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MOMENTUM

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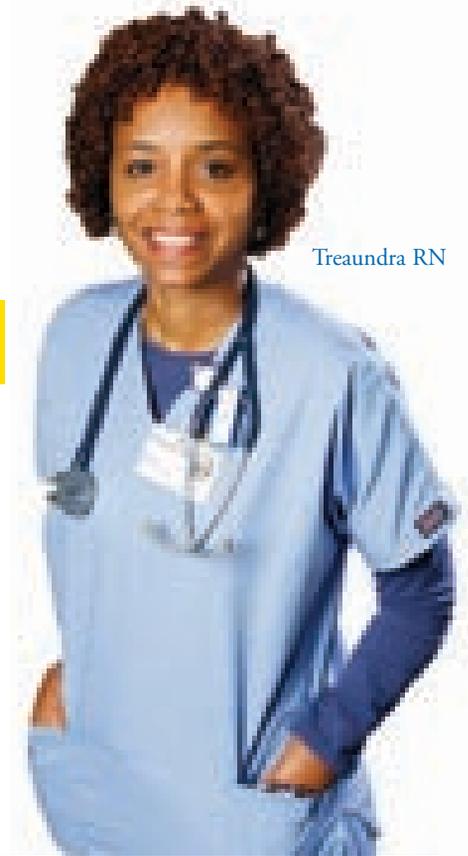
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COVER: BOARD MEMBERS - SEATED, LEFT TO RIGHT - JANET BOECKMAN, J. JANE MCFEE, LISA KLENKE, DEBRA BROADNAX; STANDING, LEFT TO RIGHT - DELPHENIA GILBERT, KATHLEEN DRISCOLL, KATHLEEN O'DELL, ERIC YOON, PATRICIA BURNS, ANNE BARNETT, ELIZABETH BUSCHMANN

Momentum reaches every Nurse and Dialysis Technician, every Hospital and Nursing School Administrator in the State of Ohio. Over 210,000 copies are addressed and mailed statewide. Estimated readership is well over 540,000 with each issue.



Lisa Klenke, MBA, RN
Board President

In the health care industry, it is generally known that the United States is in the midst of a nursing shortage that is expected to intensify as baby boomers age and the need for health care grows. According to the U.S. Department of Health and Human Services, the growth and aging of the population, along with the nation's continued demand for the highest quality care, "will create a surging demand for the services of RNs over the coming two decades." *What is Behind HRSA's Projected Supply, Demand, and Shortage of Registered Nurses* (April 2006).

At the May 2008 Board meeting, the Board received a presentation regarding the nursing labor market in Ohio. We are providing some of

the data from the presentation in hopes that it will be helpful in making informed decisions about your future in nursing, whether it is as an LPN or RN.

Mark Schaff, a labor economist for the Ohio Department of Jobs and Family Services, presented a study entitled "*Registered Nurse (RN) Shortages and the Licensed Practical Nurse (LPN) Competitive Labor Market in Ohio.*" Mr. Schaff provided detailed data revealing that the perceived nursing shortage indeed exists – with respect to RNs, but according to his study, with respect to LPNs, the labor market in Ohio is actually competitive. For RNs, the Ohio forecast of an RN labor shortage is based on conclusions derived from six different local, state and national planning models (e.g., local job vacancy surveys and occupational wage data over time).¹ However, the same models indicate that with respect to LPNs, a "competitive" labor market is predicted, meaning that the supply of LPNs will exceed job opportunities. For example, the average annual openings for LPNs, based on U.S. Department of Labor and Ohio Bureau of Labor Market Information, indicates 1,203 annual LPN job openings² compared to 3,519 total program completers (2005-2006).³

What does this data mean for individuals considering enrollment in an Ohio PN program? First, market demands vary over time. What is now a surplus situation may change in coming years. Second, the surplus of LPNs in Ohio may be regional in nature. For example, in certain parts of the state, the surplus is greater than in other areas, and it may vary not only with geographic location but setting (urban vs. rural).

Many individuals choose to become LPNs and work as LPNs throughout their career, and for others, entry into a practical nursing education program is an attractive, affordable gateway to advancement into RN programs and beyond. Individuals interested in becoming an LPN can look at the job market in the areas they wish to practice and think about their future goals in the nursing profession. For additional information, prospective students may go to <http://lmi.state.oh.us> to review Ohio Labor Market Information.

We wish you well on your journey to become an LPN or RN! •

A handwritten signature in black ink that reads "Lisa R. Klenke". The signature is written in a cursive, flowing style.

¹ ODJFS Report at 7.

² ODJFS Report at 8.

³ ODJFS Report at 9.

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Betsy J. Houchen,
RN, MS, JD
Executive Director

At the September Board meeting, we welcomed new Board member Patricia Protopapa, LPN. Patricia is currently employed by a home care agency. For most of her career, she worked in a hospital psychiatric setting, and while living in Las Vegas, she provided nursing care to the geropsych, Alzheimers, and hospice population. We are happy to welcome Patricia to the Board! We also recognize and thank our previous LPN Board member, Teresa Williams, for her service to the Board.

