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§73-15-1. Title.

This chapter shall be cited as the "Mississippi Nursing Practice Law."


In order to safeguard life and health, any person practicing or offering to practice as a registered nurse or a licensed practical nurse in Mississippi for compensation shall hereafter be required to submit evidence of qualifications to practice and shall be licensed or hold the privilege to practice as hereinafter provided. It shall be unlawful for any person not licensed or holding the privilege to practice under the provisions of this chapter:

(a) To practice or offer to practice as a registered nurse or a licensed practical nurse;

(b) To use a sign, card or device to indicate that such person is a registered nurse or a licensed practical nurse.

Any person offering to practice nursing in Mississippi must be licensed or otherwise authorized to practice as provided in this chapter.


(1) Board means the Mississippi Board of Nursing.

(2) The practice of nursing by a registered nurse means the performance for compensation of services which requires substantial knowledge of the biological, physical, behavioral, psychological and sociological sciences and of nursing theory as the basis for assessment, diagnosis, planning, intervention and evaluation in the promotion and maintenance of health; management of individuals' responses to illness, injury or infirmity; the restoration of optimum function; or the achievement of a dignified death. Nursing practice includes, but is not limited to, administration, teaching, counseling, delegation and supervision of nursing, and execution of the medical regimen, including the administration of medications and treatments prescribed by any licensed or legally authorized physician or dentist. The foregoing shall not be deemed to include acts of medical diagnosis or prescriptions of medical, therapeutic or corrective measures, except as may be set forth by rules and regulations promulgated and implemented by the Mississippi Board of Nursing.

(3) "Clinical nurse specialist practice" by a certified clinical nurse specialist means the delivery of advanced practice nursing care to individuals or groups using advanced diagnostic and assessment skills to manage and improve the health status of individuals and families; diagnose human responses to actual or potential health problems; plan for health promotion, disease prevention, and therapeutic intervention in collaboration with the patient or client; implement therapeutic interventions based on the nurse specialist's area of expertise and within the scope of advanced nursing practice, including, but not limited to, direct patient care, counseling, teaching, collaboration with other licensed health care providers; and, coordination of health care as necessary and appropriate and evaluation of the effectiveness of care.

(4) "Advanced nursing practice" means, in addition to the practice of professional nursing, the performance of advanced-level nursing approved by the board which, by virtue of graduate education and experience are appropriately performed by an advanced practice registered nurse. The advanced practice registered nurse may diagnose, treat, and manage medical conditions. This may include prescriptive authority as identified by the board. Advanced practice registered nurses must practice in a collaborative/consultative relationship with a physician or dentist with an unrestricted license to practice in the state of Mississippi and advanced nursing must be performed within the framework of a standing protocol or practice guidelines, as appropriate.
The practice of nursing by a licensed practical nurse means the performance for compensation of services requiring basic knowledge of the biological, physical, behavioral, psychological and sociological sciences and of nursing procedures which do not require the substantial skill, judgment and knowledge required of a registered nurse. These services are performed under the direction of a registered nurse or a licensed physician or licensed dentist and utilize standardized procedures in the observation and care of the ill, injured and infirm; in the maintenance of health; in action to safeguard life and health; and in the administration of medications and treatments prescribed by any licensed physician or licensed dentist authorized by state law to prescribe. On a selected basis, and within safe limits, the role of the licensed practical nurse shall be expanded by the board under its rule-making authority to more complex procedures and settings commensurate with additional preparation and experience.

A license means an authorization to practice nursing as a registered nurse or a licensed practical nurse designated herein.

A registered nurse is a person who is licensed or holds the privilege to practice under the provisions of this chapter and who practices nursing as defined herein. "R.N." is the abbreviation for the title of registered nurse.

A licensed practical nurse is a person who is licensed or holds the privilege to practice under this chapter and who practices practical nursing as defined herein. "L.P.N." is the abbreviation for the title of licensed practical nurse.

A registered nurse in clinical practice is one who functions in any health care delivery system which provides nursing services.

A "clinical nurse specialist" is a person licensed or holds the privilege to practice under this article in this state to practice professional nursing and who in this state practices advanced nursing as defined herein. "C.N.S." is the abbreviation for the title of clinical nurse specialist.

An "advanced practice registered nurse" is a person who is licensed or holds the privilege to practice under this article and who is certified in advanced practice registered nurse or specialized nursing practice and includes certified nurse midwives, certified registered nurse anesthetists and certified nurse practitioners. "C.N.M." is the abbreviation for the title of certified nurse midwife, "C.R.N.A." is the abbreviation for the title of Certified Registered Nurse Anesthetist. "C.N.P." is the abbreviation for the title of certified nurse practitioner.

A "nurse educator" is a registered nurse who meets the criteria for faculty as set forth in a state accredited program of nursing for registered nurses, or a state approved program of nursing for licensed practical nurses, and who functions as a faculty member.

A "consumer representative" is a person representing the interests of the general public, who may use services of a health agency or health professional organization or its members but who is neither a provider of health services, nor employed in the health services field, nor holds a vested interest in the provision of health services at any level, nor has an immediate family member who holds vested interests in the provision of health services at any level.

“Privilege to practice” means the authorization to practice nursing in the state as described in the Nurse Licensure Compact provided for in Section 73-15-22.

“Licensee” is a person who has been issued a license to practice nursing in the state or who holds the privilege to practice nursing in the state.


The following shall be excepted from the provisions of this chapter:

(a) Gratuitous nursing by friends and members of the family.
(b) The furnishing of nursing assistance in an emergency.
(c) The practice of nursing which is incidental to a program of study by a student enrolled in an approved educational program of nursing, provided the practice is under the supervision of a registered nurse.
(d) The practice of nursing by a graduate of an approved educational program of nursing pending the results of the first licensing examination scheduled by the board following such graduation, provided the practice is under the supervision of a registered nurse or a licensed physician if the
nurse is practicing in a physician's office and the graduate holds a temporary permit to practice nursing in Mississippi.

(e) The practice of nursing by any legally qualified nurse of another state who is employed by the United States government or any bureau, division or agency thereof while in the discharge of his or her official duties.

(f) The practice of nursing by a registered nurse or a licensed practical nurse for a period of not more than ninety (90) days pending licensure in Mississippi, provided the nurse upon employment has furnished the employer with satisfactory evidence of current registration and licensure in another state, and provided such nurse furnishes evidence to the prospective employer of having submitted proper application and fees to the board prior to employment and holds a temporary permit to practice nursing in Mississippi.

(g) The furnishing of nursing assistance by any duly qualified auxiliary personnel employed by state mental health facilities until December 31, 1983.

(h) Any registered nurse or licensed practical nurse for nursing duties performed in a physician's office under the direction and supervision of a licensed physician; provided, however, that said registered nurse or licensed practical nurse shall otherwise comply with the other provisions of this chapter.

(i) The infliction of the punishment of death pursuant to Section 99-19-51.


(1) There is hereby created a board to be known as the Mississippi Board of Nursing, composed of thirteen (13) members, two (2) of whom shall be nurse educators; three (3) of whom shall be registered nurses in clinical practice, two (2) to have as basic nursing preparation an associate degree or diploma and one (1) to have as basic nursing preparation a baccalaureate degree; one (1) of whom shall be a registered nurse at large; one (1) of whom shall be a registered nurse practitioner; four (4) of whom shall be licensed practical nurses; one (1) of whom shall be a licensed physician who shall always be a member of the State Board of Medical Licensure; and one (1) of whom shall represent consumers of health services. There shall be at least one (1) board member from each congressional district in the state; provided however, that the physician member, the consumer representative member and one (1) registered nurse member shall be at large always.

(2) Members of the Mississippi Board of Nursing, excepting the member of the State Board of Medical Licensure, shall be appointed by the Governor, with the advice and consent of the Senate, from lists of nominees submitted by any Mississippi registered nurse organization and/or association chartered by the State of Mississippi whose board of directors is elected by the membership and whose membership includes registered nurses statewide, for the nomination of registered nurses, and by the Mississippi Federation of Licensed Practical Nurses and the Mississippi Licensed Practical Nurses' Association for the nomination of a licensed practical nurse. Nominations submitted by any such registered nurse organization or association to fill vacancies on the board shall be made and voted on by registered nurses only. Each list of nominees shall contain a minimum of three (3) names for each vacancy to be filled. The list of names shall be submitted at least thirty (30) days before the expiration of the term for each position. If such list is not submitted, the Governor is authorized to make an appointment from the group affected and without nominations. Appointments made to fill vacancies for unexpired terms shall be for the duration of such terms and until a successor is duly appointed.

(3) Members of the board shall be appointed in staggered terms for four (4) years or until a successor shall be duly qualified. No member may serve more than two (2) consecutive full terms. Members of the board serving on July 1, 1988, shall continue to serve for their appointed terms.

(4) Vacancies occurring by reason of resignation, death or otherwise shall be filled by appointment of the Governor upon nominations from a list of nominees from the affected group to be submitted within not more than thirty (30) days after such a vacancy occurs. In the absence of such list, the Governor is authorized to fill such vacancy in accordance with the provisions for making full-term appointments. All vacancy appointments shall be for the unexpired terms.
Any member may be removed from the board by the Governor after a hearing by the board and provided such removal is recommended by the executive committee of the affected group.


