this section. As added by P.L.43-1995, SEC.4. Amended by P.L.1-1998, SEC.131.

IC 25-1-9-19 Third party billing notice
Sec. 19. A practitioner that provides to a patient notice concerning a third party billing for a health care service provided to the patient shall ensure that the notice:
(1) conspicuously states that the notice is not a bill;
(2) does not include a tear-off portion; and
(3) is not accompanied by a return mailing envelope.
As added by P.L.178-2003, SEC.12.
the practitioner's license, certificate, registration, or permit.
(b) The practitioner must meet the following requirements to receive
the extension of time provided under subsection (a):
(1) On the date the practitioner enters active duty, the
practitioner's license, certificate, registration, or permit may not
be revoked, suspended, lapsed, or be the subject of a complaint
under IC 25-1-7.
(2) The practitioner's license, certificate, registration, or permit
must expire while the practitioner is out of state on active duty,
and the practitioner must not have received the notice of
expiration before the date the practitioner entered active duty.
(3) The practitioner shall provide proof of out of state active duty
by providing a copy of the practitioner's:
   (A) discharge; or
   (B) government movement orders;
to the agency, board, commission, or committee issuing the
practitioner's license, certificate, registration, or permit at the
time the practitioner renews the practitioner's license, certificate,
registration, or permit under this chapter.
(c) The extension of time provided under subsection (a) is equal to
one hundred eighty (180) days after the date of the practitioner's
discharge or release from active duty.
(d) The agency, board, commission, or committee that issued the
practitioner's license, certificate, registration, or permit may extend the
period provided in subsection (c) if the agency or board determines that
an illness, an injury, or a disability related to the practitioner's active duty
prevents the practitioner from renewing or completing the continuing
education required for the practitioner's license, certificate, registration, or
permit. However, the agency, board, commission, or committee may not
extend the period for longer than three hundred sixty-five (365) days after
the date of the practitioner's discharge or release from active duty.

IC 25-1-12-7 Waiver of late fees
Sec. 7. Any late fees that may be assessed against a practitioner in
connection with a renewal under this chapter are waived.

IC 25-1-12-8 Construction with federal law
Sec. 8. This chapter may not be construed as a restriction or
limitation on any of the rights, benefits, and protections granted to a
member of:
(1) the armed forces of the United States; or
(2) the national guard;
under federal law.

TITLE 848 INDIANA STATE BOARD OF NURSING
ARTICLE 1. REGISTERED NURSES AND PRACTICAL NURSES

Rule 1. Definitions; Administration

848 IAC 1-1-1 Evaluation of credentials (Repealed)
Sec. 1. (Repealed by Indiana State Board of Nursing; filed Mar 18,
1980, 4:00 pm: 3 IR 964)

848 IAC 1-1-2 Definitions (Repealed)
Sec. 2. (Repealed by Indiana State Board of Nursing; filed Jul 30,
1998, 4:59 p.m.: 21 IR 4534)
examination and is computed annually from January 1 through December 31.

(21) “Rule” or “requirement” means a mandatory standard, which a program shall meet in order to be accredited.

(22) “Shall” indicates a mandatory rule, regulation, or requirement.

(23) “Should” indicates a recommendation.

(24) “Survey visit” means an on-site visit of a nursing program, including clinical facilities by a designated representative of the board for the purpose of evaluating the program of learning.

(Indiana State Board of Nursing; 848 IAC 1-1-2.1; filed Jul 30, 1998, 4:59 p.m.; 21 IR 4525; readopted filed Nov 6, 2001, 4:18 p.m.; 25 IR 939; filed Jun 23, 2003, 4:12 p.m.; 26 IR 3652, eff Jul 1, 2003 [IC 4-22-2-36 suspends the effectiveness of a rule document for thirty (30) days after filing with the secretary of state. LSA Document #02-247 was filed Jun 23, 2003.]; filed Sep 13, 2004, 9:45 a.m.: 28 IR 593)

848 IAC 1-1-3 Accreditation (Repealed)
Sec. 3. (Repealed by Indiana State Board of Nursing; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4534)

848 IAC 1-1-4 Criteria for accreditation (Repealed)
Sec. 4. (Repealed by Indiana State Board of Nursing; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4534)

848 IAC 1-1-5 Appeals
Authority: IC 25-23-1-7
Affected: IC 4-21.5
Sec. 5. Appeals before the Indiana state board of nursing are governed by the Indiana Administrative Orders and Procedures Act (AOPA) under IC 4-21.5. (Indiana State Board of Nursing; Reg 5; filed Jul 18, 1977, 8:55 a.m.: Rules and Regs. 1978, p. 611; readopted filed Nov 21, 2001, 10:23 a.m.: 25 IR 1326)

848 IAC 1-1-6 Licensure by examination
Authority: IC 25-23-1-7
Affected: IC 25-23-1-11; IC 25-23-1-12
Sec. 6. (a) Any person who makes application to the board for a license shall submit to the board written evidence, verified by oath, that the registered nurse applicant meets the requirements of IC 25-23-1-11 and the licensed practical nurse applicant meets the requirements of IC 25-23-1-12.

(b) A copy of a marriage certificate or court order shall be submitted by a candidate who wishes to change her or his name after the application is filed.

(c) Candidates shall present the authorization to test and a photo identification for entrance to the testing center.

(d) The required Indiana passing criteria for the licensure examination is set by the National Council of State Boards of Nursing using the computerized adaptive testing methodology.

(e) An applicant may take the examination at any testing center in the United States approved by the National Council for State Boards of Nursing. An authorization to test must be provided by the Indiana board before testing.

(f) Graduates of foreign schools of nursing shall meet the following qualifications before being licensed in Indiana:

1. Be licensed in the territory or country in which they graduated.
2. Meet the qualifications required in Indiana as determined by the board.
3. Obtain the official records from the territory or country in which the applicant graduated verifying academic qualifications or be referred to state accredited nursing programs to establish the necessary credits if the original records are unobtainable.
4. Show evidence of having passed the examination prepared by the commission on graduates of foreign nursing schools.
5. Pass the appropriate nurse licensing examination in Indiana.

(g) Requirements for unsuccessful candidates are as follows:

1. Any candidate who fails the Indiana licensing examination shall not be licensed until she or he has passed the licensing examination.
2. A complete application shall be submitted each time an examination is taken.
3. The full examination fee shall be charged for each reexamination.
4. A candidate who has failed the licensing examination (in any jurisdiction) should undertake a special study program before retaking the examination. This study program may include one (1) or all of the following:

   A) Auditing nursing courses at an approved program in nursing.
   B) A self-study program, such as review of course work or professional reading.
   C) Tutoring.
   D) Reenrollment in a state-accredited program of nursing.

(h) Written informed consent from the candidate is necessary before individual licensing examination scores are released to anyone other than the candidate.

(i) Candidates applying for the practical nursing licensing examination shall be required to meet the board’s curricular requirements for the program in practical nursing as stated in the rules in effect at the time of their graduation. Candidates applying for the registered nursing licensing examination shall be required to meet the board’s curricular requirements for the program in registered nursing as stated in the rules in effect at the time of their graduation. (Indiana State Board of Nursing; Reg 6; filed Mar 1, 1978, 8:51 a.m.: Rules and Regs. 1979, p. 162; filed Mar 18, 1980, 4:00 p.m.; 3 IR 961; filed Feb 18, 1982, 2:18 p.m.; 5 IR 735; filed Mar 29, 1985, 10:43 a.m.; 8 IR 1026; filed Sep 12, 1985, 3:27 p.m.; 9 IR 287; readopted filed Nov 21, 2001, 10:23 a.m.: 25 IR 1326; filed Jun 23, 2003, 4:12 p.m.: 26 IR 3653, eff Jul 1, 2003 [IC 4-22-2-36 suspends the effectiveness of a rule document for thirty (30) days after filing with the secretary of state. LSA Document #02-247 was filed Jun 23, 2003.]; filed Mar 16, 2005, 11:50 a.m.: 28 IR 2383)

848 IAC 1-1-7 Licensure by endorsement
Authority: IC 25-23-1-7
Affected: IC 25-23-1-11; IC 25-23-1-12
Sec. 7. (a) An applicant for licensure as a practical nurse who was originally licensed by the National Council Licensing Examination (NCLEX®) or the State Board Test Pool Examination (SBTPE) in another jurisdiction will be accepted for registration in Indiana by endorsement from the board that granted the original license if the applicant meets the following qualifications:

1. Is of good moral character.
2. Has graduated from:
   A) high school or the equivalent thereof; and
   B) a state approved program in practical nursing.