This year, one focus of the Board is the use of technology in Board operations. One of the Board's strategic initiatives is to "implement technological systems to increase organizational efficiency and the use of resources." Online renewal is technology that increases the Board's efficiency and improves the renewal process for those we license. Renewing online provides a nearly instantaneous renewal process for the licensee and reduces the large volume of paperwork flowing through the Board office.

This year, rather than print and mail renewal applications, the Board encouraged online renewal, and over 37,000 LPNs renewed their licenses online. We achieved an 84 percent online renewal rate—more than double the rate during the last LPN renewal period. The same process will be used for RN renewal in 2009, so watch

for your renewal notification in the spring of 2009 and renew as soon as possible!

Another innovation, anticipated to take effect February 1, 2009, is the elimination of the wallet cards issued by the Board. Verification through the Board website link to the Ohio e-License Center will provide primary source licensure verification. The change will prevent the alteration and fraudulent use of this paper document, eliminate printing errors, and reduce postage costs. Postage costs are high since the Board now regulates approximately 223,000 licensees and certificate holders!

As always, please feel free to contact the Board with questions and comments. Specific e-mail addresses for the units and activities of the Board are provided on the Web site at www.nursing.ohio.gov. •

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Twenty-two National Nursing Organizations JOIN TOGETHER TO COMMISSION A STUDY OF THE IMPACT OF ADVANCED PRACTICE REGISTERED NURSES ON HEALTH CARE QUALITY, SAFETY, AND EFFECTIVENESS

WASHINGTON, D.C., September 24, 2008. The Tri-Council for Nursing is collaborating with a number of national nursing organizations to commission a study of the impact Advanced Practice Registered Nurses (APRNs) have on health care quality and patient outcomes. The first comprehensive study of its kind in 20 years, researchers will examine the evidence connected to care provided by nurses in the four APRN roles - clinical nurse specialists, nurse anesthetists, nurse midwives, and nurse practitioners. Following a competitive process, Robin Newhouse, Ph.D., RN, CNAA, BC, CNOR, with the University of Maryland School of Nursing, has

been selected as the principal investigator for this project. The trans-disciplinary team members (named below) are from the University of Maryland and Johns Hopkins University.

“A sweeping review of the scientific literature on the quality, safety, and effectiveness of care provided by APRNs is needed to inform educational, policy, and organizational decisions,” said Dr. Newhouse. “Our team will evaluate the evidence on the outcomes of care provided by APRNs since 1990 objectively, define the effectiveness and limitations of APRNs, and determine the overall strength of the evidence on this important

topic. I am looking forward to working with my team to provide a qualitative and quantitative synthesis of the evidence.”

Though APRNs have been linked to improved access to health care services, enhanced patient safety, and cost-effective care, a contemporary systematic review is needed to gauge the overall impact these providers are having in today’s health care system. In 1987, the federal Office of Technology Assessment conducted a meta-analysis of the quality and safety of care delivered by nurse practitioners, physician’s assistants, and certified nurse midwives. The overwhelming conclusion of that analysis was that these clinicians are highly skilled, knowledgeable, and effective providers of care. This study also concluded that a significant portion of the care needs of this country could be delivered by these clinicians. Since this study was released, no other national analysis of the growing body of research on APRN practice has been conducted.

This new research effort, titled *An Assessment of the Safety, Quality, and Effectiveness of Care Provided by Advanced Practice Nurses*, will culminate in an expansive final report which will summarize the latest data on APRNs as well as an article for publication in a peer-reviewed journal. This work is expected to be completed by January 2009. The organizations supporting this work understand the essential role APRNs play in the health care delivery system and recognize the ability of these clinicians to provide effective, high quality interventions.

The Tri-Council for Nursing, a long-standing alliance whose members include the American Association of Colleges of Nursing, American Nurses Association, American Organization of Nurse Executives, and Na-



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tional League for Nursing, initiated this analysis of current APRN practice and associated outcomes. To date, 18 additional nursing organizations have endorsed this work and provided the financial contributions needed to fund this sizable study.

Supporting organizations include:

Academy of Medical-Surgical Nurses

American Association of Colleges of Nursing

American Association of Critical Care Nurses

American Association of Nurse Anesthetists

American College of Nurse Midwives

American Nephrology Nurses' Association

American Nurses Association

American Nurses Credentialing Center

American Organization of Nurse Executives

Association of periOperative Registered Nurses

Association of Women's Health, Obstetric and Neonatal Nurses

Commission on Graduates of Foreign Nursing Schools

Hospice and Palliative Nurses Association

National Association of Pediatric Nurse Practitioners

National Board for Certification of Hospice and Palliative Nurses

National Council of State Boards of Nursing

National League for Nursing

National Student Nurses Association

Nursing Economics Foundation

Oncology Nursing Society

Sigma Theta Tau

Society of Trauma Nurses

RESEARCH TEAM

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Study Team:

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Lou Heindel, DNP, CRNA

Meg Johantgen, Ph.D., RN

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BOARD Administrative RULES HEARING

This year, as part of the five-year rule review, the Board has reviewed administrative rule Chapters 4723-4 (Standards of Practice Relative to RN or LPN); 4723-6 (Alternative Program for Chemically Dependent Nurses); 4723-18 (Practice Intervention and Improvement Program); and 4723-20 (Prevention of Disease Transmission). The Board is also proposing minor changes to individual rules. The Board will hold an administrative rules hearing

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on November 19, 2008, at 1:00 p.m. at the Board offices, located at 17 S. High Street, Suite 400, Columbus, Ohio, 43215-7410.

