ALABAMA BOARD OF NURSING
ADMINISTRATIVE CODE

CHAPTER 610-X-2
DEFINITIONS

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610-X-2-.01 Definitions. The Alabama Board of Nursing hereby adopts by reference as its rule Code of Ala. 1975, §34-21-1, as amended.
Author: Alabama Board of Nursing
History: Filed February 17, 1984; effective March 24, 1984.

610-X-2-.02 General.

(1) May: power, privilege or right retained by the Board.

(2) May not: prohibition.

(3) Shall: duty, requirement, or condition precedent.
Author: Alabama Board of Nursing
Chapter 610-X-2 Nursing


610-X-2-.03 Definitions, Nursing Education Programs.

(1) Approved Program: A nursing education program that meets all of the standards as specified in these rules.

(2) Articulation: A planned process between two or more educational programs or systems to assist students to make a smooth transition from one program to another without duplication in learning or coursework.

(3) Clinical and theoretical competence: The possession of knowledge, attitudes and skills, and the ability to apply these attributes to meet current standards of nursing practice and education as specified in Chapter 610-X-6, Standards of Nursing Practice, Chapter 610-X-3, Nursing Education Programs, and Chapter 610-X-4, Licensure.

(4) Clinical Learning Experiences: Organized plan of learning experiences that provides nursing students an opportunity to develop competencies in the assessment, planning, implementation and evaluation of nursing care appropriate to the scope of practice for the level and type of program.

(5) Clinical Supervisor: A licensed registered nurse, acting in a supervisory capacity of clinical learning experiences, who is accessible to assign or prescribe a course of action, give procedural guidance, direction and evaluation for a nursing student(s).

(6) Curriculum: An organized plan of study in nursing that includes both theoretical and clinical learning experiences essential for preparing students to be eligible upon graduation to apply for licensure as a registered nurse or licensed practical nurse.

(7) Curriculum Outcomes: A common set of competencies expected of a program’s graduates upon completion of an organized plan of study. Outcomes are clear, observable demonstrations of student learning that occurs at or after the end of a comprehensive set of learning experiences.

(8) Deficiency(ies): Failure of a nursing education program to meet one or more of the standards as stated in Chapter 610-X-3, Nursing Education Programs.
(9) Distance Education: A formal educational process in which the majority of the instruction in a course/program occurs when instructors and students are not physically in the same location. The educational process may use various methodologies for communication, instruction, and evaluation.

(10) Faculty: Registered professional nurse, master’s prepared in nursing or health-related field, appointed by the parent institution.

(11) Licensed Hospital: A facility described in Code of Ala. 1975, §22-21-20(1), other than a health maintenance organization, which has an organized medical staff or which employs the services of a medical director who is a physician licensed to practice medicine in Alabama. The term hospital shall not include the private offices of physicians or dentists, whether in individual, group, professional corporation or professional association practice.

(12) Nursing Program Administrator: Master’s in nursing prepared registered professional nurse with primary accountability and responsibility for administration of the nursing program.

(13) Provisional Approval: The initial status granted to a new nursing education program that demonstrates the potential to meet the standards set forth in Chapter 610-X-3, Nursing Education Programs.

(14) Survey: A comprehensive Board authorized on-site evaluation or review of a written report of a proposed or existing program that serves as verification of the program’s compliance with the Board’s educational standards.

(15) Systemic Plan of Evaluation: A comprehensive written document that reflects ongoing evaluation of all program components that includes, but is not limited to, collection of objective data, evaluation of outcomes, and results in improvements based on evaluative data.

(16) Unencumbered license: an active license that has no current stipulations, conditions, or limitations.

Author: Alabama Board of Nursing
610-X-2-.04 Licensure.

(1) Application(s): form(s) and process for applicants seeking licensure by examination, endorsement, reinstatement, or renewal.

(a) Incomplete application: missing requirements.

(b) Complete application: meets requirements.

(c) Void application: incomplete application not processed within one year of submission.

(2) Board Lapsed: Action by the Board to lapse a license until certain conditions are met.