(b) An applicant for licensure as a registered nurse who was originally licensed by the NCLEX® or the SBTPE in another jurisdiction will be accepted for registration in Indiana by endorsement from the
board that granted the original license if the applicant meets the following qualifications:

(1) Is of good moral character.
(2) Has graduated from:
   (A) high school or the equivalent thereof; and
   (B) a state approved program in registered nursing.
(c) Applicants who are graduates of foreign schools of nursing are eligible for Indiana practical nursing licensure by endorsement provided that the following conditions are met:
(1) Have:
   (A) written and passed the NCLEX® or the SBTPE in another jurisdiction or country; and
   (B) achieved Indiana's passing scores in all areas.
(2) Submit:
   (A) copies of all scholastic records; and
   (B) proof of:
      (i) good moral character;
      (ii) high school graduation or equivalent thereof; and
      (iii) having graduated from a program that meets the board's curricular requirements for a program in practical nursing as stated in the rules in effect at the time of their graduation with concurrent theory and clinical experience in all areas.
(d) Applicants who are graduates of foreign schools of nursing are eligible for Indiana registered nursing licensure by endorsement provided that the following conditions are met:
(1) Have:
   (A) written and passed the NCLEX® or the SBTPE in another jurisdiction or country; and
   (B) achieved Indiana's passing scores in all areas; and
   (C) licensure in another jurisdiction.
(2) Submit:
   (A) copies of all scholastic records; and
   (B) proof of:
      (i) good moral character;
      (ii) high school graduation or equivalent thereof; and
      (iii) having graduated from a program that meets the board's curricular requirements for a program in registered nursing as stated in the rules in effect at the time of their graduation with concurrent theory and clinical experience in all areas.
(e) The completed application accompanied by the fee, photograph, and proof of current licensure in another jurisdiction shall be submitted to the Indiana board of nursing. The fee is nonrefundable. (Indiana State Board of Nursing; Reg 7; filed Mar 1, 1978; 8:51 a.m.: Rules and Regs. 1979, p. 165; filed Mar 18, 1980, 4:00 p.m.: 3 IR 963; filed Mar 29, 1985, 10:43 a.m.: 8 IR 1028; readopted filed Nov 21, 2001, 10:23 a.m.: 25 IR 1327; filed Jun 23, 2003, 4:12 p.m.: 26 IR 3654, eff Jul 1, 2003) [IC 4-22-2-36 suspends the effectiveness of a rule document for thirty (30) days after filing with the secretary of state. LSA Document #02-247 was filed Jun 23, 2003; filed Mar 16, 2005, 11:50 a.m.: 28 IR 2384]

848 IAC 1-1-8 Renewal of license
Authority: IC 25-23-1-7
Affected: IC 25-23-1-16.1
Sec. 8. (8.1) The application form and instructions for renewal of the license to practice nursing will be mailed to odd numbered years to registered nurse licensees and in even numbered years to practical nurse licensees.
(8.2) Applicants for renewal of license shall pay a renewal fee.
(8.3) Applications for renewal shall be mailed to the last known address of the licensee. Failure to receive the application for renewal shall not relieve the licensee of the responsibility for renewing the license by the renewal date. (Indiana State Board of Nursing; Reg 8; filed Mar 1, 1978, 8:51 am: Rules and Regs. 1979, p. 166; filed Mar 29, 1985, 10:43 am: 8 IR 1028; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

848 IAC 1-1-9 Inactive status (Repealed)
Sec. 9. (Repealed by Indiana State Board of Nursing; filed Dec 19, 1996, 10:00 a.m.: 20 IR 1122)

848 IAC 1-1-10 Duplicate license
Authority: IC 25-23-1-7
Affected: IC 25-23-1-7; IC 25-23-1-16.1
Sec. 10. (a) The licensee shall report, in writing, on the form supplied by the board, the loss of the original certificate of licensure or the biennial renewal license.
   (b) A license that has been lost or destroyed shall be replaced upon proper identification of the registrant. (Indiana State Board of Nursing; Reg 10; filed Mar 1, 1978, 8:51 a.m.: Rules and Regs. 1979, p. 166; filed Mar 29, 1985, 10:43 a.m.: 8 IR 1028; readopted filed Nov 21, 2001, 10:23 a.m.: 25 IR 1328)

848 IAC 1-1-11 Name change
Authority: IC 25-23-1-7
Affected: IC 25-23-1-7; IC 25-23-1-16.1
Sec. 11. CHANGE OF NAME. (11.1) If a change of name is requested, licensee shall submit a copy of a marriage certificate or court order. Licensees may maintain the legal name of preference. (Indiana State Board of Nursing; Reg 11; filed Mar 1, 1978, 8:51 am: Rules and Regs. 1979, p. 166; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

848 IAC 1-1-12 Failure to renew license; reinstatement (Repealed)
Sec. 12. (Repealed by Indiana State Board of Nursing; filed Dec 19, 1996, 10:00 a.m.: 20 IR 1122)

848 IAC 1-1-13 Employment conditions; enforcement powers and duties; records and reports
Authority: IC 25-23-1-7
Affected: IC 4-1-6; IC 25-23-1-7; IC 25-23-1-16.1
Sec. 13. Any person who practices or offers to practice nursing as either a registered or licensed practical nurse in Indiana shall hold a current Indiana license as proof of their legal authorization to practice.
   (b) The Indiana board of nursing (board) shall be responsible for the following:
      (1) The verification of licensure of nurses to employers of nurses.
      (2) Initiating appropriate action as authorized by the Nurse Practice Act under IC 25-23-1 on reports to the board concerning incidents involving a licensee that may be cause for disciplinary action.
      (3) Assuring that imposters are not functioning in roles normally assumed by the licensed nurse.
      (4) Carrying out the duties of the board in compliance with the Fair Information Practice Act under IC 4-1-6.
(Indiana State Board of Nursing; Reg 13; filed Mar 1, 1978, 8:51 a.m.: Rules and Regs. 1979, p. 167; readopted filed Nov 21, 2001, 10:23 a.m.: 25 IR 1328)

848 IAC 1-1-14 Fees
Authority: IC 25-1-8-2; IC 25-23-1-7; IC 25-23.2-3-5
848 IAC 1-1-15 Temporary permits
Authority: IC 25-23-1-7
Affected: IC 25-23-1-11; IC 25-23-1-12

Sec. 14. (a) A controlling organization wishing to open a state
accredited nursing program shall submit a letter of intent to the board six
months prior to the anticipated admission of its first group of students,
which shall include the following:
(1) Expansion plans of the existing programs within a fifty (50)
mile radius.
(2) Nursing manpower studies documenting the need for the
program.
(b) The controlling organization shall submit a completed application
on forms provided by the board and shall request a personal appearance
before the board. The application shall include documented evidence of
resources and needs necessary to start a program. This documentation
shall include the following:
(1) Availability of qualified faculty.
(2) Budgeted faculty positions.
(3) Availability of adequate clinical facilities for the program.
(4) Availability of adequate academic facilities for the program.
(5) Evidence of financial resources adequate for the planning,
implementation, and continuation of the program.
(c) The board shall meet with representatives of the controlling
organization for review of documented evidence of need.
(d) The board requires that a program in nursing in a state assisted
college or university be authorized by the Indiana commission for higher
education.
(e) Prior to the board meeting, the proposed program site shall be
visited by a representative of the board or a survey visitor appointed by
the board, or both. The visitors shall meet with administrative personnel
of the controlling institution and shall examine the academic and clinical
facilities in terms of appropriateness for the implementation of the
proposed program in nursing.
(f) After the meeting with the controlling organization, the board shall
approve or disapprove the application for initial accreditation upon
evidence:
(1) submitted in the application;
(2) presented at the meeting; and
(3) collected on the survey visit.
(g) If the program is approved for initial accreditation, the board shall
stipulate the following:
(1) The maximum class size for the first year.
(2) The maximum number of classes to be admitted during the
first year.
(3) Approved clinical facilities for the first year.
(4) The number and qualifications of nursing faculty.
(h) A second site visit shall be made by a representative of the board or a
survey visitor appointed by the board, or both, at the end of the first
year of the operation of the new program and again prior to granting full
accreditation. (Indiana State Board of Nursing; 848 IAC 1-2-1; filed Jul
30, 1998, 4:59 p.m.: 21 IR 4526; readopted filed Nov 6, 2001, 4:18 p.m.:
25 IR 939; filed Sep 13, 2004, 9:45 a.m.: 28 IR 594)

Rule 2. Accreditation

848 IAC 1-2-1 Opening a program
Authority: IC 25-23-1-7
Affected: IC 25-23-1

Sec. 1. (a) A controlling organization wishing to open a state
accredited nursing program shall submit a letter of intent to the board six
848 IAC 1-2-3 Purpose for accreditation

Authority: IC 25-23-1-7
Affected: IC 25-23-1-7

Sec. 3. The purpose for accreditation shall be as follows:

(1) To ensure the safe practice of nursing by setting legal standards for programs preparing the practitioners.

(2) To certify minimal educational standards and practices for the preparation of:
   (A) registered nurses; and
   (B) licensed practical nurses.

(3) To assist in developing the programs of nursing education in accordance with sound social, educational, and professional principles.

(4) To ensure continuous evaluation and improvement of educational programs in nursing.

(5) To keep the public informed by publishing a list of the educational programs in nursing.

(Indiana State Board of Nursing; 848 IAC 1-2-3; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4527; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

848 IAC 1-2-4 Eligible programs

Authority: IC 25-23-1-7
Affected: IC 25-23-1-7

Sec. 4. Eligible programs for purposes of accreditation shall be as follows:

(1) Registered nurse programs that prepare students for registered nurse licensure. The program shall award an associate’s degree in nursing or a baccalaureate degree with a major in nursing or a diploma in nursing.

(2) Practical nursing programs that prepare students for practical nurse licensure. The program shall award a diploma or certificate in practical nursing.

(Indiana State Board of Nursing; 848 IAC 1-2-4; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4527; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

848 IAC 1-2-5 Accreditation status

Authority: IC 25-23-1-7
Affected: IC 25-23

Sec. 5. (a) Initial accreditation shall be granted to a new program that meets the regulations for opening a nursing program until the first class graduates.

(b) Full accreditation shall be granted to a program following the initial accreditation, providing it meets the following regulations for Indiana accredited programs in nursing:

(1) Criteria indicating a program’s successful attainment of state standards shall include the rate of successful completion of the National Council Licensure Examination (NCLEX). If a program’s annual rate of successful completion of the NCLEX is lower than one (1) standard deviation below the average national pass rate for first time U.S. educated and U.S. territory candidates for three (3) consecutive years, the program shall submit a report to the board outlining the following:
   (A) Results of the faculty’s review of factors that may have contributed to the low pass rate, including, but not limited to, the following:
      (i) Curriculum content.

(Indiana State Board of Nursing; 848 IAC 1-2-5; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4527; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939; filed Sep 13, 2004, 9:45 a.m.: 28 IR 594)

848 IAC 1-2-6 Survey visits

Authority: IC 25-23-1-7
Affected: IC 25-23-1-21

Sec. 6. (a) All programs with full accreditation status shall be visited at regular intervals as determined by the board. The survey visitor or visitors shall evaluate the program’s ability to meet the requirements of this article and prepare a written report for review and action by the board.

(b) The written report of the survey visit to the educational program is submitted to the director for review to permit comments for clarification by the director prior to board action.

