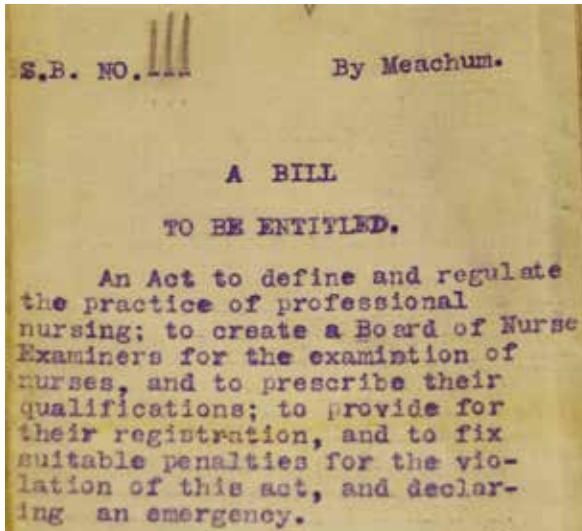


# TEXAS BOARD OF NURSING BULLETIN

VOLUME LXI - No. 3

July 2025



In this Issue: **The Evolution of Nursing Standards** - See Page 4  
**Prescription Medication Misuse and Abuse** - See page 8

## Three Bills Passed Amending NPA During 89<sup>th</sup> Texas Legislative Session



The 89<sup>th</sup> Regular Texas Legislative Session concluded on June 2, 2025. Three bills amending the **Nursing Practice Act (NPA)**(Chapter 301 of the Texas Occupations Code) were passed: **House Bill (HB) 879** by Representative James Frank relating to the licensing of certain military veterans as health care providers; **Senate Bill (SB) 25** by Senator Lois Kolkhorst relating to health and nutrition standards to promote healthy living; and **SB 920** by Senator Kevin Sparks relating to the administration of medication by open-enrollment charter schools, private schools, and school employees. HB 879, SB 25, and SB 920 were signed by Governor Greg Abbott and become effective September 1, 2025.

Text for the bills above may be viewed at [Texas Legislature Online](https://legis.texas.gov). To view the final text for these bills, enter the bill number in the search window on the site and select the text for the **Enrolled** version of each bill. Board Staff are currently reviewing all legislation passed during the 89<sup>th</sup> Legislative Session and will report on their findings during the July 2025 Board Meeting taking place July 17-18, 2025, in Agenda Item 1.3. A summary of bills passed relating to Nursing will be included in the October 2025 issue of the *Board of Nursing Bulletin*.

- \* **e-Notify**
- \* **Nurse License**
- \* **Verification**
- \* **Licensure**
- \* **Quick Confirm**

e-Notify provides free renewal reminders by email for all nurses enrolled in the program. Nursys is the only national database for verification of nurse licensure, discipline, and practice privileges for RNs, LPN/VNs, and APRNs licensed in participating jurisdictions, including all states in the Nurse Licensure Compact (NLC). Licensure Quick Confirm provides quick and easy licensure verification for nurses. Sign up today at:



[www.nursys.com](http://www.nursys.com)



### The Texas Board of Nursing

#### BOARD MEMBERS

##### Officers

Kathy Shipp, MSN, APRN, FNP  
President, representing Advanced Practice Nursing  
Lubbock

Allison Porter-Edwards, DrPH, MS, RN, CNE, CDDN, FAAN  
Vice-President, representing BSN Education  
Bellaire

##### Members

Elizabeth Adamson, DNP, DNI, MSN, MSN-Ed, RN, CPHIMS  
representing RN Practice  
Mission

Kathy Boswell, BSN, MS, RN  
representing ADN Education  
Mineral Wells

Manny Cavazos, JD, CPA  
representing Consumers  
Manor

Daryl Chambers, BBA  
representing Consumers  
Grand Prairie

Carol Kay Hawkins-Garcia, MSc, BSN, RN  
representing RN Practice  
San Antonio

Mazie M. Jamison, BA, MA  
representing Consumers  
Dallas

Kenneth D. "Ken" Johnson, BSN, RN  
representing LVN Education  
San Angelo

Mary Grace Landrum, MEd, BA  
representing Consumers  
Houston

Kathy Leader-Horn, LVN  
representing LVN Practice  
Granbury

Nancy Lewis, LVN  
representing LVN Practice  
Buchanan Dam

Dru Riddle, PhD, DNP, CRNA, FAAN  
representing APRN Practice  
Fort Worth

Melissa D. Schat, LVN  
representing LVN Practice  
Granbury

Rickey "Rick" Williams, AA  
representing Consumers  
Killeen

##### Executive Director

Kristin K. Benton, DNP, RN

The *Texas Board of Nursing Bulletin* is the official publication of the Texas Board of Nursing and is published four times a year: January, April, July, and October.

Published by:  
TEXAS BOARD OF NURSING  
VOLUME LVI - No. 3

Publication Office:  
1801 Congress Avenue, Suite 10-200  
Austin, Texas 78701-3944  
Phone: (512) 305-7400  
Fax: (512) 305-7401  
Publication Date: 7/2/2025



## Reviewed Reports:

- Five-Year Report on New Nursing Education Programs and Currently Active Proposals
- Changes in Approval Status of Programs with Sanctions
- Communication Activities with Nursing Education Programs

## Approved Reports from Survey Visits:

- Valley Grande Institute in Weslaco – Vocational Nursing Education Program
- Texas School of Health Sciences in Weslaco – Associate Degree Nursing Education Program
- St. Edwards University in Austin - Baccalaureate Degree Nursing Education Program
- ECPI University in San Antonio – Associate Degree Nursing Education Program
- Hallmark University in San Antonio – Vocational Nursing Education Program
- Palo Alto College in San Antonio – Associate Degree Nursing Education Program
- The Institute of Allied Healthcare in San Antonio – Vocational Nursing Education Program
- Howard College in San Angelo – Vocational Nursing Education Program
- University of Texas Permian Basin in Odessa – Baccalaureate Degree Nursing Education Program

## Approved Changes in Approval Status from Initial Approval to Full Approval:

- Denver College of Nursing in Houston – Baccalaureate Degree Nursing Education Program
- Fairfield University in Austin – Baccalaureate Degree Nursing Education Program

## Approved Changes in Approval Status from Full Approval with Warning to Full Approval:

- Concordia University in Austin – Baccalaureate Degree Nursing Education Program
- East Texas Baptist University in Marshall – Baccalaureate Degree Nursing Education Program
- Galveston College in Galveston – Associate Degree Nursing Education Program
- South Plains College – Levelland – Associate Degree Nursing Education Program
- South University in Round Rock – Baccalaureate Degree Nursing Education Program
- Texas State Technical College in Harlingen – Associate Nursing Education Program
- Vocational Nursing Institute in Houston – Vocational Nursing Education Program

## Approved Change in Approval Status from Initial with Warning to Full Approval

- Cybertex Institute of Technology in Austin – Vocational Nursing Education Program

## Approved Change in Approval Status from Initial Approval to Initial with Warning

- Sul Ross University in Alpine – Baccalaureate Degree Education Program

## Approved Changes in Approval Status from Full Approval with Warning to Conditional Approval

- Chamberlain College of Nursing in Pearland – Baccalaureate Degree Nursing Education Program
- University of Texas Permian Basin in Odessa – Baccalaureate Degree Nursing Education Program

## Approved Change in Approval Status from Initial Approval to Conditional Approval

- Lamson Institute of Technology in San Antonio – Vocational Nursing Education Program

## Approved Changes in Approval Status from Full Approval with Warning to Withdrawal of Approval

- Bell Tech Career Institute in Houston – Vocational Nursing Education Program

## Reviewed Reports of 2024 NCLEX Examination Pass Rates

- 2024 NCLEX-PN® Examination Pass Rates for Vocational Nursing Education Programs
- 2024 NCLEX-RN® Examination Pass Rates for Professional Nursing Education Programs

# The Evolution of Nursing Standards and Its Crucial Role in Modern Regulatory Practice

by Christine Riley, MSN, RN  
Nursing Consultant for Practice

A critical aspect of nursing history that continues to influence our approach to its professional regulation today is the implementation and enforcement of education standards for nursing. Prior to the 1880s, American nurses often learned nursing through apprenticeships – a nurse’s knowledge and skills was dependent on the person training them and their own capacity to learn (Lippert, 2025). Historical evidence shows that when nursing school graduates possess a solid foundation of nursing education, the public is better protected (Lippert, 2025).

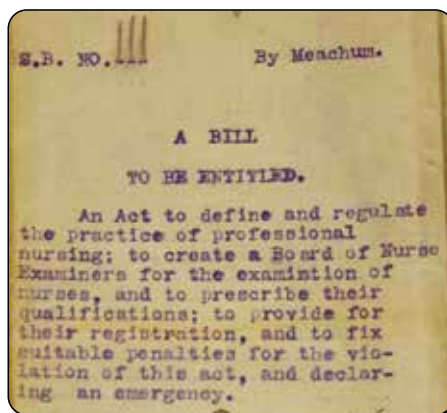
The modern era of formal nursing education began when Florence Nightingale established the Nightingale Training School for Nurses, which opened as part of St. Thomas Hospital in London in 1860 (Turkowski & Turkowski, 2024). This moment was significant because it laid the groundwork for hospital-based nursing programs, such as the nursing school started at the New England Hospital for Women and Children in 1872, and Texas John Sealy Hospital Training School for Nurses in 1890 (The University of Texas at Austin, 2025).



John Sealy Hospital Nurses, 1897

While these early nurse training programs had no officially recognized curricula in place, they crafted the first nurse training and education norms at that time and marked the beginning of standardizing nursing as a profession.

Nurse registration laws came before formal education standards were required, with North Carolina, New York, Virginia, and New Jersey being the first states to implement a Nursing Practice Act in 1903. Texas formally recognized professional nursing by passing the state’s first Nurses Registration Act in 1909.



Texas Senate Bill 111 was the Nurses Registration Act passed in 1909

These early laws created boards of nurse examiners and licensure exams, but registration was voluntary and the laws applied only to individuals using the “registered nurse” title. Therefore, anyone could call themselves a nurse, as long as they did not claim to be a *registered* nurse.

Trained nurses across the US began advocating for legal protections and standardized training, similar to those that physicians had in place. Concerns over inconsistent training, public confusion about qualifications, and the need for clear standards and definitions regarding nursing care, spurred calls for state regulation of nursing education, mandatory licensure, and standardized licensing exams.

A major advancement in Texas came with the passage of Senate Bill 40 in 1923, which granted the Board of Nurse Examiners authority to approve nursing education programs (Texas

Board of Nursing, 2013). This law required applicants for licensure to be graduates of an accredited school approved by the Board. By 1940, there were 45 accredited schools of nursing in Texas (Texas Board of Nursing, 2013).

Along with evolving education standards, licensure exams also evolved. The first exams contained written and practical components. By 1950, Texas was using parts of a written exam called the State Board Test Pool Examination (SBTPE) to evaluate prospective nurses, and by 1952, was using the full exam. Senate Bill 88 in 1959 expanded the Board’s authority to prescribe nursing curricula and grant accreditation (Texas Board of Nursing, 2013). In 1993, Texas introduced the *Differentiated Essential Competencies of Texas Graduates of Education Programs in Nursing*, a foundational framework still in use and regularly updated.