Board to Propose Elimination of License Wallet Cards

In the summer 2008 edition of *Momentum*, the Board discussed a proposal to eliminate paper wallet cards. Today, many employers prefer to verify licensure online through the Ohio e-License Center website. In addition, wallet cards can be altered, forged, or misappropriated, con-

tributing to identify theft and fraud. The Board is proposing to revise Rule 4723-7-07, Ohio Administrative Code, to discontinue issuance of wallet cards.

Board Proposal Regarding Category A Continuing Education

The Board is also proposing to revise a rule related to providers of Category A continuing education. "Category A" means the portion of continuing education that meets the one hour requirement directly related to Chapter 4723 of the Revised Code and the rules of the Ohio Board of Nursing (OBN) as set forth in Rule 4723-14-03 of the Administrative Code. The Board is proposing to require that Category A continuing education must be approved by an OBN approver or an OBN approved provider unit headquartered in the state of Ohio. A list of OBN approvers can be found on the Board's Web site at www.nursing.ohio.gov. Click on the "Education" link on the homepage.



Submission of Comments Regarding Proposed Rules and Rule Changes

Comments regarding proposed rules and/or rule changes may be submitted to the Board by mail, at the Board address indicated above, or by e-mail to: law-rules@nursing.ohio.gov. Comments must be received on or before November 19, 2008, to be considered at the rules hearing. If approved, rule proposals or changes heard on November 19, 2008, will be effective February 1, 2009. •

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TriHealth health system nurtures the mind, body and spirit of its more than 3,000 nurses in diverse ways. Whether its quality of work life, balance of work and leisure, or creating a sense of unity, TriHealth strives to enrich and support their lives.

As part of a \$270 million expansion, new patient towers were opened last year at both Bethesda North and Good Samaritan hospitals, providing a modernized and enhanced work atmosphere for TriHealth nurses to make it easier for them to fulfill their mission of “Caring for People First.”

Mentoring, professional development and assistance

TriHealth recognizes the importance of welcoming new nurses into our culture, as well as helping veterans adapt to changes in systems and processes. Comprehensive orientation programs are provided together with ongoing professional opportunities to help improve performance and maintain personal career goals.

TriHealth nurses are continually invited to increase their knowledge and broaden their experience, allowing them more job choices and great career flexibility. TriHealth’s RN to BSN on-site program provides a unique mentoring arrangement in which a local college allows nurses to earn their BSN right on a TriHealth hospital campus. Last year, TriHealth’s Clinical Coach Program matched 155 new nurses with a preceptor to provide on-the-job skill building and a nurturing wing for the

new nurse’s first few months. On a more personal level, the Graduate Mentoring Program helped 180 first-time nurses in 2007 create bonds with mentors who had common interests and career goals.

Newly assigned nurse managers also are paired with a senior manager to orient them to their new responsibilities. In addition, Manager Training Sessions help new managers develop skills to coach their employees.

Helping Employees Perform and Succeed

For many of our nurses, finding reliable child care and resources for elderly relatives can bring peace of mind. The KinderCare @ Work day care at Bethesda North Hospital, owned by TriHealth, offers discounted child care to all TriHealth employees. TriHealth also offers an in-home Sick Child Care Program.

TriHealth is an equal opportunity employer. We are committed to fostering a diverse and inclusive workforce.

Enhancing Work Life with Other Best Practices

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TriHealth offers qualifying part-time and full-time employees reduced rates on health insurance.

Employee Health and Wellness

To help improve overall health and enjoy active and productive lives at work, at home and in the community, we offer Lifestyles, our employee health and wellness services. Pathways to Wellness, our year-long health improvement program, invites nurses to contact a personal health coach, participate in an exercise tracking program, attend talks on eating style and habits and access preventive health services.

To make exercise more convenient, we offer Employee Fitness centers at both hospitals. TriHealth Fitness & Health Pavilion, with discounted employee memberships, offers child

care, spa services, a swimming pool and a full range of exercise equipment and classes including camps and a host of other programs throughout the year for children.

Financial and Legal Resources

CONCERN: EAP added three new areas in 2007 to provide added financial and legal information and security. These include basic assessment for legal issues, help for victims of identity theft and advice from industry professionals regarding debt management and budgeting. To help plan for the future, retirement planning seminars are offered.