(c) The final survey report accompanied by a written report of board action shall be sent to the administrative officer of the controlling agency. A copy shall be sent simultaneously to the director of the program.

(d) An institution used as a clinical facility for students may be visited in lieu of a regular cycle survey visit, the board may elect to accept the results of an accreditation survey visit by a nationally recognized accrediting organization of nursing education, such as the accrediting organization recognized by the U.S. Department of Education.
or the Council for Higher Education Accreditation. The program of nursing shall file:

1. the response by the program to the survey visitors; and
2. the final report including the action taken by the nationally recognized accrediting organization of nursing education programs.

(Indiana State Board of Nursing; 848 IAC 1-2-6; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4528; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939; filed Sep 13, 2004, 9:45 a.m.: 28 IR 595)

848 IAC 1-2-7 Eligible institutions
Authority: IC 25-23-1-7
Affected: IC 25-23-1-20
Sec. 7. (a) The program in nursing shall be incorporated or be a part of an incorporated institution.

(b) Educational institutions, colleges, or universities conducting a nursing program or with which a program of nursing is affiliated shall be accredited by the Higher Learning Commission of the North Central Association of Colleges and Schools or the Indiana commission on proprietary education. Hospitals conducting a nursing program shall be accredited by an organization that has been granted deeming authority. Long term care facilities shall be licensed by the Indiana state department of health.

(c) The philosophy, mission, and objectives of the program in nursing shall be in accordance with this rule.

(d) There shall be assurance that the program can meet the requirements for Indiana accredited programs in nursing. (Indiana State Board of Nursing; 848 IAC 1-2-7; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4528; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939; filed Sep 13, 2004, 9:45 a.m.: 28 IR 596)

848 IAC 1-2-8 Change of ownership
Authority: IC 25-23-1-7
Affected: IC 25-23-1-7
Sec. 8. (a) The board shall be notified in writing of any changes in ownership of a program.

(b) Information shall include the following:

1. The official name of the program.
2. The organizational chart of the contracting agency.
3. The names of administrative officials.

(c) The new controlling organization shall submit any change in curriculum to the board for approval prior to implementation. (Indiana State Board of Nursing; 848 IAC 1-2-8; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4528; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939; filed Sep 13, 2004, 9:45 a.m.: 28 IR 596)

848 IAC 1-2-8.5 Transfer of program to another controlling organization
Authority: IC 25-23-1-7
Affected: IC 25-23-1-7
Sec. 8.5. (a) A controlling organization transferring a state accredited nursing program from its control to that of another controlling organization shall submit to the board, in writing, within sixty (60) days of the decision to transfer the following:

1. The terms and conditions or contractual arrangements of the transfer.
2. The plan identifying the actions being taken to maintain the minimum legal standards for accreditation until completion of the transfer.
3. The plan for student notification and program completion requirements.

4. The plan to assist students to transfer to another accredited program if requested by a student.
5. The provisions for the record retention and accessibility of former students and graduates of the program and the plan for future custody of those records.

(b) The controlling organization accepting the transfer of control shall submit documented evidence of resources necessary to support the program within sixty (60) days of the decision to accept the transferring program. This documentation shall include the following:

1. Availability of qualified faculty.
2. Budgeted faculty positions and faculty-student ratio.
3. Availability of adequate clinical facilities for the program.
4. Availability of adequate academic facilities for the program.
5. Evidence of financial resources adequate for the implementation and continuation of the program.

(c) The board shall meet with representatives of both controlling organizations for review of documented evidence of agreements and resources.

(d) The board requires that a program in nursing in a state assisted college or university be authorized by the Indiana commission for higher education to transfer control from one (1) state assisted college or university to another state assisted college or university.

(e) Prior to board hearing and approval, the controlling organization accepting the program may be visited by a representative of the board or a survey visitor appointed by the board. The visitor shall meet with administrative personnel of the controlling organization accepting the program and shall examine the academic and clinical facilities in terms of appropriateness for the implementation of the program in nursing.

(f) After the hearing with the controlling organization accepting the transfer, the board shall approve or disapprove the transfer based upon evidence:

1. submitted in the notification of transfer;
2. presented at the hearing; and
3. collected on the survey.

(g) The new controlling organization shall submit any change in curriculum to the board for approval prior to implementation. (Indiana State Board of Nursing; 848 IAC 1-2-8.5; filed Sep 13, 2004, 9:45 a.m.: 28 IR 596)

848 IAC 1-2-9 Philosophy, mission, and objectives
Authority: IC 25-23-1-7
Affected: IC 25-23-1-7
Sec. 9. The philosophy, mission, and objectives of the program in nursing shall be as follows:

1. Clearly defined in writing in the official records.
2. Consistent with the philosophy and mission of the controlling institution.
3. Formulated and accepted by the faculty.
4. Inclusive of program beliefs regarding education, nursing, and the learning process.
5. Descriptive of the practitioner to be prepared.
6. The basis for planning, implementing, and evaluating the total program.
7. Reviewed periodically and revised as necessary by the nursing faculty.

(Indiana State Board of Nursing; 848 IAC 1-2-9; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4529; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939; filed Sep 13, 2004, 9:45 a.m.: 28 IR 597)

848 IAC 1-2-10 Organization and administration
Authority: IC 25-23-1-7

34
Affected: IC 25-23-1-7

Sec. 10. (a) Responsibility for developing and implementing the program in nursing shall be placed in the faculty of the nursing education unit.

(b) The institution shall have an effective plan of organization and administration appropriate to the purpose and implementation of the instructional program in nursing. There shall be an organizational chart of the:

(1) institution indicating the place of the nursing program; and
(2) nursing program.

(c) There shall be a controlling body that recognizes the program in nursing as an educational program and delegates authority to the chief administrative officer of the institution who, in turn, delegates authority to the program director.

(d) When a program director resigns, it is the responsibility of the administration of the controlling organization to inform the board in writing within thirty (30) days of notification of the following:

(1) Intended resignation.
(2) Effective date.
(3) Plans for filling the position.

(e) The program in nursing shall be assured of stable, financial resources adequate for and effectively allocated to support its educational activities. There shall be a budget prepared in accordance with sound educational and financial practices. The financial statement shall give a clear picture of the status of the program. The program director, with documentation of faculty input, shall have the following responsibilities relating to the financial operation of the program in nursing:

(1) Preparing the budget for one (1) year in advance of the fiscal period and recommending it to the proper authorities.
(2) Controlling the use of the approved budget through an accurate system of records.
(3) Reviewing financial reports routinely and making necessary revisions.
(4) Consulting with proper authorities within the institution in regard to interpretation, preparation, and implementation of the budget.

(Indiana State Board of Nursing; 848 IAC 1-2-11; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4529; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

848 IAC 1-2-11 Admissions

Authority: IC 25-23-1-7

Affected: IC 25-23-1-7

Sec. 11. (a) There shall be published policies for admission established by the nursing faculty.

(b) Students shall be selected on the basis of established criteria and in compliance with all applicable state and federal laws.

(c) There shall be well defined written policies governing payment and refund of tuition and other fees.

(d) The number of students admitted to a nursing education program shall be determined by the following:

(1) The number of qualified faculty.
(2) The availability of the following:
   (A) Adequate educational facilities and resources.
   (B) Appropriate clinical learning activities.

(e) An applicant shall be graduated from a state approved high school or its equivalent. A complete high school transcript shall be on file.

(f) A person who has qualified for equivalency to high school graduation on the basis of satisfactory completion of the general equivalency degree test (GED) shall be eligible for entrance to an Indiana accredited program in nursing upon proof of the following:

(1) A copy of the test results listing individual and total scores on the GED test shall be on file to validate satisfactory test completion.
(2) Satisfactory completion of college courses relevant to nursing may nullify unsatisfactory test scores.

(g) There shall be written policies regarding the following:

(1) The readmission of a student who:
   (A) withdrew from the program; or
   (B) failed required courses.

(2) The admission of a transfer student.

(Indiana State Board of Nursing; 848 IAC 1-2-11; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4529; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

848 IAC 1-2-12 Faculty

Authority: IC 25-23-1-7

Affected: IC 25-23-1-7

Sec. 12. (a) The program in nursing shall provide and maintain a qualified faculty. The general qualifications for all nurse faculty members shall include the following:

(1) Graduation from an approved program of nursing accepted by the board.
(2) Current, unencumbered registered nurse licensed in Indiana.

(b) The personnel policies for faculty members shall be defined in writing.

(c) Faculty, other than registered nurses, who teach nonclinical nursing courses, including, but not limited to:

(1) issues and trends;
(2) nutrition;
(3) research;
(4) management; and
(5) statistics;

shall hold master’s degrees in areas appropriate to the responsibilities inherent in the position.

(d) Clinical preceptorships may be used for the clinical experiences of students. When clinical preceptors are used, the following conditions shall be met:

(1) Written agreements between the cooperating agency and nursing program shall delineate the functions and responsibilities of the parties involved.
(2) Criteria for selecting clinical preceptors shall be developed and in writing.

(3) The clinical preceptors shall have the following minimum qualifications:

   (A) Current licensure as a registered nurse.
   (B) Three (3) years of experience as a registered nurse.
(4) Written clinical objectives shall be specific and shared with the clinical preceptor prior to the experience.

(5) The designated faculty member shall:

   (A) be responsible for the learning experience of each student; and
   (B) meet with each clinical preceptor and student for the purpose of monitoring and evaluating the learning experience.

(6) The designated faculty member shall be available by phone or in person when students are in the clinical area.

(7) A faculty member shall be responsible for coordinating the clinical preceptorships of no more than ten (10) students.
848 IAC 1-2-13 Faculty qualifications; registered nurse programs
Authority: IC 25-23-1-7
Affected: IC 25-23-1-7

Sec. 13. (a) The director shall be a registered nurse with a minimum of a master’s degree in nursing and be employed full-time, excluding vacations and holidays, during the enrollment period of the students. A doctoral degree is recommended. The director shall have experience in the following:

(1) The practice of nursing.
(2) Nursing education.
(3) Administration.