(3) Continuing Education Earning Period: Same as license period; January 1 through December 31 of the renewal year.

(4) Lapsed License: failure of licensee to renew; does not require examination for reinstatement.

(5) Emergency: For purposes of this chapter, a declaration by the Governor of Alabama that an emergency impacting the public health, safety and welfare exists in Alabama.

(6) Endorsement: the process of application for and method of licensure for a registered or licensed practical/vocational nurse originally licensed in a jurisdiction other than Alabama.

(7) Supervision, Direct: licensed registered nurse physically present in facility and readily accessible to designate or prescribe a course of action or to give procedural guidance, direction, and periodic evaluation.

(8) Verification: the process of attesting to original or current licensure in Alabama. May be electronic, written or telephonic at the discretion of the Board.

Author: Alabama Board of Nursing

Amended: Filed January 29, 2002; effective March 5, 2002.
Amended: Filed November 19, 2010; effective December 24, 2010.

610-X-2-.05 Advanced Practice Nursing – Collaborative Practice (CRNP, CNM).

(1) Board of Medical Examiners: The State Board of Medical Examiners established pursuant to Code of Ala. 1975, §34-24-53.

(2) Board of Nursing: The Board of Nursing established under Code of Ala. 1975, §34-21-2.

(3) Advanced Practice Nurse in Collaborative Practice: A registered nurse who has gained additional knowledge and skills through successful completion of an organized program of nursing education that prepares nurses for advanced practice roles and has been approved by the Board of Nursing to engage in the practice of advanced practice nursing. Two categories of advanced practice nurses are subject to the requirements of collaborative practice:

(a) Certified registered nurse practitioners (CRNP).

(b) Certified nurse midwives (CNM).

(4) Advanced Practice Nursing–collaborative practice: The delivery of health care services by registered nurses who have gained additional knowledge and skills through successful completion of an organized program of nursing education that prepares nurses for advanced practice roles as certified registered nurse practitioners or certified nurse midwives:

(a) Practice as a certified registered nurse practitioner (CRNP) is the performance of nursing skills by a registered nurse who has demonstrated by certification advanced knowledge and skills in the delivery of nursing services within a health care system that provides for consultation, collaborative management or referral as indicated by the health status of the client.

(b) Practice as a certified nurse midwife (CNM) is the performance of nursing skills by a registered nurse who has demonstrated by certification advanced knowledge and skills relative to the management of women's health care focusing on
pregnancy, childbirth, the postpartum period, care of the newborn, family planning and gynecological needs of women, within a health care system that provides for consultation, collaborative management or referral as indicated by the health status of the client;

(5) Collaboration: A formal relationship between one or more certified registered nurse practitioners or certified nurse midwives and a physician or physicians under which these nurses may engage in advanced practice nursing as evidenced by written protocols approved according to the requirements of Code of Ala. 1975, section 34-21-80 et seq. or exempted according to requirements of this statute. The term collaboration does not require direct, on-site supervision of the activities of a certified registered nurse practitioner or a certified nurse midwife by the collaborating physician. The term does require such professional medical oversight and direction as may be required by the rules and regulations of the Board of Nursing and the State Board of Medical Examiners.

(6) Physician or Collaborating Physician: A doctor of medicine or a doctor of osteopathy licensed to practice medicine in Alabama who agrees in writing to practice in collaboration with one or more certified registered nurse practitioners or certified nurse midwives according to the rules and regulations adopted by the Board of Nursing and the State Board of Medical Examiners.

(7) Joint Committee Of The Board Of Nursing And The State Board Of Medical Examiners For Advanced Practice Nurses. The Joint Committee of the Board of Nursing and the State Board of Medical Examiners for Advanced Practice Nurses is a committee composed of the following, pursuant to Code of Ala. 1975, section 34-21-80 et seq.