In September of this year, TriHealth was honored with the “**2008 Best in Class Diversity Award**”, presented by the Greater Cincinnati Human Resources Association. This award recognizes TriHealth’s “stellar performance” and leadership in creating, managing and valuing a diverse and inclusive workforce in ways that demonstrate commitment to the understanding, acceptance and value of diversity. For four consecutive years, TriHealth has been named among the 100 Best Companies for *Working Mothers* by *Working Mother Magazine*.

TriHealth hospitals continue to receive recognition locally and nationally for patient care as well, having been named “top-rated” in maternity care, neonatal intensive care, cardiac surgery and cardiology, orthopedics, urology, neurology/neurosurgery, and endocrinology. In addition Bethesda and Good Samaritan were just awarded one of the nation’s most highly regarded healthcare rewards, **2007 Thomson 100 Top Hospitals**. For Bethesda North, this is their fourth consecutive year to receive this esteemed honor.

At TriHealth we sincerely believe that quality doesn’t start or end with an award. To our caring nurses, employees and physicians, it’s a journey we take with every patient, every family member, every interaction. Our tagline, “*Caring For People First*” truly is part of who we are.

TriHealth has current career opportunities for experienced RNs as well as new grads at our top-rated hospitals, **Good Samaritan** and **Bethesda North**, and at many of our more than 50 additional health care service locations. For more information look for our ad in this issue or contact our Nurse Recruiters at:

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Guidelines for licensed nurse administration of cosmetic/aesthetic injectable medications (Sections 4723.01(B) and (F), Ohio Revised Code):

The scope of practice for licensed nurses may include the administration of cosmetic/aesthetic injectable medications in circumstances where:

- The safety and well being of the patient can be ensured;
- There is an established medical regimen;
- There is a medical evaluation;
- There is nursing documentation of a valid order by a licensed health care provider who possesses specific knowledge, skills and abilities in cosmetic/aesthetic procedures that are actively incorporated into the health care provider's practice. The order may include nurse administration of analgesics, topical anesthetics, or subcutaneous infiltration of anesthetic agents consistent with the licensed nurse's scope of practice, education and competence;
- There is a supportive clinical environment that contains appropriate monitoring capabilities;
- The necessary health care personnel and equipment to address complications are available and utilized at all times;
- Infection control standards are utilized at all times.

The administration of cosmetic/aesthetic injectable medications may be within the scope of nursing practice if the following guidelines are observed:

- A. The nurse may execute the cosmetic/aesthetic injectable medication regimen with a valid authorized provider order. An authorized provider is an individual who is authorized to practice in this state and is

acting within the course of the individual's professional practice.

B. In executing the nursing regimen, the licensed nurse should communicate changes in patient status to the authorized provider directing and/or supervising the procedure and to other appropriate personnel.

A licensed nurse should not independently select the medication or dosage to be administered during a procedure.

Locations such as beauty salons, non-medical spas, shopping malls, and private residences may not meet the requirements of a supportive clinical environment that contains appropriate monitoring capabilities, infection control standards, and the availability of the necessary health care personnel and equipment to address complications.

Considerations in the licensed nurse's administration of cosmetic/aesthetic injectable medications (Rules 4723-4-03 and 4723-4-04, Ohio Administrative Code):

1. The licensed nurse providing care to patients receiving cosmetic/aesthetic injectable medication administration should maintain documentation of his/her acquisition of education, demonstrated competency, and other documentation that ensures practice is in compliance with the standards of safe nursing practice.
2. The licensed nurse's education and training should include, but is not limited to, the following that is learned through an organized, formal education program:
 - a. Age-specific physiologic parameters that pertain to the patient's anatomy and physiology, including but not limited to:
 - i. Integumentary system and supporting structures;
 - ii. Muscular system and supporting structures of the face and neck;
 - iii. Vascular system and supporting structures of the face and neck;
 - iv. Nervous system and supporting structures of the face and neck;
 - v. Skeletal system, supporting structures, and associated landmarks and prominences of the face and neck.

