



**VIRTUAL/TELECONFERENCE
BOARD OF NURSING
Virtual, 4822 Madison Yards Way, Madison
Contact: Brad Wojciechowski (608) 266-2112
October 9, 2025**

The following agenda describes the issues that the Board plans to consider at the meeting. At the time of the meeting, items may be removed from the agenda. Please consult the meeting minutes for a record of the actions of the Board.

AGENDA

8:00 A.M.

OPEN SESSION – CALL TO ORDER – ROLL CALL

- A. Adoption of Agenda (1-5)**
- B. Approval of Minutes of September 11, 2025 (6-12)**
- C. Reminders: Conflicts of Interests, Scheduling Concerns**
- D. Introductions, Announcements and Recognition – Discussion and Consideration**
 - 1. Recognition: Vera Guyton, Licensed Practical Nurse Member, Resigned: 9/12/2025**
- E. Administrative Matters – Discussion and Consideration**
 - 1. Department, Staff and Board Updates**
 - 2. Election of Officers, Appointments of Liaisons and Alternates, Delegation of Authorities**
 - 3. Board Members – Term Expiration Dates**
 - a. Anderson, John G. – 7/1/2029
 - b. Kane, Amanda K. – 7/1/2027
 - c. Malak, Jennifer L. – 7/1/2026
 - d. McNally, Patrick J. – 7/1/2026
 - e. Saldivar Frias, Christian – 7/1/2023
 - f. Weinman, Robert W. – 7/1/2027
- F. 08:00 A.M. PRELIMINARY PUBLIC HEARING ON STATEMENT OF SCOPE 064-25: N 1 Relating to Faculty Accreditation Standards (13-15)**
 - 1. Review and Respond to Preliminary Public Hearing Comments**
- G. Administrative Rule Matters – Discussion and Consideration (16-45)**
 - 1. Scope Statement: N 1 to 8, relating to Advanced Practice Registered Nurses and Comprehensive Review (17-43)**
 - 2. Pending and Possible Rulemaking Projects (44-45)**

- H. Education and Examination Matters – Discussion and Consideration
- I. **Legislative and Policy Matters – Discussion and Consideration (46-56)**
 - 1. 2025 WI AB 294 relating to membership on the Board of Nursing
- J. **Credentialing Matters – Discussion and Consideration (57-96)**
 - 1. Medical Condition Declarations – Initial Application
- K. **Newsletter Matters – Discussion and Consideration (97)**
- L. Nurse Licensure Compact (NLC) Update – Discussion and Consideration
- M. Liaison Reports – Discussion and Consideration
- N. Discussion and Consideration of Items Added After Preparation of Agenda:
 - 1. Introductions, Announcements and Recognition
 - 2. Administrative Matters
 - 3. Election of Officers
 - 4. Appointment of Liaisons and Alternates
 - 5. Delegation of Authorities
 - 6. Education and Examination Matters
 - 7. Credentialing Matters
 - 8. Practice Matters
 - 9. Legislative and Policy Matters
 - 10. Administrative Rule Matters
 - 11. Liaison Reports
 - 12. Board Liaison Training and Appointment of Mentors
 - 13. Public Health Emergencies
 - 14. Informational Items
 - 15. Division of Legal Services and Compliance (DLSC) Matters
 - 16. Presentations of Petitions for Summary Suspension
 - 17. Petitions for Designation of Hearing Examiner
 - 18. Presentation of Stipulations, Final Decisions and Orders
 - 19. Presentation of Proposed Final Decisions and Orders
 - 20. Presentation of Interim Orders
 - 21. Petitions for Re-Hearing
 - 22. Petitions for Assessments
 - 23. Petitions to Vacate Orders
 - 24. Requests for Disciplinary Proceeding Presentations
 - 25. Motions
 - 26. Petitions
 - 27. Appearances from Requests Received or Renewed
- O. **Public Comments**

CONVENE TO CLOSED SESSION to deliberate on cases following hearing (s. 19.85(1)(a), Stats.); to consider licensure or certification of individuals (s. 19.85(1)(b), Stats.); to consider closing disciplinary investigations with administrative warnings (ss. 19.85(1)(b), and 440.205, Stats.); to consider individual histories or disciplinary data (s. 19.85(1)(f), Stats.); and to confer with legal counsel (s. 19.85(1)(g), Stats.).

P. Proposed Stipulations and Interim Orders

1. 24 NUR 0198 – Ian J. Lindsey **(98-103)**
2. 25 NUR 0514 – Lisa M. Mathieus **(104-108)**
3. 25 NUR 0078 – Angel K. Webster **(109-113)**

Q. Deliberation on Division of Legal Services and Compliance Matters

1. Administrative Warnings

- a. 25 NUR 0035 – B.M.G. **(114-116)**
- b. 25 NUR 0274 – J.C. **(117-118)**
- c. 25 NUR 0403 – D.L.C. **(119-120)**
- d. 25 NUR 0421 – K.L.F. **(121-122)**

2. Case Closings

- a. 22 NUR 293 – B.J.T., D.A.B., G.A.P., J.H.K., J.A.H., J.A.M., M.A.M., M.A.L., R.C.A., R.W.W., and W.M.P. **(123-138)**
- b. 23 NUR 592 – S.L.R. **(139-143)**
- c. 23 NUR 735 – A.L.M. **(144-158)**
- d. 24 NUR 116 – L.M.R. **(159-166)**
- e. 24 NUR 0199 – A.L.G. **(167-172)**
- f. 24 NUR 0314 – S.B., C.J.D., and T.M.W. **(173-179)**
- g. 24 NUR 0598 – N.E.C. **(180-190)**
- h. 24 NUR 0680 – L.M.L. **(191-194)**
- i. 24 NUR 0741 – U. **(195-198)**
- j. 24 NUR 0772 – M.N.H. **(199-202)**
- k. 25 NUR 0156 – M.K.L. **(203-205)**
- l. 25 NUR 0356 – H.L., and L.G. **(206-212)**

3. Proposed Stipulations, Final Decisions, and Orders

- a. 20 NUR 211 – Kathryn J. Sweetman **(213-223)**
- b. 22 NUR 295 and 24 NUR 0539 – Krystn M. Enk **(224-235)**
- c. 23 NUR 352 – Faron J. Crabtree **(236-242)**
- d. 23 NUR 394 – Molly E. Langum **(243-249)**
- e. 23 NUR 589 – Erick J. Gohdes **(250-255)**
- f. 23 NUR 705 – Kimberly Lange **(256-263)**
- g. 24 NUR 0251 – Jacqueline K. Evanow **(264-269)**
- h. 24 NUR 0352 – Kori L. Bergman **(270-275)**
- i. 24 NUR 0619 – Catherine S. DePoole **(276-280)**
- j. 25 NUR 0381 – Amber M. Herzmann **(281-286)**

R. Deliberation on Proposed Final Decision and Orders

1. Barry L. Coltrane, Respondent (DHA Case Number SPS-25-0053/ DLSC Case Number 23 NUR 622 and 24 NUR0190) **(287-299)**
2. Sara Stadler, Respondent (DHA Case Number SPS-25-0057/ DLSC Case Number 22 NUR 868) **(300-317)**

S. Deliberation of Items Added After Preparation of the Agenda

1. Education and Examination Matters
2. Credentialing Matters
3. DLSC Matters
4. Monitoring Matters
5. Professional Assistance Procedure (PAP) Matters
6. Petitions for Summary Suspensions
7. Petitions for Designation of Hearing Examiner
8. Proposed Stipulations, Final Decisions and Order
9. Proposed Interim Orders
10. Administrative Warnings
11. Review of Administrative Warnings
12. Proposed Final Decisions and Orders
13. Matters Relating to Costs/Orders Fixing Costs
14. Case Closings
15. Board Liaison Training
16. Petitions for Assessments and Evaluations
17. Petitions to Vacate Orders
18. Remedial Education Cases
19. Motions
20. Petitions for Re-Hearing
21. Appearances from Requests Received or Renewed

T. Consulting with Legal Counsel

RECONVENE TO OPEN SESSION IMMEDIATELY FOLLOWING CLOSED SESSION

U. Vote on Items Considered or Deliberated Upon in Closed Session if Voting is Appropriate

V. Open Session Items Noticed Above Not Completed in the Initial Open Session

W. Board Meeting Process (Time Allocation, Agenda Items) – Discussion and Consideration

X. Board Strategic Planning and its Mission, Vision and Values – Discussion and Consideration

ADJOURNMENT

NEXT MEETING: NOVEMBER 13, 2025

MEETINGS AND HEARINGS ARE OPEN TO THE PUBLIC, AND MAY BE CANCELLED WITHOUT NOTICE.

Times listed for meeting items are approximate and depend on the length of discussion and voting. All meetings are held virtually unless otherwise indicated. In-person meetings are typically conducted at 4822 Madison Yards Way, Madison, Wisconsin, unless an alternative location is listed on the meeting notice. In order to confirm a meeting or to request a complete copy of the board's agenda, please visit the Department website at <https://dsps.wi.gov>. The board may also consider materials or items filed after the transmission of this notice. Times listed for the

commencement of any agenda item may be changed by the board for the convenience of the parties. The person credentialed by the board has the right to demand that the meeting at which final action may be taken against the credential be held in open session. Requests for interpreters for the hard of hearing, or other accommodations, are considered upon request by contacting the Affirmative Action Officer or reach the Meeting Staff by calling 608-267-7213.

**VIRTUAL/TELECONFERENCE
BOARD OF NURSING
MEETING MINUTES
JUNE 12, 2025**

PRESENT: John Anderson, Vera Guyton (*excused at 10:01 a.m.*), Amanda Kane, Jennifer Malak, Patrick McNally, Robert Weinman

ABSENT: Christian Saldivar Frias

STAFF: Brad Wojciechowski, Executive Director; Whitney DeVoe, Legal Counsel; Sofia Anderson, Administrative Rules Coordinator; Brenda Taylor, Board Services Supervisor; and other Department Staff

CALL TO ORDER

Robert Weinman, Chairperson, called the meeting to order at 8:00 a.m. A quorum was confirmed six (6) members present.

ADOPTION OF THE AGENDA

Amendments to the Agenda

Reordering V.2.e. "23 NUR 737 – N.I.H."