Initially, the Texas Board of Nurse Examiners (BNE) regulated registered nurses (RNs) and their education programs, while the Board of Vocational Nurse Examiners (BVNE), created in

continued on next page

## Evolution of Nursing Standards - continued from previous page

1951, regulated licensed vocational nurses (LVNs) and approved their education programs. These two entities merged in 2004, and the Texas Board of Nurse Examiners was officially renamed to the Texas Board of Nursing in 2007 (Texas Board of Nursing, 2013). Since then, the Texas Board of Nursing has regulated nursing education, practice, and licensure for both LVNs and RNs.

Today, Texas has over 130 approved professional nursing education programs, and 85 approved vocational nursing education programs (Texas Board of Nursing, 2025). The crafting of sustainable laws and rules enable regulatory agencies, including nursing regulatory boards, to respond to emergent situations – including fraud. One such situation being addressed by nursing regulatory boards today is Operation Nightingale – a large-scale, multistate coordinated law enforcement action launched in 2023 by the U.S. Department of Health and Human Services Office of Inspector General (HHS-OIG). This operation uncovered a scheme in which over 7,600 fraudulent nursing diplomas and transcripts were sold, enabling unqualified individuals to take the national nurse licensure exam and, in many cases, obtain a license (U.S. Department of Justice, 2024).



Operation Nightingale shocked nursing regulatory boards nationwide. Not only did the illegitimate nurses pose a threat to public safety through practicing nursing without being fully educated as nurses, but the scheme exposed vulnerabilities in how education credentials are verified, especially across state lines. In Texas and other states, Operation Nightingale tested the strength of current education require-

ments, and the legal tools available to enforce existing laws and rules.

In response, the Texas Board of Nursing is working with other nursing regulatory bodies, nursing education providers, accreditation bodies and authorities to detect, investigate and act on cases of fraudulent licensure. As of August 2024, the Board reviewed over 670 licensees and applicants, which resulted in 181 investigations. In accordance with the grounds for disciplinary action outlined in the Nursing Practice Act, the Board can file formal charges and take disciplinary action, including denial or revocation of a license, if a nurse obtained the license through fraud or deceit [Tex. Occ. Code 301.452(b), 301.453, 2023].

The Texas Board of Nursing regularly shares updates and information with the public, including nurse employers, on the Board's website and *The Bulletin*. This information includes press releases, general information on Operation Nightingale, and regularly updated lists of schools and individuals involved in the scheme.

The scheme continues to highlight the need for strong and enforceable standardized education requirements for nurse licensure. The history and evolution of nursing education – from hospital-based programs to accredited institutions – underscore the importance of nursing regulation in protecting the public and highlights the collective responsibility of regulators, educators, and employers in upholding the integrity of the profession.

### References

Lippert, A. (Spring 2025). Experts in humanity: the history of nursing regulation. Online course. National Council of State Boards of Nursing.

Texas Board of Nursing. (2013). *History – Texas Board of Nursing*. <https://www.bon.texas.gov/history.asp.html>

Texas Board of Nursing. (2025) 85. *Texas Approved Vocational Nursing Education Programs*. [https://www.bon.texas.gov/pdfs/education\\_pdfs/education\\_programs/ApprovedVNSchools.pdf](https://www.bon.texas.gov/pdfs/education_pdfs/education_programs/ApprovedVNSchools.pdf)

Texas Board of Nursing. (2025). *Texas Approved Professional Nursing Education Programs*. [https://www.bon.texas.gov/pdfs/education\\_pdfs/education\\_programs/ApprovedRNSchools.pdf](https://www.bon.texas.gov/pdfs/education_pdfs/education_programs/ApprovedRNSchools.pdf)

Texas Occupations Code § 301.452(b). (2023). Retrieved from <https://statutes.capitol.texas.gov/Docs/OC/htm/OC.301.htm>

Texas Occupations Code § 301.453. (2023). Retrieved from <https://statutes.capitol.texas.gov/Docs/OC/htm/OC.301.htm>

The University of Texas at Austin. (2025). *History*. <https://nursing.utexas.edu/about/history>

Turkowski, Y. & Turkowski, V. (2024). *Florence Nightingale (1820-1910): The Founder of Modern Nursing*. Cureus. <https://www.cureus.com/articles/269178-florence-nightingale-1820-1910-the-founder-of-modern-nursing.pdf>

U.S. Department of Justice. (2024, April 3). *Three defendants sentenced in fraudulent nursing diploma scheme*. <https://www.justice.gov/usao-sdfl/pr/three-defendants-sentenced-fraudulent-nursing-diploma-scheme>

### Did You Know?

**I am graduating from a nursing program this year. Can I take the NCLEX in a different state?**

The NCLEX can be taken in any state convenient to you. The results will be directed to the board of nursing where you applied for your authorization to test (ATT) and licensure. If you are seeking a multistate license and reside in a compact state, you should apply for a license in the state where you intend to legally reside and/or practice.

## Board Approves the Occupational English Test for International Nursing Applicants

At its regularly scheduled open meeting on April 24, 2025, the Texas Board of Nursing (Board) voted to approve the Occupational English Test (OET – Nursing) as an acceptable measure of English language proficiency for internationally educated candidates applying to take the NCLEX® exam for licensure by examination in Texas.

This decision reflects the Board’s ongoing commitment to ensuring that all nursing applicants possess the necessary communication skills to provide safe and effective patient care. Following a review of documentation and a public discussion, the Board determined that the OET – Nursing exam meets the standard for assessing English proficiency, as outlined in 22 Texas Administrative Code §217.4.

The Board’s approval of the OET – Nursing is subject to the following conditions:

Applicants must achieve a minimum score of 300 in each of the four subtests: Reading, Writing, Listening, and Speaking.

Only tests taken at official testing centers (either paper-based or computer-based) will be accepted.

Remotely proctored exams will not be accepted.

All required passing scores must be earned during a single test administration.

This addition provides internationally educated candidates with a new, health-care-specific option for demonstrating English proficiency as part of the licensure process in Texas.

For more information on approved English proficiency exams and licensure requirements, please visit the Texas Board of Nursing [website](#):

### Background on OET-Nursing

The Occupational English Test (OET) is an international English language proficiency exam specifically designed for healthcare professionals. OET assesses the English language skills of healthcare professionals in four areas: Reading, Writing, Listening, and Speaking. The test materials are designed to reflect real workplace tasks and scenarios, making it relevant for professionals in the healthcare sector. For more information about the OET, including test dates and preparation materials, visit the official [website](#)



## Advanced Practice Registered Nurse Question and Answer

**Question:** I am an Advanced Practice Registered Nurse (APRN) licensed in a specific role and population focus. My employer has asked me to start performing a new procedure and I want to make sure I am practicing within my scope of practice. Is this procedure within my scope of practice?

**Answer:** The Texas Nursing Practice Act (NPA) and Texas Board of Nursing (BON or Board) Rules and Regulations are written broadly so all nurses can apply them in various practice settings across the State. Because each nurse has a different background, knowledge, and level of competence, the Board does not have an all-purpose list of tasks that every nurse can or cannot perform, and it is up to each individual nurse to use sound judgment when deciding whether or not to perform any particular procedure or act.

APRN scope of practice is not setting specific; rather, it is determined by a patient’s condition and needs at the time services are provided. The Board addresses APRN scope of practice in **Board Rule 221.12**, and the Core Standards for Advanced Practice found in **Board Rule 221.13** further clarify that APRNs must function within the advanced role and specialty appropriate to their educational preparation [**Board Rule 221.13(b)**]. **Board Rule 221.12(c)(5)** includes factors the Board will consider when an APRN completes additional training. The Board does not recommend a single method for pursuing a new skill as appropriate training varies based on the specific activity and the individual APRN’s background and competence. What is appropriate for one APRN may not be for another, even with the same licensure title.

It is also important that APRNs maintain records of all training completed as well as evidence of verification of competence to perform new patient care activities. If an APRN is ever required to defend their practice for any reason, they will likely be required to provide documentation of appropriate education and training relating to the services that were provided.

In the best interest of patients and to ensure sound decision-making and quality nursing care, nurses should stay informed about current evidence-based practice standards or guidelines applicable to their area of practice. Evidence-based practice guidelines and/or national nursing organizations can help nurses determine the best practices and standards in a particular area of nursing practice. National professional specialty and advanced practice nursing organizations offer APRNs the broadest parameters for professional scopes of practice and are a vital resource for making a scope of practice determination.

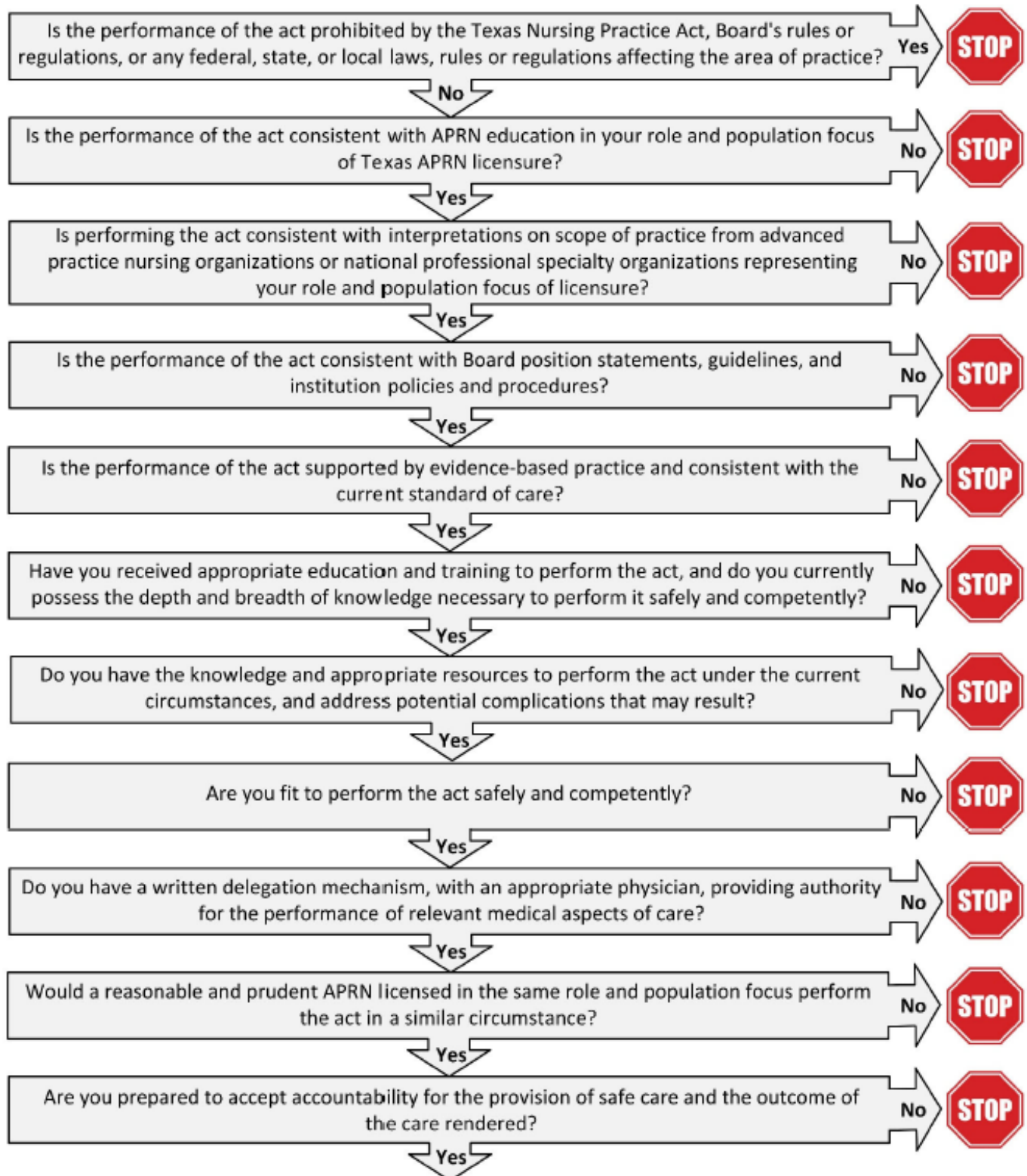
The **APRN Scope of Practice Decision-Making Model** found on the BON website was developed by Board Staff to assist APRNs in making scope of practice determinations. This step-by-step tool is designed to assist an individual nurse in determining whether a procedure or act is within their scope of practice. In the model APRNs are asked reflective questions, and depending on how they answer, they are directed to continue through the model or stop. At any point, if an APRN reaches a Stop Sign, they should consider the act in question beyond (or outside) their scope of practice.