(b) The nurse faculty member shall have experience in the practice of nursing and hold a master’s degree. The majority of the faculty shall hold master’s degrees with majors in nursing. The remainder of the faculty shall hold master’s degrees in a field appropriate to their teaching or clinical responsibilities. The majority of the faculty shall be full-time employees of the institution. The reappointment of a person who does not hold a master’s degree in nursing shall be made only if that person, within one (1) year of initial appointment, has a written plan of study for degree completion and has matriculated in a college or university.

Continuing reappointment of a person who does not hold a master’s degree in nursing shall be contingent upon orderly progression toward degree completion. (Indiana State Board of Nursing; 848 IAC 1-2-13; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4530; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939; filed Sep 13, 2004, 9:45 a.m.: 28 IR 598)

848 IAC 1-2-14 Faculty qualifications; licensed practical nurse programs
Authority: IC 25-23-1-7
Affected: IC 25-23-1-7

Sec. 14. (a) The director shall be a registered nurse with a minimum of a master’s degree, preferably in nursing, and be employed full-time, excluding vacations and holidays, during the enrollment period of the students. A program director appointed prior to the promulgation of this rule shall be considered, except the director shall have experience in the following:

(1) The practice of nursing.
(2) Nursing education.
(3) Administration.

(b) The nurse faculty member shall have experience in the practice of nursing and hold a baccalaureate degree. The majority of the faculty shall hold baccalaureate degrees with majors in nursing. The remainder of the faculty shall hold baccalaureate degrees in a field appropriate to their teaching or clinical responsibilities. The majority of the faculty shall be full-time employees of the institution. (Indiana State Board of Nursing; 848 IAC 1-2-14; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4530; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939; filed Sep 13, 2004, 9:45 a.m.: 28 IR 599)

848 IAC 1-2-15 Student personnel services
Authority: IC 25-23-1-7
Affected: IC 25-23-1-7

Sec. 15. Within the framework of the controlling institution, policies regulating student personnel services shall be delineated in writing, including, but not limited to, the following:

(1) Counseling and guidance.
(2) Health services.

(3) Financial aid.
(4) Housing.
(5) Student organization.
(6) Job placement.
(7) Liability insurance.

(Indiana State Board of Nursing; 848 IAC 1-2-15; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4531; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

848 IAC 1-2-16 Curriculum; all programs
Authority: IC 25-23-1-7
Affected: IC 25-23-1-7

Sec. 16. (a) The:

(1) development;
(2) implementation;
(3) evaluation; and
(4) revision;

of the curriculum shall be the responsibility of the nursing faculty and shall be based on the stated philosophy and objectives of the program.

(b) The program shall provide an opportunity for the student to learn:

(1) facts;
(2) principles;
(3) concepts; and
(4) skills;

which ensure that each graduate meets the minimal qualifications essential for safety to practice as a licensed nurse.

(c) There shall be concurrent didactic instruction and clinical experiences in the care of patients from all age groups except when students repeat courses for failing or withdrawal. Those students may repeat the failed course by itself without also repeating the concurrent course.

(d) The clinical experiences shall be determined by the philosophy, mission, and objectives of the program.

(e) Classroom and clinical experiences shall be the responsibility of program faculty.

(f) Observational experiences shall be determined by the philosophy, mission, and objectives of the program. As used in this subsection, “observational experiences” means those experiences in which the student is in the role of observer. Observational experiences shall be:

(1) planned for and guided by the faculty, but may not require direct supervision; and
(2) included in the program’s annual report to the board.

(g) There shall be an outline of the total curriculum showing the placement of courses according to:

(1) year and semester or term;
(2) the ratio of credits to hours; or
(3) the total number of hours.

(h) The school year shall be divided into definite terms with dates set for the beginning and ending of each. The dates shall be communicated to the students at the beginning of the academic year.

(i) Board approval shall be granted prior to the initiation of any major curriculum change. If the change is minor, in that it does not substantially alter the curriculum, it shall be reported to the board in writing in the program’s annual report to the board.

(j) A major change, which would require the board’s approval prior to implementation, includes the following:

(1) Major changes in philosophy, mission, or objectives.
(2) The number of credits required for successful completion of the program or the major in nursing.
(3) The number and type of general education courses.
(4) Relocation of the program or any of its components.
(5) Change in required clinical hours.
Admission times.
Progression options.
Additions of satellite locations.

(k) There shall be a systematic written plan for program evaluation that is ongoing according to the time frame specified by the faculty. The findings from the systematic evaluation shall be used for development, maintenance, and revision of the program components. The written plan shall include, but is not limited to, the following:

1. Philosophy, mission, and objectives of the nursing education program.
2. Expected knowledge, skills, and abilities of the graduates.
3. Teaching and learning experiences.
4. Student evaluation of courses.
5. Instructor evaluation of students.
6. Pass rates on licensure examination.
7. Follow-up studies of graduates' evaluation of the program of learning.

848 IAC 1-2-17 Curriculum; registered nurse programs

Authority: IC 25-23-1-7
Affected: IC 25-23-1-7

Sec. 17. (a) The length of a full-time program shall be a minimum of two (2) academic years or its equivalent.
(b) The curriculum shall provide instruction in the following areas:

1. Physical and biological sciences, including content drawn from the areas of:
   (A) anatomy;
   (B) physiology;
   (C) chemistry;
   (D) microbiology;
   (E) pharmacology;
   (F) physics; and
   (G) nutrition;
   that may be integrated, combined, or presented as separate courses.
2. Social and behavioral sciences shall include content drawn from the concepts of mental health that may be integrated, combined, or presented as separate courses.
3. The nursing content shall establish the following:
   (A) Provide concurrent theory and clinical experience in the following areas:
      (i) Adult nursing.
      (ii) Maternity nursing.
      (iii) Nursing of children.
      (iv) Mental health nursing.
      (v) Gerontological nursing.
   (B) Include:
      (i) history;
      (ii) trends;
      (iii) legal aspects; and
      (iv) ethical aspects;
   (C) Include content about chemical substance abuse among professionals.
   (D) Computer technology shall be integrated, combined, or presented as a separate course.
   (E) Standard precautions education shall be integrated, combined, or presented as a separate course.

(Indiana State Board of Nursing; 848 IAC 1-2-17; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4532; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939; filed Sep 13, 2004, 9:45 a.m.: 28 IR 599)

848 IAC 1-2-18 Curriculum; licensed practical nurse program

Authority: IC 25-23-1-7
Affected: IC 25-23-1-7

Sec. 18. (a) The length of a full-time program shall be a minimum of one (1) calendar year or its equivalent.
(b) The curriculum shall provide instruction in the following areas:

1. Physical and biological sciences, including content drawn from the areas of:
   (A) anatomy;
   (B) physiology;
   (C) nutrition; and
   (D) pharmacology;
   that may be integrated, combined, or presented as separate courses.
2. Social and behavioral sciences, including content drawn from the concepts of mental health that may be integrated, combined, or presented as separate courses.
3. The nursing content shall establish the following:
   (A) Provide concurrent theory and clinical experience in the following areas:
      (i) Adult nursing.
      (ii) Maternity nursing.
      (iii) Nursing of children.
      (iv) Gerontological nursing.
   (B) Include:
      (i) history;
      (ii) trends;
      (iii) legal aspects; and
      (iv) ethical aspects;
   (C) Include content about chemical substance abuse among professionals.
   (D) Computer technology shall be integrated, combined, or presented as a separate course.
   (E) Standard precautions education shall be integrated, combined, or presented as a separate course.

(Indiana State Board of Nursing; 848 IAC 1-2-18; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4532; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939; filed Sep 13, 2004, 9:45 a.m.: 28 IR 600)

848 IAC 1-2-19 Clinical experience; all programs

Authority: IC 25-23-1-7
Affected: IC 25-23-1-20

Sec. 19. (a) Clinical facilities used for learning experiences shall be approved by an organization that has been granted deeming authority or appropriate licensing bodies. Long term care facilities shall be licensed by the Indiana state department of health.
(b) There shall be written agreements between the program and any institution or agency, which is used for clinical experiences. Agreements shall state the responsibilities and privileges of both parties. Written agreements are not necessary for observational experiences.
(c) Nursing program faculty shall:
   (1) assign;
   (2) guide;
   (3) evaluate; and
   (4) supervise:
   the learning activities of students in the clinical experience.
(d) The ratio of faculty to students shall be a maximum of 1:10 or any portion thereof in the clinical or observational experience, exclusive of the nurse director or coordinator. (Indiana State Board of Nursing; 848 IAC 1-2-19; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4532; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939; filed Sep 13, 2004, 9:45 a.m.: 28 IR 601)

848 IAC 1-2-20 Educational resources
Authority: IC 25-23-1-7
Affected: IC 25-23-1-20
Sec. 20. (a) Classrooms, laboratories, and conference rooms shall be provided to meet the needs of the students.
(b) The library shall be adequate in size and have current holdings to meet the educational needs of the students and faculty. There shall be a variety of current audiovisual and computer aids for individual and group instruction. The annual budget shall provide for accessions to the library.
(c) Furnishings, supplies, and office equipment shall be provided for the director, faculty, and clerical staff.
(d) Adequate office space shall be provided for the director, faculty, and clerical staff.
(e) There shall be adequate support services and secretarial personnel to meet the needs of the program.
(f) There shall be adequate support for faculty development. (Indiana State Board of Nursing; 848 IAC 1-2-20; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4533; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939; filed Sep 13, 2004, 9:45 a.m.: 28 IR 601)