(1) The members of the Mississippi Board of Nursing shall meet annually and organize for the ensuing year by election of one (1) of its members as president, one (1) as secretary, and one (1) as treasurer. The physician member and the representative of consumers of health services may discuss and nominate but shall not vote for officers nor hold office in such elections.

(2) The board shall meet at least once every four (4) months for the purpose of transacting such business as may come before the board. Any member who shall not attend two (2) consecutive meetings of the board shall be subject to removal by the Governor. The president of the board shall notify the Governor in writing when any such member has failed to attend two (2) consecutive regular meetings.

(3) Special meetings of the board may be held on call of the president or upon call of any seven (7) members. A written notice of time, place and purpose of any special meeting shall be mailed by the executive director to all members of the board not less than ten (10) days before the meeting is held.

(4) On all matters the board shall function as a board of thirteen (13) members, and seven (7) members, including at least three (3) registered nurses and two (2) practical nurses, shall constitute a quorum. In any case, the affirmative vote of a majority of the members present and participating shall be necessary to take action. In all cases pertaining to practical nursing, such majority must include the affirmative vote of at least one (1) of the practical nurse members of the board.

(5) The board shall hold not less than two (2) examinations each year for registered nurses and not less than two (2) each year for licensed practical nurses, at such times and places as the board may determine.

(6) Each member of the board shall receive a per diem compensation as provided in Section 25-3-69 for attendance at board meetings, together with necessary travel and other expenses incurred in the discharge of his or her duties as a board member.


(1) All fees from examination, registration and licensure of nurses as provided for hereafter, and all monies coming into possession of the board from any source whatsoever, shall be paid to the treasurer who shall issue receipts therefor and the same shall be deposited in the State Treasury to the credit of the board.

(2) The funds collected by this board shall be expended only pursuant to appropriation approved by the Legislature and as provided by law.

(3) The treasurer and executive director shall execute surety bonds in a sum to be determined by the board, conditioned upon the faithful performance of their duties and upon their accounting for all monies coming into their hands. The premium for the bond shall be paid by the board funds. Funds shall not be withdrawn or expended except upon approval of the board.


(1) Each board member shall be a citizen of the United States, a resident of the State of Mississippi, and shall before entering upon duties of said office take the oath prescribed by Section 268 of the Constitution of the State of Mississippi and file same with the Office of the Secretary of State who shall thereupon issue such person so appointed a certificate of appointment.

(2) Each registered nurse board member shall possess these additional qualifications:
   (a) Education - graduation from an approved educational program for the preparation of registered nurses;
(b) **Experience** - have at least five (5) years of nursing experience since graduation;
(c) **Employment** - have been employed for at least the past three (3) years as a registered nurse in Mississippi;
(d) **Licensure** - be currently registered to practice as a registered nurse in the State of Mississippi.

(3) Each licensed practical nurse board member shall possess these additional qualifications:
(a) **Education** - graduation from an approved educational program for the preparation of licensed practical nurses;
(b) **Experience** - have at least five (5) years of nursing experience since graduation;
(c) **Employment** - have been employed for at least the past three (3) years as a licensed practical nurse in Mississippi;
(d) **Licensure** - be currently registered to practice as a licensed practical nurse in the State of Mississippi.

(4) The physician member shall be a physician licensed to practice in the State of Mississippi and a member of the State Board of Medical Licensure.

§73-15-17. Duties of Board.

The Mississippi Board of Nursing is authorized and empowered to:

(a) Adopt and from time to time revise such rules and regulations consistent with the law as shall be necessary to govern its proceedings and carry into effect the provisions of this chapter.
(b) Require the secretary to keep records of all meetings of the board and keep a record of all proceedings, and to prepare a register of registered nurses and a register of licensed practical nurses, all nurses appearing thereon to be duly licensed under this chapter, and which registers shall be open for public inspection at all reasonable times.
(c) Issue subpoenas, require attendance of witnesses, and administer oaths of persons giving testimony.
(d) Cause the prosecution of all persons violating the provisions of this chapter, and incur such necessary expenses therefor.
(e) Conduct hearings upon charges calling for discipline of a licensee or revocation of a license or the privilege to practice.
(f) Present a true and full report to the Governor and Legislature, together with statement of receipts and disbursements on or before February 1 of each year.
(g) Maintain an office in the greater Jackson area for the administration of this chapter.
(h) File an annual list of all certificates of registration issued by the board with the Secretary of State's office for both registered nurses and licensed practical nurses.
(i) File an annual list of all certificates of registration issued by the board to registered nurses, including addresses of the persons, with the Mississippi Nurses' Association; and file a similar list of all certificates of registration issued to licensed practical nurses, including addresses of the persons, with the Mississippi Federation of Licensed Practical Nurses and the Mississippi Licensed Practical Nurses Association.
(j) Adopt a seal which shall be in the form of a circle with the image of an eagle in the center, and around the margin the words "Mississippi Board of Nursing," and under the image of the eagle the word "Official." The seal shall be affixed to certificates and warrants issued by the board, and to all records sent up on appeal from its decisions.
(k) Schedule dates and locations for state board examinations for examining qualified applicants for licensure.
(l) Examine, license and renew licenses of duly qualified applicants.
(m) Appoint and employ a qualified person who shall not be a member of the board to serve as executive director, define the duties, fix the compensation, and delegate to him or her those activities that will expedite the functions of the board. The executive director shall meet all the qualifications for board members, and shall in addition:
   (i) Have had at least a master's degree in nursing, eight (8) years' experience as a registered nurse, five (5) of which shall be in teaching or in administration, or a combination thereof; and
(ii) Have been actively engaged in nursing for at least five (5) years immediately preceding appointment.

(n) Employ, discharge, define duties, and fix compensation of such other persons as may be necessary to carry out the provisions of this chapter.

(o) Secure the services of research consultants as deemed necessary who shall receive a per diem, travel and other necessary expenses incurred while engaged by the board.

(p) Enter into contracts with any other state or federal agency or with any private person, organization or group capable of contracting, if it finds such action to be in the public interest and in the furtherance of its responsibilities.

(q) Upon reasonable suspicion that a holder of a license issued under this article has violated any statutory ground for denial of licensure as set forth in Section 73-15-29 or is guilty of any offense specified in Section 73-15-33, require the license holder to undergo a fingerprint-based criminal history records check of the Mississippi central criminal database and the Federal Bureau of Investigation criminal history database, in the same manner as required for applicants for licensure under Sections 73-15-19(1) and 73-15-21(1).


(1) The Mississippi Board of Nursing is designated as the state agency responsible for the administration and supervision of the Nursing Workforce Program as an educational curriculum in the State of Mississippi. It is the intent of the Legislature to develop a nursing workforce able to carry out the scope of service and leadership tasks required of the profession by promoting a strong educational infrastructure between nursing practice and nursing education.

(2) The Mississippi Board of Nursing is authorized to establish an Office of Nursing Workforce within the administrative framework of the board for the purpose of providing coordination and consultation to nursing education and practice. The Nursing Workforce Program shall encompass five (5) interdependent components:

(a) Develop and facilitate implementation of a state educational program directed toward nursing educators regarding health care delivery system changes and the impact these changes will have on curriculum and on the service needs of nurses.

(b) Determine the continuing education needs of the nursing workforce and facilitate such continuing education coursework through the university/college schools of nursing in the state and the community/junior college nursing programs in the state.

(c) Promote and coordinate through the schools of nursing opportunities for nurses prepared at the associate degree and bachelor degree levels to obtain higher degrees.

(d) Apply for and administer grants from public and private sources for the development of the Nursing Workforce Program prescribed in this section.

(e) Establish systems to ensure an adequate supply of nurses to meet the health care needs of the citizens of Mississippi. This will include, but is not limited to, gathering and quantifying dependable data on current nursing workforce capacities and forecasting future requirements. The Office of Nursing Workforce will report its findings annually to the Mississippi Legislature.

(3) Pursuant to the provisions of subsections (1) and (2), the Board of Nursing is authorized to provide for the services of an Office of Nursing Workforce Director and such other professional and nonprofessional staff as may be needed and as funds are available to the Board of Nursing to implement the Nursing Workforce Program prescribed in this section. It shall be the responsibility of such professional staff to coordinate efforts of the bachelor degree schools of nursing, the associate degree schools of nursing and other appropriate agencies in the State of Mississippi to implement the Nursing Workforce Program.

(4) The Board of Nursing shall appoint a Nursing Workforce Advisory Committee composed of health care professionals, health agency administrators, nursing educators and other appropriate individuals to provide technical advice to the Office of Nursing Workforce created in this section. The members of the committee shall be appointed by the Board of Nursing from a list of nominees submitted by appropriate nursing and health care organizations in the State of Mississippi. The
members of the committee shall receive no compensation for their services, but may be reimbursed for actual travel expenses and mileage authorized by law for necessary committee business.