You can find the **APRN Scope of Practice Decision-Making Model** on the BON [website](#). continued on next page



# Texas Board of Nursing APRN Scope of Practice Decision-Making Model

To begin, identify or clarify the act (activity, task, procedure, or intervention) under consideration.



**You may proceed with performance of the act in accordance with the minimum standards of practice and the prevailing standards of care.**

# Prescription Medication Misuse and Abuse: APRN Prescribing Responsibilities



Prescription medications are drugs that require authorization from a qualified provider prior to the medication being dispensed to a patient. Prescription medications are indicated for a variety of medical conditions, but even when deemed medically necessary and legitimately ordered, nurses must remain vigilant to identify signs for prescription medication misuse and abuse. Nurses play an essential role in early identification of concerns for misuse and abuse that if unaddressed may lead to serious complications.

Prescription medication misuse occurs when medication is taken in a manner differently than prescribed. Examples of misuse include taking a medication in excess frequency or dosage, taking medication for an unapproved indication, or taking medication prescribed for another person. Drug abuse occurs when a drug is taken to experience a high and may occur with medication obtained legally or illicit drugs such as cocaine, methamphetamine, or heroin. Drug abuse may involve combining medication with other drugs or alcohol to produce an intoxicating effect, or the modification of a medication for administration via a different route to influence bioavailability (Prescriptions and Opioids, 2023). Everyone, regardless of health status, experience, or knowledge, is at serious risk of harm or death from the misuse or abuse of prescription medication.

Controlled drugs or substances are those whose use and distribution are tightly controlled because of their abuse potential and risk. Controlled substances are rated in the order of their abuse risk and placed in Schedules by the Federal Drug Enforcement Administration (DEA). Drugs with the highest risk of abuse, and potential for psychological and/or physical dependence, are placed in Schedule I, and those with the lowest abuse potential are placed in Schedule V (Controlled

Drugs, n.d.). Four types of drugs are known to have significant addictive potential and are prevalent in health care provider disciplinary cases involving non-therapeutic prescribing: opioids, benzodiazepines, barbiturates, and carisoprodol/Soma (Kale, 2019).

## Safe Prescribing Determinations

Inappropriate or non-therapeutic prescribing practices have significant public health implications. Nurses are an integral part of the health care system and are important patient safety advocates. The duty of a nurse is to ensure the safety of their patients and to act in their best interest. Nurses have the training and keen assessment skills to identify subtle signs that may indicate at-risk behavior. Whenever concerns arise, it is incumbent upon all nurses to seek information, support, and resources to inform their practice decisions.

Prior to ordering, prescribing, administering, or dispensing medication an appropriate assessment must be performed and documented (**Board Rule 222.10**). It is important for all nurses to know the rationale for and the potential effects of medications and treatments prior to initiating, continuing, or modifying medication therapy. When making a prescribing determination APRNs must consider the appropriate use of prescription medications and screening options to monitor patients for therapy adherence, potential diversion, and drug abuse.<sup>3</sup> With every prescribing determination APRNs must ensure that they are ordering and prescribing medication for evidence-based therapeutic or prophylactic purposes consistent with the standard of care.

Evidence-based practice is a conscientious, problem-solving approach to clinical practice that incorporates the best evidence from well-designed studies, patient values and prefer-

ences, and a clinician's expertise in making decisions that individualize a patient's care (Stevens, 2013). Nurses should perform a critical appraisal of available research to determine the validity and applicability of the recommendations made. Research findings from studies developed using rigorous methodology can be integrated with a practitioner's clinical experience and individual patient values to make sound clinical decisions. Information from non-reputable sources should be reviewed further and verified.

Standard of care is based on the conclusions of evidence-based research that describe a range of generally accepted approaches for the diagnosis, management, or prevention of specific diseases or conditions that prudent practitioners may take when managing a patient's care under similar circumstances. Standard of care is not defined by how a single practitioner practices in a particular clinic or practice area. General principles for safe medication use apply to all medications, but there are unique additional considerations for controlled substances. It is important for all nurses to know and recognize the challenges associated with controlled substances to be certain they are in compliance with not only Texas Board of Nursing laws, rules, and regulations, but also those within the purview of other regulatory agencies such as the Texas State Board of Pharmacy and the US Drug Enforcement Administration (DEA).

## Regulatory Compliance

No changes to APRN scope of practice regarding controlled substance ordering or prescribing occurred as a result of the 89th regular legislative session. Authority for Texas APRNs to order and prescribe controlled substances is detailed in **Board Rule 222.8**. According to this rule, APRNs with prescriptive authority issued by

continued on next page

# Prescription Medication - cont. from prev. page

the BON and DEA registration may prescribe controlled substances, as permitted by the rule, pursuant to Texas physician delegation. APRNs may prescribe no more than a 90-day supply of controlled substances. If a refill of the controlled substances is required after 90 days, the APRN must consult with the delegating physician and document that delegation in the patient's medical record. Additionally, prescriptions for substances in Schedules III through V shall not be authorized for a child less than two years of age prior to consultation with the delegating physician and notation of the consultation in the patient's chart.

The limitation for no more than a 90-day supply of controlled substances applies regardless of the identity of the initial prescriber or the last prescriber. For example, if a patient is new to an APRN and the APRN has never ordered an identified controlled substance for the patient before, but the patient has been taking the medication for at least 90 days, then discussion and consultation with the delegating physician is required prior to continuing the medication therapy and issuing the prescription for that controlled substance. It is acceptable for the APRN to document the name of the physician, a synopsis of the discussion and the date on which the discussion took place.

Texas law places limitations on authority to delegate Schedule II ordering and prescribing to APRNs. **Board Rule 222.8(c)** clarifies that APRNs are only authorized to order or prescribe Schedule II controlled substances for patients who:

1. Have been admitted to the hospital with an intended length of stay of 24 hours or greater; or
2. Are receiving services in the hospital ED; or
3. Have executed a written certification of terminal illness and are receiving services from a quali-

fied hospice provider. The schedule II substance must be part of the plan of care.

**There are no other circumstances under which a physician may delegate authority for an APRN to prescribe Schedule II substances.** If an APRN lacks delegated authority to order and prescribe Schedule II substances but believes it may be appropriate for a patient to be treated with a Schedule II substance, then the APRN should advocate for the patient as appropriate. It is not prohibited for APRNs to communicate a recommendation to a physician to consider treatment with a Schedule II substance. The determination to prescribe would be at the physician's discretion, and the prescription itself would be issued by the physician if they choose to do so.

**Board Rule 228.2** addresses Texas requirements for reviewing the Texas Prescription Monitoring Program (PMP). The PMP collects and monitors prescription data for all controlled substances dispensed by pharmacies in Texas or to Texas residents from a pharmacy that is located in another state. The PMP also allows providers to query their own prescribing history. Prior to prescribing any controlled substance for patients being treated for pain APRNs should access and review the PMP before prescribing opioids, benzodiazepines, barbiturates, or carisoprodol. Documentation that the review of the PMP occurred and rationale for prescribing a controlled substance must be included in the patient's medical record. There are only two exceptions to this requirement, APRNs must comply unless:

1. The patient has been diagnosed with cancer, or the patient is receiving hospice care; and
2. The APRN clearly notes on the prescription or in the electronic prescription record that the patient was diagnosed with cancer

or is receiving hospice care, as applicable.

Mandatory checks of the Texas PMP are required for both in-person and telemedicine practice. Likewise, for telemedicine care all limitations related to prescribing controlled substances found in **Board Rule 222.8** are applicable. The standard of care with patient assessments, diagnoses, treatment plans, and documentation must be the same, regardless of whether patient care and management is provided via telemedicine or in-person. Additional guidance can be found in **Board Rule 217.24**, that addresses telemedicine medical service prescriptions. There is specific reference in this rule to limitations on the treatment of chronic pain using telecommunication technology. When prescribing controlled substances via telehealth nurses should exercise reasonable caution given the risk for abuse of controlled substances.

To improve safety and security in the prescribing process House Bill 2174 was passed during the 86th regular legislative session. Effective January 1, 2021, all prescriptions for controlled substances must be issued electronically unless an exception outlined in the Texas Health and Safety Code §481.0755 applies, or a waiver has been issued to an APRN by the Texas Board of Nursing. Waivers may be considered for circumstances necessitating a waiver including economic hardship, technological limitations not reasonably within the nurses control, or other exceptional circumstances. Waivers may be granted for a period of one year based on the circumstances described in a waiver application. When prescribing for patients when the approved limitation or an exception does not exist, APRNs are responsible for complying with Texas law for e-prescribing controlled substances.

The 2023 Texas Legislature approved funding for the Texas State Board of Pharmacy to offer statewide inte-

continued on next page

# Prescription Medication - cont. from prev. page

gration of the PMP into approved Electronic Health Records (EHR) and Pharmacy Management Systems (PMS) and NarxCare access at no cost to healthcare providers. For additional information it is recommended to contact and review resources from the [Texas Board of Pharmacy](#).

## Identify and Meet Patient Needs

Empathy and trust are foundational for building relationships and providing high quality patient centered care. Nurses must balance being cautious and credulous with the use of prescription medication. While most people seeking care do so for legitimate reasons, not every person seeking to interact with a nurse is genuine. Patients desiring to misuse or abuse medication may suffer from a drug related condition which clouds their judgment and pushes them to seek prescription medications when doing so may be inappropriate and potentially self-destructive. Conversely, significant hesitancy by providers can negatively impact patients who are seeking medically necessary care. Patients may suffer from a variety of drug related conditions including:

- **Addiction**

Addiction is a chronic disease characterized by drug seeking behavior and drug use that is compulsive and difficult to control, despite harmful consequences. The initial decision to take drugs may be voluntary for most people, but repeated drug use can lead to brain changes that interfere with their self-control and ability to resist intense urges to take medications. These brain changes can be persistent, which is why addiction is considered a “relapsing” disease. Following recovery, individuals with a history of addiction are at increased risk for returning to misusing prescription medication even after years of sobriety (NIDA, 2018).