Correcting Case Number V.2.t. "24 NUR 0602 – D.G."

Correcting Case number V.3.f. "23 NUR 364 and 23 NUR 711 – Angie Wuksinich"

MOTION: Patrick McNally moved, seconded by Amanda Kane, to adopt the Agenda as amended. Motion carried unanimously.

APPROVAL OF MINUTES JULY 10, 2025

MOTION: Jennifer Malak moved, seconded by Vera Guyton, to approve the Minutes of July 10, 2025, as published. Motion carried unanimously.

PRESCRIPTION DRUG MONITORING PROGRAM (PDMP)

PDMP Participation Updates: Advanced Practice Nurse Prescribers

MOTION: Robert Weinman moved, seconded by Amanda Kane, to acknowledge and thank Marjorie Liu, Program Lead, PDMP, and Stephanie Droezer, Program and Policy Analyst, PDMP, for their appearance and presentation to the Board of Nursing. Motion carried unanimously.

**BOARD OPIOID ABUSE GOAL SETTING AND REPORT PURSUANT TO WIS.
STAT § 440.035(2M)(C)**

MOTION: Patrick McNally moved, seconded by Jennifer Malak, to adopt the goals to address opioid abuse as presented in the agenda and to delegate the Department to file the Wis. Stat. § 440.035 Report to Legislature. Motion carried unanimously.

ADMINISTRATIVE RULE MATTERS

N 1 to 8, relating to Advanced Practice Registered Nurses and comprehensive review

MOTION: Robert Weinman moved, seconded by John Anderson, to request DSPS staff draft a Scope Statement revising N 1 to 8, relating to Advanced Practice Registered Nurses and comprehensive review. Motion carried unanimously.

INTERDISCIPLINARY ADVISORY COMMITTEE

Draft IV Hydration Guidance Document

MOTION: Jenny Malak moved, seconded by Patrick McNally, to approve the IV Hydration Guidance Document as presented and refer back to IAC for finalization. Motion carried unanimously.

MOTION: Robert Weinman moved, seconded by Jenny Malak, to delegate the IAC Liaison the authority to approve the IV Hydration guidance on behalf of the Board. Motion carried unanimously.

CLOSED SESSION

MOTION: John Anderson moved, seconded by Patrick McNally, to convene to Closed Session to deliberate on cases following hearing (s. 19.85(1)(a), Stats.); to consider licensure or certification of individuals (s. 19.85(1)(b), Stats.); to consider closing disciplinary investigation with administrative warnings (ss. 19.85(1)(b), Stats. and 440.205, Stats.); to consider individual histories or disciplinary data (s. 19.85(1)(f), Stats.); and, to confer with legal counsel (s. 19.85(1)(g), Stats.). Robert Weinman, Chairperson, read the language of the motion. The vote of each member was ascertained by voice vote. Roll Call Vote: John Anderson-yes; Vera Guyton-yes; Amanda Kane-yes; Jennifer Malak-yes; Patrick McNally-yes; and Robert Weinman-yes. Motion carried unanimously.

The Board convened into Closed Session at 8:59 a.m.

Proposed Stipulations and Final Decisions and Orders

MOTION: Robert Weinman moved, seconded by Amanda Kane, to adopt the Findings of Fact, Conclusions of Law and Order in the matter of the following cases:
22 NUR 443 – Mary K. Brown
22 NUR 755, 23 NUR 329, 23 NUR 738 and 24 NUR 138 – Charlythia J. Beal
22 NUR 791 – Cindy Thor
23 NUR 186 – Constance L. Cayer-Wirtz
23 NUR 216 and 23 NUR 596 – Nicole C. Reder
23 NUR 364 and 23 NUR 711 – Angie Wuksinich
23 NUR 369 – Cynthia A. Mills
23 NUR 557 – John B. Hauck
23 NUR 613 – Matthew T. Onofrio
23 NUR 649 – Steven M. Smokovich
23 NUR 722 – Zan A. Thompson
24 NUR 0197 – Kathleen A. Possley
24 NUR 0231 – Julie A. Smith
24 NUR 0426 and 24 NUR 0536 – Lauren J. Anderson
24 NUR 0501 – Debra Behselich
24 NUR 0505 – William B. Cochran
24 NUR 0593 – Tina M. Corpron
24 NUR 0647 – Tricia A. Voss
24 NUR 0696 – Karen J. Froebel
24 NUR 0758 – Dezaeae Polinske
24 NUR 0764 – MacKenzie D. Cramer
25 NUR 0006 – Tanisha R. Landrum
25 NUR 0056 – David James
25 NUR 0072 – Lora M. Hanson
25 NUR 0211 – Jaylene Guziak
25 NUR 0343 – Paige M. Becker
Motion carried unanimously.

PRESENTATION AND DELIBERATION OF PETITIONS FOR SUMMARY SUSPENSION

APPEARANCE: Carley Peich Kiesling, DLSC Attorney; Gary Miller, Attorney for Respondent B.C.J.; and B.C.J., Respondent: DLSC 25 NUR 0039 – B.C.J.

MOTION: Robert Weinman moved, seconded by Amanda Kane, to acknowledge that oral arguments in the Summary Suspension proceedings for DLSC Case Number 25 NUR 0039 were presented to the Board by Carley Peich Kiesling, DLSC Attorney; Gary Miller, Attorney for Respondent B.C.J.
Motion carried unanimously.

MOTION: Patrick McNally moved, seconded by Robert Weinman, to find that notice was given to Respondent B.C.J., through his attorney of record, Gary Miller, of the Summary Suspension proceedings for DLSC Case Number 25 NUR 0039, pursuant to Wis. Admin. Code § SPS 6.05. Motion carried unanimously.

MOTION: Amanda Kane moved, seconded by John Anderson, to delegate authority to CLC to act on behalf of the Board to determine if there is probable cause to believe that B.C.J., Respondent, has engaged in or is likely to engage in conduct such that the public health, safety or welfare imperatively requires emergency suspension of the Respondent's license and to issue the Order for Summary Suspension in the matter of disciplinary proceedings against Respondent, DLSC Case Number 25 NUR 0039, pursuant to Wis. Admin. Code § SPS 6.06. Motion carried unanimously.

(Jennifer Malak recused and left the room for deliberation and voting in the matter concerning B.C.J., DLSC Case Number DLSC 25 NUR 0039.)

24 NUR 0491 – Brian J. Taplin

MOTION: Vera Guyton moved, seconded by Patrick McNally, to adopt Findings of Fact, Conclusions of Law and Order in the matter of disciplinary proceedings against Brian J. Taplin, DLSC Case Number 24 NUR 0491. Motion carried.

Vera Guyton excused 10:01 a.m.

DELIBERATION ON REVIEW OF ADMINISTRATIVE WARNINGS

APPEARANCE: Gretchen Mrozinski, DLSC Attorney; J.M.T., Respondent:
Administrative Warning WARN00003919 – DLSC Case Number 23 NUR 840 – J.M.T.

MOTION: Jennifer Malak moved, seconded by Amanda Kane, to affirm the issuance of the administrative warning in the matter of J.M.T, DLSC Case Number 23 NUR 840. Motion carried unanimously.

MONITORING MATTERS

Sybilla Materla, R.N. – Requesting modification of monitoring Order

MOTION: Robert Weinman moved, seconded by Amanda Kane, to deny the requests of Sybilla Materla, R.N. for termination and/or reduction in drug screens or alternate screening that does not require check-ins, and termination of the treatment requirement. **Reason for Denial:** Failure to demonstrate continuous and successful compliance under the terms of the Board Order (0020157). Motion carried unanimously.

DELIBERATION ON DIVISION OF LEGAL SERVICES AND COMPLIANCE MATTERS

Administrative Warnings

MOTION: Patrick McNally moved, seconded by Jennifer Malak, to issue an Administrative Warning in the following DLSC Cases:

- 23 NUR 144 – R.B.
- 23 NUR 564 – A.L.T.
- 24 NUR 095 – N.K.
- 24 NUR 0259 – D.L.H.
- 24 NUR 0452 – W.E.T.
- 24 NUR 0562 – D.D.R.
- 24 NUR 0685 – A.L.L.
- 25 NUR 0085 – N.A.G.
- 25 NUR 0317 – S.R.P.
- 25 NUR 0409 – M.B.C.

Motion carried unanimously.

Case Closings

MOTION: Jennifer Malak moved, seconded by John Anderson, to close the following DLSC Cases for the reasons outlined below:

- 22 NUR 804 – S.L.A. – No Violation
- 23 NUR 163 – D.K.D. – Insufficient Evidence
- 23 NUR 339 – D.M.E. – Insufficient Evidence
- 23 NUR 737 – N.I.H. – Lack of Jurisdiction (L2)
- 24 NUR 099 – S.B.H. – No Violation
- 24 NUR 107 – C.J.G. – Insufficient Evidence
- 24 NUR 0223 – V.P.P. – Insufficient Evidence
- 24 NUR 0234 – S.J.K. – No Violation
- 24 NUR 0239 – U. – Insufficient Evidence
- 24 NUR 0259 – L.G.M. – Insufficient Evidence
- 24 NUR 0288 – N.L.S. – No Violation
- 24 NUR 0298 – A.J.B. – Prosecutorial Discretion (P2)
- 24 NUR 0313 – U. – Lack of Jurisdiction (L2)
- 24 NUR 0378 – S.L.K. – No Violation
- 24 NUR 0527 – A.L.S. – No Violation
- 24 NUR 0548 – F.T. – No Violation
- 24 NUR 0585 – N.J.D. – No Violation
- 24 NUR 0600 – K.L.B. – Prosecutorial Discretion (P5)
- 24 NUR 0602 – D.G. – Insufficient Evidence
- 24 NUR 0623 – N.L.L. – Prosecutorial Discretion (P2)
- 24 NUR 0773 – J.L.C. – No Violation
- 24 NUR 0820 – R.B. – No Violation

25 NUR 0104 – E.L.M. – No Violation
25 NUR 0146 – R.K.S. – No Violation
25 NUR 0320 – J.J.B. – No Violation
25 NUR 0341 – J.B.S. – Prosecutorial Discretion (P1)
25 NUR 0372 – E.K.B. – Prosecutorial Discretion (P1)
25 NUR 0437 – E.F.N. – No Violation
Motion carried unanimously.