(5) All funds made available to the Board of Nursing for the purpose of nursing workforce shall be administered by the board office for that purpose. The Board of Nursing is authorized to enter into contract with any private person, organization or entity capable of contracting for the purpose of administering this section.

(6) The Nursing Workforce Program and the Office of Nursing Workforce provided for in this section will be established and implemented only if sufficient funds are appropriated to or otherwise available to the Board of Nursing for that purpose.


(1) Registered nurse applicant qualifications. Any applicant for a license to practice as a registered nurse shall submit to the board:

(a) An attested written application on a Board of Nursing form;
(b) Written official evidence of completion of a nursing program approved by the Board of Trustees of State Institutions of Higher Learning, or one approved by a legal accrediting agency of another state, territory or possession of the United States, the District of Columbia, or a foreign country which is satisfactory to this board;
(c) Evidence of competence in English related to nursing, provided the first language is not English;
(d) Any other official records required by the board.

In addition to the requirements specified in paragraphs (a) through (d) of this subsection, in order to qualify for a license to practice as a registered nurse, an applicant must have successfully been cleared for licensure through an investigation that shall consist of a determination as to good moral character and verification that the prospective licensee is not guilty of or in violation of any statutory ground for denial of licensure as set forth in Section 73-15-29 or guilty of any offense specified in Section 73-15-33. To assist the board in conducting its licensure investigation, all applicants shall undergo a fingerprint-based criminal history records check of the Mississippi central criminal database and the Federal Bureau of Investigation criminal history database. Each applicant shall submit a full set of his or her fingerprints in a form and manner prescribed by the board, which shall be forwarded to the Mississippi Department of Public Safety (department) and the Federal Bureau of Investigation Identification Division for this purpose.

Any and all state or national criminal history records information obtained by the board that is not already a matter of public record shall be deemed nonpublic and confidential information restricted to the exclusive use of the board, its members, officers, investigators, agents and attorneys in evaluating the applicant's eligibility or disqualification for licensure, and shall be exempt from the Mississippi Public Records Act of 1983. Except when introduced into evidence in a hearing before the board to determine licensure, no such information or records related thereto shall, except with the written consent of the applicant or by order of a court of competent jurisdiction, be released or otherwise disclosed by the board to any other person or agency.

The board shall provide to the department the fingerprints of the applicant, any additional information that may be required by the department, and a form signed by the applicant consenting to the check of the criminal records and to the use of the fingerprints and other identifying information required by the state or national repositories.

The board shall charge and collect from the applicant, in addition to all other applicable fees and costs, such amount as may be incurred by the board in requesting and obtaining state and national criminal history records information on the applicant.

The board may, in its discretion, refuse to accept the application of any person who has been convicted of a criminal offense under any provision of Title 97 of the Mississippi Code of 1972, as now or hereafter amended, or any provision of this chapter.

(2) Licensure by examination.

(a) Upon the board being satisfied that an applicant for a license as a registered nurse has met the qualifications set forth in subsection (1) of this section, the board shall proceed to
examine such applicant in such subjects as the board shall, in its discretion, determine. The
subjects in which applicants shall be examined shall be in conformity with curricula in schools
of nursing approved by the Board of Trustees of State Institutions of Higher Learning, or one
approved by a legal accrediting agency of another state, territory or possession of the United
States, the District of Columbia, or a foreign country which is satisfactory to the board.

(b) The applicant shall be required to pass the written examination as selected by the board.
(c) Upon successful completion of such examination, the board shall issue to the applicant a
license to practice as a registered nurse.
(d) The board may use any part or all of the State Board Test Pool Examination for registered
nurse licensure, its successor examination, or any other nationally standardized examination
identified by the board in its rules. The passing score shall be established by the board in its
rules.

(3) Licensure by endorsement. The board may issue a license to practice nursing as a registered
nurse without examination to an applicant who has been duly licensed as a registered nurse under
the laws of another state, territory or possession of the United States, the District of Columbia, or a
foreign country if, in the opinion of the board, the applicant meets the qualifications required of
licensed registered nurses in this state and has previously achieved the passing score or scores on
the licensing examination required by this state, at the time of his or her graduation.

(4) Requirements for rewriting the examination. The board shall establish in its rules the requirements
for rewriting the examination for those persons failing the examination on the first writing or
subsequent writing.

(5) Fee. The applicant applying for a license by examination or by endorsement to practice as a
registered nurse shall pay a fee not to exceed One Hundred Dollars ($100.00) to the board.

(6) Temporary permit.
(a) The board may issue a temporary permit to practice nursing to a graduate of an approved
school of nursing pending the results of the examination in Mississippi, and to a qualified
applicant from another state, territory or possession of the United States, or District of
Columbia, or pending licensure procedures as provided for elsewhere in this chapter. The fee
shall not exceed Twenty-five Dollars ($25.00).
(b) The board may issue a temporary permit for a period of ninety (90) days to a registered nurse
who is currently licensed in another state, territory or possession of the United States or the
District of Columbia and who is an applicant for licensure by endorsement. Such permit is not
renewable except by board action.
(c) The board may issue a temporary permit to a graduate of an approved school of nursing
pending the results of the first licensing examination scheduled after application. Such permit
is not renewable except by board action.
(d) The board may issue a temporary permit for a period of thirty (30) days to any registered
nurse during the time enrolled in a nursing reorientation program. This time period may be
extended by board action. The fee shall not exceed Twenty-five Dollars ($25.00).
(e) The board may adopt such regulations as are necessary to limit the practice of persons to
whom temporary permits are issued.

(7) Temporary license. The board may issue a temporary license to practice nursing at a youth camp
licensed by the State Board of Health to nonresident registered nurses and retired resident
registered nurses under the provisions of Section 75-74-8.

(8) Title and abbreviation. Any person who holds a license or holds the privilege to practice as a
registered nurse in this state shall have the right to use the title "registered nurse" and the
abbreviation "R.N." No other person shall assume such title or use such abbreviation, or any words,
letters, signs or devices to indicate that the person using the same is a registered nurse.

(9) Registered nurses licensed under a previous law. Any person holding a license to practice nursing
as a registered nurse issued by this board which is valid on July 1, 1981, shall thereafter be
deemed to be licensed as a registered nurse under the provisions of this chapter upon payment of
the fee provided in Section 73-15-27.

(10) Each application or filing made under this section shall include the Social Security Number(s) of the
applicant in accordance with Section 93-11-64.

(1) Advanced practice registered nurses. Any nurse desiring to be certified as an advanced registered nurse practitioner shall apply to the board and submit proof that he or she holds a current license to practice professional nursing and that he or she meets one or more of the following requirements:
(a) Satisfactory completion of a formal post-basic educational program of at least one academic year, the primary purpose of which is to prepare nurses for advanced or specialized practice.
(b) Certification by a board approved certifying body. Such certification shall be required for initial state certification and any re-certification as a registered nurse anesthetist, nurse practitioner or nurse midwife. The board may by rule provide for provisional or temporary state certification of graduate nurse practitioners or nurse midwives for a period of time determined to be appropriate for preparing and passing the national certification examination. Those with provisional or temporary certifications must practice under the direct supervision of a licensed physician or a certified nurse practitioner or certified nurse midwife.
(c) Graduation from a program leading to a master’s or post-master’s degree in a nursing clinical specialty area with preparation in specialized practitioner skills.

(2) Rulemaking. The board shall provide by rule the appropriate requirements for advanced practice registered nurses in the categories of certified registered nurse anesthetist, certified nurse midwife and advance practice registered nurse.

(3) Collaboration. An advanced practice registered nurse shall perform those functions authorized in this section within a collaborative/consultative relationship with a dentist or physician with an unrestricted license to practice dentistry or medicine in this state and within an established protocol or practice guidelines, as appropriate, that is filed with the board upon license application, license renewal, after entering into a new collaborative/consultative relationship or making changes to the protocol or practice guidelines or practice site. The board shall review and approve the protocol to ensure compliance with applicable regulatory standards. The advanced practice registered nurse may not practice as an APRN if there is no collaborative/consultative relationship with a physician or dentist and a board approved protocol or practice guidelines.

(4) Renewal. The board shall renew a license for an advanced practice registered nurse upon receipt of the renewal application, fees and protocol or practice guidelines. The board shall adopt rules establishing procedures for license renewals. The board shall by rule prescribe continuing education requirements for advanced practice nurses not to exceed forty (40) hours biennially as a condition for renewal of a license or certificate.

(5) Reinstatement. Advanced practice registered nurses may reinstate a lapsed privilege to practice upon submitting documentation of a current active license to practice professional nursing, a reinstatement application and fee, a protocol or practice guidelines, documentation of current certification as an advanced practice nurse in a designated area of practice by a national certification organization recognized by the board and documentation of at least forty (40) hours of continuing education related to the advanced clinical practice of the nurse practitioner within the previous two year period. The board shall adopt rules establishing the procedure for reinstatement.