- **Pseudo-addiction**

Often mistaken for addiction, pseudo-addiction involves drug-seeking behavior that is consistent with addiction, but the behavior results from inadequate treatment of a patient’s pain. Once the patient’s pain is adequately treated, the drug seeking behaviors and potential prescription drug misuse may stop. Drug seeking behaviors related to pseudo-addiction may stem from a lack of trust that results in a patient engaging in behaviors to prove their pain is real to receive adequate treatment (Greene & Chambers, 2015).

- **Tolerance**

An alteration of the body’s responsiveness to alcohol or other medications (including opioids) such that higher doses are required to produce the same effect achieved during initial use. Tolerance can decrease if an individual takes a break or stops using medication. Individuals with a history of tolerance are at an increased risk for overdose if they resume misusing prescription medication due to a change in tolerance that may not be anticipated (Medications, 2021).

- **Physical dependence**

Physical dependence is an expected and ordinary biological consequence of medication use, often occurring when certain medications are taken for weeks or years. The adaptations resulting from continued medication use cause withdrawal signs and symptoms when a drug is discontinued. Physical dependence may be characterized by motivation to continue using a drug to avoid withdrawal. The adaptations associated with drug withdrawal are dissimilar from the adaptations that result in addiction, which result in a loss of self-control, and intense urges

to take a medication even at the expense of adverse consequences (Szalavitz et al, 2021).

Addiction, pseudo-addiction, tolerance, and physical dependence are separate and distinct conditions, but they may occur concurrently. Nurses are in a unique position to recognize indications of these conditions in their early stages and take appropriate action to prevent more serious complications. By being attuned to behaviors that may require further inquiry nurses can identify and prevent drug misuse or abuse. Some red flag behaviors include but are not limited to:

1. Unexplained signs/behaviors such as nervous behaviors, slurred speech, excessive talkativeness, unsteady gait, pinpoint pupils, or perspiration.
2. Requesting a specific drug or class of drugs. Patients may utilize street names for requested drugs and may report allergic reactions or intolerances to drugs other than those requested.
3. Requesting dosing and frequency be initiated above standard recommendations and may be dismissive of potential adverse reactions.
4. Requesting medication be administered concurrently with other medications as a cocktail that is known to create a high.
5. Providing inconsistent stories, and often unusual or changing stories, to support or drive the conversation to treatment of their complaints with a controlled substance.
6. Reluctance to cooperate with any aspect of a treatment plan, other than taking a medication. May refuse physical examination or tests.

continued on next page

# Prescription Medication - cont. from prev. page

7. Unexplained degree of knowledge of available treatment options for the differential associated with the chief complaint. This may include an exaggerated, feigned, or “textbook” presentation for a particular condition.
8. Showing up without an appointment and describing their situation as emergent, or at least being unusually demanding, insistent, or hurried.
9. Unexpected/unexplainable results on confirmatory urine drug testing
10. Pharmacy or PMP records indicate early refills on controlled substances, and/or multiple prescribers of similar drugs for a person (Texas Board of Pharmacy, n.d.).
1. Being unwilling/unable to give the name of the referring or previous treating provider or practice.
2. Being unable/unwilling to provide previous medical records (e.g., previous clinic burned down).
3. Providing records that appear incomplete, edited, or uncharacteristic of those created by a healthcare professional.
4. Unexplained geographical anomalies, such as great distances between the prescriber, a patient’s address, and the requested pharmacy.
5. Requesting that a prescription for a controlled substance be hand written rather than sent electronically (Texas Board of Pharmacy, n.d.).

Nurses must be detail oriented to spot subtle clues that could indicate at-risk behaviors. Patients may employ a variety of strategies to make requests for prescription medication seem legitimate. All nurses should seek relevant records and information to inform their decision making and validate information provided that appears incomplete or shows signs of deception. Patients and other healthcare providers may make requests, or demands, but all APRNs should recognize that any decision to order, prescribe, administer, or dispense a drug is theirs to make.

Nurses shouldn’t avoid, or discount, performing their own assessment. Collaboration with a patient, other healthcare team members, and others is a standard of nursing practice and is an expectation. By ensuring due diligence prior to ordering, prescribing, administering, or dispensing a medication, APRNs can prevent misuse and abuse of prescription medication, and ensure patients receive medically necessary treatment to meet their needs. Some red flags related to potential fraudulent prescription patterns include but are not limited to:

## Considerations for Pain Management

When assessing and treating patients for pain, it is important for nurses to recognize that the overarching goal of pain management is to treat the patient’s pain in a manner that provides therapeutic benefit, rather than unnecessary risk or harm, to the patient. A patient’s overall health must be considered, including their level of physical function as well as psychological, social and work-related factors. Treatment plans must be supported by evidence-based research and within the current standard of care for the patient’s condition. APRNs diagnosing and treating a patient’s pain must be cautious to ensure that they are treating the patient’s condition and not only the patient’s symptoms.<sup>3</sup>

APRNs providing pain management services should review **Board Rule 228.1** which outlines standards of practice in pain management. The standards emphasize essential considerations to using sound clinical judgment in the specialty of pain management. At a minimum APRNs must ensure a current and complete

assessment, treatment plan, informed consent, and medical record. Ongoing monitoring of the pain management treatment plan must occur at reasonable intervals, and the modification or continuation of the plan must be based on an evaluation of progress towards treatment goals. The standards outlined in **Board Rule 228.1** should be read in their entirety and may be utilized as a resource to develop practice setting policy and procedures.

Consultation and referral are important considerations when providing care to patients who are experiencing pain. Pain has a physical component as well as a psychological component, and both must be addressed appropriately. Patients who are at risk for or who have known histories of substance use disorder are likely to require consultation and possible referral to providers with expertise in addictionology. Likewise, patients with co-existing psychological and/or psychiatric disorders will require consultation and possible referral to an expert in the treatment of these disorders or conditions.<sup>3</sup>

Cautionary reports and warnings issued by the FDA are also important considerations when considering use of prescription medication. For example, the FDA issued a black box warning regarding issues such as respiratory depression, sleep apnea and even death when taking opioids alongside benzodiazepines or other central nervous system depressants, including alcohol. APRNs have a duty to consider these and other risks, and must order, prescribe, and administer these drugs judiciously.

National guidelines for safe prescribing should be reviewed and incorporated into practice. Relevant guidelines and related resources may come from government agencies like the U.S Department of Health and Human Services, the Center for Disease Control and Prevention, and the DEA. Other sources include professional as-

continued on next page

# Prescription Medication - cont. from prev. page

sociations or organizations which may offer practice-setting specific guidance and resources related to evidence based research and standard of care. Examples include the American Academy of Family Physicians and American Association of Nurse Practitioners.

Nurses are an integral part of the health care system and are important patient safety advocates. Patients rely on nurses to act rationally and use appropriate clinical reasoning and judgement when making decisions that could affect patient health and wellbeing. By remaining vigilant of concerns associated with drug misuse and abuse nurses can protect their patients and their practice.

## References

Controlled Drugs. Texas State Board of Pharmacy. (n.d.). <https://www.pharmacy.texas.gov/consumer/broch2.asp>

Greene, M. S., & Chambers, R. A. (2015). Pseudoaddiction: Fact or Fiction? An Investigation of the Medical Literature. *Current addiction reports*, 2(4), 310–317. <https://doi.org/10.1007/s40429-015-0074-7>

Kale, N. (2019). Urine Drug Testing - Ordering and Interpretation. *American Family Physician*, 99(1), 33–39.

Medications for Opioid Use Disorder For Healthcare and Addiction Professionals, Policymakers, Patients, and Families. Substance Abuse and Mental Health Services Administration. (2021). <https://library.samhsa.gov/sites/default/files/pep21-02-01-002.pdf>

NIDA. (2018). Understanding Drug Use and Addiction Drug Facts. Retrieved from <https://nida.nih.gov/publications/drugfacts/understanding-drug-use-addiction>

Prescriptions and Opioids. Substance Abuse and Mental Health Services Administration. (2023). <https://www.samhsa.gov/substance-use/learn/prescriptions-opioids>

Stevens, K. R. (2013). The impact of evidence-based practice in nursing and the next big ideas. *The Online Journal of Issues in Nursing*, 18(2), 1-12.

Szalavitz, M., Rigg, K. K., & Wakeman, S. E. (2021). Drug dependence is not addiction—and it matters. *Annals of Medicine*, 53(1), 1989–1992. <https://doi.org/10.1080/07853890.2021.1995623>

Texas Board of Pharmacy. (n.d.). Corresponding Responsibility – A Shared Obligation. Texas Board of Pharmacy Abuse & Misuse of Prescription Drugs. [https://www.pharmacy.texas.gov/files\\_pdf/Corresponding\\_Responsibility\\_Brochure.pdf](https://www.pharmacy.texas.gov/files_pdf/Corresponding_Responsibility_Brochure.pdf)

## Poison Control and Prevention: What Texas Nurses Should Know

The Texas Nursing Practice Act (NPA) requires the Board of Nursing to provide license holders with information about poison control centers (Sec. 301.1582). As front-line healthcare providers, nurses play a vital role in poison prevention, emergency response, and public education.

According to the Health Resources & Services Administration (HRSA), there are 55 poison centers across the United States. Texas is served by the Texas Poison Center Network (TPCN), a system of six regional poison centers that support both the public and healthcare professionals.

Services Offered by Texas Poison Centers:

- 24/7 emergency guidance for poisoning incidents—many of which can be managed over the phone, avoiding unne-

cessary 911 calls or emergency room visits.

- Clinical consultation for health care providers regarding toxic exposures, medication errors, and treatment recommendations.
- Poison prevention education and public health outreach materials.
- Real-time surveillance to detect and respond to emerging public health threats (e.g., contaminated products, chemical spills).
- Free, confidential services with interpretation available in over 100 languages.

What to Do in a Poison Emergency:

- Call the Poison Help line at 1-800-222-1222—you'll be routed to your regional center.

- Call 911 immediately if the individual has collapsed, is having a seizure, has trouble breathing, or is unresponsive.

Prompt recognition and use of poison control services can improve patient outcomes, reduce unnecessary healthcare utilization, and support evidence-based decision-making. Nurses can also serve as educators, sharing poison prevention strategies with patients, families, and communities.