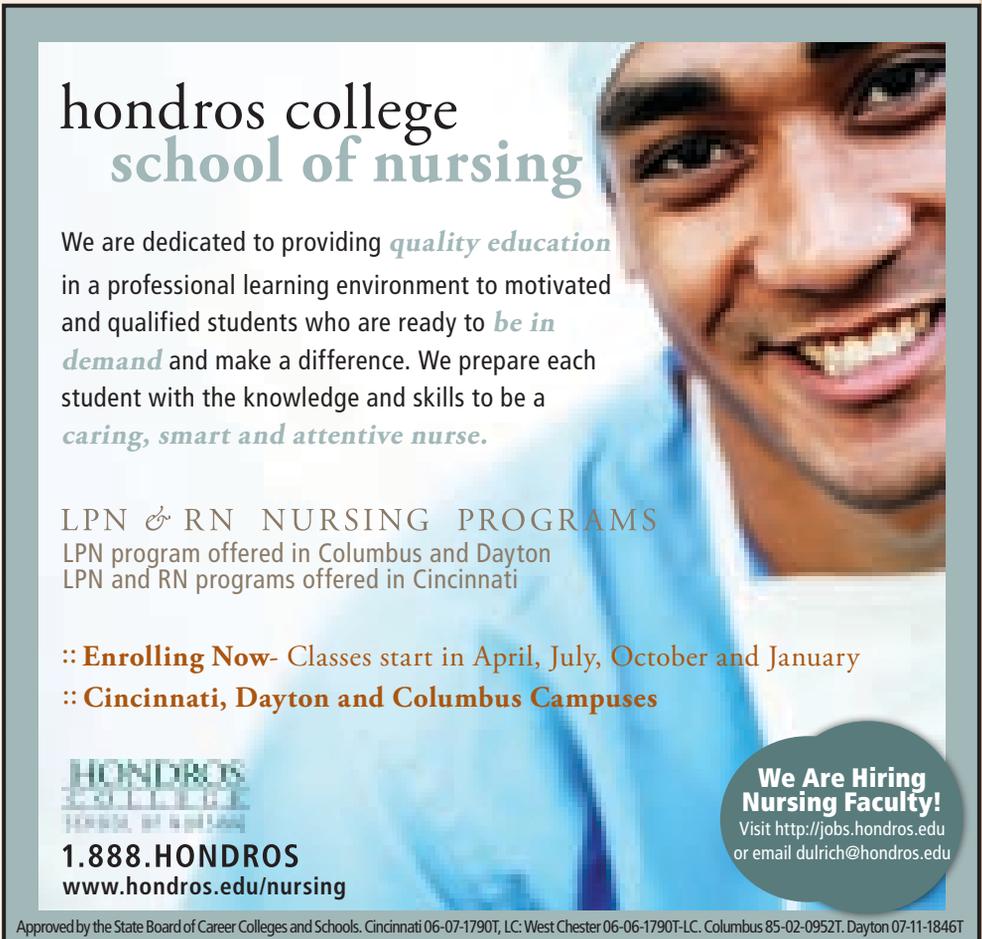
- b. Indications, contraindications, and potential complications related to cosmetic/aesthetic injectable medication administration;
 - c. Infection control standards pertaining to cosmetic/aesthetic injectable medication administration and the care of the cosmetic/aesthetic patient.
3. The competence of the nurse's knowledge and skill in the performance of administering cosmetic/aesthetic injectable

medications should be validated by a physician whose practice includes cosmetic/aesthetic medicine through a formalized physician-precepted return demonstration by the nurse.

Accountability and Responsibility of Nurses

Section 4723.01(B) of the ORC defines the scope of practice for the registered nurse. Rule 4723-4-03, OAC holds registered nurses responsible for maintaining and demonstrat-

CONTINUED ON THE NEXT PAGE



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ing current knowledge, skills, abilities, and competence in rendering nursing care within their scope of practice.

Section 4723.01(F) of the ORC defines the scope of practice for the licensed practical nurse. Rule 4723-4-04, OAC holds licensed practical nurses responsible for maintaining and demonstrating current knowledge, skills, abilities and competence in rendering nursing care within their scope of practice.

The licensed nurse must apply the Nurse Practice Act (Chapter 4723, ORC) and rules regulating the practice of nursing (Chapters 4723-1 to 4723-27, OAC) to the specific practice setting. Further, the licensed nurse must utilize good professional judgment in determining whether or not to engage in a given patient-care related activity consistent with the law and rules, and guided by the Board's *Decision-Making Model, Publication OBN-103*. It is critical to note that the law and rules require that the licensee provide nursing care only in circumstances that are consistent with the licensee's education, experience, knowledge, and demonstrated competency.

In this statement, the Board does not announce a new rule but instead gives licensees specific guidelines regarding their obligations under existing law.

Licensees should review the following:

- § 4723.01, ORC
- Rule 4723-4-03, OAC
- Rule 4723-4-04, OAC
- Rule 4723-4-06, OAC
- Rule 4723-20, OAC

A complete copy of the Nurse Practice Act and the rules adopted thereunder is available for review and download from the Board of Nursing Web site: www.nursing.ohio.gov in the Law and Rules section. •

Approved: July 18, 2008



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All meetings of the Advisory Groups begin at 10:00 AM (unless otherwise noted) and are held in the Board office. If you wish to attend one of these meetings, please contact the Board office at 614/466-6940 to determine any change in the location, date or times from those listed.