(6) Changes in status. The advanced practice registered nurse shall notify the board immediately regarding changes in the collaborative/consultative relationship with a licensed physician or dentist. If changes leave the advanced practice registered nurse without a board approved collaborative/consultative relationship with a physician or dentist, the advanced practice nurse may not practice as an advanced practice registered nurse.

(7) Practice requirements. The advanced practice registered nurse shall practice:
(a) According to standards and guidelines of the national certification organization.
(b) In a collaborative/consultative relationship with a licensed physician whose practice is compatible with that of the nurse practitioner. Certified registered nurse anesthetists may collaborate/consult with licensed dentists. The nurse practitioner must be able to communicate reliably with a collaborating/consulting physician or dentist while practicing.
(c) According to a board-approved protocol or practice guidelines.
(d) Advanced practice registered nurses practicing as nurse anesthetists must practice according to board-approved practice guidelines that address pre-anesthesia preparation and evaluation; anesthesia induction, maintenance, and emergence; post-anesthesia care; peri-anesthetic and clinical support functions.
Advanced practice registered nurses practicing in other specialty areas must practice according to a board-approved protocol that has been mutually agreed upon by the nurse practitioner and a Mississippi licensed physician or dentist whose practice or prescriptive authority is not limited as a result of voluntary surrender or legal/regulatory order.

Each collaborative/consultative relationship shall include and implement a formal quality assurance/quality improvement program which shall be maintained on site and shall be available for inspection by representatives of the board. This quality assurance/quality improvement program must be sufficient to provide a valid evaluation of the practice and be a valid basis for change, if any;

Nurse practitioners may not write prescriptions for, dispense or order the use of or administration of any schedule of controlled substances except as contained in this chapter.

Prescribing controlled substances and medications. Certified nurse midwives and certified nurse practitioners may apply for controlled substance prescriptive authority after completing a board approved educational program. Certified nurse midwives and certified nurse practitioners who have completed the program and received prescription authority from the board may prescribe Schedules II-V. The words "administer," "controlled substances," and "ultimate user," shall have the same meaning as set forth in Section 41-29-105, unless the context otherwise requires. The board shall promulgate rules governing prescribing of controlled substances, including distribution, record keeping, drug maintenance, labeling and distribution requirements and prescription guidelines for controlled substances and all medications. Prescribing any controlled substance in violation of the rules promulgated by the board shall constitute a violation of Section 73-15-29(1)(f), (k) and (l) and shall be grounds for disciplinary action. The prescribing, administering or distributing of any legend drug or other medication in violation of the rules promulgated by the board shall constitute a violation of Section 73-15-29(1)(f), (k) and (l) and shall be grounds for disciplinary action.


Licensed practical nurse applicant qualifications. Any applicant for a license to practice practical nursing as a licensed practical nurse shall submit to the board:

(a) An attested written application on a Board of Nursing form;
(b) A diploma from an approved high school or the equivalent thereof, as determined by the appropriate educational agency;
(c) Written official evidence of completion of a practical nursing program approved by the State Department of Education through its Division of Vocational Education, or one approved by a legal accrediting agency of another state, territory or possession of the United States, the District of Columbia, or a foreign country which is satisfactory to this board;
(d) Evidence of competence in English related to nursing, provided the first language is not English;
(e) Any other official records required by the board.

In addition to the requirements specified in paragraphs (a) through (e) of this subsection, in order to qualify for a license to practice as a licensed practical nurse, an applicant must have successfully been cleared for licensure through an investigation that shall consist of a determination as to good moral character and verification that the prospective licensee is not guilty of or in violation of any statutory ground for denial of licensure as set forth in Section 73-15-29 or guilty of any offense specified in Section 73-15-33. To assist the board in conducting its licensure investigation, all applicants shall undergo a fingerprint-based criminal history records check of the Mississippi central criminal database and the Federal Bureau of Investigation criminal history database. Each applicant shall submit a full set of his or her fingerprints in a form and manner prescribed by the board, which shall be forwarded to the Mississippi Department of Public Safety (department) and the Federal Bureau of Investigation Identification Division for this purpose.

Any and all state or national criminal history records information obtained by the board that is not already a matter of public record shall be deemed nonpublic and confidential information restricted to the exclusive use of the board, its members, officers, investigators, agents and
attorneys in evaluating the applicant's eligibility or disqualification for licensure, and shall be exempt from the Mississippi Public Records Act of 1983. Except when introduced into evidence in a hearing before the board to determine licensure, no such information or records related thereto shall, except with the written consent of the applicant or by order of a court of competent jurisdiction, be released or otherwise disclosed by the board to any other person or agency.

The board shall provide to the department the fingerprints of the applicant, any additional information that may be required by the department, and a form signed by the applicant consenting to the check of the criminal records and to the use of the fingerprints and other identifying information required by the state or national repositories.

The board shall charge and collect from the applicant, in addition to all other applicable fees and costs, such amount as may be incurred by the board in requesting and obtaining state and national criminal history records information on the applicant.

The board may, in its discretion, refuse to accept the application of any person who has been convicted of a criminal offense under any provision of Title 97 of the Mississippi Code of 1972, as now or hereafter amended, or any provision of this chapter.

(2) Licensure by examination.
   (a) Upon the board being satisfied that an applicant for a license as a practical nurse has met the qualifications set forth in subsection (1) of this section, the board shall proceed to examine such applicant in such subjects as the board shall, in its discretion, determine. The subjects in which applicants shall be examined shall be in conformity with curricula in schools of practical nursing approved by the State Department of Education.
   (b) The applicant shall be required to pass the written examination selected by the board.
   (c) Upon successful completion of such examination, the board shall issue to the applicant a license to practice as a licensed practical nurse.
   (d) The board may use any part or all of the State Board Test Pool Examination for practical nurse licensure, its successor examination, or any other nationally standardized examination identified by the board in its rules. The passing score shall be established by the board in its rules.

(3) Licensure by endorsement. The board may issue a license to practice practical nursing as a licensed practical nurse without examination to an applicant who has been duly licensed as a licensed practical nurse under the laws of another state, territory or possession of the United States, the District of Columbia, or a foreign country if, in the opinion of the board, the applicant meets the qualifications required of licensed practical nurses in this state and has previously achieved the passing score or scores on the licensing examination required by this state at the time of his or her graduation.

(4) Licensure by equivalent amount of theory and clinical experience. In the discretion of the board, former students of a state accredited school preparing students to become registered nurses may be granted permission to take the examination for licensure to practice as a licensed practical nurse, provided the applicant's record or transcript indicates the former student completed an equivalent amount of theory and clinical experience as required of a graduate of a practical nursing program, and provided the school attended was, at the time of the student's attendance, an accredited school of nursing.

(5) Requirements for rewriting the examination. The board shall establish in its rules the requirements for rewriting the examination for those persons failing the examination on the first writing or subsequent writing.

(6) Fee. The applicant applying for a license by examination or by endorsement to practice as a licensed practical nurse shall pay a fee not to exceed Sixty Dollars ($60.00) to the board.

(7) Temporary permit.
   (a) The board may issue a temporary permit to practice practical nursing to a graduate of an approved school of practical nursing pending the results of the examination in Mississippi, and to a qualified applicant from another state, territory or possession of the United States, or the District of Columbia, pending licensing procedures as provided elsewhere in this chapter. The fee shall not exceed Twenty-five Dollars ($25.00).
   (b) The board may issue a temporary permit for a period of ninety (90) days to a licensed practical nurse who is currently licensed in another state, territory or possession of the United
States or the District of Columbia and who is an applicant for licensure by endorsement. Such permit is not renewable except by board action.

(c) The board may issue a temporary permit to a graduate of an approved practical nursing education program or an equivalent program satisfactory to the board pending the results of the first licensing examination scheduled after application. Such permit is not renewable except by board action.

(d) The board may issue a temporary permit for a period of thirty (30) days to any licensed practical nurse during the time enrolled in a nursing reorientation program. This time period may be extended by board action. The fee shall not exceed Twenty-five Dollars ($25.00).

(e) The board may adopt such regulations as are necessary to limit the practice of persons to whom temporary permits are issued.

(8) Title and abbreviation. Any person who holds a license or holds the privilege to practice as a licensed practical nurse in this state shall have the right to use the title "licensed practical nurse" and the abbreviation "L.P.N." No other person shall assume such title or use such abbreviation, or any words, letters, signs or devices to indicate that a person using the same is a licensed practical nurse.

(9) Licensed practical nurses licensed under a previous law. Any person holding a license to practice nursing as a practical nurse issued by this board which is valid on July 1, 1981, shall thereafter be deemed to be licensed as a practical nurse under the provisions of this chapter upon payment of the fee prescribed in Section 73-15-27.

(10) Each application or filing made under this section shall include the Social Security Number(s) of the applicant in accordance with Section 93-11-64.


The Nurse Licensure Compact is enacted into law and entered into by this state with any and all states legally joining in the compact in accordance with its terms, in the form substantially as follows:

Article I. Findings and Declaration of Purpose.