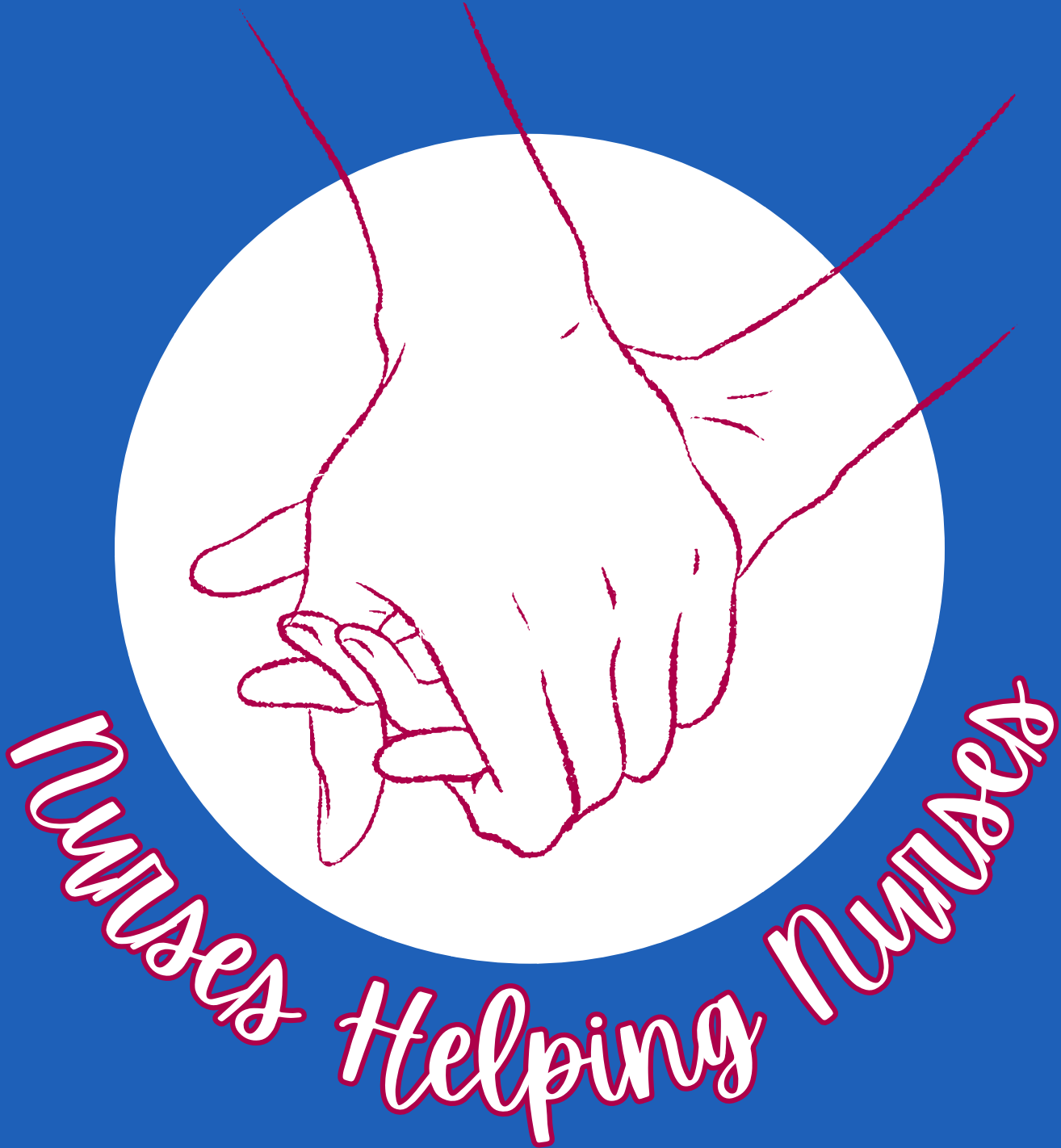
Resources:

- **Poison Centers** - Health Resources & Services Administration (HRSA)
- **Poison Control** - Texas Poison Center Network (TPCN)

Apply to Be an  
**NCLEX**<sup>®</sup>

Item Writer or Reviewer Today

**Submit a Volunteer Application**



Become a Peer Support Partner with TPAPN today  
and help fellow Texas nurses!



<http://texasnurses.org/mpage/TPAPN-advocates>



A  
Passion  
to Help  
Nurses  
Heal

## Upcoming TPAPN Educational Opportunities

The Texas Peer Assistance Program for Nurses (TPAPN) believes in helping support positive outcomes for nurses and their patients by providing early identification, support, monitoring, accountability, and advocacy to Texas nurses who have an identified substance use or mental health condition or related incident, so they may continue to practice nursing safely. The TPAPN website ([www.tpapn.org](http://www.tpapn.org)) has more information about the TPAPN program.

The Peer Support Partner is a volunteer nurse who provides peer support, guidance, encouragement, and more, to nurses participating in TPAPN. The program is looking for more Peer Support Partners. TPAPN has launched on-demand education courses and has live virtual courses as well. TPAPN supports current and prospective peer support partners through networking events that will be listed on the TPAPN website. On demand courses including topics such as *Addiction, Mental Health Conditions, Motivational Interviewing, & Person-Centered Care* are accessible by following the directions below:

1. Go To <https://www.texasnurses.org/>

2. Go to the Professional Development tab and click *Get CNE*
3. Go to *Categories* and select *TPAPN On Demand*, where you will see a list of available options.
4. Select *Register*, if you are not a TNA member, you can create a non-member account to login
5. Watch the course, then get your certificate.

Registration and more information about the upcoming virtual live courses are located on the TPAPN webpage ([www.tpapn.org](http://www.tpapn.org)). The upcoming scheduled events include:

- **Peer Support Partner Information Sessions:**

- July 23
- August 12
- September 17

- **The Role of the Peer Support Partner:**

- July 16
- July 29
- August 19
- September 16

- **TPAPN Lunch & Learn:**
  - September 10th

The TPAPN website has a *request speaker* form if you are interested in a presentation at your facility or school related to the TPAPN program and resources.

Conditions such as substance use or mental health, can potentially impact nursing practice. A nurse with such a condition is encouraged to self-refer to TPAPN *prior* to the condition impacting nursing practice. Any person may refer a nurse to TPAPN if the condition has not impacted nursing practice; however, persons mandated to report to the Board of Nursing (BON or Board), such as an employer, a nurse, or a nursing peer review committee, are required to report the nurse to the BON if they believe there has been a nursing practice violation.

The TPAPN referral form is on the TPAPN website. The Board website contains links to file a complaint online under Discipline & Complaints – **How to File a Complaint.**

# NOTICE OF DISCIPLINARY ACTION

The following nurses had disciplinary action taken against their licenses through a Board order containing public information about the nurse's disciplinary action. While every effort is made to ensure the accuracy of this information, the Board's licensure verification system should be utilized for verification. You can obtain information about these disciplinary actions from the Board's website, [www.bon.texas.gov](http://www.bon.texas.gov), using the verification look-up under Licensure or under the disciplinary action section of Discipline & Complaints. Under Licensure, select Verification, then click on the applicable license type; Discipline & Complaints, select Disciplinary Action, then select individual newsletter date. Additionally, you can send your written request to the Texas Board of Nursing, Enforcement Division, 1801 Congress Avenue, Suite 10-200, Austin, Texas 78701.

| Name                      | License Numbers                       | Discipline                                   | Action Date | Name                          | License Numbers         | Discipline                           | Action Date |
|---------------------------|---------------------------------------|--|-------------|-------------------------------|-------------------------|--------------------------------------|-------------|
| Abiekwe, Richard Fon      | LVN 313783                            | Warning with Stipulations and Fine           | 3/18/25     | Canada, Ashley Jackson        | LVN 233110              | Reprimand with Stipulations          | 4/24/25     |
| Aguirre, Mariel Ajejandra | AP 141683, RX 30274 & RN 831082       | Remedial Education with Fine                 | 3/26/25     | Carlson, Rebecca Elizabeth    | LVN 1034004             | Remedial Education                   | 2/10/25     |
| Aiken, Tiffany Michele    | RN 707026                             | Reprimand with Stipulations                  | 3/18/25     | Carrasco, Leah Alina          | RN 869136               | Warning with Stipulations, Deferred  | 4/24/25     |
| Alegria, Daisy            | RN 1028901 & LVN 350293               | Warning with Stipulations                    | 3/18/25     | Carrion, Laura Imelda         | LVN 181993              | Warning with Stipulations and Fine   | 4/24/25     |
| Ali, Ahtesham             | AP 144128, RX 32574 & RN 876701       | Voluntary Surrender                          | 1/29/25     | Castillo, Olivia Bercasio     | RN 783465               | Warning with Stipulations            | 4/24/25     |
| Alleman, Brianna Rachelle | RN 872211                             | Warning with Stipulations                    | 4/24/25     | Catlin, Shaney Leigh          | LVN 342578              | Revoked                              | 2/11/25     |
| Amuda, Abidemi Afusat     | RN 1051644                            | Revoked                                      | 4/24/25     | Champagne, Israel Dwane       | LVN 141405              | Revoked                              | 2/11/25     |
| Angelo, Marites Reyes     | RN 896585                             | Remedial Education, Deferred                 | 4/28/25     | Choney, Kristy Lynn           | LVN 307284              | Enforced Suspension                  | 2/3/25      |
| Ashford, Gloria Jean      | RN 695358                             | Warning with Stipulations, Deferred          | 2/11/25     | Clark, Aminata                | RN 1110094 & LVN 331064 | Remedial Education                   | 4/10/25     |
| Avila, Nathaniel          | LVN 1034575                           | Revoked                                      | 3/18/25     | Clark, Nicole Marie           | LVN 136964              | Voluntary Surrender                  | 2/12/25     |
| Becerra III, Alfredo      | RN 880982                             | Warning with Stipulations and Fine           | 4/24/25     | Cleaver, Karissa Nicole       | RN 1125370              | Reprimand with Stipulations and Fine | 2/24/25     |
| Belmontes, Trevon         | LVN 353443                            | Remedial Education                           | 4/1/25      | Collins, Taylor Ann           | LVN 1018498             | Voluntary Surrender                  | 2/24/25     |
| Benton, Jennifer Lynn     | LVN 315689                            | Warning with Stipulations                    | 2/11/25     | Davis, Josephine              | RN 790772               | Reprimand with Stipulations          | 2/11/25     |
| Black, George Wayne       | RN 600475 & LVN 133561                | Voluntary Surrender                          | 4/8/25      | De La Fuente, Linda Alejandra | RN 1132272              | Warning with Stipulations, Deferred  | 4/24/25     |
| Blackwell, Jovan Renee    | RN 985150 & LVN 333952                | Warning with Stipulations                    | 2/11/25     | Delbosque, George Isaac       | LVN 335567              | Revoked                              | 2/11/25     |
| Blair, Ashlie             | RN 642228                             | Reprimand with Stipulations and Fine         | 3/18/25     | Demapan, Joseph               | RN 776078               | Probated Suspension                  | 3/18/25     |
| Blanco, Marissa           | AP 120892 & RN 760444                 | Reprimand with Stipulations                  | 3/18/25     | Dennis, Cortney Renia         | LVN 327257              | Revoked                              | 4/24/25     |
| Bostelman, Cheryl Smith   | RN 735076                             | Probated Suspension                          | 4/24/25     | Dominguez, Amber Lynn         | LVN 227301              | Warning with Stipulations, Deferred  | 3/18/25     |
| Boutte, Patrina Nikeshia  | AP131940 & RN 671868                  | Warning with Stipulations and Fine, Deferred | 4/24/25     | Dorbin, Amber                 | RN 906017               | Voluntary Surrender                  | 3/12/25     |
| Brady, Francesca Virginia | RN 775472                             | Voluntary Surrender                          | 3/5/25      | Dowell, Bethany Coy           | LVN 1010059             | Warning with Stipulations            | 4/24/25     |
| Brice, Marsha Renee       | RN 800804                             | Warning with Stipulations                    | 2/11/25     | Drake, Angela Christine       | AP 123854 & RN 775413   | Revoked                              | 3/18/25     |
| Britton, Angela Denise    | LVN 305081                            | Reprimand with Stipulations and Fine         | 2/11/25     | Dukes, Camrian Antwanette     | LVN 333686              | Revoked                              | 2/11/25     |
| Brooks, Greg Allen        | AP 114460, RX 22978 & RN 713145       | Remedial Education                           | 2/14/25     | Ekpesu, Grace Amah            | LVN 1025391             | Revoked                              | 4/24/25     |
| Brooks, Michele Renee     | LVN 189948                            | Revoked                                      | 2/11/25     | Elanjickal, Ajith Antony      | RN 1132892              | Warning with Stipulations            | 3/18/25     |
| Brown, Cynthia Ann        | RN 905913                             | Remedial Education                           | 2/10/25     | Emehelu, Sandra Ijeoma        | RN 1088380              | Warning with Stipulations and Fine   | 4/24/25     |
| Brown, Denyse             | LVN 1046028                           | Enforced Suspension                          | 2/27/25     | Evans, Patricia Ann           | RN 529214               | Voluntary Surrender                  | 4/1/25      |
| Brown, Steven C.          | RN 823768                             | Voluntary Surrender                          | 4/29/25     | Evans, Sherry Lynn            | RN 846054               | Warning with Stipulations            | 4/24/25     |
| Bruckhoff, Adam Richard   | RN 1063076                            | Remedial Education                           | 4/24/25     | Fernandez, Veronica           | RN 789545 & LVN 214992  | Revoked                              | 4/24/25     |
| Buddin, Robert Anthony    | RN 673729                             | Revoked                                      | 2/11/25     | Floyd, Allison Elizabeth      | RN 1038214              | Warning with Stipulations and Fine   | 4/24/25     |
| Burks-Elam, Amiee Darlene | LVN 192528                            | Reprimand with Fine                          | 3/18/25     | Frazier, Julie Amanda         | RN 715584               | Probated Suspension                  | 2/11/25     |
| Cahill, Melissa M.        | AP 1017386, RX 36614 & PTP AR R067089 | Warning with Stipulations                    | 2/11/25     | Fry, Rebecca Anne             | RN 789553               | Remedial Education                   | 2/6/25      |
| Calderon, Teresa Marie    | LVN 184886                            | Reprimand with Stipulations                  | 3/18/25     | Fuller, Shana Marie           | RN 763540 & LVN 181509  | Enforced Suspension                  | 2/25/25     |
|                           |                                       |  |             | Gagne, Marjorie               | LVN 341358              | Remedial Education with Fine         | 3/13/25     |
|                           |                                       |  |             | Garcia (Collazo), Katherine   | LVN 328366              | Reprimand with Stipulations          | 4/24/25     |
|                           |                                       |  |             | Garcia, Ursula Adelina        | LVN 336843              | Warning with Stipulations and Fine   | 2/11/25     |