848 IAC 1-2-21 Progression and graduation
Authority: IC 25-23-1-7
Affected: IC 25-23-1-7
Sec. 21. (a) There shall be written requirements for progression and graduation prepared by the faculty of each program. There shall be a written policy and procedure for academic probation and termination from the program. There shall be a code of conduct for students.
(b) The nursing program shall provide to enrolled students a student handbook that shall include all information specific to the nursing program.
(c) Candidates for the registered nurse licensing examination shall have successfully completed the educational program with an accumulative average grade of “C” or better, and a grade of “C” or better in each course as identified in section 17 of this rule.
(d) Candidates for the practical nurse licensing examination shall have successfully completed the educational program with a grade of “C” or better in each course. (Indiana State Board of Nursing; 848 IAC 1-2-21; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4533; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939; filed Sep 13, 2004, 9:45 a.m.: 28 IR 602)

848 IAC 1-2-22 Records and program catalog
Authority: IC 25-23-1-7
Affected: IC 25-23-1-7
Sec. 22. (a) There shall be a record system that provides for accurate recording of admission data and student academic records.
(a) There shall be written agreements between the program and any institution or agency, which is used for clinical experiences. Agreements shall state the responsibilities and privileges of both parties. Written agreements are not necessary for observational experiences.
(c) Nursing program faculty shall:
   (1) assign;
   (2) guide;
   (3) evaluate; and
   (4) supervise:
   the learning activities of students in the clinical experience.
(d) The ratio of faculty to students shall be a maximum of 1:10 or any portion thereof in the clinical or observational experience, exclusive of the nurse director or coordinator. (Indiana State Board of Nursing; 848 IAC 1-2-19; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4532; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939; filed Sep 13, 2004, 9:45 a.m.: 28 IR 601)

Provisions shall be made for safe storage of records to prevent loss by destruction and unauthorized use.
(b) Individual student files, maintained by the program of nursing during the student’s enrollment, shall include, at a minimum, the following:
   (1) Documents required for admission.
   (2) Results of performance evaluation relating to the student’s progression or lack thereof.
   (3) Documentation of standard precautions training.
(c) The institution must maintain in readily accessible form, or cause to be maintained in readily accessible form, sufficient records to generate an official student transcript for a period of sixty (60) years after the date the student attended the institution.
(d) Information about the program shall be published periodically, at least every two (2) years. The publication shall be dated and include the following:
   (1) Philosophy, mission, and objectives of the nursing program.
   (2) A general description of the program.
   (3) The curriculum plan.
   (4) Brief course descriptions.
   (5) Facilities and conditions provided for student learning and welfare.
   (6) Faculty information.
   (7) A statement of tuition, fees, and refund policies.
   (8) A statement regarding nondiscriminatory policies for student and faculty recruitment.
   (9) A statement regarding student complaint and grievance procedures.
   (10) Housing and residence facilities information.
   (11) Admission, progression, and graduation policies. (Indiana State Board of Nursing; 848 IAC 1-2-22; filed Jul 30, 1998, 4:59 p.m.: 21 IR 4533; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939; filed Sep 13, 2004, 9:45 a.m.: 28 IR 602)
ARTICLE 2. STANDARDS FOR THE COMPETENT PRACTICE OF REGISTERED AND LICENSED PRACTICAL NURSING

Rule 1. Definitions

848 IAC 2-1-1 Applicability
Authority: IC 25-23-1-7
Affected: IC 25-23

Sec. 1. The definitions in this rule apply throughout this article. (Indiana State Board of Nursing; 848 IAC 2-1-1; filed Oct 25, 1991, 5:00 p.m.: 15 IR 243; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

848 IAC 2-1-2 “Competence” defined
Authority: IC 25-23-1-7
Affected: IC 25-23

Sec. 2. “Competence” means performing skillfully and proficiently the functions that are within the role of the licensee and demonstrating behavior that is consistent with the interrelationship of essential knowledge, judgment, and skill. (Indiana State Board of Nursing; 848 IAC 2-1-2; filed Oct 25, 1991, 5:00 p.m.: 15 IR 243; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

848 IAC 2-1-3 “Health team” defined
Authority: IC 25-23-1-7
Affected: IC 25-23

Sec. 3. “Health team” means a group of health care providers which may, in addition to health care practitioners, include the patient/client, family, and any significant others. (Indiana State Board of Nursing; 848 IAC 2-1-3; filed Oct 25, 1991, 5:00 p.m.: 15 IR 243; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

Rule 2. Registered Nursing

848 IAC 2-2-1 Responsibility to apply the nursing process
Authority: IC 25-23-1-7
Affected: IC 25-23

Sec. 1. The registered nurse shall do the following:
1. Assess the patient/client in a systematic, organized manner.
2. Formulate a nursing diagnosis based on accessible, communicable, and recorded data which is collected in a systematic and continuous manner.
3. Plan care which includes goals and prioritized nursing approaches or measures derived from the nursing diagnosis.
4. Implement strategies to provide for patient/client participation in health promotion, maintenance, and restoration.
5. Initiate nursing actions to assist the patient/client to maximize his or her health capabilities.
6. Evaluate with the patient/client the status of goal achievement as a basis for reassessment, reordering priorities, new goal-setting, and revision of the plan of nursing care.
7. Seek educational resources and create learning experiences to enhance and maintain current knowledge and skills for his or her continuing competence in nursing practice and individual professional growth.

848 IAC 2-2-2 Responsibility as a member of the nursing profession
Authority: IC 25-23-1-7
Affected: IC 25-23

Sec. 2. The registered nurse shall do the following:
1. Function within the legal boundaries of nursing practice based on the knowledge of statutes and rules governing nursing.
2. Accept responsibility for individual nursing actions and continued competence.
3. Communicate, collaborate, and function with other members of the health team to provide safe and effective care.
4. Seek education and supervision as necessary when implementing nursing practice techniques.
5. Respect the dignity and rights of the patient/client regardless of socioeconomic status, personal attributes, or nature of health problem.
6. Maintain each patient/client's right to privacy by protecting confidential information unless obligated, by law, to disclose the information.
7. Provide nursing care without discrimination on the basis of diagnosis, age, sex, race, creed, or color.
8. Delegate and supervise only those nursing measures which the nurse knows, or should know, that another person is prepared, qualified, or licensed to perform.
9. Retain professional accountability for nursing care when delegating nursing intervention.
10. Respect and safeguard the property of patient/client, family, significant others, and the employer.
11. Notify, in writing, the appropriate party, which may include:
   A. the office of the attorney general, consumer protection division;
   B. his or her employer or contracting agency; or
   C. the board;
   of any unprofessional conduct which may jeopardize the patient/client safety.
12. Participate in the review and evaluation of the quality and effectiveness of nursing care.

848 IAC 2-2-3 Unprofessional conduct
Authority: IC 25-23-1-7
Affected: IC 25-23

Sec. 3. Nursing behaviors (acts, knowledge, and practices) failing to meet the minimal standards of acceptable and prevailing nursing practice, which could jeopardize the health, safety, and welfare of the public, shall constitute unprofessional conduct. These behaviors shall include, but are not limited to, the following:
1. Using unsafe judgment, technical skills, or inappropriate interpersonal behaviors in providing nursing care.
2. Performing any nursing technique or procedure for which the nurse is unprepared by education or experience.
3. Disregarding a patient/client’s dignity, right to privacy, or right to confidentiality.
(4) Failing to provide nursing care because of diagnosis, age, sex, race, color, or creed.
(5) Abusing a patient/client verbally, physically, emotionally, or sexually.
(6) Falsifying, omitting, or destroying documentation of nursing actions on the official patient/client record.
(7) Abandoning or knowingly neglecting patients/clients requiring nursing care.
(8) Delegating nursing care, functions, tasks, or responsibility to others when the nurse knows, or should know, that such delegation is to the detriment of patient safety.
(9) Providing one's license/temporary permit to another individual for any reason.
(10) Failing to practice nursing in accordance with prevailing nursing standards due to physical or psychological impairment.
(11) Providing one's license/temporary permit to another individual for any reason.
(12) Misappropriating money or property from a patient/client or employee.
(13) Failing to notify, in writing, the appropriate party, which may include:
   (A) the office of the attorney general, consumer protection division;
   (B) his or her employer or contracting agency; or
   (C) the board;
   of any unprofessional conduct which may jeopardize patient/client safety.

(Indiana State Board of Nursing; 848 IAC 2-3-1; filed Oct 25, 1991, 5:00 p.m.: 15 IR 243; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

Rule 3. Licensed Practical Nursing

848 IAC 2-3-1 Responsibility to apply the nursing process
Authority: IC 25-23-1-7
Affected: IC 25-23
Sec. 1. The licensed practical nurse shall do the following:
(1) Know and utilize the nursing process in planning, implementing, and evaluating health services and nursing care to the individual patient or client.
(2) Collaborate with other members of the health team in providing for patient/client participation in health promotion, maintenance, and restoration.
(3) Seek educational resources and create learning experiences to enhance and maintain current knowledge and skills for his or her continuing competence in nursing practice and individual professional growth.
(4) Assess the health status of the patient/client, in conjunction with other members of the health care team, for analysis and identification of health goals.
(5) Evaluate with the patient/client the status of goal achievement as a basis for reassessment, reordering of priorities, and new goal setting for contribution to the modification of the plan of nursing care.

(Indiana State Board of Nursing; 848 IAC 2-3-1; filed Oct 25, 1991, 5:00 p.m.: 15 IR 244; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

848 IAC 2-3-2 Responsibility as a member of the health team
Authority: IC 25-23-1-7
Affected: IC 25-23
Sec. 2. The licensed practical nurse shall do the following:
(1) Function within the legal boundaries of practical nursing practice based on the knowledge of statutes and rules governing nursing.
(2) Accept responsibility for individual nursing actions and continued competence.
(3) Communicate, collaborate, and function with other members of the health care team to provide safe and effective care.
(4) Seek education and supervision as necessary from registered nurses and/or other members of the health care team when implementing nursing techniques or practices.
(5) Respect the dignity and rights of the patient/client regardless of socioeconomic status, personal attributes, or nature of health problems.
(6) Maintain each patient/client's right to privacy by protecting confidential information unless obligated, by law, to disclose the information.
(7) Provide nursing care without discrimination on the basis of diagnosis, age, sex, race, creed, or color.
(8) Accept only those delegated nursing measures which he or she knows he or she is prepared, qualified, and licensed to perform.
(9) Respect and safeguard the property of patient/client, family, significant others, and the employer.
(10) Notify, in writing, the appropriate party which may include:
    (A) the office of the attorney general, consumer protection division;
    (B) his or her employer or contracting agency; or
    (C) the board;
    of any unprofessional conduct which may jeopardize the patient/client safety.
(11) Participate in the review and evaluation of the quality and effectiveness of nursing care.