(a) The party states find that:

(1) The health and safety of the public are affected by the degree of compliance with and the effectiveness of enforcement activities related to state nurse licensure laws;
(2) Violations of nurse licensure and other laws regulating the practice of nursing may result in injury or harm to the public;
(3) The expanded mobility of nurses and the use of advanced communication technologies as part of our nation’s healthcare delivery system require greater coordination and cooperation among states in the area of nurse licensure and regulation;
(4) New practice modalities and technology make compliance with individual state nurse licensure laws difficult and complex;
(5) The current system of duplicative licensure for nurses practicing in multiple states is cumbersome and redundant to both nurses and states.

(b) The general purposes of this Compact are to:

(1) Facilitate the states’ responsibility to protect the public’s health and safety;
(2) Ensure and encourage the cooperation of party states in the areas of nurse licensure and regulation;
(3) Facilitate the exchange of information between party states in the areas of nurse regulation, investigation and adverse actions;
(4) Promote compliance with the laws governing the practice of nursing in each jurisdiction;
(5) Invest all party states with the authority to hold a nurse accountable for meeting all state practice laws in the state in which the patient is located at the time care is rendered through the mutual recognition of party state licenses.
Article II. Definitions.

As used in this Compact:
(a) “Adverse action” means a home or remote state action.
(b) “Alternative program” means a voluntary, non-disciplinary monitoring program approved by a nurse licensing board.
(c) “Coordinated licensure information system” means an integrated process for collecting, storing, and sharing information on nurse licensure and enforcement activities related to nurse licensure laws, which is administered by a non-profit organization composed of and controlled by state nurse licensure boards.
(d) “Current significant investigative information” means:
(1) Investigative information that a licensing board, after a preliminary inquiry that includes notification and an opportunity for the nurse to respond if required by state law, has reason to believe is not groundless and, if proved true, would indicate more than a minor infraction; or
(2) Investigative information that indicates that the nurse represents an immediate threat to public health and safety regardless of whether the nurse has been notified and had an opportunity to respond.
(e) “Home state” means the party state which is the nurse’s primary state of residence.
(f) “Home state action” means any administrative, civil, equitable or criminal action permitted by the home state’s laws which are imposed on a nurse by the home state’s licensing board or other authority including actions against an individual’s license such as: revocation, suspension, probation or any other action which affects a nurse’s authorization to practice.
(g) “Licensing board” means a party state’s regulatory body responsible for issuing nurse licenses.
(h) “Multistate licensure privilege” means current, official authority from a remote state permitting the practice of nursing as either a registered nurse or a licensed practical/vocational nurse in such party state. All party states have the authority, in accordance with existing state due process law, to take actions against the nurse’s privilege such as: revocation, suspension, probation or any other action which affects a nurse’s authorization to practice.
(i) “Nurse” means a registered nurse or licensed practical/vocational nurse, as those terms are defined by each party’s state practice laws.
(j) “Party state” means any state that has adopted this Compact.
(k) “Remote state” means a party state, other than the home state,
(1) Where the patient is located at the time nursing care is provided, or,
(2) In the case of the practice of nursing not involving a patient, in such party state where the recipient of nursing practice is located.
(l) “Remote state action” means
(1) Any administrative, civil, equitable or criminal action permitted by a remote state’s laws which are imposed on a nurse by the remote state’s licensing board or other authority including actions against an individual’s multistate licensure privilege to practice in the remote state, and
(2) Cease and desist and other injunctive or equitable orders issued by remote states or the licensing boards thereof.
(m) “State” means a state, territory, or possession of the United States, the District of Columbia or the Commonwealth of Puerto Rico.
(n) “State practice laws” means those individual party’s state laws and regulations that govern the practice of nursing, define the scope of nursing practice, and create the methods and grounds for imposing discipline.
(o) “State practice laws” does not include the initial qualifications for licensure or requirements necessary to obtain and retain a license, except for qualifications or requirements of the home state.

Article III. General Provisions and Jurisdiction.

(a) A license to practice registered nursing issued by a home state to a resident in that state will be recognized by each party state as authorizing a multistate licensure privilege to practice as a registered nurse in such party state. A license to practice licensed practical/vocational nursing
issued by a home state to a resident in that state will be recognized by each party state as
authorizing a multistate licensure privilege to practice as a licensed practical/vocational nurse in
such party state. In order to obtain or retain a license, an applicant must meet the home state’s
qualifications for licensure and license renewal as well as all other applicable state laws.

(b) Party states may, in accordance with state due process laws, limit or revoke the multistate
licensure privilege of any nurse to practice in their state and may take any other actions under their
applicable state laws necessary to protect the health and safety of their citizens. If a party state
takes such action, it shall promptly notify the administrator of the coordinated licensure information
system. The administrator of the coordinated licensure information system shall promptly notify the
home state of any such actions by remote states.

c) Every nurse practicing in a party state must comply with the state practice laws of the state in which
the patient is located at the time care is rendered. In addition, the practice of nursing is not limited
to patient care, but shall include all nursing practice as defined by the state practice laws of a party
state. The practice of nursing will subject a nurse to the jurisdiction of the nurse licensing board
and the courts, as well as the laws, in that party state.

d) This Compact does not affect additional requirements imposed by states for advanced practice
registered nursing. However, a multistate licensure privilege to practice registered nursing granted
by a party state shall be recognized by other party states as a license to practice registered nursing
if one is required by state law as a precondition for qualifying for advanced practice registered
nurse authorization.

e) Individuals not residing in a party state shall continue to be able to apply for nurse licensure as
provided for under the laws of each party state. However, the license granted to these individuals
will not be recognized as granting the privilege to practice nursing in any other party state unless
explicitly agreed to by that party state.

Article IV. Applications for Licensure in a Party State.

(a) Upon application for a license, the licensing board in a party state shall ascertain, through the
coordinated licensure information system, whether the applicant has ever held, or is the holder of, a
license issued by any other state, whether there are any restrictions on the multistate licensure
privilege, and whether any other adverse action by any state has been taken against the license.

(b) A nurse in a party state shall hold licensure in only one (1) party state at a time, issued by the home
state.

(c) A nurse who intends to change primary state of residence may apply for licensure in the new home
state in advance of such change. However, new licenses will not be issued by a party state until
after a nurse provides evidence of change in primary state of residence satisfactory to the new
home state’s licensing board.

(d) When a nurse changes primary state of residence by:
   (1) Moving between two (2) party states, and obtains a license from the new home state, the
license from the former home state is no longer valid;
   (2) Moving from a non-party state to a party state, and obtains a license from the new home
state, the individual state license issued by the non-party state is not affected and will remain
in full force if so provided by the laws of the non-party state;
   (3) Moving from a party state to a non-party state, the license issued by the prior home state
converts to an individual state license, valid only in the former home state, without the
multistate licensure privilege to practice in other party states.

Article V. Adverse Actions.

In addition to the General Provisions described in Article III, the following provisions apply:

(a) The licensing board of a remote state shall promptly report to the administrator of the coordinated
licensure information system any remote state actions including the factual and legal basis for such
action, if known. The licensing board of a remote state shall also promptly report any significant
current investigative information yet to result in a remote state action. The administrator of the
coordinated licensure information system shall promptly notify the home state of any such reports.
(b) The licensing board of a party state shall have the authority to complete any pending investigations for a nurse who changes primary state of residence during the course of such investigations. It shall also have the authority to take appropriate action(s), and shall promptly report the conclusions of such investigations to the administrator of the coordinated licensure information system. The administrator of the coordinated licensure information system shall promptly notify the new home state of any such actions.

(c) A remote state may take adverse action affecting the multistate licensure privilege to practice within that party state. However, only the home state shall have the power to impose adverse action against the license issued by the home state.

(d) For the purposes of imposing adverse action, the licensing board of the home state shall give the same priority and effect to reported conduct received from a remote state as it would if such conduct had occurred within the home state. In so doing, it shall apply its own state laws to determine appropriate action.

(e) The home state may take adverse action based on the factual findings of the remote state, so long as each state follows its own procedures for imposing such adverse action.

(f) Nothing in this Compact shall override a party state’s decision that participation in an alternative program may be used in lieu of licensure action and that such participation shall remain non-public if required by the party state’s laws. Party states must require nurses who enter any alternative programs to agree not to practice in any other party state during the term of the alternative program without prior authorization from such other party state.

Article VI. Additional Authorities Invested in Party State Nurse Licensing Boards.

Notwithstanding any other powers, party state nurse licensing boards shall have the authority to:

(a) If otherwise permitted by state law, recover from the affected nurse the costs of investigations and disposition of cases resulting from any adverse action taken against that nurse;

(b) Issue subpoenas for both hearings and investigations which require the attendance and testimony of witnesses, and the production of evidence. Subpoenas issued by a nurse licensing board in a party state for the attendance and testimony of witnesses, and/or the production of evidence from another party state, shall be enforced in the latter state by any court of competent jurisdiction, according to the practice and procedure of that court applicable to subpoenas issued in proceedings pending before it. The issuing authority shall pay any witness fees, travel expenses, mileage and other fees required by the service statutes of the state where the witnesses and/or evidence are located.

(c) Issue cease and desist orders to limit or revoke a nurse’s authority to practice in their state;

(d) Promulgate uniform rules and regulations as provided for in Article VIII(c).