DELIBERATION ON PROPOSED FINAL DECISION AND ORDERS

MOTION: Amanda Kane moved, seconded by John Anderson delegated to DSPS Chief Legal Counsel the Board’s authority to preside over and resolve the matter of disciplinary proceedings in the following cases:

Felicia Coleman, Respondent (DHA Case Number SPS-25-0024/ DLSC Case Number 23 NUR 539)

Mary A. Garcia, Respondent (DHA Case Number SPS-25-0017/ DLSC Case Number 21 NUR 447)

Nicole Riesterer, Respondent (DHA Case Number SPS-25-0043/ DLSC Case Number 22 NUR 022)

Philip W. Schanen, Respondent (DHA Case Number SPS-24-0054/ DLSC Case Numbers 23 NUR 663 and 23 NUR 779)

Motion carried unanimously.

DELIBERATION ON MATTERS RELATING TO COSTS/ORDERS FIXING

Thomas L. Collins (DHA Case Number SPS-23-0030/ DLSC Case Number 22 NUR 455)

MOTION: Jennifer Malak moved, seconded by John Anderson, to adopt the Order Fixing Costs in the matter of disciplinary proceedings against Thomas L. Collins, Respondent – DHA Case Number SPS-23-0030/ DLSC Case Number 22 NUR 455. Motion carried unanimously.

RECONVENE TO OPEN SESSION

MOTION: Robert Weinman moved, seconded by Amanda Kane, to reconvene into Open Session. Motion carried unanimously.

The Board reconvened into Open Session at 11:04 a.m.

VOTING ON ITEMS CONSIDERED OR DELIBERATED UPON IN CLOSED SESSION

MOTION: Amanda Kane moved, seconded by John Anderson, to affirm all motions made and votes taken in Closed Session. Motion carried unanimously.

(Be advised that any recusals or abstentions reflected in the Closed Session motions stand for the purposes of the affirmation vote.)

ADJOURNMENT

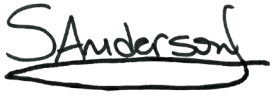
MOTION: Patrick McNally moved, seconded by Jennifer Malak, to adjourn the meeting. Motion carried unanimously.

The meeting adjourned at 11:08 a.m.

DRAFT

**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and title of person submitting the request: Sofia Anderson, Administrative Rules Coordinator		2) Date when request submitted: 09/29/2025 Items will be considered late if submitted after 12:00 p.m. on the deadline date which is 8 business days before the meeting	
3) Name of Board, Committee, Council, Sections: Board of Nursing			
4) Meeting Date: October 9, 2025	5) Attachments: ☒ Yes ☐ No	6) How should the item be titled on the agenda page? 08:00 A.M. Preliminary Public Hearing for Scope Statement 064-25: N 1 relating to faculty accreditation standards.	
7) Place Item in: ☒ Open Session ☐ Closed Session	8) Is an appearance before the Board being scheduled? <i>(If yes, please complete Appearance Request for Non-DSPS Staff)</i> ☐ Yes ☒ No	9) Name of Case Advisor(s), if required: N/A	
10) Describe the issue and action that should be addressed: The Board will hold a Preliminary Public Hearing on these scopes as directed by the Joint Committee for Review of Administrative Rules (JCRAR) pursuant to s. 227.136 (1), Stats.			
11) Authorization  Signature of person making this request 09/29/2025 Date Supervisor (if required) Date Executive Director signature (indicates approval to add post agenda deadline item to agenda) Date			
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 3. If necessary, provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			

STATEMENT OF SCOPE

BOARD OF NURSING

Rule No.: N 1

Relating to: Faculty Accreditation Standards

Rule Type: Emergency and permanent

1. Finding/nature of emergency (Emergency Rule only):

This rule is essential for the public welfare by enabling nursing schools to broaden their clinical faculty. The expeditious promulgation of this proposed rule directly serves Wisconsin's economic interests and public well-being by alleviating nursing school staffing shortages and reducing barriers to nursing practice.

2. Detailed description of the objective of the proposed rule:

The Board's primary objective is to alleviate nursing school faculty shortages and reduce barriers to nursing practice by allowing greater flexibility in clinical faculty availability. The goal is to promote a bigger nursing workforce, which is essential to the well-being of the state as a whole.

3. Description of the existing policies relevant to the rule, new policies proposed to be included in the rule, and an analysis of policy alternatives:

Chapter N 1 broadly covers the approval process for nursing schools, which includes specific faculty accreditation standards that schools must adhere to for approval and continued operation. These standards generally outline the criteria for employing qualified educational administrators and faculty members. The Board has identified the need to clarify these provisions to allow more flexibility in clinical faculty available to teach nursing students in clinical settings.

The alternative is to not update these provisions, which would restrict the flow of new nursing graduates into the workforce.

4. Detailed explanation of statutory authority for the rule (including the statutory citation and language):

Section 15.08 (5) (b), Stats., provides an examining board "[s]hall promulgate rules for its own guidance and for the guidance of the trade or profession to which it pertains. . ."

Section 227.24 (1) (a), Stats., provides "[a]n agency may, except as provided in s. 227.136 (1), promulgate a rule as an emergency rule without complying with the notice, hearing, and publication requirements under this chapter if preservation of the public peace, health, safety, or welfare necessitates putting the rule into effect prior to the time it would take effect if the agency complied with the procedures."

Section 441.01 (3), Stats., provides "[t]he board may establish minimum standards for schools for professional nurses and schools for licensed practical nurses, including all related clinical units and facilities, and make and provide periodic surveys and consultations to such schools. It may also establish rules to prevent unauthorized persons from practicing professional nursing. It shall approve all rules for the administration of this chapter in accordance with ch. 227."

5. Estimate of amount of time that state employees will spend developing the rule and of other resources necessary to develop the rule:

80 hours

6. List with description of all entities that may be affected by the proposed rule:

Nursing students, nursing school graduates, entities that hire or may hire nursing students and nursing school graduates, and individuals accessing health care services.

7. Summary and preliminary comparison with any existing or proposed federal regulation that is intended to address the activities to be regulated by the proposed rule:

None

8. Anticipated economic impact of implementing the rule (note if the rule is likely to have a significant economic impact on small businesses):

The proposed rule will have minimal to no economic impact on small businesses and the state's economy as a whole.

Contact Person: Sofia Anderson, Administrative Rules Coordinator, DSPSAdminRules@wisconsin.gov, (608) 261-4463.

Approved for publication:



Authorized Signature

7/11/2025

Date Approved

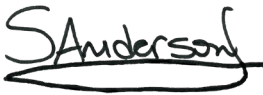
Approved for implementation:

Authorized Signature

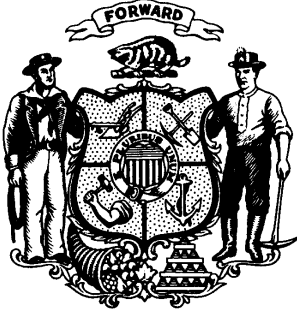
Date Approved

**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and title of person submitting the request: Sofia Anderson, Administrative Rules Coordinator		2) Date when request submitted: 09/29/2025 Items will be considered late if submitted after 12:00 p.m. on the deadline date which is 8 business days before the meeting	
3) Name of Board, Committee, Council, Sections: Board of Nursing			
4) Meeting Date: October 9, 2025	5) Attachments: ☒ Yes ☐ No	6) How should the item be titled on the agenda page? Administrative Rules Matters – Discussion and Consideration 1. Scope Statement: N 1 to 8, relating to Advanced Practice Registered Nurses and comprehensive review. 2. Pending and Possible rulemaking projects.	
7) Place Item in: ☒ Open Session ☐ Closed Session		8) Is an appearance before the Board being scheduled? <i>(If yes, please complete Appearance Request for Non-DSPS Staff)</i> ☐ Yes ☒ No	9) Name of Case Advisor(s), if required: N/A
10) Describe the issue and action that should be addressed: Attachments: 1. 2025 WI Act 17 2. Scope Statement: N 1 to 8, relating to Advanced Practice Registered Nurses and comprehensive review. 3. Nursing rule projects chart.			
11) Authorization  Signature of person making this request 09/29/2025 Date Supervisor (if required) Date Executive Director signature (indicates approval to add post agenda deadline item to agenda) Date			
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 3. If necessary, provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			