(a) Two physicians licensed to practiced medicine in the State of Alabama;

(b) One registered nurse licensed to practice professional nursing in the State of Alabama;

(c) One licensed physician engaged in collaborative practice with a certified registered nurse practitioner or a certified nurse midwife in the State of Alabama;

(d) One certified registered nurse practitioner engaged in advanced practice nursing with a physician in the State of Alabama; and
(e) One certified nurse midwife engaged in advanced practice with a physician in the State of Alabama.

(8) Legend Drug: Any drug, medicine, chemical or poison bearing on the label the words, "Caution, federal law prohibits dispensing without prescription" or similar words indicating that such drug, medicine, chemical, or poison may be sold or dispensed only upon the prescription of a licensed practitioner, except that the term legend drug will not include any drug, substance, or compound which is listed in Schedules I through V of the Alabama Uniform Controlled Substances Act.

(9) Prescribe or prescribing. The act of issuing a prescription for a legend drug.

(10) Prescription: An order for a legend drug which is issued and signed by a practitioner authorized by law to prescribe and administer such drugs and is intended to be filled, compounded, or dispensed by a pharmacist.

(11) Protocol: A document approved according to Code of Ala. 1975, section 34-21-81, establishing the permissible functions and activities to be performed by certified registered nurse practitioners and certified nurse midwives and signed by collaborating physicians and any nurse practitioners or nurse midwives practicing with those physicians.

(12) Medical Oversight: Concurrent and on-going collaboration between a physician and a CRNP or CNM and documentation of time together in a practice site; may include but is not limited to direct consultation and patient care, discussion of disease processes and medical care, review of patient records, protocols and outcome indicators, and other activities to promote positive patient outcomes.

(13) Quality Assurance: Documented evaluation of the clinical practice of the certified registered nurse practitioner or certified nurse midwife against established patient outcome indicators, using a specified percentage or selected sample of patient records, with a summary of findings, conclusions, and, if indicated, recommendations for change.

(14) Principal Practice Site: The main location at which the collaborating physician is engaged in the practice of medicine.

(15) Remote Practice Site: An approved site for collaborative practice without an approved collaborating or covering physician on-site. The collaborating physician’s principal practice site, acute care hospitals, skilled nursing
facilities, licensed special-care assisted living facilities and licensed assisted living facilities are not remote practice sites for the purpose of these rules.

(16) Readily Available: Response by the collaborating or covering physician by telephone, telecommunication, or radio for consultation, referral, or direct medical intervention as indicated by the needs of a patient and based on usual and customary standards of medical practice.

(17) Direct Medical Intervention: Physical presence of a physician to attend the patient as defined in the collaborative practice protocol.

Author: Alabama Board of Nursing


610-X-2-.06 Standards Of Nursing Practice.

(1) Accountability: Answerable or responsible for action.

(2) Assessment, Comprehensive: the systematic collection and analysis of data including the physical, psychological, social, cultural and spiritual aspects of the patient by the registered nurse for the purpose of judging a patient’s health and illness status and actual or potential health needs. Comprehensive assessment includes patient history, physical examination, analysis of the data collected, development of the patient plan of care, implementation and evaluation of the plan of care.

(3) Assessment, Focused: An appraisal of a patient’s status and specific complaint through observation and collection of objective and subjective data by the registered nurse or licensed practical nurse. Focused assessment involves identification of normal and abnormal findings, anticipation and recognition of changes or potential changes in patient’s health status, and may contribute to a comprehensive assessment performed by the registered nurse.

(4) Assignment, Licensed Nurse: The transfer of responsibility and accountability for nursing activities from one licensed nurse to another.
(5) Assignment, Unlicensed Individual: the designation of tasks from a licensed nurse to unlicensed assistive personnel. The licensed nurse making the assignment retains accountability for accurate and timely completion and outcome of the tasks.

(6) Delegation: The act of authorizing a competent individual to perform selected nursing activities supportive to registered nurses or licensed practical nurses in selected situations while retaining the accountability for the outcome if the delegation is to an unlicensed individual.

(7) Dual Relationship: any time a licensed nurse interacts with a patient outside the nurse-patient relationship.