continued on next page

# DISCIPLINARY ACTION

- cont. from prev. pg.

| Name                          | License Numbers                          | Discipline                           | Action Date | Name                           | License Numbers                   | Discipline                           | Action Date |
|-------------------------------|--|--------------------------------------|-------------|--------------------------------|-----------------------------------|--------------------------------------|-------------|
| Geller, Sydney Jean           | RN 1095072                               | Warning with Stipulations            | 3/18/25     | Labanino, Rubildo              | AP 136885, RX 25799 & RN 881960   | Voluntary Surrender                  | 4/9/25      |
| Ghan, Valerie Ann             | LVN 329061                               | Remedial Education                   | 2/28/25     | Lane, Elglena Elizabeth        | LVN 14613                         | Reprimand with Stipulations          | 4/24/25     |
| Gibson, Lauranne Renee Simone | LVN 210494                               | Remedial Education, Deferred         | 2/28/25     | Lang, Melia Lajoy              | LVN 1067463                       | Revoked                              | 4/24/25     |
| Granger, Sasha Denece         | LVN 347269                               | Revoked                              | 3/18/25     | Lapin, Lynette                 | RN 1014470                        | Warning with Stipulations            | 2/11/25     |
| Gray, Angela Nicole           | LVN 206931                               | Remedial Education                   | 4/25/25     | Lerma, Soraida                 | RN 649581                         | Reprimand with Stipulations          | 2/11/25     |
| Gray, Elbert Franklin         | LVN 85466                                | Remedial Education with Fine         | 4/14/25     | Leroy, Calyn Deene             | RN 879027                         | Warning with Stipulations            | 2/11/25     |
| Green, Jamar Rosham           | RN 964185 & LVN 220550                   | Warning with Stipulations            | 3/18/25     | Lillian, Erin Elizabeth        | AP 131016, RN 720329 & LVN 177810 | Reprimand with Stipulations          | 2/11/25     |
| Green, Linda F.               | RN 521892                                | Voluntary Surrender                  | 4/10/25     | Linton, Rachel Lynn            | LVN 335725                        | Reprimand with Stipulations          | 3/18/25     |
| Harris, Kristy Nichole        | LVN 228001                               | Probated Suspension                  | 4/24/25     | Lippe (Lemons), Deborah Monroe | RN 714345                         | Revoked                              | 2/11/25     |
| Havard, Kelly Lynn            | RN 792361, LVN 183230 & PTP LA RN 219543 | Reprimand with Stipulations and Fine | 2/11/25     | Logan, Marcia Maria            | RN 595690                         | Reprimand with Stipulations and Fine | 2/11/25     |
| Heath, Gwendolyn              | RN 976091                                | Warning with Stipulations            | 4/24/25     | Lollar, Serethia C.            | RN 942062 & LVN 313418            | Warning with Stipulations            | 4/24/25     |
| Hebert, Wanda Rani            | LVN 92864                                | Voluntary Surrender                  | 3/10/25     | Lopez, Leticia Dawn            | LVN 310538                        | Remedial Education, Deferred         | 4/10/25     |
| Hernandez, Vanessa M.         | AP 129013 & RN 736582                    | Remedial Education with Fine         | 4/10/25     | Losoya, Joe Daniel             | RN 733027                         | Voluntary Surrender                  | 3/11/25     |
| Hicks, Shirley Faye           | RN 693534                                | Warning with Stipulations            | 4/24/25     | Luwei, Uduak                   | LVN 1036952                       | Revoked                              | 4/24/25     |
| Hill, Lorena Lissette         | RN 771192                                | Voluntary Surrender                  | 2/18/25     | Magnone, Gabriela              | LVN 301460                        | Revoked                              | 4/24/25     |
| Holley, Christina Lynn        | PTP MO RN 2013030963                     | Voluntary Surrender                  | 2/11/25     | Mahan, Arielle Beth            | RN 926562 & LVN 312284            | Remedial Education, Deferred         | 2/18/25     |
| Horak, Timothy                | RN 847876                                | Reprimand with Stipulations          | 2/11/25     | Mahnke, Miriam Louise          | AP 105572 & RN 455270             | Revoked                              | 3/18/25     |
| Howe (Barnett), Haley         | RN 924239                                | Warning with Stipulations, Deferred  | 4/24/25     | Makori, Robert N.              | RN 1018263                        | Revoked                              | 4/24/25     |
| Hrnjak, Linda Marie           | RN 775214                                | Revoked                              | 2/11/25     | Maldonado, Jeremy Dustin       | RN 801301 & LVN 213945            | Voluntary Surrender                  | 2/24/25     |
| Ikuuah, Mary Wairimu          | LVN 1000893                              | Revoked                              | 4/24/25     | Maldonado, Veronica Y.         | LVN 323808                        | Limited License                      | 3/31/25     |
| Ilooma, Uchenna Nneka         | AP 134632, RX 23727 & RN 732904          | Warning with Stipulations, Deferred  | 4/24/25     | Marquez, Rosanna Lynn          | RN 977066 & LVN 322288            | Warning with Stipulations            | 3/18/25     |
| Imoeker, Larry Omo            | RN 713466                                | Warning with Stipulations            | 3/18/25     | Martines, Jasmine Rose         | LVN 326486                        | Revoked                              | 7/2/24      |
| Isaiah, Grace Ekpeno          | LVN 1003035                              | Revoked                              | 4/24/25     | Martinez, Shane Lee            | LVN 161426                        | Revoked                              | 4/24/25     |
| Iyeke, Vivian Uchenna         | LVN 157770                               | Revoked                              | 3/18/25     | Masih, Shashi                  | RN 626212 & LVN 156261            | Reprimand with Stipulations          | 4/24/25     |
| Jackson, Ray Henry            | RN 820563 & LVN 179289                   | Probated Suspension                  | 4/24/25     | Mason, Latanya Michele         | LVN 1066534                       | Warning with Stipulations and Fine   | 3/18/25     |
| Jasper, Jennifer Denise       | RN 723774                                | Voluntary Surrender                  | 4/24/25     | Masteller, Andrew Michael      | LVN 343442                        | Revoked                              | 4/24/25     |
| Jenkins, Craig B.             | RN 726594 & LVN 177467                   | Voluntary Surrender                  | 3/27/25     | Matte, Jessica Elaine          | LVN 212019                        | Revoked                              | 2/11/25     |
| Johnson, Russell Scott        | RN 738829                                | Warning with Stipulations            | 3/18/25     | McClain, Angela Renee          | RN 711657                         | Remedial Education with Fine         | 3/4/25      |
| Jones, Mylece Lamile          | LVN 344660                               | Probated Suspension                  | 4/24/25     | McCoy, Quiana Natae            | LVN 311592                        | Revoked                              | 2/11/25     |
| Kamara, Milford A.            | RN 1031643                               | Enforced Suspension                  | 2/11/25     | McFarland, Joe Riley           | AP 127187 & RN 791711             | Warning with Stipulations            | 3/18/25     |
| Khan, Sobia                   | RN 929211                                | Warning with Stipulations            | 2/11/25     | McKee, Leticia Nell            | LVN 348849                        | Remedial Education with Fine         | 3/28/25     |
| Kho, Joseph William U.        | RN 888404                                | Warning with Stipulations            | 3/18/25     | McKenzie, Dale Ross            | LVN 167278                        | Probated Suspension                  | 3/18/25     |
| Killoran, Argie Jane          | RN 795116                                | Reprimand with Stipulations and Fine | 4/24/25     | McKeon, Katrina Marie          | LVN 335719                        | Remedial Education                   | 2/3/25      |
| Kimmel, Maribel               | LVN 228878                               | Voluntary Surrender                  | 4/18/25     | Meadows, Ronald E.             | RN 654645                         | Warning with Stipulations            | 4/24/25     |
| King, Terry                   | RN 627686                                | Voluntary Surrender                  | 4/23/25     | Melartin, Akseli Anttila       | RN 981297                         | Enforced Suspension                  | 2/27/25     |
| Kleine, Timmy Dean            | RN 558922 & LVN 119508                   | Warning with Stipulations            | 4/24/25     | Melendez, Elizabeth            | RN 987761                         | Warning with Stipulations, Deferred  | 3/18/25     |
| Klumpp, Patricia Mary         | LVN 198899                               | Voluntary Surrender                  | 2/25/25     | Mena, Diane Joann              | RN 1102327                        | Probated Suspension                  | 2/11/25     |
| Knight, Andrea Julie          | RN 894059                                | Warning with Stipulations            | 2/11/25     | Merriman, Richard Lee          | LVN 132758                        | Warning with Stipulations and Fine   | 3/18/25     |
| Kurdi, Maureen Helen          | RN 1048955                               | Probated Suspension                  | 3/18/25     |                                |                                   |                                      |             |