Advisory Group on Nursing Education—October 9.
Chair: Kathleen Driscoll, JD, MS, RN

Advisory Group on Dialysis—October 14 (cancelled).
Chair: Debra Broadnax, MSN, RN, CNS

Advisory Group on Continuing Education—October 17.
Chair: Anne Barnett, BSN, RNC, CWS

Committee on Prescriptive Governance—September 8. October 27,
Chair: Eric Yoon, RN, MSN, ACNP, CCNS

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J. Jane McFee, LPN, *Vice President*
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2011

Elizabeth Buschmann, LPN
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Kathleen O'Dell, RN, M.Ed., N.C.S.N
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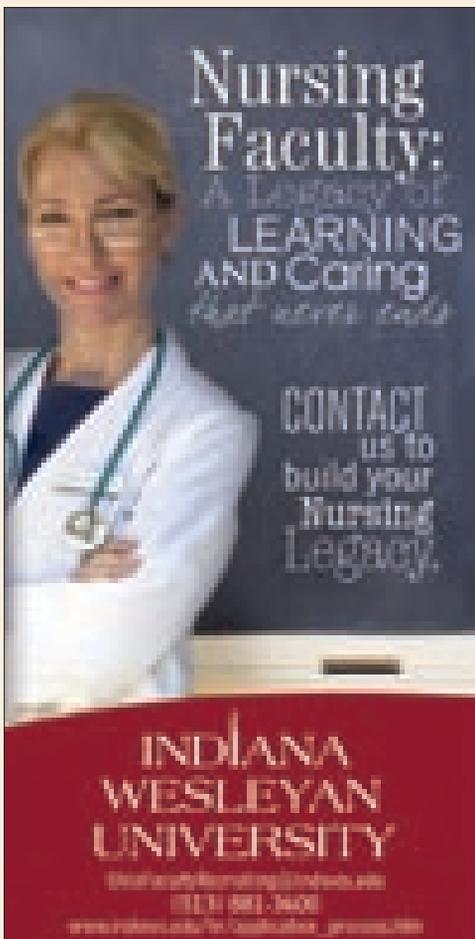
Chamberlain College of Nursing is accredited by The Higher Learning Commission of The North Central Association, www.ncahlc.org. The bachelor's degree program in nursing is accredited by The National League for Nursing Accrediting Commission (NLNAC) and The Commission on Collegiate Nursing Education (CCNE), 6150 Oakland Ave. St. Louis, MO 63139 – Program availability varies by location.

MEDICATION AIDE UPDATE

On August 26, 2008, the Board issued the 75th Medication Aide Certificate. Under Ohio law, once the 75th medication aide is certified, the “clock” begins allowing the Board to calculate the ending date of the Pilot Program. The end date will be **March 26, 2009**. The timeline below indicates the relevant timeframes leading to the Pilot Program end date.

TIMELINE FOR EXPANSION OF MEDICATION AIDE PROGRAM

- **11/25/2008** - the Board will request data from each Pilot Program facility including, but not limited to, costs and other financial matters pertaining to the use of medication aides, a summary of the facility’s experience in utilizing medication aides, and the facility’s perception of the quality and nature of the training of the medication aides. This report is due to the Board by 12/26/2008.
- **2/23/2009** - the Board is required to submit a report of its findings and recommendations (based upon its evaluation of the Pilot Program facility data) to the Governor, President and Minority Leader of the Senate, Speaker and Minority Leader of the House of Representatives, and the Ohio Director of Health.
- **3/26/2009** - the Pilot Program will end. On and after this date, any Ohio nursing home or residential care facility may begin utilizing certified medication aides. •



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RN – Care Management Specialist – PT
RN – Research Nurse – Cardiac Cath Lab – FT
RN – Telemetry – FT Nights, Weekend Option
RN – Ortho/Neuro – FT, PT, PRN
RN – Recovery Room/PACU – FT, PT
RN – Emergency Department – FT, PT, Nights
RN – Med/Surg, Telemetry – Weekend Option – Nights

East

Mercy Hospital Anderson 513-233-6860

RN – Family Birth Center/L&D/Special
Care Nursery – FT, PT, PRN Nights
RN – Med/Surg Oncology – FT, PT, PRN Days
RN – ICU/CVICU – FT, PT, PRN Nights
RN – iFlex Nurses – PRN Nights
RN – Emergency Department – FT, PT, PRN
RN – Orthopedics – FT, PT, PRN
RN – Cardiovascular Inpatient Unit –
FT, PT, PRN Nights
RN – Med/Surg Post Procedural Unit –
PT, PRN Days
Manager Med/Surg Oncology – FT

Mercy Hospital Clermont 513-735-7534

RN – Clinical Development/UBE –
Wound Care – FT Days
RN – Clinical Administrator – FT Nights
RN – Clinical Coordinator – Telemetry – FT Nights
RN – ICU – PT Nights, PRN
RN – Behavioral Med – FT Eves
RN – Telemetry – FT/PT Nights, PRN
RN – Emergency Department – FT
Nights, PT Nights/Eves, PRN

Mercy St. Theresa 513-272-4962

RN – Intermediate Care – FT
LPN – Intermediate Care – FT

West

Mercy Hospital Mt. Airy 513-853-5760

RN – Clinical Coordinator Charge Nurse –
Emergency Dept. – FT
RN – Telemetry – FT, PT, PRN
RN – Emergency Department – FT, PT, PRN
RN – ICU – FT, PT, PRN
RN – Surgery – FT, PT, PRN