(8) Hospital: A facility described in Ala. Code 1975 section 22-21-20(1), other than a health maintenance organization, which has an organized medical staff or which employs the services of a medical director who is a physician licensed to practice medicine in Alabama. The term hospital shall not include the private offices of physicians or dentists, whether in individual, group, registered corporation or registered association practice.

(9) Legally Authorized Prescriber: licensed physician, dentist, certified registered nurse practitioner, certified nurse midwife, and physician assistant.

(10) May: Power, privilege or right retained by the Board

(11) May not: Prohibition

(12) Moderate Sedation: the administration of any pharmacological agent for the purpose of a medically controlled state of depressed consciousness limited to short periods of time and used for diagnostic and therapeutic procedures that:

(a) Allow protective reflexes to be maintained.

(b) Retain the patient’s ability to maintain a patent airway, respiratory rate and rhythm.

(c) Permit expected responses by the patient to physical stimulation and verbal command.

(13) Organized Program of Study: an organized sequence of learning activities that provides the instructional foundation (didactic and clinical) for participants to achieve the desired learning outcomes in a given subject matter.
(14) Professional Boundary: behavior of the licensed nurse in maintaining a therapeutic relationship with a patient for the patient’s benefit rather than behavior that lessens the patient’s care and shifts the focus to the licensed nurse.

(15) Qualified Instructor: an individual with the knowledge, skills, ability, experience, and expertise to present the selected topic.

(16) Responsibility: The charge to do something that is expected performance.

(17) Shall: duty, requirement, or condition precedent.

(18) Supervised Clinical Practice: a systematic plan for practicing the behavior or skill related to the standardized procedure under the supervision of a qualified instructor for the purpose of mastering the procedure.

(19) Supervision, Direct: responsible licensed nurse physically present in facility and readily accessible to designate or prescribe a course of action or to give procedural guidance, direction, and periodic evaluation. Direct supervision by a registered nurse is required for new graduates practicing on a temporary permit.

(20) Supervision, Indirect: Responsible licensed nurse is available for periodic inspection and evaluation through physical presence, electronic or telephonic communication for direction, consultation, and collaboration.

(21) Standardized Procedure: Written policies and protocols establishing the permissible functions, activities, and level of supervision of registered nurses and licensed practical nurses for practice beyond basic nursing education preparation.

(22) Standardized Procedure Report: Document submitted annually to the Board of Nursing identifying the practices and procedures beyond basic education in a format specified by the Board.

(23) Unencumbered license: an active license that has no current stipulations, conditions, or limitations.

(24) Standard Precautions: Recommendations issued by Centers for Disease Control and Prevention (CDC) to minimize the risk of transmission of pathogens.

Author: Alabama Board of Nursing
Definitions Standards Of Nursing Practice – Specific Settings

(1) Delegation: The act of authorizing a competent individual to perform selected nursing activities supportive to registered nurses or licensed practical nurses in selected situations while retaining the accountability for the outcome if the delegation is to an unlicensed individual.

(2) Medication Assistant, Certified (MAC): Mental health worker who successful completed approved curriculum for assistance with medications in community residential settings.

(3) Medication Assistant Supervisor (MAS): A registered nurse or licensed practical nurse who supervises Medication Assistant, Certified (MAC) in community mental health residential settings.

(4) Medication Assistant Train the Trainer (MATT): A registered nurse who teaches the approved curriculum for mental health community residential settings.

(5) Registered Nurse First Assistant (RNFA): A registered nurse who, through additional education and supervised clinical practice, has acquired knowledge, skills, and judgment that are specific to providing assistance during a surgical procedure as directed by the attending surgeon and as defined in standardized procedures.

(6) Sexual Assault Nurse Examiner (SANE): A registered nurse who, through additional education and supervised clinical practice, has acquired knowledge, skills, and judgment specific to providing health services to sexual assault or rape victims including a forensics examination.

Author: Alabama Board of Nursing


Disciplinary Action.

(1) Abandonment: Acceptance of a patient assignment, thus establishing a nurse-patient relationship, and then ending the nurse-patient relationship without giving reasonable notice to supervisory personnel so that others can make arrangements for continuation of nursing care.