Article VII. Coordinated Licensure Information System.

(a) All party states shall participate in a cooperative effort to create a coordinated data base of all licensed registered nurses and licensed practical/vocational nurses. This system will include information on the licensure and disciplinary history of each nurse, as contributed by party states, to assist in the coordination of nurse licensure and enforcement efforts.

(b) Notwithstanding any other provision of law, all party states’ licensing boards shall promptly report adverse actions, actions against multistate licensure privileges, any current significant investigative information yet to result in adverse action, denials of applications, and the reasons for such denials, to the coordinated licensure information system.

(c) Current significant investigative information shall be transmitted through the coordinated licensure information system only to party state licensing boards.

(d) Notwithstanding any other provision of law, all party states’ licensing boards contributing information to the coordinated licensure information system may designate information that may not be shared with non-party states or disclosed to other entities or individuals without the express permission of the contributing state.

(e) Any personally identifiable information obtained by a party state’s licensing board from the coordinated licensure information system may not be shared with non-party states or disclosed to
other entities or individuals except to the extent permitted by the laws of the party state contributing the information.

(f) Any information contributed to the coordinated licensure information system that is subsequently required to be expunged by the laws of the party state contributing that information, shall also be expunged from the coordinated licensure information system.

(g) The Compact administrators, acting jointly with each other and in consultation with the administrator of the coordinated licensure information system, shall formulate necessary and proper procedures for the identification, collection and exchange of information under this Compact.

Article VIII. Compact Administration and Interchange of Information.

(a) The head of the nurse licensing board, or his/her designee, of each party state shall be the administrator of this Compact for his/her state.

(b) The Compact administrator of each party state shall furnish to the Compact administrator of each other party state any information and documents including, but not limited to, a uniform data set of investigations, identifying information, licensure data, and disclosable alternative program participation information to facilitate the administration of this Compact.

(c) Compact administrators shall have the authority to develop uniform rules to facilitate and coordinate implementation of this Compact. These uniform rules shall be adopted by party states, under the authority invested under Article VI (d).

Article IX. Immunity.

No party state or the officers or employees or agents of a party state’s nurse licensing board who acts in accordance with the provisions of this Compact shall be liable on account of any act or omission in good faith while engaged in the performance of their duties under this Compact. Good faith in this article shall not include willful misconduct, gross negligence, or recklessness.

Article X. Entry into Force, Withdrawal and Amendment.

(a) This Compact shall enter into force and become effective as to any state when it has been enacted into the laws of that state. Any party state may withdraw from this Compact by enacting a statute repealing the same, but no such withdrawal shall take effect until six (6) months after the withdrawing state has given notice of the withdrawal to the executive heads of all other party states.

(b) No withdrawal shall affect the validity or applicability by the licensing boards of states remaining party to the Compact of any report of adverse action occurring prior to the withdrawal.

(c) Nothing contained in this Compact shall be construed to invalidate or prevent any nurse licensure agreement or other cooperative arrangement between a party state and a non-party state that is made in accordance with the other provisions of this Compact.

(d) This Compact may be amended by the party states. No amendment to this Compact shall become effective and binding upon the party states unless and until it is enacted into the laws of all party states.

Article XI. Construction and Severability.

(a) This Compact shall be liberally construed so as to effectuate the purposes thereof. The provisions of this Compact shall be severable and if any phrase, clause, sentence or provision of this Compact is declared to be contrary to the constitution of any party state or of the United States or the applicability thereof to any government, agency, person or circumstance is held invalid, the validity of the remainder of this Compact and the applicability thereof to any government, agency, person or circumstance shall not be affected thereby. If this Compact shall be held contrary to the constitution of any state party thereto, the Compact shall remain in full force and effect as to the remaining party states and in full force and effect as to the party state affected as to all severable matters.
(b) In the event party states find a need for settling disputes arising under this Compact:
   (1) The party states may submit the issues in dispute to an arbitration panel which will be comprised of an individual appointed by the Compact administrator in the home state; an individual appointed by the Compact administrator in the remote state(s) involved; and an individual mutually agreed upon by the Compact administrators of all the party states involved in the dispute.
   (2) The decision of a majority of the arbitrators shall be final and binding.


   (1) The term “head of the nurse licensing board”, as referred to in Article VIII of the Nurse Licensure Compact, shall mean the Executive Director of the Mississippi Board of Nursing.
   (2) The Governor may withdraw this state from the Nurse Licensure Compact if the Board of Nursing notifies the Governor that a state that is a party to the compact changed, after July 1, 2001, the state’s requirements for licensing a nurse and that the state’s requirements, as changed, are substantially lower than the requirements for licensing a nurse in this state.
   (3) The effective date of this Compact shall be July 1, 2001.

§73-15-25. Approval of Schools of Practical Nursing.

In addition to all other powers and duties now vested by law in the State Department of Education, it is hereby empowered and required, acting in this behalf by and through its Division of Vocational Education, to:

   (1) Contract with the State Board of Community and Junior Colleges to establish by rules and regulations and promulgate uniform standards for the accreditation of schools of practical nursing in this state insofar as concerns the eligibility of graduates of such schools to take the examination to become licensed practical nurses;

   (2) Contract with the State Board of Community and Junior Colleges to issue to such schools, upon an annual basis, certificates of accreditation as may be proper under such standards.


The license of every person licensed under the provisions of this chapter shall be renewed biennially except as hereafter provided:

   (a) Registered Nurses:
      (i) The license to practice as a registered nurse shall be valid for two (2) calendar years, beginning January 1 of each uneven-numbered year and expiring December 31 in each even-numbered year of the biennial period and subject to renewal for each period of two (2) years thereafter.
      (ii) A notice for renewal of licensure will be mailed by the board on or before November 1 of the year the license expires to every person to whom a license was issued or renewed during the biennial period. Such application shall be completed and returned to the board by December 31 of that year with the biennial renewal fee to be set at the discretion of the board, but not to exceed One Hundred Dollars ($100.00).
      (iii) Upon receipt of the application and fee, the board shall verify the accuracy of the application and issue to the applicant a certificate of renewal for the ensuing period of two (2) years. Such renewal shall render the holder thereof the right to practice as a registered nurse.
      (iv) A registered nurse may request in writing to the board that his or her license be placed on inactive status. The board may grant such request and shall have authority, in its discretion, to attach conditions to the licensure of such registered nurse while on inactive status. A biennial renewal fee for inactive registered nurses shall be set at the discretion of the board, not to exceed Fifty Dollars ($50.00).
      (v) Any registered nurse applying for a license, renewal of an active license, reinstatement of a lapsed license, or change from inactive to active status may be required to provide evidence
of continuing basic nursing competencies when such nurse has not practiced nursing for compensation or performed the function of a registered nurse in a voluntary capacity with or without compensation within the five-year period immediately prior to such application for a license, renewal, reinstatement or change of status.

(vi) Any registered nurse who permits his or her license to lapse by failing to renew the license as provided above may be reinstated by the board on satisfactory explanation for such failure to renew his or her license, by compliance with all other applicable provisions of this chapter, by completion of a reinstatement form, and upon payment of a reinstatement fee not to exceed One Hundred Dollars ($100.00) which shall not include the renewal fee for the current biennial period. Any registered nurse who permits his or her license to lapse shall be notified by the board within fifteen (15) days of such lapse.

(vii) Any person practicing as a registered nurse during the time his or her license has lapsed shall be considered in violation of this chapter and shall be subject to the penalties provided for violation of this chapter, provided the registered nurse has not submitted the required reinstatement form and fees within fifteen (15) days after notification by the board of such lapse.

(b) Licensed Practical Nurses:

(i) The license to practice as a licensed practical nurse shall be valid for two (2) calendar years, beginning January 1 of each even-numbered year and expiring December 31 in each uneven-numbered year of the biennial period and subject to renewal for each period of two (2) years thereafter.

(ii) A notice for renewal of licensure will be mailed by the board on or before November 1 of the year the license expires to every person to whom a license was issued or renewed during the biennial period. Such application shall be completed and returned to the board by December 31 of that year with the biennial renewal fee to be set at the discretion of the board, but not to exceed One Hundred Dollars ($100.00).

(iii) Upon receipt of the application and fee, the board shall verify the accuracy of the application and issue to the applicant a certificate of renewal for the ensuing period of two (2) years. Such renewal shall render the holder thereof the right to practice as a licensed practical nurse.

(iv) A licensed practical nurse may request in writing to the board that his or her license be placed on inactive status. The board may grant such request and shall have authority, in its discretion, to attach conditions to the licensure of such licensed practical nurse while on inactive status. A biennial renewal fee for inactive licensed practical nurses shall be set at the discretion of the board, not to exceed Fifty Dollars ($50.00).

(v) Any licensed practical nurse applying for a license, renewal of an active license, reinstatement of a lapsed license, or change from inactive to active status may be required to provide evidence of continuing basic nursing competencies when such nurse has not practiced nursing for compensation or performed the function of a licensed practical nurse in a voluntary capacity with or without compensation within the five-year period immediately prior to such application for a license, renewal, reinstatement or change of status.