State of Wisconsin



2025 Assembly Bill 257

Date of enactment: August 8, 2025

Date of publication*: August 9, 2025

2025 WISCONSIN ACT 17

AN ACT *to repeal* 50.01 (1b), 77.54 (14) (f) 3., 118.2925 (1) (b), 118.294 (1) (a), 146.89 (1) (r) 8., 252.01 (1c), 440.03 (13) (b) 3., 440.03 (13) (b) 42., 440.08 (2) (a) 4m., 440.08 (2) (a) 50., 441.11 (title), 441.11 (1), 441.11 (3), 441.15, 441.16, 441.19, 448.035 (1) (a), 450.01 (1m) and 655.001 (9); *to renumber* 655.001 (1); *to renumber and amend* 146.89 (1) (r) 3., 253.13 (1), 255.06 (1) (d), 441.06 (7) and 441.11 (2); *to amend* 29.193 (1m) (a) 2. (intro.), 29.193 (2) (b) 2., 29.193 (2) (c) 3., 29.193 (2) (cd) 2. b., 29.193 (2) (cd) 2. c., 29.193 (2) (e), 29.193 (3) (a), 45.40 (1g) (a), 46.03 (44), 50.08 (2), 50.09 (1) (a) (intro.), 50.09 (1) (f) 1., 50.09 (1) (h), 50.09 (1) (k), 50.49 (1) (b) (intro.), 51.41 (1d) (b) 4., 70.47 (8) (intro.), 77.54 (14) (f) 4., 97.59, 106.30 (1), 118.15 (3) (a), 118.25 (1) (a), 118.29 (1) (e), 118.2915 (2) (a), 118.2915 (3) (a), 118.2915 (4) (c), 118.2915 (6) (a) (intro.), 118.2915 (6) (a) 2., 118.2915 (6) (a) 3., 118.2925 (3), 118.2925 (4) (c), 118.2925 (5), 118.294 (1) (am), 118.294 (2), 118.294 (4) (a), 146.615 (1) (a), 146.82 (3) (a), 146.89 (1) (r) 1., 146.89 (6), 154.01 (1g), 252.07 (8) (a) 2., 252.07 (9) (c), 252.10 (7), 252.11 (2), 252.11 (4), 252.11 (5), 252.11 (7), 252.11 (10), 252.15 (3m) (d) 11. b. and 13., (5g) (c), (5m) (d) 2. and (e) 2. and 3. and (7m) (intro.) and (b), 252.16 (3) (c) (intro.), 252.17 (3) (c) (intro.), 253.07 (4) (d), 253.115 (4), 253.115 (7) (a) (intro.), 253.15 (2), 255.06 (2) (d), 255.07 (1) (d), 257.01 (5) (a), 257.01 (5) (b), 341.14 (1a), 341.14 (1e) (a), 341.14 (1m), 341.14 (1q), 343.16 (5) (a), 343.51 (1), 343.62 (4) (a) 4., 440.077 (1) (a), 440.077 (2) (c), 440.094 (1) (c) 1., 440.094 (2) (a) (intro.), 440.981 (1), 440.982 (1), 440.987 (2), 441.01 (3), 441.01 (4), 441.01 (7) (a) (intro.), 441.01 (7) (b), 441.06 (3), 441.06 (4), 441.07 (1g) (intro.), (a), (c) and (e), 441.07 (2), 441.10 (7), 441.18 (2) (a) (intro.), 441.18 (2) (b), 441.18 (3), 448.03 (2) (a), 448.035 (2) to (4), 448.56 (1) and (1m) (b), 448.62 (2m), 448.67 (2), 448.956 (1m), 450.01 (16) (h) 2., 450.01 (16) (hr) 2., 450.03 (1) (e), 450.11 (1g) (b), 450.11 (1i) (a) 1., 450.11 (1i) (b) 2. b., 450.11 (7) (b), 450.11 (8) (e), 450.13 (5) (b), 450.135 (7) (b), 462.04, 655.001 (7t), 655.002 (1) (a), 655.002 (1) (b), 655.002 (1) (c), 655.002 (1) (d), 655.002 (1) (e), 655.002 (1) (em), 655.002 (2) (a), 655.002 (2) (b), 655.003 (1), 655.003 (3), 655.005 (2) (a), 655.005 (2) (b), 655.23 (5m), 655.27 (3) (a) 4., 655.27 (3) (b) 2m., 655.275 (2), 655.275 (5) (b) 2., 895.478 (3m), 961.01 (19) (a) and 961.395; *to repeal and recreate* 118.2915 (1) (a), 155.01 (1g) (b), 251.01 (1c) and 441.06 (title); *to create* 253.115 (1) (f), 253.13 (1) (a), 253.15 (1) (em), 255.06 (1) (f) 2., 440.03 (13) (b) 39m., 440.08 (2) (a) 47r., 441.001 (1c), 441.001 (3c), 441.001 (3g), 441.001 (3n), 441.001 (3r), 441.001 (3w), 441.001 (5), 441.01 (7) (c), 441.065, 441.07 (1r), 441.09, 441.092 and 655.001 (1g) of the statutes; **relating to:** advanced practice registered nurses, extending the time limit for emergency rule procedures, providing an exemption from emergency rule procedures, and granting rule-making authority.

* Section 991.11, WISCONSIN STATUTES: Effective date of acts. "Every act and every portion of an act enacted by the legislature over the governor's partial veto which does not expressly prescribe the time when it takes effect shall take effect on the day after its date of publication."

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

SECTION 1. 29.193 (1m) (a) 2. (intro.) of the statutes is amended to read:

29.193 (1m) (a) 2. (intro.) Has a permanent substantial loss of function in one or both arms or one or both hands and fails to meet the minimum standards of any one of the following standard tests, administered under the direction of a licensed physician, a licensed physician assistant, a licensed chiropractor, or a certified licensed advanced practice registered nurse ~~prescriber~~:

SECTION 2. 29.193 (2) (b) 2. of the statutes is amended to read:

29.193 (2) (b) 2. An applicant shall submit an application on a form prepared and furnished by the department, which shall include a written statement or report prepared and signed by a licensed physician, a licensed physician assistant, a licensed chiropractor, a licensed podiatrist, or a certified licensed advanced practice registered nurse ~~prescriber~~ prepared no more than 6 months preceding the application and verifying that the applicant is physically disabled.

SECTION 3. 29.193 (2) (c) 3. of the statutes is amended to read:

29.193 (2) (c) 3. The department may issue a Class B permit to an applicant who is ineligible for a permit under subd. 1., 2. or 2m. or who is denied a permit under subd. 1., 2. or 2m. if, upon review and after considering the physical condition of the applicant and the recommendation of a licensed physician, a licensed physician assistant, a licensed chiropractor, a licensed podiatrist, or a certified licensed advanced practice registered nurse ~~prescriber~~ selected by the applicant from a list of licensed physicians, licensed physician assistants, licensed chiropractors, licensed podiatrists, and certified licensed advanced practice nurse prescribers ~~registered nurses~~ compiled by the department, the department finds that issuance of a permit complies with the intent of this subsection. The use of this review procedure is discretionary with the department and all costs of the review procedure shall be paid by the applicant.

SECTION 4. 29.193 (2) (cd) 2. b. of the statutes is amended to read:

29.193 (2) (cd) 2. b. The person has a permanent substantial loss of function in one or both arms and fails to meet the minimum standards of the standard upper extremity pinch test, the standard grip test, or the standard nine-hole peg test, administered under the direction of a licensed physician, a licensed physician assistant, a licensed chiropractor, or a certified licensed advanced practice registered nurse ~~prescriber~~.

SECTION 5. 29.193 (2) (cd) 2. c. of the statutes is amended to read:

29.193 (2) (cd) 2. c. The person has a permanent substantial loss of function in one or both shoulders and fails to meet the minimum standards of the standard shoulder strength test, administered under the direction of a licensed physician, a licensed physician assistant, a licensed chiropractor, or a certified licensed advanced practice registered nurse ~~prescriber~~.

SECTION 6. 29.193 (2) (e) of the statutes is amended to read:

29.193 (2) (e) *Review of decisions.* An applicant denied a permit under this subsection, except a permit under par. (c) 3., may obtain a review of that decision by a licensed physician, a licensed physician assistant, a licensed chiropractor, a licensed podiatrist, or a certified licensed advanced practice registered nurse ~~prescriber~~ designated by the department and with an office located in the department district in which the applicant resides. The department shall pay for the cost of a review under this paragraph unless the denied application on its face fails to meet the standards set forth in par. (c) 1. or 2. A review under this paragraph is the only method of review of a decision to deny a permit under this subsection and is not subject to further review under ch. 227.

SECTION 7. 29.193 (3) (a) of the statutes is amended to read:

29.193 (3) (a) Produces a certificate from a licensed physician, a licensed physician assistant, a licensed optometrist, or a certified licensed advanced practice registered nurse ~~prescriber~~ stating that his or her sight is impaired to the degree that he or she cannot read ordinary newspaper print with or without corrective glasses.

SECTION 8. 45.40 (1g) (a) of the statutes is amended to read:

45.40 (1g) (a) "Health care provider" means an advanced practice registered nurse ~~prescriber who is certified who may issue prescription orders~~ under s. ~~441.16~~ 441.09 (2), an audiologist who is licensed under subch. II of ch. 459 or who holds a compact privilege under subch. III of ch. 459, a dentist who is licensed under subch. I of ch. 447 or who holds a compact privilege under subch. II of ch. 447, an optometrist who is licensed under ch. 449, a physician who is licensed under s. 448.02, or a podiatrist who is licensed under s. 448.63.

SECTION 9. 46.03 (44) of the statutes is amended to read:

46.03 (44) SEXUALLY TRANSMITTED DISEASE TREATMENT INFORMATION. Prepare and keep current an information sheet to be distributed to a patient by a physician, a physician assistant, or certified an advanced practice registered nurse ~~prescriber who may issue prescription orders~~ under s. 441.09 (2) providing expedited partner therapy to that patient under s. 441.092, 448.035, or 448.9725. The information sheet shall in-

clude information about sexually transmitted diseases and their treatment and about the risk of drug allergies. The information sheet shall also include a statement advising a person with questions about the information to contact his or her physician, advanced practice registered nurse, pharmacist, or local health department, as defined in s. 250.01 (4).

SECTION 10. 50.01 (1b) of the statutes is repealed.

SECTION 11. 50.08 (2) of the statutes is amended to read:

50.08 (2) A physician, an advanced practice registered nurse ~~prescriber~~ certified who may issue prescription orders under s. 441.16 441.09 (2), or a physician assistant who prescribes a psychotropic medication to a nursing home resident who has degenerative brain disorder shall notify the nursing home if the prescribed medication has a boxed warning under 21 CFR 201.57.

SECTION 12. 50.09 (1) (a) (intro.) of the statutes is amended to read:

50.09 (1) (a) (intro.) Private and unrestricted communications with the resident's family, physician, physician assistant, advanced practice registered nurse ~~prescriber~~, attorney, and any other person, unless medically contraindicated as documented by the resident's physician, physician assistant, or advanced practice registered nurse ~~prescriber~~ in the resident's medical record, except that communications with public officials or with the resident's attorney shall not be restricted in any event. The right to private and unrestricted communications shall include, but is not limited to, the right to:

SECTION 13. 50.09 (1) (f) 1. of the statutes is amended to read:

50.09 (1) (f) 1. Privacy for visits by spouse or domestic partner. If both spouses or both domestic partners under ch. 770 are residents of the same facility, the spouses or domestic partners shall be permitted to share a room unless medically contraindicated as documented by the resident's physician, physician assistant, or advanced practice registered nurse ~~prescriber~~ in the resident's medical record.

SECTION 14. 50.09 (1) (h) of the statutes is amended to read:

50.09 (1) (h) Meet with, and participate in activities of social, religious, and community groups at the resident's discretion, unless medically contraindicated as documented by the resident's physician, physician assistant, or advanced practice registered nurse ~~prescriber~~ in the resident's medical record.