(2) Administrative complaint: A legal document which contains notice of the time and place of an administrative hearing; contains a statement of the charges against the applicant, registered nurse, licensed practical nurse, advanced practice nurse, continuing education provider, or nursing education program; and complies with the notice provisions for contested cases as set forth in the Alabama Administrative Procedures Act.

(3) Assessment, Comprehensive: the systematic collection and analysis of data including the physical, psychological, social, cultural and spiritual aspects of the patient by the registered nurse for the purpose of judging a patient’s health and illness status and actual or potential health needs. Comprehensive assessment includes patient history, physical examination, analysis of the data collected, development of the patient plan of care, implementation and evaluation of the plan of care.

(4) Assessment, Focused: An appraisal of a patient’s status and specific complaint through observation and collection of objective and subjective data by the registered nurse or licensed practical nurse. Focused assessment involves identification of normal and abnormal findings, anticipation and recognition of changes or potential changes in patient’s health status, and may contribute to a comprehensive assessment performed by the registered nurse.

(5) Board-Acceptable Licensed Healthcare Provider: A licensed healthcare provider who has been accepted, in advance, by Board staff to conduct a required evaluation of a licensee for purposes of reinstatement of a Board-Lapsed license.

(6) Board-Lapsed License: An Order of the Board that lapses a license until identified conditions are met and the license is reinstated by Order of the Board.

(7) Dual Relationship: any time a licensed nurse interacts with a patient
outside the nurse-patient relationship.

(8) Fine: A monetary penalty imposed by the Board.

(9) Letter of Admonishment: A letter from the Board that addresses the areas of concern over the reported conduct and notifies the registered nurse, licensed practical nurse or applicant for licensure that the case has been closed without discipline.

(10) Letter of Closure: A letter from the Board that notifies the registered nurse, licensed practical nurse or applicant for licensure that the case has been closed without discipline.

(11) May: power, privilege or right retained by the Board.

(12) May not: prohibition.

(13) Negligent: Failure to exercise the care required by the applicable standard of care.

(14) Probation: The monitored practice of nursing which permits the nurse to continue to practice nursing pursuant to specified conditions as set forth by the Board.

(15) Professional Boundary: behavior of the licensed nurse in maintaining a therapeutic relationship with a patient for the patient’s benefit rather than behavior that lessens the patient’s care and shifts the focus to the licensed nurse.

(16) Reprimand: A formal censure by the Board.

(17) Revocation: The withdrawal of the license by Board action.

(18) Shall: duty, requirement, or condition precedent.

(19) Suspension: The temporary withdrawal of the license by Board action.

(20) Voluntary Surrender: The voluntary relinquishment of a license that has the force and effect of revocation.

(21) Willful: Commission of an act or omission when the licensed nurse or applicant knows or reasonably should know that the act or omission violates the Nurse Practice Act.

Author: Alabama Board of Nursing
610-X-2-.09 Advanced Practice Nursing (CRNA, CNS).

(1) Advanced Practice Nurse: A registered nurse who has gained additional knowledge and skills through successful completion of an organized program of nursing education that prepares nurses for advanced practice roles and has been approved by the Board of Nursing to engage in the practice of advanced practice nursing as a:

(a) Certified registered nurse anesthetist.

(b) Clinical nurse specialist.

(2) Advanced Practice Nursing: The delivery of health care services by registered nurses who have gained additional knowledge and skills through successful completion of an organized program of nursing education that prepares nurses for advanced practice as certified registered nurse anesthetists and clinical nurse specialists.

(a) Practice as a certified registered nurse anesthetist (CRNA) is the performance of or the assistance in any act involving the determination, preparation, administration, or monitoring of any drug used to render an individual insensible to pain for surgical and other therapeutic or diagnostic procedures under the direction of a physician licensed to practice medicine or a dentist.

(b) Practice as clinical nurse specialist (CNS) is the performance of advanced nursing skills by a registered nurse who, through study and supervised practice in nursing at the graduate level has advanced knowledge and practice skills in a specialized area of practice.