(vi) Any licensed practical nurse who permits his or her license to lapse by failing to renew the license as provided above may be reinstated by the board upon satisfactory explanation for such failure to renew his or her license, by compliance with all other applicable provisions of this chapter, by completion of a reinstatement form, and upon payment of the reinstatement fee not to exceed One Hundred Dollars ($100.00), which shall not include the renewal fee for the current biennial period. Any licensed practical nurse who permits his or her license to lapse shall be notified by the board within fifteen (15) days of such lapse.

(vii) Any person practicing as a licensed practical nurse during the time his or her license has lapsed shall be considered an illegal practitioner and shall be subject to the penalties provided for violation of this chapter, provided the license practical nurse has not submitted the required reinstatement form and fees within fifteen (15) days after notification by the board of such lapse.

(1) The board shall have power to revoke, suspend or refuse to renew any license issued by the board, or to revoke or suspend any privilege to practice, or to deny an application for a license, or to fine, place on probation and/or discipline a licensee, in any manner specified in this chapter, upon proof that such person:

(a) Has committed fraud or deceit in securing or attempting to secure such license;
(b) Has been convicted of felony, or a crime involving moral turpitude or has had accepted by a court a plea of nolo contendere to a felony or a crime involving moral turpitude (a certified copy of the judgment of the court of competent jurisdiction of such conviction or pleas shall be prima facie evidence of such conviction);
(c) Has negligently or willfully acted in a manner inconsistent with the health or safety of the persons under the licensee's care;
(d) Has had a license or privilege to practice as a registered nurse or a licensed practical nurse suspended or revoked in any jurisdiction, has voluntarily surrendered such license or privilege to practice in any jurisdiction, has been placed on probation as a registered nurse or licensed practical nurse in any jurisdiction or has been placed under a disciplinary order(s) in any manner as a registered nurse or licensed practical nurse in any jurisdiction, (a certified copy of the order of suspension, revocation, probation or disciplinary action shall be prima facie evidence of such action);
(e) Has negligently or willfully practiced nursing in a manner that fails to meet generally accepted standards of such nursing practice;
(f) Has negligently or willfully violated any order, rule or regulation of the board pertaining to nursing practice or licensure;
(g) Has falsified or in a repeatedly negligent manner made incorrect entries or failed to make essential entries on records;
(h) Is addicted to or dependent on alcohol or other habit-forming drugs or is a habitual user of narcotics, barbiturates, amphetamines, hallucinogens, or other drugs having similar effect, or has misappropriated any medication;
(i) Has a physical, mental or emotional condition that renders the licensee unable to perform nursing services or duties with reasonable skill and safety;
(j) Has engaged in any other conduct, whether of the same or of a different character from that specified in this chapter, that would constitute a crime as defined in Title 97 of the Mississippi Code of 1972, as now or hereafter amended, and that relates to such person's employment as a registered nurse or licensed practical nurse;
(k) Engages in conduct likely to deceive, defraud or harm the public;
(l) Engages in any unprofessional conduct as identified by the board in its rules;
(m) Has violated any provision of this chapter.

(2) When the board finds any person unqualified because of any of the grounds set forth in subsection (1) of this section, it may enter an order imposing one or more of the following penalties:

(a) Denying application for a license or other authorization to practice nursing or practical nursing;
(b) Administering a reprimand;
(c) Suspending or restricting the license or other authorization to practice as a registered nurse or licensed practical nurse for up to two (2) years without review;
(d) Revoking the license or other authorization to practice nursing or practical nursing;
(e) Requiring the disciplinee to submit to care, counseling or treatment by persons and/or agencies approved or designated by the board as a condition for initial, continued or renewed licensure or other authorization to practice nursing or practical nursing;
(f) Requiring the disciplinee to participate in a program of education prescribed by the board as a condition for initial, continued or renewed licensure or other authorization to practice;
(g) Requiring the disciplinee to practice under the supervision of a registered nurse for a specified period of time; or
(h) Imposing a fine not to exceed Five Hundred Dollars ($500.00).
In addition to the grounds specified in subsection (1) of this section, the board shall be authorized to suspend the license or privilege to practice of any licensee for being out of compliance with an order for support, as defined in Section 93-11-153. The procedure for suspension of a license or privilege to practice for being out of compliance with an order for support, and the procedure for the reissuance or reinstatement of a license or privilege to practice suspended for that purpose, and the payment of any fees for the reissuance or reinstatement of a license or privilege to practice suspended for that purpose, shall be governed by Section 93-11-157 or 93-11-163, as the case may be. If there is any conflict between any provision of this chapter, the provisions of Section 93-11-157 or 93-11-163, as the case may be, shall control.

If the public health, safety or welfare imperatively requires emergency action and the Board incorporates a finding to the effect in an order, the Board may order summary suspension of a license pending proceedings for revocation or other action. Theses proceeding shall be promptly instituted and determined by the Board.


(1) Charges may be brought upon sworn affidavit filed by the Board of Nursing against any licensee who has allegedly committed any act in violation of this chapter that is grounds for disciplinary action. Upon receiving the sworn affidavit charging a licensee with an act which is a ground for disciplinary action under this chapter, the executive director or designee of the board shall fix a time and place for a hearing and shall cause a copy of the specific allegations and charges to be sent by certified mail or served by personal service of process together with notice of the time and place fixed for the hearing, to be served upon the accused at least fifteen (15) days prior thereto. The accused may waive notice of the hearing in writing and the board may grant the accused at least one (1) extension of time, upon the request of the accused. When personal service of process or service of process by certified mail cannot be effected, the executive director of the board shall cause to be published once in each of three (3) successive weeks a notice of the hearing in the newspapers published in the county in which the accused last practiced according to the records of the board, or in the county in which the accused last resided. When publication of the notice is necessary, the date of the hearing shall not be less than ten (10) days after the last date of the notice.

(2) The board, acting by and through its executive director, shall have the power to subpoena persons and compel the production of any records, including, but not limited to, hospital and physician's records, papers and other documents, which shall be served in accordance with law for the Board of Nursing and on behalf of the accused. The person providing copies shall prepare them from the original records and shall delete from the copy provided pursuant to the subpoena the name of the individual by numbered code, to be retained by the custodian of the records from which the copies were made. Upon certification of the custodian that the copies are true and complete except for the individual's name, they shall be deemed authentic, subject to the right to inspect the originals for the limited purpose of ascertaining the accuracy of the copies. No privilege of confidentiality shall exist with respect to such copies, and no liabilities shall lie against the board or the custodian for furnishing or using such copies in accordance with this chapter.

(3) All records of the investigation and all patient charts, records, emergency room records or any other document that may have been copied shall be kept confidential and shall not be subject to discovery or subpoena. If no disciplinary proceedings are initiated within a period of five (5) years after the determination of insufficient cause, then the board shall destroy all records obtained pursuant to this section.

(4) At the hearings the board shall administer oaths as may be necessary for the proper conduct of the hearings. The accused shall have the right to appear either personally or by counsel, or both, to produce witnesses or evidence in his or her behalf, to cross-examine witnesses, and to have subpoenas issued by the board. All disciplinary hearings shall be conducted by a hearing panel consisting of three (3) members of the board, designated on a rotating basis by the board. All disciplinary hearings or appeals before the board and the Attorney General, and/or a designee thereof, shall not be bound by strict rules of procedure or by the laws of evidence in the conduct of its proceedings, but the determination shall be based upon sufficient legal evidence to sustain it. A
final decision by the hearing panel and by the board on appeal shall include findings of fact and conclusions of law, separately stated, of which the accused shall receive a copy.

(5) If the hearing panel determines that probable cause and sufficient legal evidence exist to believe that an applicant does not possess the qualifications required by this chapter or that an accused has violated any of the provisions of this chapter, the hearing panel may refuse to issue a license to the applicant, or revoke, suspend, refuse to renew a license, or revoke or suspend the privilege to practice, or otherwise discipline the accused as prescribed in this chapter.

(6) No previously issued license to practice nursing as a registered nurse or as a licensed practical nurse shall be revoked or suspended until after a hearing conducted pursuant to this chapter, except where the board finds there is imminent danger to the public health or safety that warrants injunctive relief provided in this chapter.

(7) A revoked or suspended license may be reissued after one (1) year, in the discretion of the hearing panel. A revoked or suspended privilege to practice may be reinstated after one (1) year, in the discretion of the hearing panel. The denial of an application to renew an existing license shall be treated in all respects as a revocation. The procedure for the reissuance of a license or reinstatement of the privilege to practice that is suspended for being out of compliance with an order for support, as defined in Section 93-11-153, shall be governed by Section 93-11-157 or 93-11-163, as the case may be.

(8) The hearing panel need not find that the actions that are grounds for discipline were willful, but it may consider the same in determining the nature of the disciplinary actions imposed.