(Indiana State Board of Nursing; 848 IAC 2-3-2; filed Oct 25, 1991, 5:00 p.m.: 15 IR 244; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)
(10) Failing to practice nursing in accordance with prevailing practical nursing standards due to physical or psychological impairment.
(11) Diverting prescription drugs for own or another person’s use.
(12) Misappropriating money or property from a patient/client or employee.
(13) Failing to notify, in writing, the appropriate party which may include:
   (A) the office of the attorney general, consumer protection division;
   (B) his or her employer or contracting agency; or
   (C) the board;
   of any unprofessional conduct which may jeopardize patient/client safety.

(Indiana State Board of Nursing; 848 IAC 3-1-2; filed Oct 25, 1991, 5:00 p.m.: 15 IR 245; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

ARTICLE 3. NURSE-MIDWIVES

Rule 1. Definitions

848 IAC 3-1-0.5 Applicability
Authority: IC 25-23-1-7
Affected: IC 25-23-1-1; IC 25-23-1-13.1
Sec. 0.5. The definitions in this rule apply throughout this article.
(Indiana State Board of Nursing; 848 IAC 3-1-0.5; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2871; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

848 IAC 3-1-0.6 “Board” defined
Authority: IC 25-23-1-7
Affected: IC 25-23-1-1; IC 25-23-1-13.1
Sec. 0.6. “Board” means the Indiana state board of nursing. (Indiana State Board of Nursing; 848 IAC 3-1-0.6; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2871; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

848 IAC 3-1-1 “Certified nurse-midwife” defined; use of initials
Authority: IC 25-23-1-7
Affected: IC 25-23-1-1
Sec. 1. (a) “Certified nurse-midwife” means a registered nurse who has graduated from a nationally accredited school of midwifery, has passed the National Certifying Examination given by the American College of Nurse-Midwives, and is licensed by the board to practice as a nurse-midwife.
   (b) “CNM” means certified nurse-midwife and are the designated authorized initials to be used by the designated certified nurse-midwife. (Indiana State Board of Nursing; Nurse-Midwifery Rule 1, Art 1; filed Jun 15, 1979, 4:41 p.m.: 2 IR 1131; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2871; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939) NOTE: Transferred from the Medical Licensing Board of Indiana (844 IAC 3-1-2) to the Indiana State Board of Nursing (848 IAC 3-1-2) by P.L.185-1993, SECTION 16, effective July 1, 1993.

848 IAC 3-1-2 “Practice of nurse-midwifery” defined
Authority: IC 25-23-1-7
Affected: IC 25-23-1-1; IC 25-23-1-13.1
Sec. 2. “Practice of nurse-midwifery” means the practice of nursing and the extension of that practice, including well-woman gynecological healthcare, family planning, and care to the normal and expanding family throughout pregnancy, labor, delivery, and post-delivery. (Indiana State Board of Nursing; Nurse-Midwifery Rule 1, Art 2; filed Jun 15, 1979, 4:41 p.m.: 2 IR 1131; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2872; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939) NOTE: Transferred from the Medical Licensing Board of Indiana (844 IAC 3-1-2) to the Indiana State Board of Nursing (848 IAC 3-1-2) by P.L.185-1993, SECTION 16, effective July 1, 1993.

848 IAC 3-1-3 Association with licensed physician; jurisdiction of board (Repealed)
Sec. 3. (Repealed by Indiana State Board of Nursing; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2879)

848 IAC 3-1-4 Registration requirement (Repealed)
Sec. 4. (Repealed by Indiana State Board of Nursing; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2879)

848 IAC 3-1-5 Application for registration; qualifications (Repealed)
Sec. 5. (Repealed by Indiana State Board of Nursing; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2879)

848 IAC 3-1-6 Fees for registration (Repealed)
Sec. 6. (Repealed by Indiana State Board of Nursing; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2879)

848 IAC 3-1-7 Photograph submitted with application (Repealed)
Sec. 7. (Repealed by Indiana State Board of Nursing; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2879)

848 IAC 3-1-8 Screening applicant; approval (Repealed)
Sec. 8. (Repealed by Indiana State Board of Nursing; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2879)

848 IAC 3-1-9 Temporary registration not offered (Repealed)
Sec. 9. (Repealed by Indiana State Board of Nursing; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2879)

848 IAC 3-1-10 Biennial re-registration (Repealed)
Sec. 10. (Repealed by Indiana State Board of Nursing; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2879)

848 IAC 3-1-11 Notice of re-registration (Repealed)
Sec. 11. (Repealed by Indiana State Board of Nursing; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2879)

848 IAC 3-1-12 Fee for re-registration (Repealed)
Sec. 12. (Repealed by Indiana State Board of Nursing; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2879)

848 IAC 3-1-13 Delinquency fee (Repealed)
Sec. 13. (Repealed by Indiana State Board of Nursing; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2879)

848 IAC 3-1-14 Suspension of registration for delinquency (Repealed)
Sec. 14. (Repealed by Indiana State Board of Nursing; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2879)

848 IAC 3-1-15 Retirement and surrender of registration (Repealed)
Sec. 15. (Repealed by Indiana State Board of Nursing; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2879)
Rule 2. General Provisions

848 IAC 3-2-1 Application for limited license; qualifications
Authority: IC 25-23-1-7
Affected: IC 25-23-1-1; IC 25-23-1-13.1
Sec. 1. Every applicant for a limited license in nurse-midwifery shall pay a fee as provided in 848 IAC 1-1-14 in the form of a personal check, certified check, cashier's check, or money order payable to the health professions bureau. This fee is not refundable, but may be used up to and including one (1) year from the original submission of the application.

Sec. 2. (a) Each applicant for a limited license in nurse-midwifery shall pay a fee as provided in 848 IAC 1-1-14 in the form of a personal check, certified check, cashier's check, or money order payable to the health professions bureau. This fee is not refundable, but may be used up to and including one (1) year from the original submission of the application.

(b) The fee for any reapplication shall be the same as determined by the board for the original application and is payable in the form of a personal check, certified check, cashier's check, or money order payable to the health professions bureau. (Indiana State Board of Nursing; 848 IAC 3-2-2; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2872; readopted filed Nov 6, 2001, 10:23 a.m.: 25 IR 1328)

848 IAC 3-2-2 Fees for limited license
Authority: IC 25-23-1-7
Affected: IC 25-23-1-1; IC 25-23-1-13.1
Sec. 3. A recent passport type photograph of the applicant taken within six (6) weeks prior to filing shall be submitted with each application. The photograph shall be in color on semigloss paper, not less than three (3) inches wide and four (4) inches high. (Indiana State Board of Nursing; 848 IAC 3-2-3; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2872; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 939)

848 IAC 3-2-3 Photograph submitted with application
Authority: IC 25-23-1-7
Affected: IC 25-23-1-1; IC 25-23-1-13.1
Sec. 4. No temporary permit will be issued under any circumstances. (Indiana State Board of Nursing; 848 IAC 3-2-4; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2872; readopted filed Nov 6, 2001, 10:23 a.m.: 25 IR 1329)

848 IAC 3-2-4 Temporary permit not issued
Authority: IC 25-23-1-7
Affected: IC 25-23-1-1; IC 25-23-1-13.1
Sec. 5. Every person with a limited license to practice nurse-midwifery and shall have and utilize knowledge of the statutes and rules governing the practice of nurse-midwifery, including the following:

(A) State and federal drug laws and regulations.
(B) State and federal confidentiality laws and regulations.
(C) State and federal medical records access laws.
(D) evaluate patient outcomes.
(2) Use advanced knowledge and skills in teaching and guiding clients and other health care team members.
(3) Use appropriate critical thinking skills to make independent decisions, commensurate with the autonomy, authority, and responsibility of the practice of nurse-midwifery.
(4) Function within the legal boundaries of the practice of nurse-midwifery and shall have and utilize knowledge of the statutes and rules governing the practice of nurse-midwifery, including the following:

(A) State and federal drug laws and regulations.
(B) State and federal confidentiality laws and regulations.
(C) State and federal medical records access laws.
(5) Consult and collaborate with other members of the health care team as appropriate to provide reasonable client care.

Rule 3. Competent Practice of Nurse-Midwifery

848 IAC 3-3-1 Competent practice of nurse-midwives
Authority: IC 25-23-1-7
Affected: IC 16-21; IC 25-23-1-1; IC 25-23-1-13.1
Sec. 1. A nurse-midwife shall perform as an independent and interdependent member of the health care team as defined in 848 IAC 2-1-3. The following are standards for each nurse-midwife:

(1) Assess clients by using advanced knowledge and skills to:
   (A) identify abnormal conditions;
   (B) diagnose health problems;
   (C) develop and implement nursing treatment plans; and
   (D) evaluate patient outcomes.
(2) Use advanced knowledge and skills in teaching and guiding clients and other health care team members.
(3) Use appropriate critical thinking skills to make independent decisions, commensurate with the autonomy, authority, and responsibility of the practice of nurse-midwifery.
(4) Function within the legal boundaries of the practice of nurse-midwifery and shall have and utilize knowledge of the statutes and rules governing the practice of nurse-midwifery, including the following:

(A) State and federal drug laws and regulations.
(B) State and federal confidentiality laws and regulations.
(C) State and federal medical records access laws.
(5) Consult and collaborate with other members of the health care team as appropriate to provide reasonable client care.