SECTION 15. 50.09 (1) (k) of the statutes is amended to read:

50.09 (1) (k) Be free from mental and physical abuse, and be free from chemical and physical restraints except as authorized in writing by a physician, physician

assistant, or advanced practice registered nurse ~~prescriber~~ for a specified and limited period of time and documented in the resident's medical record. Physical restraints may be used in an emergency when necessary to protect the resident from injury to himself or herself or others or to property. However, authorization for continuing use of the physical restraints shall be secured from a physician, physician assistant, or advanced practice registered nurse ~~prescriber~~ within 12 hours. Any use of physical restraints shall be noted in the resident's medical records. "Physical restraints" includes, but is not limited to, any article, device, or garment that interferes with the free movement of the resident and that the resident is unable to remove easily, and confinement in a locked room.

SECTION 16. 50.49 (1) (b) (intro.) of the statutes is amended to read:

50.49 (1) (b) (intro.) "Home health services" means the following items and services that are furnished to an individual, who is under the care of a physician, physician assistant, or advanced practice registered nurse ~~prescriber~~, by a home health agency, or by others under arrangements made by the home health agency, that are under a plan for furnishing those items and services to the individual that is established and periodically reviewed by a physician, physician assistant, or advanced practice registered nurse ~~prescriber~~ and that are, except as provided in subd. 6., provided on a visiting basis in a place of residence used as the individual's home:

SECTION 17. 51.41 (1d) (b) 4. of the statutes is amended to read:

51.41 (1d) (b) 4. A psychiatric mental health advanced practice registered nurse who is suggested by the Milwaukee County board of supervisors. The Milwaukee County board of supervisors shall solicit suggestions from organizations including the Wisconsin Nurses Association for individuals who specialize in a full continuum of behavioral health and medical services including emergency detention, inpatient, residential, transitional, partial hospitalization, intensive outpatient, and wraparound community-based services. The Milwaukee County board of supervisors shall suggest to the Milwaukee County executive 4 psychiatric mental health advanced practice registered nurses for this board membership position.

SECTION 18. 70.47 (8) (intro.) of the statutes is amended to read:

70.47 (8) HEARING. (intro.) The board shall hear upon oath all persons who appear before it in relation to the assessment. Instead of appearing in person at the hearing, the board may allow the property owner, or the property owner's representative, at the request of either person, to appear before the board, under oath, by tele-

phone or to submit written statements, under oath, to the board. The board shall hear upon oath, by telephone, all ill or disabled persons who present to the board a letter from a physician, physician assistant, or advanced practice ~~registered nurse prescriber certified under s. 441.16 (2)~~ licensed under ch. 441 that confirms their illness or disability. At the request of the property owner or the property owner's representative, the board may postpone and reschedule a hearing under this subsection, but may not postpone and reschedule a hearing more than once during the same session for the same property. The board at such hearing shall proceed as follows:

SECTION 19. 77.54 (14) (f) 3. of the statutes is repealed.

SECTION 20. 77.54 (14) (f) 4. of the statutes is amended to read:

77.54 (14) (f) 4. An advanced practice registered nurse who may issue prescription orders under s. 441.09 (2).

SECTION 21. 97.59 of the statutes is amended to read:

97.59 Handling foods. No person in charge of any public eating place or other establishment where food products to be consumed by others are handled may knowingly employ any person handling food products who has a disease in a form that is communicable by food handling. If required by the local health officer or any officer of the department for the purposes of an investigation, any person who is employed in the handling of foods or is suspected of having a disease in a form that is communicable by food handling shall submit to an examination by the officer or by a physician, physician assistant, or advanced practice registered nurse ~~prescriber~~ designated by the officer. The expense of the examination, if any, shall be paid by the person examined. Any person knowingly infected with a disease in a form that is communicable by food handling who handles food products to be consumed by others and any persons knowingly employing or permitting such a person to handle food products to be consumed by others shall be punished as provided by s. 97.72.

SECTION 22. 106.30 (1) of the statutes is amended to read:

106.30 (1) DEFINITION. In this section, "nurse" means a registered nurse licensed under s. 441.06 or permitted under s. 441.08, a licensed practical nurse licensed or permitted under s. 441.10, or an advanced practice registered nurse ~~prescriber certified under s. 441.16 (2), or a nurse-midwife licensed under s. 441.15 441.09.~~

SECTION 23. 118.15 (3) (a) of the statutes is amended to read:

118.15 (3) (a) Any child who is excused by the

school board because the child is temporarily not in proper physical or mental condition to attend a school program but who can be expected to return to a school program upon termination or abatement of the illness or condition. The school attendance officer may request the parent or guardian of the child to obtain a written statement from a licensed physician, naturopathic doctor, dentist, chiropractor, optometrist, psychologist, physician assistant, ~~or nurse practitioner, as defined in s. 255.06 (1) (d), or certified advanced practice registered nurse prescriber, or registered nurse described under s. 255.06 (1) (f) 1,~~ or Christian Science practitioner living and residing in this state, who is listed in the Christian Science Journal, as sufficient proof of the physical or mental condition of the child. An excuse under this paragraph shall be in writing and shall state the time period for which it is valid, not to exceed 30 days.

SECTION 24. 118.25 (1) (a) of the statutes is amended to read:

118.25 (1) (a) "Practitioner" means a person licensed as a physician, naturopathic doctor, or physician assistant in any state or licensed as an advanced practice registered nurse or certified as an advanced practice registered nurse prescriber in any state. In this paragraph, "physician" has the meaning given in s. 448.01 (5).

SECTION 25. 118.29 (1) (e) of the statutes is amended to read:

118.29 (1) (e) "Practitioner" means any physician, naturopathic doctor, dentist, optometrist, physician assistant, advanced practice registered nurse ~~prescriber~~ with prescribing authority, or podiatrist licensed in any state.

SECTION 26. 118.2915 (1) (a) of the statutes is repealed and recreated to read:

118.2915 (1) (a) "Advanced practice registered nurse" means an individual licensed under s. 441.09 who may issue prescription orders under s. 441.09 (2).

SECTION 27. 118.2915 (2) (a) of the statutes is amended to read:

118.2915 (2) (a) The governing body of a school may adopt a plan for the management of pupils attending the school who have asthma. If the governing body of a school adopts a plan under this paragraph, it shall specify in the plan the training necessary to perform the activities under sub. (4). The governing body of a school may not adopt a plan under this paragraph unless the plan has been approved by a physician, an advanced practice registered nurse ~~prescriber~~, or a physician assistant.

SECTION 28. 118.2915 (3) (a) of the statutes is amended to read:

118.2915 (3) (a) A physician, an advanced practice registered nurse ~~prescriber~~, or a physician assistant may

provide a prescription or standing order for a short-acting bronchodilator or components in the name of a school that has adopted a plan under sub. (2) (a) to be maintained by the school for use under sub. (4).

SECTION 29. 118.2915 (4) (c) of the statutes is amended to read:

118.2915 (4) (c) In accordance with a prescription or standing order from a physician, an advanced practice registered nurse ~~prescriber~~, or a physician assistant, administer a short-acting bronchodilator to a pupil or other person who the school nurse or designated school personnel believes in good faith is experiencing respiratory distress, regardless of whether the pupil or other person has a prescription for a short-acting bronchodilator.

SECTION 30. 118.2915 (6) (a) (intro.) of the statutes is amended to read:

118.2915 (6) (a) (intro.) None of the following are liable for any injury that results from the administration or self-administration of a short-acting bronchodilator under this section, regardless of whether authorization was given by the pupil's parent or guardian or by the pupil's physician, physician assistant, or advanced practice registered nurse ~~prescriber~~, unless the injury is the result of an act or omission that constitutes gross negligence or willful or wanton misconduct:

SECTION 31. 118.2915 (6) (a) 2. of the statutes is amended to read:

118.2915 (6) (a) 2. A physician, advanced practice registered nurse ~~prescriber~~, or physician assistant who provides a prescription or standing order for a short-acting bronchodilator or components to a school under sub. (3) (a).

SECTION 32. 118.2915 (6) (a) 3. of the statutes is amended to read:

118.2915 (6) (a) 3. A physician, advanced practice registered nurse ~~prescriber~~, physician assistant, or pharmacist who dispenses a short-acting bronchodilator or components to a school in accordance with a prescription or standing order under sub. (3) (a).

SECTION 33. 118.2925 (1) (b) of the statutes is repealed.

SECTION 34. 118.2925 (3) of the statutes is amended to read:

118.2925 (3) PRESCRIPTIONS FOR SCHOOLS. A physician, an advanced practice registered nurse ~~prescriber~~ who may issue prescription orders under s. 441.09 (2), or a physician assistant may prescribe epinephrine delivery systems in the name of a school that has adopted a plan under sub. (2) (a), to be maintained by the school for use under sub. (4).

SECTION 35. 118.2925 (4) (c) of the statutes is amended to read:

118.2925 (4) (c) Administer an epinephrine deliv-

ery system to a pupil or other person who the school nurse or designated school personnel in good faith believes is experiencing anaphylaxis in accordance with a standing protocol from a physician, an advanced practice registered nurse ~~prescriber~~ who may issue prescription orders under s. 441.09 (2), or a physician assistant, regardless of whether the pupil or other person has a prescription for an epinephrine delivery system. If the pupil or other person does not have a prescription for an epinephrine delivery system, or the person who administers the epinephrine delivery system does not know whether the pupil or other person has a prescription for an epinephrine delivery system, the person who administers the epinephrine delivery system shall, as soon as practicable, report the administration by dialing the telephone number "911" or, in an area in which the telephone number "911" is not available, the telephone number for an emergency medical service provider.

SECTION 36. 118.2925 (5) of the statutes is amended to read:

118.2925 (5) IMMUNITY FROM CIVIL LIABILITY; EXEMPTION FROM PRACTICE OF MEDICINE. A school and its designated school personnel, and a physician, an advanced practice registered nurse ~~prescriber~~ who may issue prescription orders under s. 441.09 (2), or a physician assistant who provides a prescription or standing protocol for school epinephrine delivery systems, are not liable for any injury that results from the administration or self-administration of an epinephrine delivery system under this section, regardless of whether authorization was given by the pupil's parent or guardian or by the pupil's physician, physician assistant, or advanced practice registered nurse ~~prescriber~~, unless the injury is the result of an act or omission that constitutes gross negligence or willful or wanton misconduct. The immunity from liability provided under this subsection is in addition to and not in lieu of that provided under s. 895.48.