## DISCIPLINARY ACTION

- cont. from prev. pg.

| Name                       | License Numbers        | Discipline   | Action Date |
|----------------------------|------------------------|--|-------------|
| Miller, Kelli Renae        | RN 523686              | Voluntary Surrender  | 4/1/25      |
| Mitchell, Hailey Michelle  | LVN 316803             | Reprimand with Stipulations                                      | 3/18/25     |
| Moner, Cazaría Jovita      | RN 836078              | Reprimand with Fine  | 3/18/25     |
| Moore, Jeremy Glynn        | RN 897877              | Remedial Education   | 4/29/25     |
| Morales, Jeannette         | RN 1058512             | Revoked  | 2/11/25     |
| Ojeda Jr., Alfredo         | RN 898937 & LVN 194310 | Reprimand with Stipulations                                      | 4/24/25     |
| Ojulari, Esther Abimbola   | RN 928044              | Warning with Stipulations  | 4/24/25     |
| Okpo, Francis O.           | RN 875456              | Warning with Stipulations  | 3/18/25     |
| Ortega, Lisa Marie         | LVN 342393             | Revoked  | 6/27/22     |
| Oshman, Leila              | AP 112356 & RN 638047  | Reprimand with Fine  | 2/11/25     |
| Owens, Heather Nichole     | LVN 308883             | Voluntary Surrender  | 3/4/25      |
| Page, Christopher Nicholas | LVN 313642             | Revoked  | 4/24/25     |
| Patrick, Alona Sophia      | RN 786144              | Remedial Education with Fine                                     | 3/25/25     |
| Patton, Amanda             | LVN 343764             | Revoked  | 3/18/25     |
| Paule, Denice Malicdem     | RN 983778              | Remedial Education   | 3/27/25     |
| Perez, Julian Camilo       | LVN 337319             | Voluntary Surrender  | 4/21/25     |
| Person, Deborah Ann        | LVN 158734             | Voluntary Surrender  | 3/4/25      |
| Pilipick, Jeanette Lee     | LVN 223768             | Reprimand with Stipulations                                      | 3/18/25     |
| Poole, Kelly Renee         | RN 751972              | Remedial Education   | 4/23/25     |
| Posey, Bobby Lee Lewis     | LVN 1029347            | Revoked  | 4/24/25     |
| Rabon, Angela Marie        | LVN 347293             | Warning with Stipulations  | 3/18/25     |
| Raheb, Megan Iona          | RN 883312 & LVN 310934 | Probated Suspension  | 2/11/25     |
| Ramsey, Tiffany            | RN 893005 & LVN 218726 | Warning with Stipulations  | 4/24/25     |
| Ratley, Bobbi Jo           | LVN 191124             | Revoked  | 2/11/25     |
| Ray, Janet Juanita         | RN 571049 & LVN 112545 | Reprimand with Stipulations                                      | 3/18/25     |
| Reeves, Katharine Lee      | RN 716105              | Enforced Suspension  | 2/19/25     |
| Reyna, Maryhelen           | LVN 209872             | Remedial Education with Fine                                     | 3/17/25     |
| Riddler, Kristina Gail     | LVN 192383             | Voluntary Surrender  | 2/12/25     |
| Rivera, Allan Patrick      | RN 933819              | Warning with Stipulations  | 3/18/25     |
| Rivero, Rene               | RN 982263              | Voluntary Surrender  | 3/31/25     |
| Rodriguez, Kristin Laurann | RN 693925 & LVN 169616 | Warning with Stipulations  | 3/18/25     |
| Ross, Dorothy Letris       | RN 864109              | Revoked  | 4/24/25     |
| Saad, Laura A.             | LVN 1130284            | Probated Suspension  | 3/18/25     |
| Saenz, Maria Concepcion    | RN 667928 & LVN 170297 | Reprimand with Stipulations                                      | 4/24/25     |
| Sands, Jennifer Lynette    | RN 739477              | Voluntary Surrender  | 3/17/25     |
| Santos, Sophia Renee       | RN 1080840             | Warning with Stipulations, Deferred Remedial Education with Fine | 2/11/25     |
| Sassos, Laura              | RN 1006368             | Remedial Education with Fine                                     | 4/8/25      |
| Savior, Minnie Taylor      | RN 548625              | Voluntary Surrender  | 2/27/25     |
| Schmitt, April Michele     | LVN 212954             | Revoked  | 2/11/25     |
| Schwartz, Ariel            | RN 1105947             | Reprimand with Stipulations                                      | 4/24/25     |

| Name                         | License Numbers         | Discipline                          | Action Date |
|------------------------------|-------------------------|-------------------------------------|-------------|
| Scott, Amber Lea             | LVN 309755              | Revoked                             | 2/11/25     |
| Scott, Kevin                 | RN 664843               | Revoked                             | 2/11/25     |
| Seymour-Permenter, Mendi Lu  | RN 716127               | Limited License                     | 4/22/25     |
| Skirlock, Kristi Lynn        | RN 986432 & LVN 341115  | Voluntary Surrender                 | 2/3/25      |
| Sones, Renee Nicole          | LVN 337224              | Revoked                             | 2/11/25     |
| Stapp, Lauree Lorene         | RN 564360               | Warning with Stipulations           | 4/24/25     |
| Suits, Kathryn Elizabeth     | RN 1091351              | Revoked                             | 2/11/25     |
| Summers, Ashley Marie        | RN 967291 & LVN 328147  | Revoked                             | 2/11/25     |
| Thomas, Patrick Norman       | RN 721055 & LVN 102251  | Warning with Stipulations           | 3/18/25     |
| Toure, Brahima K.            | LVN 336088              | Probated Suspension                 | 4/24/25     |
| Towle, Crystal Gail          | LVN 221682              | Warning with Stipulations           | 2/11/25     |
| Ullman, Erick Lewis          | RN 976817               | Revoked                             | 3/18/25     |
| Umana, Emem Michael          | RN 1010710 & LVN 313069 | Reprimand with Stipulations         | 4/24/25     |
| Venters, Rosaline            | LVN 331606              | Warning with Stipulations, Deferred | 3/18/25     |
| Wardsworth, Ireatha Lashonda | RN 664743               | Warning with Stipulations           | 2/11/25     |
| Wheeler, Marty Beth          | PTP CO LVN 330961       | Revoked                             | 3/18/25     |
| Whitall, George Lee          | LVN 171705              | Probated Suspension                 | 4/24/25     |
| White, Jared Evan            | RN 708353               | Remedial Education                  | 4/16/25     |
| Williams, Alice Aubrey       | LVN 346742              | Revoked                             | 2/11/25     |
| Williams, Latoya Owens       | LVN 1105160             | Revoked                             | 2/11/25     |
| Wilson, Amber Suzanne        | LVN 327952              | Voluntary Surrender                 | 4/16/25     |
| Wilson, Brandi D.            | LVN 169007              | Probated Suspension                 | 2/11/25     |
| Wilson, Cherrell M.          | LVN 1064187             | Reprimand with Stipulations         | 4/24/25     |
| Wilson, Tanisha Angelete     | RN 885819               | Remedial Education with Fine        | 4/22/25     |
| Wood, Stacey Leigh           | RN 802236               | Remedial Education, Deferred        | 3/10/25     |
| Zachariah, Annamma           | RN 860338               | Reprimand with Stipulations         | 2/11/25     |
| Zamora, Maria T.             | LVN 53101               | Voluntary Surrender                 | 3/13/25     |
| Zelaya, Mayra L.             | RN 732546               | Revoked                             | 3/18/25     |

### Abbreviations in the Notice of Disciplinary Action Section

- PTP** Privilege to Practice in Texas associated with the indicated state and license.
- RX** Prescription Authorization

### Statistical information

The 213 disciplinary actions reported in *The Bulletin* represent only 0.037% of nurses who are currently licensed to practice in the State of Texas.

As of February 28, 2025, 99.76% of current Registered Nurses, 99.42% of current Licensed Vocational Nurses, and 99.77% of current Advanced Practice Registered Nurses were without current discipline according to Board records.



## NCSBN Research Highlights Small Steps Toward Nursing Workforce Recovery; Burnout and Staffing Challenges Persist



**The data reveal that more than 138,000 nurses left the workforce since 2022 and by 2029, almost 40% of nurses intend to leave the workforce, reinforcing concerns about ongoing labor shortages and systemic workforce challenges.**

The National Council of State Boards of Nursing (NCSBN) released findings from its 2024 National Nursing Workforce Study, surveying 800,000 nurses to understand the state of the workforce since the 2022 study revealed a workforce crisis following the COVID-19 pandemic. Research revealed that the U.S. nursing workforce has shown some signs of recovery although long-term stability remains uncertain. And, while emotional exhaustion and workloads have moderated since 2022, high levels of stress and burnout continue to impact the workforce.

This is the largest and most comprehensive research study of the nursing workforce, uncovering the data points which have far reaching implications for the health care system at large and for patient populations. The research was gathered as part of a biennial nursing workforce study conducted by NCSBN and the National Forum of State Nursing Workforce Centers.

### **Key findings include:**

More than 138,000 nurses left the workforce since 2022 and they report stress, burnout and retirement as key reasons, the same reasons as those surveyed two years ago.

39.9% of registered nurses (RNs) and 41.3% of licensed practical/vocational nurses (LPN/VNs) reported an intent to leave the workforce or retire within the next five years.

Of the nurses who reported an intent to leave within the next five years, the reasons they are leaving aside from retirement include:

Approximately 41.5% selected stress and burnout as the root cause.

Following stress and burnout, other top reasons include workload, understaffing and inadequate salary.

Employment levels have rebounded slightly, with 87.7% of RN licensees and 70.6% of LPN/VN licensees now actively employed in nursing.

Median pre-tax annual earnings for both RNs and LPNs have increased by 10-16%, likely driven by inflation and rising demand for health care services.

The percentage of Latino/Hispanic RNs has doubled since 2015, from 3.6% to 7.2%.

“While we have seen some improvements, staffing challenges, stress and burnout, and workforce safety are issues that have permeated the nursing industry before, during and after the pandemic and are still challenges,” said Phil Dickison, NCSBN Chief Executive Officer. “We can no longer use COVID-19 as an excuse as to why nurses are leaving the workforce. We can infer that while hospitals continue to prioritize investments in mental health and other support services for nurses since the pandemic, structural issues that predated the pandemic remain.”

Despite these challenges, the industry shows some signs of improvement. In addition to the increased employment levels, the educational attainment of the nursing profession is increasing, with more than 73% of RNs holding a baccalaureate degree or higher. The nursing workforce is at the highest educational level ever documented by NCSBN, and is becoming more racially diverse.