Sec. 6. On or before August 31 of odd-numbered years, the health professions bureau shall notify each nurse-midwife that he or she is required to renew their limited license to practice nurse-midwifery. At the time of such notice, the health professions bureau shall mail a form to each nurse-midwife to the last known address of record. (Indiana State Board of Nursing; 848 IAC 3-2-6; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2872; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 940)

848 IAC 3-2-7 Fee for renewal
Authority: IC 25-23-1-7
Affected: IC 25-23-1-1; IC 25-23-1-13.1
Sec. 7. At the time of submitting his or her limited license renewal form to the board, each nurse-midwife shall submit a fee as provided in 848 IAC 1-1-14 and proof of current licensure as a registered nurse. A personal check, certified check, cashier's check, or money order shall be submitted to the health professions bureau with the renewal form and shall be made payable to the health professions bureau. (Indiana State Board of Nursing; 848 IAC 3-2-7; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2872; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 940)

848 IAC 3-2-8 Delinquent fee
Authority: IC 25-23-1-7
Affected: IC 25-23-1-1; IC 25-23-1-13.1
Sec. 8. In the event any nurse-midwife fails to complete the renewal process on or before October 31 of odd-numbered years, he or she shall be required to pay a delinquent fee to be determined by the board in addition to the fees prescribed in section 7 of this rule for each year that the limited license is delinquent. (Indiana State Board of Nursing; 848 IAC 3-2-8; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2873; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 940)
(6) Recognize the limits of individual knowledge and experience, and consult with or refer clients to other health care providers as appropriate.
(7) Retain professional accountability for any delegated intervention, and delegate interventions only as authorized by IC 25-23-1 and this title.
(8) Maintain current knowledge and skills in the practice of nurse-midwifery.
(9) Manage and provide health care services in the practice of nurse-midwifery.
(10) Provide individual and group counseling and teaching.
(11) Participate in periodic and joint evaluation of services rendered, including, but not limited to, the following:
   (A) Chart reviews.
   (B) Case reviews.
   (C) Client evaluations.
   (D) Outcome statistics.
(12) Conduct and apply research findings appropriate to the area of practice.
(13) Participate, when appropriate, in the joint review and revision of written guidelines involving the plan of care. 

848 IAC 3-4-1 Limitations of Rules

Sec. 1. The definitions in this rule apply throughout this article and 848 IAC 5. (Indiana State Board of Nursing; 848 IAC 4-1-1; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2874; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 940)

Rule 4. Limitations of Rules

848 IAC 3-4-1 Limitations of rules (Repealed)
Sec. 1. (Repealed by Indiana State Board of Nursing; filed Nov 21, 2001, 10:23 a.m.: 25 IR 1329)

Rule 5. Fees for Nurse-Midwives

848 IAC 3-5-1 Fees for nurse-midwives
Authority: IC 25-23-1-7
Affected: IC 25-23-1-1; IC 25-23-1-13.1
Sec. 1. (a) The application fee for limited licensure as a nurse-midwife shall be fifty dollars ($50).
   (b) The fee for renewal of a nurse-midwife limited license shall be fifty dollars ($50).
   (c) The penalty fee for late renewals is as established by the health professions bureau.
   (d) The fee for a duplicate nurse-midwife wall certificate shall be ten dollars ($10).
   (e) The fee for endorsement out of Indiana for a nurse-midwife shall be ten dollars ($10). (Indiana State Board of Nursing; 848 IAC 3-5-1; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2873; filed Dec 19, 1996, 10:00 a.m.: 20 IR 1123; readopted filed Jul 30, 2001, 2:07 p.m.: 24 IR 4237)

ARTICLE 4. ADVANCED PRACTICE NURSING AND PRESCRIPTIVE AUTHORITY FOR ADVANCED PRACTICE NURSING

Rule 1. Definitions

848 IAC 4-1-1 Applicability
Authority: IC 25-23-1-7
Affected: IC 25-23-1
practitioner by a national organization which requires a national certifying examination.

(3) Prior to the promulgation of this article, the following:
(A) A formal organized program of study and clinical experience which prepares the registered nurse to practice as a nurse practitioner.
(B) The required program of study at a time when there was no credentialing or certification process available in the specialty area of the program of study.
(b) “NP” means nurse practitioner and are the designated authorized initials to be used by the nurse practitioner. (Indiana State Board of Nursing; 848 IAC 4-1-4; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2874; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 940)

848 IAC 4-1-5 “Clinical nurse specialist” defined
Authority: IC 25-23-1-7
Affected: IC 25-23-1-1
Sec. 5. (a) “Clinical nurse specialist” means an advanced practice nurse who does the following:
(1) Meets the requirements of an advanced practice nurse as outlined in section 3 of this rule.
(2) Has completed a graduate program offered by a college or university accredited by the Commission on Recognition of Postsecondary Accreditation designed to train clinical nurse specialists which grants, at a minimum, a master's degree and which meets the requirements of section 6 of this rule.
(3) Provides advanced levels of client care and assists other health professionals in establishing and meeting health goals. Clinical nurse specialists collaborate and consult with other health care providers who may need assistance in dealing with complex client problems.
(b) “CNS” means clinical nurse specialist and are the designated authorized initials to be used by the clinical nurse specialist. (Indiana State Board of Nursing; 848 IAC 4-1-5; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2874; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 940)

848 IAC 4-1-6 “Formal organized program of study and clinical experience or the equivalent as determined by the board” defined
Authority: IC 25-23-1-7
Affected: IC 25-23-1-1
Sec. 6. “Formal organized program of study and clinical experience or the equivalent as determined by the board” means:
(1) a program offered by a college or university accredited by the Commission on Recognition of Postsecondary Accreditation that includes:
(A) instruction in the biological, behavioral, medical, and nursing sciences relevant to practice as an advanced practice nurse in a specified category;
(B) instruction in the legal, ethical, and professional responsibilities of advanced practice nursing; and
(C) supervised clinical practice of those skills used by the advanced practice nurse in a specialty role; or
(2) experience obtained in collaboration with a physician, prior to the promulgation of this article, which was required by a national organization as a prerequisite for a national certifying examination used to certify a registered nurse in a specialty area.
(Indiana State Board of Nursing; 848 IAC 4-1-6; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2875; readopted filed Nov 21, 2001, 10:23 a.m.: 25 IR 1329)

Rule 2. Competent Practice of Nurse Practitioners

848 IAC 4-2-1 Competent practice of nurse practitioners
Authority: IC 25-23-1-7
Affected: IC 25-23-1-19.4
Sec. 1. A nurse practitioner shall perform as an independent and interdependent member of the health team as defined in 848 IAC 2-1-3. The following are standards for each nurse practitioner:
(1) Assess clients by using advanced knowledge and skills to:
(A) identify abnormal conditions;
(B) diagnose health problems;
(C) develop and implement nursing treatment plans;
(D) evaluate patient outcomes; and
(E) collaborate with or refer to a practitioner, as defined in IC 25-23-1-19.4, in managing the plan of care.
(2) Use advanced knowledge and skills in teaching and guiding clients and other health team members.
(3) Use appropriate critical thinking skills to make independent decisions, commensurate with the autonomy, authority, and responsibility of a nurse practitioner.
(4) Function within the legal boundaries of their advanced practice area and shall have and utilize knowledge of the statutes and rules governing their advanced practice area, including the following:
(A) State and federal drug laws and regulations.
(B) State and federal confidentiality laws and regulations.
(C) State and federal medical records access laws.
(5) Consult and collaborate with other members of the health team as appropriate to provide reasonable client care, both acute and ongoing.
(6) Recognize the limits of individual knowledge and experience, and consult with or refer clients to other health care providers as appropriate.
(7) Retain professional accountability for any delegated intervention, and delegate interventions only as authorized by IC 25-23-1 and this title.
(8) Maintain current knowledge and skills in the nurse practitioner area.
(9) Conduct an assessment of clients and families which may include health history, family history, physical examination, and evaluation of health risk factors.
(10) Assess normal and abnormal findings obtained from the history, physical examination, and laboratory results.
(11) Evaluate clients and families regarding development, coping ability, and emotional and social well-being.
(12) Plan, implement, and evaluate care.
(13) Develop individualized teaching plans with each client based on health needs.
(14) Counsel individuals, families, and groups about health and illness and promote attention to wellness.
(15) Participate in periodic or joint evaluations of service rendered, including, but not limited to, the following:
(A) Chart reviews.
(B) Client evaluations.
(C) Outcome statistics.
(16) Conduct and apply research findings appropriate to the area of practice.
(17) Participate, when appropriate, in the joint review of the plan of care.
(Indiana State Board of Nursing; 848 IAC 4-2-1; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2875; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 940)
Rule 3. Competent Practice of Clinical Nurse Specialists

848 IAC 4-3-1 Competent practice of clinical nurse specialists
Authority: IC 25-23-1-7
Affected: IC 16-21; IC 25-23-1-1; IC 25-23-1-33
Sec. 1. A clinical nurse specialist shall perform as an independent and interdependent member of the health care team as defined in 848 IAC 2-1-3. The following are standards for each clinical nurse specialist:

1. Assess clients by using advanced knowledge and skills to:
   (A) identify abnormal conditions;
   (B) diagnose health problems;
   (C) develop and implement nursing treatment plans; and
   (D) evaluate patient outcomes.

2. Use advanced knowledge and skills in teaching and guiding clients and other health team members.

3. Use appropriate critical thinking skills to make independent decisions, commensurate with the autonomy, authority, and responsibility of the clinical nurse specialist.

4. Function within the legal boundaries of their advanced practice area and shall have and utilize knowledge of the statutes and rules governing their advanced practice areas, including the following:
   (A) State and federal drug laws and regulations.
   (B) State and federal confidentiality laws and regulations.
   (C) State and federal medical records access laws.

5. Consult and collaborate with other members of the health team as appropriate to provide reasonable client care.

6. Recognize the limits of individual knowledge and experience, and consult with or refer clients to other health care providers as appropriate.

7. Retain professional accountability for any delegated intervention, and delegate interventions only as authorized by IC 25-23-1 and this title.