SECTION 37. 118.294 (1) (a) of the statutes is repealed.

SECTION 38. 118.294 (1) (am) of the statutes is amended to read:

118.294 (1) (am) "Advanced practice registered nurse" ~~has the meaning given in s. 154.01 (1g)~~ means an individual licensed under s. 441.09 who may issue prescription orders under s. 441.09 (2).

SECTION 39. 118.294 (2) of the statutes is amended to read:

118.294 (2) PRESCRIPTIONS FOR SCHOOLS. A physician, an advanced practice registered nurse ~~prescriber~~, or a physician assistant may prescribe undesignated glucagon in the name of a school to be maintained by the school for use under sub. (3).

SECTION 40. 118.294 (4) (a) of the statutes is amended to read:

118.294 (4) (a) A school and its school personnel, and a physician, an advanced practice registered nurse prescriber, or a physician assistant who provides a prescription or standing order for undesignated glucagon are not liable for any injury that results from the administration of undesignated glucagon under this section, regardless of whether authorization was given by the pupil's parent or guardian or by the pupil's diabetes provider, unless the injury is the result of an act or omission that constitutes gross negligence or willful or wanton misconduct. The immunity from liability provided under this paragraph is in addition to and not in lieu of that provided under s. 895.48.

SECTION 41. 146.615 (1) (a) of the statutes is amended to read:

146.615 (1) (a) "Advanced practice clinician" means a physician assistant or an advanced practice registered nurse, ~~including a nurse practitioner, certified nurse midwife, clinical nurse specialist, or certified registered nurse anesthetist~~ licensed under s. 441.09.

SECTION 42. 146.82 (3) (a) of the statutes is amended to read:

146.82 (3) (a) Notwithstanding sub. (1), a physician, a naturopathic doctor, a limited-scope naturopathic doctor, a physician assistant, or an advanced practice registered nurse prescriber ~~certified under s. 441.16 (2) licensed under s. 441.09~~ who treats a patient whose physical or mental condition in the physician's, naturopathic doctor's, limited-scope naturopathic doctor's, physician assistant's, or advanced practice nurse prescriber's registered nurse's judgment affects the patient's ability to exercise reasonable and ordinary control over a motor vehicle may report the patient's name and other information relevant to the condition to the department of transportation without the informed consent of the patient.

SECTION 43. 146.89 (1) (r) 1. of the statutes is amended to read:

146.89 (1) (r) 1. Licensed as a physician under ch. 448, naturopathic doctor under ch. 466, a dentist, dental therapist, or dental hygienist under ch. 447, a registered nurse, practical nurse, or ~~nurse midwife~~ advanced practice registered nurse under ch. 441, an optometrist under ch. 449, a physician assistant under subch. IX of ch. 448, a pharmacist under ch. 450, a chiropractor under ch. 446, a podiatrist under subch. IV of ch. 448, or a physical therapist under subch. III of ch. 448.

SECTION 44. 146.89 (1) (r) 3. of the statutes is renumbered 146.89 (1) (r) 5e. and amended to read:

146.89 (1) (r) 5e. A registered nurse practitioner, as defined in s. 255.06 (1) (d) who holds a multistate li-

cense, as defined in s. 441.51 (2) (h), issued by a party state, as defined in s. 441.51 (2) (k), and whose practice of professional nursing under s. 441.001 (4) includes performance of delegated medical services under the supervision of a physician, dentist, podiatrist, or advanced practice registered nurse.

SECTION 45. 146.89 (1) (r) 8. of the statutes is repealed.

SECTION 46. 146.89 (6) of the statutes is amended to read:

146.89 (6) (a) While serving as a volunteer health care provider under this section, an advanced practice registered nurse ~~who has a certificate to issue prescription orders under s. 441.16 (2)~~ is considered to meet the requirements of s. 655.23, if required to comply with s. 655.23.

(b) While serving as a volunteer health care provider under this section, an advanced practice registered nurse ~~who has a certificate to issue prescription orders under s. 441.16 (2)~~ is not required to maintain in effect malpractice insurance.

SECTION 47. 154.01 (1g) of the statutes is amended to read:

154.01 (1g) "Advanced practice registered nurse" means ~~a nurse an individual licensed under ch. 441 who is currently certified by a national certifying body approved by the board of nursing as a nurse practitioner, certified nurse midwife, certified registered nurse anesthetist, or clinical nurse specialist s. 441.09.~~

SECTION 48. 155.01 (1g) (b) of the statutes is repealed and recreated to read:

155.01 (1g) (b) An individual who is licensed as an advanced practice registered nurse and possesses a nurse practitioner specialty designation under s. 441.09.

SECTION 49. 251.01 (1c) of the statutes is repealed and recreated to read:

251.01 (1c) "Advanced practice registered nurse" means an individual licensed under s. 441.09.

SECTION 50. 252.01 (1c) of the statutes is repealed.

SECTION 51. 252.07 (8) (a) 2. of the statutes is amended to read:

252.07 (8) (a) 2. The department or local health officer provides to the court a written statement from a physician, physician assistant, or advanced practice registered nurse prescriber that the individual has infectious tuberculosis or suspect tuberculosis.

SECTION 52. 252.07 (9) (c) of the statutes is amended to read:

252.07 (9) (c) If the court orders confinement of an individual under this subsection, the individual shall remain confined until the department or local health officer, with the concurrence of a treating physician, physician assistant, or advanced practice registered nurse pre-

~~scribe~~, determines that treatment is complete or that the individual is no longer a substantial threat to himself or herself or to the public health. If the individual is to be confined for more than 6 months, the court shall review the confinement every 6 months.

SECTION 53. 252.10 (7) of the statutes is amended to read:

252.10 (7) Drugs necessary for the treatment of mycobacterium tuberculosis shall be purchased by the department from the appropriation account under s. 20.435 (1) (e) and dispensed to patients through the public health dispensaries, local health departments, physicians, or advanced practice ~~nurse-prescribers~~ registered nurses who may issue prescription orders under s. 441.09 (2).

SECTION 54. 252.11 (2) of the statutes is amended to read:

252.11 (2) An officer of the department or a local health officer having knowledge of any reported or reasonably suspected case or contact of a sexually transmitted disease for which no appropriate treatment is being administered, or of an actual contact of a reported case or potential contact of a reasonably suspected case, shall investigate or cause the case or contact to be investigated as necessary. If, following a request of an officer of the department or a local health officer, a person reasonably suspected of being infected with a sexually transmitted disease refuses or neglects examination by a physician, physician assistant, or advanced practice registered nurse ~~prescriber~~ or treatment, an officer of the department or a local health officer may proceed to have the person committed under sub. (5) to an institution or system of care for examination, treatment, or observation.

SECTION 55. 252.11 (4) of the statutes is amended to read:

252.11 (4) If a person infected with a sexually transmitted disease ceases or refuses treatment before reaching what in a physician's, physician assistant's, or advanced practice ~~nurse-prescriber's~~ registered nurse's opinion is the noncommunicable stage, the physician, physician assistant, or advanced practice registered nurse ~~prescriber~~ shall notify the department. The department shall without delay take the necessary steps to have the person committed for treatment or observation under sub. (5), or shall notify the local health officer to take these steps.

SECTION 56. 252.11 (5) of the statutes is amended to read:

252.11 (5) Any court of record may commit a person infected with a sexually transmitted disease to any institution or may require the person to undergo a system of care for examination, treatment, or observation if the person ceases or refuses examination, treatment, or

observation under the supervision of a physician, physician assistant, or advanced practice registered nurse ~~prescriber~~. The court shall summon the person to appear on a date at least 48 hours, but not more than 96 hours, after service if an officer of the department or a local health officer petitions the court and states the facts authorizing commitment. If the person fails to appear or fails to accept commitment without reasonable cause, the court may cite the person for contempt. The court may issue a warrant and may direct the sheriff, any constable, or any police officer of the county immediately to arrest the person and bring the person to court if the court finds that a summons will be ineffectual. The court shall hear the matter of commitment summarily. Commitment under this subsection continues until the disease is no longer communicable or until other provisions are made for treatment that satisfy the department. The certificate of the petitioning officer is prima facie evidence that the disease is no longer communicable or that satisfactory provisions for treatment have been made.

SECTION 57. 252.11 (7) of the statutes is amended to read:

252.11 (7) Reports, examinations and inspections, and all records concerning sexually transmitted diseases are confidential and not open to public inspection, and may not be divulged except as may be necessary for the preservation of the public health, in the course of commitment proceedings under sub. (5), or as provided under s. 938.296 (4) or 968.38 (4). If a physician, physician assistant, or advanced practice registered nurse ~~prescriber~~ has reported a case of sexually transmitted disease to the department under sub. (4), information regarding the presence of the disease and treatment is not privileged when the patient, physician, physician assistant, or advanced practice registered nurse ~~prescriber~~ is called upon to testify to the facts before any court of record.

SECTION 58. 252.11 (10) of the statutes is amended to read:

252.11 (10) The state laboratory of hygiene shall examine specimens for the diagnosis of sexually transmitted diseases for any physician, naturopathic doctor, physician assistant, advanced practice registered nurse ~~prescriber~~, or local health officer in the state, and shall report the positive results of the examinations to the local health officer and to the department. All laboratories performing tests for sexually transmitted diseases shall report all positive results to the local health officer and to the department, with the name of the physician, naturopathic doctor, physician assistant, or advanced practice registered nurse ~~prescriber~~ to whom reported.

SECTION 59. 252.15 (3m) (d) 11. b. and 13., (5g)

(c), (5m) (d) 2. and (e) 2. and 3. and (7m) (intro.) and (b) of the statutes are amended to read:

252.15 (3m) (d) 11. b. The coroner, medical examiner, or appointed assistant is investigating the cause of death of the subject of the HIV test and has contact with the body fluid of the subject of the HIV test that constitutes a significant exposure, if a physician, physician assistant, or advanced practice registered nurse ~~prescriber~~, based on information provided to the physician, physician assistant, or advanced practice registered nurse ~~prescriber~~, determines and certifies in writing that the coroner, medical examiner, or appointed assistant has had a contact that constitutes a significant exposure and if the certification accompanies the request for disclosure.