Mercy Hospital Western Hills 513-389-5037

RN – Surgery/OR Nurse Manager – FT
RN – Clinical Coordinator (Charge Nurse) –
Telemetry – FT
RN – Clinical Coordinator (Charge Nurse) –
Med/Surg – FT
RN – Clinical Development/UBE –
Med/Surg, Ortho – FT
RN – Telemetry – FT, PT
RN – Emergency Department – PT Eves
RN – ICU – FT Nights
RN – Med/Surg Ortho – FT, PRN
RN – Med/Surg – FT
RN – Behavioral Health – FT, PRN
LPN – Behavioral Health, Med/Surg – PRN

Mercy West Park 513-347-8219

LPN – Intermediate Care – PRN
LPN – Assisted Living – PT

Mercy Franciscan Terrace 513-948-6710

RN – Intermediate Care – FT
MDS Nurse – Intermediate Care – FT

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LICENSE VERIFICATION

Verification of a nursing license is available through the Board of Nursing (Board) website, which provides a link to the Ohio e-License Center. The name, license number and license expiration date is public information and may be viewed by anyone. The Board strongly recommends that all employers use this website as verification of current licensure for nursing employees. Employers should not rely on the wallet card, which is sent to the nurse with the issuance of a license. Please note that when calling the Board office with questions about your license or certificate that Board staff generally will not use social security numbers as primary means to verify licensure or certificate information. You should have your license or certificate number readily available. •

BOARD FEES/PAYMENT

Effective April 1, 2009, the Ohio Board of Nursing will no longer accept personal checks. Business checks will continue to be accepted. Payment must be made in the form of a certified check, cashier's check or money order. Payments must be drawn on a United States (U.S.) bank or payable in U.S. dollars and must be made payable to "Treasurer, State of Ohio." •

RN RENEWAL NEW ONLINE PROCESS

Beginning with the 2008 LPN Renewal, the Ohio Board of Nursing (Board) initiated a new licensure renewal process. All LPNs who were eligible to renew their license received a renewal notice along with instructions on how to renew their license online. LPNs who did not want to renew their license online were asked to submit a request for a paper application via fax, mail or e-mail. During this LPN renewal period, 44,306 LPNs renewed their license, and 37,348 of these LPNs renewed online (an approximate 84 percent online renewal rate). **This new process will be implemented next year during the RN renewal period.** •

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RN Licenses

RN 288458 DeAnna Alley
 121536 Karen Ansevin
 322696 Susan Ashworth
 122901 Mary Baker
 287198 Molly Ballard
 328852 Irene Belbeck
 227398 Teresa Bennett
 328728 Diana Benson
 205747 Dawn Bialecki
 277352 Danielle Boykin
 335127 Jennifer Brockman
 201144 Katrina Brown
 302056 Rebecca Buckley
 291345 Amy Call
 257607 Margaret Caputo
 243115 Valerie Carr
 329106 Michelle Carter
 310121 Karrie Cheeseman
 162667 Patricia Coburn
 240056 Julie Cooper
 291991 Tracy Cross
 292099 Jennifer Cumberland
 274683 Lisa Dance
 327433 Rose Dartt
 246495 Donna Davis
 217298 Annie Dawson
 322462 Millanie DeKlerk
 202608 Susan Detwiler
 181246 Tammy DiMuzio
 318456 Deanna DiPillo
 197266 David Dunham
 246264 Angela Edge
 322318 Tamarra Edwards
 142974 Jacqueline Embry
 92856 Joan Everson
 301991 Alicia Fink
 73980 Jacquelyn Fuller
 242864 Suzanne Hageman
 229159 Hillary Harrison
 149393 Deborah Hatch
 328421 Cara Havens
 340062 Kira Hawk
 305132 Kelly Hensley
 270555 Christina Hurst
 304786 Christopher Ilijevich
 246794 Rhonda James

200015 Rita Jared
 167224 Sarah Jones
 177117 Deborah Kaminsky
 331653 Shane Klaber
 338047 Jamie Kunkler
 245690 John Lenarduzzi
 123750 Ruth Leslie
 314944 Allison Lewis
 326364 Emily Lloyd
 210078 Dena Luttrell
 268833 Randy Marion
 203799 Kristen McCarthy
 318329 Jamie McGarity
 327060 Melissa Miller
 338106 Demetria Mitchell
 281952 Angela Morrow
 293501 Christen Mosier
 321001 Patricia Mossey
 274128 Donna Neer
 338393 Valerie Nicolato
 102937 Carol O'Brien
 70408 Kathryn Olsen
 284338 Carl Osborn
 336251 Sunny Osborne
 289165 Jeffery Peace
 288026 Linda Peden
 233814 Carol Perry
 264336 Zelda Pierce
 222676 Sandra Popovich
 337641 Rebekah Presson
 254408 D'Arcy Ralph
 231558 Sharon Ramey
 273801 Marcella Richmond
 313113 Lisa Roeder
 320173 Christine Roof
 329351 Lori Roush
 294418 Raquelle Russell
 287169 Mary Ann Quigley
 305168 Patricia Robinson
 313866 Alla Sabo
 227073 Lori Sackela
 200901 Pamela Sandlin
 283015 Rosanne Sandora
 267776 Gina Savoca
 318777 Autumn Schaeff
 149276 Kathleen Schiming
 121781 Darrel Schmidt
 228887 Joan Sells