(9) The right to appeal from the action of the hearing panel to the full membership of the board in denying, revoking, suspending or refusing to renew any license issued by the board, or revoking or suspending any privilege to practice, or fining or otherwise disciplining any person practicing as a registered nurse or licensed practical nurse, is granted. The appeal must be taken within thirty (30) days after notice of the action of the hearing panel in denying, revoking, suspending or refusing to renew the license, or revoking or suspending the privilege to practice, or fining or otherwise disciplining the person, and is perfected upon filing notice of appeal and Fifty Dollars ($50.00) with the executive director of the board.

(10) The right to appeal from the action of the board in affirming the denial, revocation, suspension or refusal to renew any license issued by the board, or revoking or suspending any privilege to practice, or fining or otherwise disciplining of any person practicing as a registered nurse or a licensed practical nurse, is granted. Such appeal shall be to the chancery court of the county of the residence of the licensee on the record made, including a verbatim transcript of the testimony at the hearing. The appeal must be taken within thirty (30) days after notice of the action of the board in denying, revoking, suspending or refusing to renew the license or revoking or suspending the privilege to practice, or fining or otherwise disciplining the person. The appeal is perfected upon filing notice of the appeal, together with a bond in the sum of One Hundred Dollars ($100.00), with two (2) sureties, conditioned that if the action of the board in denying, revoking, suspending or refusing to renew the license, or revoking or suspending the privilege to practice, or fining or otherwise disciplining the person, be affirmed by the chancery court the nurse will pay the costs of the appeal and the action in the chancery court. Such bond shall be approved by the president of the board. In lieu of the bond, the nurse may deposit One Hundred Dollars ($100.00) with the clerk of the chancery court. Appeals may be had to the Supreme Court of the State of Mississippi as provided by law from any final action of the chancery court. No such person shall be allowed to practice nursing or deliver health care services in violation of any action of the chancery court denying, revoking, suspending, restricting or refusing to renew a license or revoking or suspending the privilege to practice while any such appeal to the Supreme Court is pending. Actions taken by the board in suspending a license or suspending the privilege to practice when required by Section 93-11-157 or 93-11-163 are not actions from which an appeal may be taken under this section. Any appeal of a license suspension or suspension of the privilege to practice that is required by Section 93-11-157 or 93-11-163 shall be taken in accordance with the appeal procedure specified in Section 93-11-157 or 93-11-163, as the case may be, rather than the procedure specified in this section.

(11) Nothing contained in this chapter shall be construed to bar any criminal prosecutions for violation of this chapter or any regulations promulgated hereunder.
Any member of the board and any witness appearing before the board shall be immune from suit in any civil action brought by a licensee who is the subject of a review hearing if such member or witness acts in good faith within the scope of the board and has made a reasonable effort to obtain the facts of the matter as to which the individual acts, and acts in the reasonable belief that the action taken is warranted by the facts.

Proceedings in progress on July 1, 1998, to deny, revoke, suspend or refuse to renew any license, or fine or otherwise discipline a licensee, shall not abate by reason of this chapter.


It is unlawful for any person, including a corporation or association to,

(a) Sell, fraudulently obtain or furnish any nursing diploma, license, renewal of license, or record, or to aid or abet therein;

(b) Practice nursing as defined by this chapter under cover of any diploma, license, renewal of license, or record illegally or fraudulently obtained or signed or issued unlawfully or under fraudulent representation;

(c) Practice or offer to practice nursing as defined by this chapter unless duly licensed or privileged to practice under the provisions of this chapter;

(d) Use any designation by which a person presents to the public that he or she is a registered nurse or a licensed practical nurse unless duly licensed or privileged to practice under the provisions of this chapter;

(e) Practice as a registered nurse or licensed practical nurse during the time his or her license or privilege to practice issued under the provisions of this chapter is under suspension or revocation;

(f) Conduct a nursing education program for the preparation of registered nurses, unless the program has been accredited by the Board of Trustees of State Institutions of Higher Learning, or conduct a nursing education program for the preparation of licensed practical nurses unless the program has been accredited by the Department of Education through the Division of Vocational Education;

(g) Willfully employ unlicensed persons or persons not holding the privilege to practice, to practice as registered nurses or licensed practical nurses; or

(h) Willfully aid or abet any person who violates any provisions of this chapter.

Any person, firm or corporation who violates any provisions of this chapter shall be guilty of a misdemeanor and, upon conviction thereof, shall be punished by a fine not less than One Hundred Dollars ($100.00) nor more than One Thousand Dollars ($1,000.00) or by imprisonment in the county jail for not less than twelve (12) months, or by both such fine and imprisonment. It shall be necessary to prove, in any prosecution under this chapter, only a single act prohibited by law, or a single holding out or an attempt without proving a general course of conduct in order to constitute a violation. Each violation may constitute a separate offense. It shall be the duty of the Attorney General to advise with the board in preparing charges, to assist in conducting board disciplinary hearings, to provide assistance with appropriate affidavits and other charges for filing in the appropriate court, and to assist the county or district attorney in prosecution, if any.

§73-15-35. Injunctive Relief.

The practice of nursing as a registered nurse or the practice of nursing as a licensed practical nurse by any person who has not been issued a license or who does not hold the privilege to practice under the provisions of this chapter, or whose license or privilege to practice has been suspended or revoked, or has expired and not been reinstated, or has negligently or willfully practiced nursing in a manner that fails to meet generally accepted standards of such nursing practice, is declared to be a danger to the public health and welfare and shall be enjoined through appropriate court action. In addition to and not in lieu of any other civil, criminal or disciplinary remedy, the Attorney General, the Board of Nursing or the prosecuting attorney of any county where a person is practicing or purporting to practice as a registered nurse or as a licensed practical nurse in violation of this chapter may, in accordance with the laws of this state governing injunctions, maintain an action to enjoin that person from practicing as a registered nurse or a licensed practical nurse until in compliance with the chapter. The court may issue a temporary injunction without notice or without bond enjoining a defendant from further practicing as a registered nurse or a licensed practical nurse. If it is established to the satisfaction of the court that
the defendant has been or is practicing as a registered nurse or a licensed practical nurse without being licensed and in good standing as provided herein, the court may enter a decree perpetually enjoining the defendant from such further activities, and a subsequent violation of which may be considered as contempt of court by any court of competent jurisdiction. Such injunction and contempt proceedings may be in addition to and not in lieu of any other penalties and remedies provided by this chapter.

§73-15-101. Statewide hemodialysis technician certification program created; practicing as certified hemodialysis technician prohibited unless certified under this section; powers of Board of Nursing; applicant qualifications; requirements for renewal of certification; fees.

(1) A statewide program for certification of hemodialysis technicians is created under the Mississippi Board of Nursing.

(2) Unless certified as a certified hemodialysis technician under this section, no person shall:
   (a) Practice as a certified hemodialysis technician; or
   (b) Use the title "certified hemodialysis technician," "hemodialysis technician," or other title, abbreviation, letters, figures, signs, or devices to indicate or imply that the person is a certified hemodialysis technician.

(3) The Board of Nursing is authorized and empowered to:
   (a) Maintain a permanent register of all certified hemodialysis technicians;
   (b) Adopt rules and regulations for certified hemodialysis technician training programs, including standards and curricula;
   (c) Provide for periodic evaluation of training programs;
   (d) Grant, deny or withdraw approval from a training program that fails to meet prescribed standards or fails to maintain a current contract with the board;
   (e) Develop, maintain and administer a certification examination, or grant, deny or withdraw approval of a certification examination(s);
   (f) Adopt rules and regulations for certification of hemodialysis technicians by examination, endorsement, renewal and reinstatement; and
   (g) Conduct disciplinary hearings of certified hemodialysis technicians concerning the restriction, denial, suspension, revocation and/or discipline of a certificate holder in any manner specified in rules and regulations of the board.

(4) Any applicant for certification to practice as a hemodialysis technician shall submit to the Board of Nursing:
   (a) An attested written application on a Board of Nursing form;
   (b) A diploma from an approved high school or the equivalent thereof, as determined by the appropriate education agency;
   (c) Written official evidence of completion of a hemodialysis technician program approved by the Board of Nursing;
   (d) Evidence of competence in English related to health care/nursing if the first language is not English;
   (e) Written official evidence that the applicant has passed the certification examination as approved by the Board of Nursing; and
   (f) Any other official records required by the Board of Nursing.

The Board of Nursing may, in its discretion, refuse to accept the application of any person who has been convicted of a criminal offense under any provision of Title 97 of the Mississippi Code of 1972, or any offense listed in Section 43-11-13(5), or any sex offense included in Section 45-33-23(g), as now or hereafter amended.

(5) Every certificate issued by the Board of Nursing to practice as a certified hemodialysis technician shall be renewed every two (2) years. The certified hemodialysis technician seeking renewal shall submit proof of employment as a certified hemodialysis technician, proof of having met continuing education requirements adopted by the Board of Nursing and any other official records required by the Board of Nursing.

(6) The Board of Nursing shall establish nonrefundable fees necessary for the administration of this section, including, but not limited to, fees for initial certification by initial or later examination,
renewal of certification, reinstatement of a lapsed certificate, endorsement, initial review and approval of a training program, and later review and approval of a training program.

This act shall take effect and be in force from and after July 1, 2010.