The re-entry of experienced nurses has helped stabilize the workforce, restoring the median age distribution to 50, but it is unclear if this is a long-term trend or a temporary adjustment, especially as many of the last of the baby boomers are expected to exit the workforce in 2027 as they reach retirement age. While workloads have decreased by 20-25% since 2022, staffing shortages, burnout and high intent-to-leave rates remain critical challenges that threaten long-term stability.

“It is necessary to continue efforts to retain more experienced nurses and address longstanding factors associated with nurses’ premature intent to leave, ensuring dependable workforce planning moving forward,” added Dickison.

To view the NCSBN research supplement, please contact [ncsbn@reputationpartners.com](mailto:ncsbn@reputationpartners.com) or visit [ncsbn.org/workforce](https://ncsbn.org/workforce).



# BON Offers Hosted and Interactive Education Opportunities

The Board of Nursing (BON) offers hosted and interactive education opportunities for nurses. Topics for interactive offerings include *Documentation, Prescriptive Authority for APRNs, Determining APRN Scope of Practice, Delegation, and Nursing Peer Review*. The BON will be conducting three hosted workshops on *Nursing Jurisprudence and Ethics*:

## Protecting Your Patients and Your Practice, Nursing Jurisprudence and Ethics

The purpose of this workshop, offered remotely, is to provide registered nurses, licensed vocational nurses, and advanced practice registered nurses with information on the current nursing licensure laws that serve as the foundation for the nurses’ practice in the State of Texas. Workshop participation will contribute to the nurse’s ability to know and conform with the Texas Nursing Practice Act and the Board’s Rules and Regulations, which in turn will promote and protect the welfare of the public. This workshop is approved for six contact hours.

Wed Aug 6, 2025, 8:00 am to 2:00 pm Central

Wed Sep 10, 2025, 8:00 am to 2:00 pm Central

Wed Nov. 5, 2025, 8:00 am to 2:00 pm Central

For further information, visit <https://www.bon.texas.gov/catalog/index.html>

## Imposter Update: Warrant issued for Dazael Gloria



Police in Houston are searching for Dazael Gloria, who was been charged with allegedly impersonating a nurse and treating disabled people while working for two nursing agencies. Houston Police allege Gloria practiced nursing without a license at least three separate times in October 2024, according to a criminal complaint.

He is also accused of presenting himself as a licensed nurse in Harris County, Texas, from August 2022 to October 2023, according to court records. The suspect is accused of using the identity of a relative to unlawfully gain employment for two separate nursing agencies in Harris County, according to court records.

Police were informed of these incidents by an investigator at the Texas Board of Nursing. Mr. Gloria’s nursing license was terminated and voluntarily surrendered on Feb. 14, 2020, according to court records. For further information, see [https://www.bon.texas.gov/pdfs/newsletter\\_pdfs/2024/July%202024%20Bulletin%20FNL.pdf](https://www.bon.texas.gov/pdfs/newsletter_pdfs/2024/July%202024%20Bulletin%20FNL.pdf)

## Texas Board of Nursing Welcomes New Nurses!



The Texas Board of Nursing congratulates new licensees for March 2025, April 2025, and May 2025. Whether you are new to nursing practice or changing your licensure, we thank you for choosing to practice in Texas and welcome you to the workforce!

Number of New Licenses Issued by Examination  
(March 2025 – May 2025)

**LVNs – 607**

**RNs – 3,541**

**APRNs – 1,345**

Here are some helpful tips for you as you start your nursing practice in Texas:

- \* Make sure that you save your password for the Texas Nurse Portal – you will need to access the Portal every two years to renew your licensure.
- \* Consider signing up for Nursys.com – this free service will send you an automatic e-Notify alert when it is time to renew your license.
- \* The Board has some requirements for continuing education each licensure cycle. Check out Education\Continuing Education & Competency on our website to ensure that you are staying current with requirements for licensure renewal.

## Bruce Holter (Information Specialist)

### Celebrating 28 Years of Service



#### **What originally brought you to the Texas Board of Nursing, and what was your role when you first started?**

I was working at Travis State School when the decision was made to close the school as part of the settlement of a 20-year-old federal lawsuit (*Lelsz vs. Cavanaugh*). I was one of the last five employees as we closed the school. When I started at the school, there were 1,500 employees. I had been doing newsletters and training employees at the school using some of the same software that the Board was using. One of my supervisors at the school was an RN so it seemed natural to transition to the RN Board<sup>1</sup>. Several of my former co-workers at the school were already working for the Board, which made the transition easier.

#### **Over your 28 years here, what are some of the biggest changes you've witnessed in the field of public information and communication?**

Going paperless was the biggest change undertaken by the Board in my time here. That change impacted all aspects of agency operations from how Board meetings were conducted to paper licenses and renewal notification cards mailed to licensees. It was a difficult (but necessary) transition. In hindsight, it was the right thing to do and fits with the paperless culture we have today.

#### **What project or accomplishment are you most proud of during your time at the Board?**

I am "proudest" of the Board of Nursing Newsletter. We went from a black-

and-white publication to two-color for almost 20 years. After the transition to paperless, we can now use any color we want and have as many pages as are needed to communicate with nurses. Getting the alerts out on things such as nurse imposters, scams, and fraudulent nursing programs is so important in protecting the public and the nurses served by the Board.

#### **How has the way the Board communicates with the public evolved over the years—from print to digital and beyond?**

When we were still printing and mailing the newsletter to all nurses, it took an entire semi-truck to take the newsletters to the post office! Now, distribution of the newsletter is done via email, the agency website, and social media. The current style of communication is here to stay as so much of our daily life involves communication by computer or phone.

#### **What do you think sets the Board of Nursing apart as a state agency in terms of public service and transparency?**

The Board of Nursing is firmly committed to its mission to protect the public from unsafe nursing practice. It is critical for the agency to be transparent in the information provided to the public and to nurses to best serve the needs of our many stakeholders. Transparency is important for an honest relationship with the people we serve.

#### **What have you learned about nurses and the nursing profession through your work at the Board?**

I have learned that the trust that the public has in nurses is warranted. The vast majority of nurses are decent, caring people that are committed to the well-being of their patients.

#### **How do you hope your legacy has contributed to the Board's mission of protecting the public and supporting safe nursing practice?**

I hope my work on behalf of the Board has helped to keep the public safe, provide guidance on what is required to practice safely in the State of Texas and alert our stakeholders to imposters, scammers and education programs that don't adhere to the requirements the Board has set forth to protect the public.

#### **As you head into retirement, what are you most looking forward to in this next chapter?**

I look forward to more time to go fishing or enjoying a good cup of coffee while reading a good book.

<sup>1</sup>Until February of 2004, Texas had a separate regulatory body for Registered Nurses and a Licensed Vocational Nurses. A single Board of Nursing was created for RNs and LVNs following passage of HB 1483.

## Texas Board of Nursing Meeting Schedule

### 2025 Board Meeting Dates

July 17-18

October 23-24

### 2025 Eligibility and Disciplinary Committee Meeting Dates

August 19

September 9

November 12

December 9

For meeting times and locations, visit the Board of Nursing website.

\* - The Board meeting scheduled for July 17-18, 2025, will be streamed online. Meeting access information will be posted at: [www.bon.texas.gov](http://www.bon.texas.gov)

Information published in the *Texas Board of Nursing Bulletin* is not copyrighted and may be reproduced. The Board would appreciate credit for the material used and a copy of the reprint. Please direct questions or comments to: Newsletter, Texas Board of Nursing, 1801 Congress Avenue, Suite 10-200, Austin, Texas 78701-3944. Comments may be emailed to [bruce.holter@bon.texas.gov](mailto:bruce.holter@bon.texas.gov) or call (512) 305-6842.

#### Office Hours and Location

The office of the Texas Board of Nursing is located in the George H.W. Bush Building, located next to the Bob Bullock Museum in downtown Austin, across the street from the University of Texas. The mailing address is: 1801 Congress Avenue, Suite 10-200, Austin, Texas 78701. Office hours are 8:00 a.m. to 5:00 p.m., Monday through Friday, except for designated holidays. If you need to reach the Board, please call (512) 305-7400 or send an email to: [webmaster@bon.texas.gov](mailto:webmaster@bon.texas.gov)

The Texas Board of Nursing is an Equal Employment Opportunity Employer and does not discriminate on the basis of race, color, national origin, sex, religion, age, genetic information, or status as an individual with a disability or protected veteran in its hiring and recruitment process. Veterans' and former foster youth employment preferences are granted as required by law. The Texas Board of Nursing participates in E-Verify, and will provide the Social Security Administration (SSA) and, if necessary, the Department of Homeland Security (DHS), with information from each new employee's Form I-9 to confirm work authorization.

The *Texas Board of Nursing Bulletin* is published quarterly by the Texas Board of Nursing. In compliance with the Americans with Disabilities Act, this document may be requested in alternate formats by contacting the Board's office, (512) 305-7400 (Voice), (512) 305-7401 (FAX), or by visiting the George H.W. Bush Building, 1801 Congress Avenue, Suite 10-200, Austin, Texas 78701.

### Board of Nursing Contact Info

MAIN NUMBER.....(512) 305-7400  
FAX.....(512) 305-7401

- 24-hour Access
- License Verification
- General Information

ENFORCEMENT.....(512) 305-6838

- Complaint and Disciplinary Action Inquiries
- Violations of NPA and Rules and Regulations
- Monitoring of Disciplined RNs and LVNs

#### OPERATIONS

CUSTOMER SERVICE.....(512) 305-6809

- License Renewals, Endorsement, Examination, or
- Continuing Education for Nurses  
[Licensing@bon.texas.gov](mailto:Licensing@bon.texas.gov)

#### PROFESSIONAL AND VOCATIONAL NURSING

ADVANCED PRACTICE.....(512) 305-6843

- APRN Application and
- Prescriptive Authority Procedures  
[aprn@bon.texas.gov](mailto:aprn@bon.texas.gov)

NURSING EDUCATION.....(512) 305-6816

NURSING PRACTICE.....(512) 305-6802

- Nursing Practice Issues
- Legislation
- Workshop Information....(512) 305-6844
- Workshop e-mail inquiries  
[workshops@bon.texas.gov](mailto:workshops@bon.texas.gov)

NEWSLETTER INFO.....(512) 305-6842



## Nurse Employers: Do You Want to Receive an Email Alert When the Bulletin Goes Online?

The Texas Board of Nursing (BON) discontinued mailing paper issues of the *Texas Board of Nursing Bulletin (Bulletin)* in October 2023. Nurse employers, other boards of nursing, and any interested individuals who would like to receive an email alert when the newsletter is posted may do so when the *Bulletin* is posted online. The only requirement necessary to receive an alert when the *Bulletin* is posted is to notify the Board. Note: all nurses who have established nurse portal accounts are sent notice of *Bulletins* using the email address associated with the account. If you would like to be added to the electronic notification list for all issues of the newsletter, please visit [https://www.bon.texas.gov/about\\_newsletters.asp.html](https://www.bon.texas.gov/about_newsletters.asp.html) and enter your email address. No further information is required. The email address that you provide will only be used to notify you when the newsletter has been posted. Digital copies of the *Bulletin* are accessible at: [https://www.bon.texas.gov/about\\_newsletters.asp.html](https://www.bon.texas.gov/about_newsletters.asp.html)