208263 Rochelle Sepanski
 234525 Colleen Simovic
 208446 Karen Skoczynski
 208222 Brenda Smith
 280206 Krista Smith
 148435 Marsha Strominger
 334584 Jennifer Sturgeon
 118522 Rebecca Suboticki
 327003 Lindsey Tann
 239891 Ruthie Turner
 98334 Linda Tome
 335040 Benjamin Vandersommen
 338397 Kilea Waite
 325022 Beth Waldvogel
 264997 Johna Walker
 260524 Jo Anna Ward
 302946 Amanda Watson
 118459 Andrea Webb
 158048 Joyce Wells
 105867 Carole Wiley
 254773 Jeffrey Wise
 212417 Brenda Worcester
 326790 Michelle Yeager
 332924 Abigail Yeater
 132593 Mary Zukie

Duplicate 2006-2008

LPN Licenses

PN 125384 Patricia Beard
 123338 Felicia Betts
 105583 Dawn Black
 120306 Mary Delaney
 121957 Angela Dobbins-Rivera
 123115 Kelly Ernst
 127235 Tabatha Luchini
 121540 Faith Manary
 048653 Sandra Milchling
 045065 Connie Miller
 096474 Georgia Miller
 127194 Amy Moody
 130489 Caroline Patterson
 014477 Jessiebelle Paxton
 122613 William Salifu
 121781 Darrel Schmidt
 118522 Rebecca Suboticki
 084388 Connie Walkden
 128295 Justine Williams
 087207 Annette Windsor

Current as of 6/08

WHAT IS A DUPLICATE LICENSE?

A duplicate license is issued to replace a lost, destroyed, or stolen license.

To receive a duplicate license, complete the form *Affidavit of Lost Document*, and submit a \$25.00 replacement fee. The Board will issue a license with the designation "Replacement"

stamped across the top of the license. Once a duplicate is issued, the original wallet copy should not be used.

Each issue of Momentum lists those licenses for which a duplicate is issued during the months immediately preceding publication. •

PAYMENT FAILURES

There is often a lag-time between the time a payment is processed by the bank and the time the Board receives notification of error or insufficient funds. Even though a renewed license may have been received in the mail, failure of a payment to clear the bank will cause an application to become incomplete. Under rule 4723-1-04, Ohio Administrative Code, return of a check does not waive or extend the date upon which a license or certificate lapses. The purpose of publishing this list is to notify current and potential employers and to reach the individual when other avenues have failed.

Below is a list of those nurses and dialysis technicians whose renewal applications, certificates, or duplicate licenses are incomplete due to payment failure related to insufficient funds. The licensee and certificate holders listed below failed to render payment by the date this publication went to press.

BAD CHECK LIST

DT 01459	Lisa Miljour	RN 179628	Cheryl Balogh
PN 088845	Rebecca Anderson	196050	Beverly Chambers
080412	Vera Bazemore	169966	Susan Chapman
110095	Alicia Bennett	234395	Robert Clarke
063017	Linda Black	284031	Deborah Conner
105327	Rachelle Burg	081572	Mary Hartmann
115970	Connie Burgess	219322	Micheal Hipshire
109961	Sandra Carter	278461	Yvonne Hoberek
079354	Pamela Casey	320012	Vanessa Huff
106337	Julie Cowdrey	254146	Ann Jarven
089104	Mary Darnell	330975	Carrie Land
107371	Patricia Edington-Wallace	099852	Jane Mccutcheon
100040	Lavonda Featchurs	256289	Linda McDaniel
077423	Barbara Freeman	169684	Bernadette Queener
104926	Stacy Freeman	323272	Jennifer Sheets
066195	Teresa Gilmore	288354	Shelia Smith
105124	Lisa Groves	292985	Therese Spalding
102088	Mildred Highlander	229036	Dundee Sweetland
044929	Gaynell Hunt	300574	Jacque Young

If your name is listed here, please contact the Board at 614-995-3691 to arrange for proper payment of your fees. Because the name of a licensee may be the same as another, please do not assume from the name alone that a particular individual has a payment failure. You may verify the license number on the Board's web site at www.nursing.ohio.gov by clicking on Verification.

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At the July 2008 Board meeting, the Board of Nursing approved its latest interpretive guideline: *Guidelines for the Care of Patients Receiving Intramuscular, Subdermal, or Subcutaneously Injected Medications for Cosmetic/Aesthetic Treatment*. In approving interpretive guidelines, the Board does not announce a new rule, but rather provides licensees specific guidelines regarding their obligations under existing law and rules. All interpretive guidelines approved by the Board are available for review and download from the Board of Nursing Web site: www.nursing.ohio.gov in the "Nursing Practice" section.

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The free report is provided by LaTonia Denise Wright. Ms. Wright is an OH licensed RN and a licensed attorney in OH, KY, and IN. She represents, counsels, and advises nurses in Nursing Board and professional practice matters.



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