Author: Alabama Board of Nursing


610-X-2-.10 Definitions, Continuing Education For Licensure.

(1) Board Approved Continuing Education Provider: An individual; partnership; association; organization; educational institution; governmental agency; or licensed health care facility, including hospitals, nursing homes, clinics, home health agencies, or other organized health care facilities, offering continuing education for nurses that meet Board criteria for approval.

(2) Board Recognized Continuing Education Provider: A national or regional agency, journal, Alabama regulatory agency or board, or another Board of Nursing recognized by the Alabama Board of Nursing as providing or approving continuing education in accordance with criteria that are substantially the same as those required of Alabama Board of Nursing approved providers of continuing education.

(3) Board Approved or Board Recognized Continuing Education Course: An activity that meets the definition of continuing education and has undergone approval by a Board approved provider or Board recognized provider of continuing education. A course or activity may be a program of multiple sessions or a single session lasting at least twenty-five minutes (0.5 contact hours).

(4) Continuing Education: Planned, organized learning experiences designed to augment the knowledge, skill, and attitudes for the enhancement of the practice of nursing to the end of improving health care to the public.

(5) Continuing Education Contact Hour: Unit of measurement of continuing education that meets Board criteria for approval and lasts at least fifty minutes.

(6) Provider Number: A number assigned by the Board to designate an approved provider.

(7) Refresher Course: A body of study with both theoretical and clinical components that is relevant to current practice modalities and technologies.

Author: Alabama Board of Nursing
610-X-2-.11  Reserved.

610-X-2-.12  Reserved.

610-X-2-.13  Voluntary Disciplinary Alternative Program.


(2)  Board-Recognized Substance Use Disorders Treatment Provider: An organized program for treatment of substance use disorders that meets criteria set forth by the Alabama Board of Nursing in 610-X-13-.05.

(3)  Comprehensive Evaluation: An evaluation conducted in an inpatient setting over a period of four (4) to seven (7) days by a multidisciplinary team that includes assessment of the nurse’s physical health, substance use, psychological and psychiatric functioning, family and social assessment, and legal and occupational history. Neuropsychological and cognitive testing, drug testing, and any other testing deemed appropriate by the evaluation team may also be included.

(4)  Continuing Care/Aftercare: Sessions conducted by the substance use disorder treatment provider one (1) time per week for a MINIMUM of one (1) year after the completion of treatment. Progression to one (1) time per week sessions in the treatment program is acceptable for continuing care in state-funded programs and intensive outpatient programs, if approved in advance by Board staff.

(5)  Mental Condition: A disorder meeting diagnostic criteria for Mental Disorder as defined in the DSM-IV-TR (American Psychiatric Association:  Diagnostic and Statistical
(6) Substance Use Disorder: A disorder meeting the diagnostic criteria for Substance Use Disorders (either Substance Dependence or Substance Abuse) as defined in the DSM-IV-TR (American Psychiatric Association: Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition, Text Revision. Washington, DC, American Psychiatric Association, 2000).

(7) Treatment Recommendations: The course of treatment recommended for a nurse, including recommendations for follow up care after completion of treatment, based on a diagnosis of a Substance Use Disorder (DSM-IV-TR criteria) and ASAM Patient Placement Criteria for level of treatment and services required.

(8) Voluntary Disciplinary Alternative Program (VDAP): A program authorized by the Alabama Legislature to promote early identification, intervention, treatment, and rehabilitation of any registered nurse, licensed practical nurse or applicant issued a valid temporary permit for licensure whose competence is found to be impaired or compromised because of the use or abuse of drugs, alcohol, controlled substances, chemicals, or other substances or as a result of a physical or mental condition rendering the person unable to meet the standards of the nursing profession.

(9) VDAP Agreement. An agreement signed by the VDAP participant setting forth the terms and conditions with which the VDAP participant shall comply during participation in the VDAP.

Author: Alabama Board of Nursing


Amended: Filed August 20, 2010; effective September 24, 2010.