13. If the subject of the HIV test has a positive HIV test result and is deceased, by the subject's attending physician, physician assistant, or advanced practice registered nurse ~~prescriber~~, to persons, if known to the physician, physician assistant, or advanced practice registered nurse ~~prescriber~~, with whom the subject had sexual contact or shared intravenous drug use paraphernalia.

(5g) (c) A physician, physician assistant, or advanced practice registered nurse ~~prescriber~~, based on information provided to the physician, physician assistant, or advanced practice registered nurse ~~prescriber~~, determines and certifies in writing that the person has had contact that constitutes a significant exposure. The certification shall accompany the request for HIV testing and disclosure. If the person is a physician, physician assistant, or advanced practice registered nurse ~~prescriber~~, he or she may not make this determination or certification. The information that is provided to a physician, physician assistant, or advanced practice registered nurse ~~prescriber~~ to document the occurrence of the contact that constitutes a significant exposure and the physician's, physician assistant's, or advanced practice ~~nurse-prescriber's~~ registered nurse's certification that the person has had contact that constitutes a significant exposure, shall be provided on a report form that is developed by the department of safety and professional services under s. 101.02 (19) (a) or on a report form that the department of safety and professional services determines, under s. 101.02 (19) (b), is substantially equivalent to the report form that is developed under s. 101.02 (19) (a).

(5m) (d) 2. A physician, physician assistant, or advanced practice registered nurse ~~prescriber~~, based on information provided to the physician, physician assistant, or advanced practice registered nurse ~~prescriber~~, determines and certifies in writing that the contact under subd. 1. constitutes a significant exposure. A health care provider who has a contact under subd. 1. c. may

not make the certification under this subdivision for himself or herself.

(e) 2. If the contact occurs as provided under par. (d) 1. b., the attending physician, physician assistant, or advanced practice registered nurse ~~prescriber~~ of the funeral director, coroner, medical examiner, or appointed assistant.

3. If the contact occurs as provided under par. (d) 1. c., the physician, physician assistant, or advanced practice registered nurse ~~prescriber~~ who makes the certification under par. (d) 2.

(7m) REPORTING OF PERSONS SIGNIFICANTLY EXPOSED. (intro.) If a positive, validated HIV test result is obtained from a test subject, the test subject's physician, physician assistant, or advanced practice registered nurse ~~prescriber~~ who maintains a record of the HIV test result under sub. (4) (c) may report to the state epidemiologist the name of any person known to the physician, physician assistant, or advanced practice registered nurse ~~prescriber~~ to have had contact with body fluid of the test subject that constitutes a significant exposure, only after the physician, physician assistant, or advanced practice registered nurse ~~prescriber~~ has done all of the following:

(b) Notified the HIV test subject that the name of any person known to the physician, physician assistant, or advanced practice registered nurse ~~prescriber~~ to have had contact with body fluid of the test subject that constitutes a significant exposure will be reported to the state epidemiologist.

SECTION 60. 252.16 (3) (c) (intro.) of the statutes is amended to read:

252.16 (3) (c) (intro.) Has submitted to the department a certification from a physician, as defined in s. 448.01 (5), physician assistant, or advanced practice registered nurse ~~prescriber~~ of all of the following:

SECTION 61. 252.17 (3) (c) (intro.) of the statutes is amended to read:

252.17 (3) (c) (intro.) Has submitted to the department a certification from a physician, as defined in s. 448.01 (5), physician assistant, or advanced practice registered nurse ~~prescriber~~ of all of the following:

SECTION 62. 253.07 (4) (d) of the statutes is amended to read:

253.07 (4) (d) In each fiscal year, \$31,500 as grants for employment in communities of licensed registered nurses, licensed practical nurses, ~~certified nurse midwives~~ licensed advanced practice registered nurses, or licensed physician assistants who are members of a racial minority.

SECTION 63. 253.115 (1) (f) of the statutes is created to read:

253.115 (1) (f) "Nurse-midwife" means an individ-

ual who is licensed as an advanced practice registered nurse and possesses a certified nurse-midwife specialty designation under s. 441.09.

SECTION 64. 253.115 (4) of the statutes is amended to read:

253.115 (4) **SCREENING REQUIRED.** Except as provided in sub. (6), the physician, nurse-midwife ~~licensed under s. 441.15~~, or certified professional midwife licensed under s. 440.982 who attended the birth shall ensure that the infant is screened for hearing loss before being discharged from a hospital, or within 30 days of birth if the infant was not born in a hospital.

SECTION 65. 253.115 (7) (a) (intro.) of the statutes is amended to read:

253.115 (7) (a) (intro.) The physician, nurse-midwife ~~licensed under s. 441.15~~, or certified professional midwife licensed under s. 440.982 who is required to ensure that the infant is screened for hearing loss under sub. (4) shall do all of the following:

SECTION 66. 253.13 (1) of the statutes is renumbered 253.13 (1) (b) and amended to read:

253.13 (1) (b) The attending physician or ~~nurse licensed under s. 441.15~~ nurse-midwife shall cause every infant born in each hospital or maternity home, prior to its discharge therefrom, to be subjected to tests for congenital and metabolic disorders, as specified in rules promulgated by the department. If the infant is born elsewhere than in a hospital or maternity home, the attending physician, ~~nurse licensed under s. 441.15~~ nurse-midwife, or birth attendant who attended the birth shall cause the infant, within one week of birth, to be subjected to these tests.

SECTION 67. 253.13 (1) (a) of the statutes is created to read:

253.13 (1) (a) In this subsection, “nurse-midwife” means an individual who is licensed as an advanced practice registered nurse and possesses a certified nurse-midwife specialty designation under s. 441.09.

SECTION 68. 253.15 (1) (em) of the statutes is created to read:

253.15 (1) (em) “Nurse-midwife” means an individual who is licensed as an advanced practice registered nurse and possesses a certified nurse-midwife specialty designation under s. 441.09.

SECTION 69. 253.15 (2) of the statutes is amended to read:

253.15 (2) **INFORMATIONAL MATERIALS.** The board shall purchase or prepare or arrange with a nonprofit organization to prepare printed and audiovisual materials relating to shaken baby syndrome and impacted babies. The materials shall include information regarding the identification and prevention of shaken baby syndrome and impacted babies, the grave effects of shaking or

throwing on an infant or young child, appropriate ways to manage crying, fussing, or other causes that can lead a person to shake or throw an infant or young child, and a discussion of ways to reduce the risks that can lead a person to shake or throw an infant or young child. The materials shall be prepared in English, Spanish, and other languages spoken by a significant number of state residents, as determined by the board. The board shall make those written and audiovisual materials available to all hospitals, maternity homes, and nurse-midwives ~~licensed under s. 441.15~~ that are required to provide or make available materials to parents under sub. (3) (a) 1., to the department and to all county departments and nonprofit organizations that are required to provide the materials to child care providers under sub. (4) (d), and to all school boards and nonprofit organizations that are permitted to provide the materials to pupils in one of grades 5 to 8 and in one of grades 10 to 12 under sub. (5). The board shall also make those written materials available to all county departments and Indian tribes that are providing home visitation services under s. 48.983 (4) (b) 1. and to all providers of prenatal, postpartum, and young child care coordination services under s. 49.45 (44). The board may make available the materials required under this subsection to be made available by making those materials available at no charge on the board’s Internet site.

SECTION 70. 255.06 (1) (d) of the statutes is renumbered 255.06 (1) (f) (intro.) and amended to read:

255.06 (1) (f) (intro.) ~~“Nurse-practitioner”~~ “Women’s health nurse clinician” means ~~a~~ any of the following:

1. A registered nurse who is licensed under ch. 441 or who holds a multistate license, as defined in s. 441.51 (2) (h), issued in a party state, as defined in s. 441.51 (2) (k), and whose practice of professional nursing under s. 441.001 (4) includes performance of delegated medical services under the supervision of a physician, naturopathic doctor, dentist, or podiatrist, or advanced practice registered nurse.

SECTION 71. 255.06 (1) (f) 2. of the statutes is created to read:

255.06 (1) (f) 2. An advanced practice registered nurse.

SECTION 72. 255.06 (2) (d) of the statutes is amended to read:

255.06 (2) (d) *Specialized training for rural colposcopic examinations and activities.* Provide not more than \$25,000 in each fiscal year as reimbursement for the provision of specialized training of ~~nurse practitioners~~ women’s health nurse clinicians to perform, in rural areas, colposcopic examinations and follow-up activities for the treatment of cervical cancer.

SECTION 73. 255.07 (1) (d) of the statutes is amended to read:

255.07 (1) (d) “Health care practitioner” means a physician, a physician assistant, or an advanced practice registered nurse who ~~is certified to~~ may issue prescription orders under s. ~~441.16~~ 441.09 (2).

SECTION 74. 257.01 (5) (a) of the statutes is amended to read:

257.01 (5) (a) An individual who is licensed as a physician, a physician assistant, or a podiatrist under ch. 448, licensed as a naturopathic doctor under ch. 466, licensed as a registered nurse, licensed practical nurse, or ~~nurse-midwife~~ advanced practice registered nurse under ch. 441, licensed as a dentist or dental therapist under ch. 447, licensed as a pharmacist under ch. 450, licensed as a veterinarian or certified as a veterinary technician under ch. 89, or certified as a respiratory care practitioner under ch. 448.

SECTION 75. 257.01 (5) (b) of the statutes is amended to read:

257.01 (5) (b) An individual who was at any time within the previous 10 years, but is not currently, licensed as a physician, a physician assistant, or a podiatrist under ch. 448, licensed as a naturopathic doctor under ch. 466, licensed as a registered nurse, licensed practical nurse, or ~~nurse-midwife~~, advanced practice registered nurse under ch. 441, licensed as a nurse-midwife under ch. 441, 2023 stats., licensed as a dentist or dental therapist under ch. 447, licensed as a pharmacist under ch. 450, licensed as a veterinarian or certified as a veterinary technician under ch. 89, or certified as a respiratory care practitioner under ch. 448, if the individual’s license or certification was never revoked, limited, suspended, or denied renewal.