8. Maintain current knowledge and skills in their clinical nurse specialist area.

9. Provide direct nursing care utilizing advanced scientific knowledge, nursing theory, and nursing skills in the assessment, planning, implementation, and evaluation of health and nursing care of individual clients.

10. Provide indirect nursing care through planning, guiding, evaluating, and directing nursing care delivered by nursing and ancillary personnel as authorized by IC 25-23-1 and this title.

11. Conduct nursing research, including methods of nursing intervention and healthcare in the area of specialization, and apply research findings appropriate to the area of practice.

12. Teach and counsel individuals or groups by utilizing communication skills and teaching or learning theories to increase knowledge or functioning of individuals or groups, nursing personnel, students, and other members of the health care team.

13. Serve as a consultant and as a resource, utilizing advanced health knowledge and skills, to those who are directly and indirectly involved in patient care.

14. Participate in periodic evaluation of services rendered, including, but not limited to, the following:
   (A) Chart reviews.
   (B) Case reviews.
   (C) Patient evaluations.
   (D) Outcome of case statistics.

ARTICLE 5. PRESCRIPTIVE AUTHORITY FOR ADVANCED PRACTICE NURSING

Rule 1. Prescriptive Authority

848 IAC 5-1-1 Initial authority to prescribe legend drugs
Authority: IC 25-23-1-7
Affected: IC 25-23-1
Sec. 1. (a) An advanced practice nurse may be authorized to prescribe legend drugs, including controlled substances, if the advanced practice nurse does the following:

1. Submits an application on a form prescribed by the board with the required fee, including, but not limited to, the following information:
   (A) Complete name, residence and office addresses with zip codes, and residence and business telephone numbers with area codes.
   (B) All names used by the applicant, explaining the reasons for any name change or use.
   (C) Date and place of birth.
   (D) Citizenship and visa status, if applicable.

2. Provide a complete list of all places of employment, including the following:
   (i) The names and addresses of employers.
   (ii) Dates of employment.
   (iii) Degrees obtained or received.

3. Whether the applicant has ever had any disciplinary action taken against the applicant's nursing license by the board or by the licensing agency of any other state or jurisdiction and the details and dates thereof.

4. A complete list of all places of employment, including the following:
   (i) The names and addresses of employers.
   (ii) The dates of each employment.
   (iii) Employment responsibilities held or performed that the applicant had since graduation from nursing school.

5. Whether the applicant is, or has been, addicted to any narcotic drug, alcohol, or other drugs.

6. Whether the applicant has been convicted of any violation of law relating to drug abuse, controlled substances, narcotic drugs, or any other drugs.

7. Whether the applicant has previously been licensed to practice nursing in any other state or jurisdiction and, if so, the following:
   (i) The names of such states or jurisdictions that previously licensed the applicant.
   (ii) The dates of such licensure.
   (iii) The license number.
(ii) The date of denial of such licensure.
(iii) The reasons relating thereto.
(L) A certified statement that the applicant has not been convicted of a criminal offense (excluding minor traffic violations) or a certified statement listing all criminal offenses of which the applicant has been convicted. This listing must include the following:
(i) The offense of which the applicant was convicted.
(ii) The court in which the applicant was convicted.
(iii) The cause number in which the applicant was convicted.
(M) All information in the application shall be submitted under oath or affirmation, subject to the penalties for perjury.
(2) Submits proof of holding an active, unrestricted:
(A) Indiana registered nurse license; or
(B) registered nurse license in another compact state and having filed a Multi-state Privilege Notification Form with the health professions bureau.
(3) Submits proof of having met the requirements of all applicable laws for practice as an advanced practice nurse in the state of Indiana.
(4) Submits proof of a baccalaureate or higher degree in nursing.
(5) If the applicant holds a baccalaureate degree only, submits proof of certification as a nurse practitioner or certified nurse-midwife by a national organization recognized by the board and which requires a national certifying examination.
(6) Submits proof of having successfully completed a graduate level pharmacology course consisting of at least two (2) semester hours of academic credit from a college or university accredited by the Commission on Recognition of Postsecondary Accreditation:
(A) within five (5) years of the date of application; or
(B) if the pharmacology course was completed more than five (5) years immediately preceding the date of filing the application, the applicant must submit proof of the following:
(i) Completing at least thirty (30) actual contact hours of continuing education during the two (2) years immediately preceding the date of the application, including a minimum of at least eight (8) actual contact hours of pharmacology, all of which must be approved by a nationally approved sponsor of continuing education for nurses.
(ii) Prescriptive experience in another jurisdiction within the five (5) years immediately preceding the date of the application.
(7) Submits proof of collaboration with a licensed practitioner in the form of a written practice agreement that sets forth the manner in which the advanced practice nurse and licensed practitioner will cooperate, coordinate, and consult with each other in the provision of health care to patients. Practice agreements shall be in writing and shall also set forth provisions for the type of collaboration between the advanced practice nurse and the licensed practitioner and the reasonable and timely review by the licensed practitioner of the prescribing practices of the advanced practice nurse. Specifically, the written practice agreement shall contain at least the following information:
(A) Complete names, home and business addresses, zip codes, and telephone numbers of the licensed practitioner and the advanced practice nurse.
(B) A list of all other offices or locations besides those listed in clause (A) where the licensed practitioner authorized the advanced practice nurse to prescribe.
(C) All specialty or board certifications of the licensed practitioner and the advanced practice nurse.
(D) The specific manner of collaboration between the licensed practitioner and the advanced practice nurse, including how the licensed practitioner and the advanced practice nurse will:
(i) work together;
(ii) share practice trends and responsibilities;
(iii) maintain geographic proximity; and
(iv) provide coverage during absence, incapacity, infirmity, or emergency by the licensed practitioner.
(E) A description of what limitation, if any, the licensed practitioner has placed on the advanced practice nurse’s prescriptive authority.
(F) A description of the time and manner of the licensed practitioner’s review of the advanced practice nurse’s prescribing practices. The description shall include provisions that the advanced practice nurse must submit documentation of the advanced practice nurse’s prescribing practices to the licensed practitioner within seven (7) days. Documentation of prescribing practices shall include, but not be limited to, at least a five percent (5%) random sampling of the charts and medications prescribed for patients.
(G) A list of all other written practice agreements of the licensed practitioner and the advanced practice nurse.
(H) The duration of the written practice agreement between the licensed practitioner and the advanced practice nurse.
(8) Written practice agreements for advanced practice nurses applying for prescriptive authority shall not be valid until prescriptive authority is granted by the board.
(b) When the board determines that the applicant has met the requirements under subsection (a), the board shall send written notification of authority to prescribe to the advanced practice nurse, including the identification number and designated authorized initials to be used by the advanced practice nurse.
(c) Advanced practice nurses who have been granted prescriptive authority will immediately notify the board in writing of any changes in, or termination of, written practice agreements, including any changes in the prescriptive authority of the collaborating licensed practitioner. Written practice agreements shall terminate automatically if the advanced practice nurse or licensed practitioner no longer has an active, unrestricted license.
(d) Advanced practice nurses wishing to prescribe controlled substances must obtain an Indiana controlled substances registration and a federal Drug Enforcement Administration registration. (Indiana State Board of Nursing; 848 IAC 5-1-1; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2676; readopted filed Nov 6, 2001, 4:18 p.m.: 25 IR 940; filed Dec 24, 2003, 10:45 a.m.: 27 IR 1571)

848 IAC 5-1-2 Prescribing legend drugs; use of forms (Repealed)
Sec. 3. (a) Prescriptive authority for the advanced practice nurse expires on October 31 in each odd-numbered year. Failure to renew the prescriptive authority on or before the expiration date will automatically render the authority invalid without any action by the board.

(b) A notice of expiration and instructions for renewal of the authority to prescribe legend drugs will be mailed in odd-numbered years with the renewal for registered nurse licensure.

(c) Applicants for renewal of the prescriptive authority shall pay a renewal fee in addition to the fee for renewal of the registered nurse license.

(d) The notice of expiration for renewal of the prescriptive authority shall be mailed to the last known address of the licensee. Failure to receive the application for renewal shall not relieve the licensee of the responsibility for renewing the registered nurse license and the authorization to prescribe by the renewal date.

(e) Applicants for renewal of prescriptive authority shall submit the following to the board along with the renewal form and fee:

1. Proof of at least thirty (30) actual contact hours of continuing education during the two (2) years immediately preceding renewal, including at least eight (8) actual contact hours of pharmacology, approved by a nationally approved sponsor of continuing education for nurses.

2. A current signed and dated written collaborative practice agreement that contains all of the information required under section 1 of this rule.

Rule 2. Limitations of Rules

848 IAC 5-2-1 Limitations of rules
Authority: IC 25-23-1-7
Affected: IC 25-23-1
Sec. 1. No written practice agreement shall be necessary unless the advanced practice nurse seeks prescriptive authority. (Indiana State Board of Nursing; 848 IAC 5-1-3; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2878; readopted filed Nov 21, 2001, 10:23 a.m.: 25 IR 1329)

Rule 3. Fees for Prescriptive Authority

848 IAC 5-3-1 Fees for prescriptive authority
Authority: IC 25-23-1-7
Affected: IC 25-23-1
Sec. 1. (a) The application fee for an advanced practice nurse to receive prescriptive authority shall be fifty dollars ($50).

(b) The fee for renewal of advanced practice nurse prescriptive authority shall be ten dollars ($10).

(c) The penalty fee for late renewals is as established by the health professions bureau.

(d) The fee for a duplicate wall certificate for advanced practice nurse prescriptive authority shall be ten dollars ($10).

(e) The fee for written verification of advanced practice nurse prescriptive authority shall be ten dollars ($10). (Indiana State Board of Nursing; 848 IAC 5-3-1; filed Jul 29, 1994, 5:00 p.m.: 17 IR 2879; filed Jun 6, 1996, 9:00 a.m.: 19 IR 3105; readopted filed Jul 30, 2001, 2:07 p.m.: 24 IR 4237)