SECTION 76. 341.14 (1a) of the statutes is amended to read:

341.14 (1a) If any resident of this state, who is registering or has registered an automobile, or a motor truck, dual purpose motor home or dual purpose farm truck which has a gross weight of not more than 8,000 pounds, a farm truck which has a gross weight of not more than 12,000 pounds or a motor home, submits a statement once every 4 years, as determined by the department, from a physician licensed to practice medicine in any state, from an advanced practice registered nurse licensed to practice nursing in any state, from a public health nurse certified or licensed to practice in any state, from a physician assistant licensed or certified to practice in any state, from a podiatrist licensed to practice in any state, from a chiropractor licensed to practice chiropractic in any state, from a physical therapist licensed to practice in any state, or from a Christian Science practitioner residing in this state and

listed in the Christian Science journal certifying to the department that the resident is a person with a disability that limits or impairs the ability to walk, the department shall procure, issue and deliver to the disabled person plates of a special design in lieu of plates which ordinarily would be issued for the vehicle, and shall renew the plates. The plates shall be so designed as to readily apprise law enforcement officers of the fact that the vehicle is owned by a nonveteran disabled person and is entitled to the parking privileges specified in s. 346.50 (2a). No charge in addition to the registration fee shall be made for the issuance or renewal of such plates.

SECTION 77. 341.14 (1e) (a) of the statutes is amended to read:

341.14 (1e) (a) If any resident of this state, who is registering or has registered a motorcycle, submits a statement once every 4 years, as determined by the department, from a physician licensed to practice medicine in any state, from an advanced practice registered nurse licensed to practice nursing in any state, from a public health nurse certified or licensed to practice in any state, from a physician assistant licensed or certified to practice in any state, from a podiatrist licensed to practice in any state, from a chiropractor licensed to practice chiropractic in any state, from a physical therapist licensed to practice in any state, from a Christian Science practitioner residing in this state and listed in the Christian Science journal, or from the U.S. department of veterans affairs certifying to the department that the resident is a person with a disability that limits or impairs the ability to walk, the department shall procure, issue and deliver to the disabled person a plate of a special design in lieu of the plate which ordinarily would be issued for the motorcycle, and shall renew the plate. The statement shall state whether the disability is permanent or temporary and, if temporary, the opinion of the physician, advanced practice registered nurse, public health nurse, physician assistant, podiatrist, chiropractor, physical therapist, practitioner, or U.S. department of veterans affairs as to the duration of the disability. The plate shall be so designed as to readily apprise law enforcement officers of the fact that the motorcycle is owned by a disabled person and is entitled to the parking privileges specified in s. 346.50 (2a). No charge in addition to the registration fee may be made for the issuance or renewal of the plate.

SECTION 78. 341.14 (1m) of the statutes is amended to read:

341.14 (1m) If any licensed driver submits to the department a statement once every 4 years, as determined by the department, from a physician licensed to practice medicine in any state, from a public health nurse certified or licensed to practice in any state, from an advanced practice registered nurse licensed to prac-

tice nursing in any state, from a physician assistant licensed or certified to practice in any state, from a podiatrist licensed to practice in any state, from a chiropractor licensed to practice chiropractic in any state, from a physical therapist licensed to practice in any state, or from a Christian Science practitioner residing in this state and listed in the Christian Science journal certifying that another person who is regularly dependent on the licensed driver for transportation is a person with a disability that limits or impairs the ability to walk, the department shall issue and deliver to the licensed driver plates of a special design in lieu of the plates which ordinarily would be issued for the automobile or motor truck, dual purpose motor home or dual purpose farm truck having a gross weight of not more than 8,000 pounds, farm truck having a gross weight of not more than 12,000 pounds or motor home, and shall renew the plates. The plates shall be so designed as to readily apprise law enforcement officers of the fact that the vehicle is operated by a licensed driver on whom a disabled person is regularly dependent and is entitled to the parking privileges specified in s. 346.50 (2a). No charge in addition to the registration fee may be made for the issuance or renewal of the plates. The plates shall conform to the plates required in sub. (1a).

SECTION 79. 341.14 (1q) of the statutes is amended to read:

341.14 (1q) If any employer who provides an automobile, or a motor truck, dual purpose motor home or dual purpose farm truck which has a gross weight of not more than 8,000 pounds, a farm truck which has a gross weight of not more than 12,000 pounds or a motor home, for an employee's use submits to the department a statement once every 4 years, as determined by the department, from a physician licensed to practice medicine in any state, from an advanced practice registered nurse licensed to practice nursing in any state, from a public health nurse certified or licensed to practice in any state, from a physician assistant licensed or certified to practice in any state, from a podiatrist licensed to practice in any state, from a physical therapist licensed to practice in any state, from a chiropractor licensed to practice chiropractic in any state, or from a Christian Science practitioner residing in this state and listed in the Christian Science journal certifying that the employee is a person with a disability that limits or impairs the ability to walk, the department shall issue and deliver to such employer plates of a special design in lieu of the plates which ordinarily would be issued for the vehicle, and shall renew the plates. The plates shall be so designed as to readily apprise law enforcement officers of the fact that the vehicle is operated by a disabled person and is entitled to the parking privileges specified in s. 346.50 (2a). No charge in addition to the registra-

tion fee may be made for the issuance or renewal of the plates. The plates shall conform to the plates required in sub. (1a).

SECTION 80. 343.16 (5) (a) of the statutes is amended to read:

343.16 (5) (a) The secretary may require any applicant for a license or any licensed operator to submit to a special examination by such persons or agencies as the secretary may direct to determine incompetency, physical or mental disability, disease, or any other condition that might prevent such applicant or licensed person from exercising reasonable and ordinary control over a motor vehicle. If the department requires the applicant to submit to an examination, the applicant shall pay for the examination. If the department receives an application for a renewal or duplicate license after voluntary surrender under s. 343.265 or receives a report from a physician, physician assistant, advanced practice registered nurse ~~prescriber certified under s. 441.16 (2) licensed under s. 441.09~~, or optometrist under s. 146.82 (3), or if the department has a report of 2 or more arrests within a one-year period for any combination of violations of s. 346.63 (1) or (5) or a local ordinance in conformity with s. 346.63 (1) or (5) or a law of a federally recognized American Indian tribe or band in this state in conformity with s. 346.63 (1) or (5), or s. 346.63 (1m), 1985 stats., or s. 346.63 (2) or (6) or 940.25, or s. 940.09 where the offense involved the use of a vehicle, the department shall determine, by interview or otherwise, whether the operator should submit to an examination under this section. The examination may consist of an assessment. If the examination indicates that education or treatment for a disability, disease or condition concerning the use of alcohol, a controlled substance or a controlled substance analog is appropriate, the department may order a driver safety plan in accordance with s. 343.30 (1q). If there is noncompliance with assessment or the driver safety plan, the department shall revoke the person's operating privilege in the manner specified in s. 343.30 (1q) (d).

SECTION 81. 343.51 (1) of the statutes is amended to read:

343.51 (1) Any person who qualifies for registration plates of a special design under s. 341.14 (1), (1a), (1m), or (1q) or any other person with a disability that limits or impairs the ability to walk may request from the department a special identification card that will entitle any motor vehicle parked by, or under the direction of, the person, or a motor vehicle operated by or on behalf of the organization when used to transport such a person, to parking privileges under s. 346.50 (2), (2a), and (3). The department shall issue the card at a fee to be determined by the department, upon submission by the applicant, if the applicant is an individual rather than an

organization, of a statement from a physician licensed to practice medicine in any state, from an advanced practice registered nurse licensed to practice nursing in any state, from a public health nurse certified or licensed to practice in any state, from a physician assistant licensed or certified to practice in any state, from a podiatrist licensed to practice in any state, from a chiropractor licensed to practice chiropractic in any state, from a physical therapist licensed to practice in any state, or from a Christian Science practitioner residing in this state and listed in the Christian Science journal that the person is a person with a disability that limits or impairs the ability to walk. The statement shall state whether the disability is permanent or temporary and, if temporary, the opinion of the physician, advanced practice registered nurse, public health nurse, physician assistant, podiatrist, chiropractor, physical therapist, or practitioner as to the duration of the disability. The department shall issue the card upon application by an organization on a form prescribed by the department if the department believes that the organization meets the requirements under this subsection.

SECTION 82. 343.62 (4) (a) 4. of the statutes is amended to read:

343.62 (4) (a) 4. The applicant submits with the application a statement completed within the immediately preceding 24 months, except as provided by rule, by a physician licensed to practice medicine in any state, from an advanced practice registered nurse licensed to practice nursing in any state, from a physician assistant licensed or certified to practice in any state, from a podiatrist licensed to practice in any state, from a chiropractor licensed to practice chiropractic in any state, from a physical therapist licensed to practice in any state, or from a Christian Science practitioner residing in this state, and listed in the Christian Science journal certifying that, in the medical care provider's judgment, the applicant is physically fit to teach driving.

SECTION 83. 440.03 (13) (b) 3. of the statutes is repealed.

SECTION 84. 440.03 (13) (b) 39m. of the statutes is created to read:

440.03 (13) (b) 39m. Nurse, advanced practice registered.

SECTION 85. 440.03 (13) (b) 42. of the statutes is repealed.

SECTION 86. 440.077 (1) (a) of the statutes is amended to read:

440.077 (1) (a) "Advanced practice registered nurse ~~prescriber~~" means an advanced practice registered nurse ~~prescriber-certified licensed~~ under s. ~~441.16 (2)~~ 441.09.

SECTION 87. 440.077 (2) (c) of the statutes is amended to read:

440.077 (2) (c) Under the program under par. (a), a participating military medical personnel shall be supervised by a physician, physician assistant, podiatrist, registered professional nurse, or advanced practice registered nurse ~~prescriber~~. The supervising physician, physician assistant, podiatrist, registered professional nurse, or advanced practice registered nurse ~~prescriber~~ shall retain responsibility for the care of the patient.

SECTION 88. 440.08 (2) (a) 4m. of the statutes is repealed.

SECTION 89. 440.08 (2) (a) 47r. of the statutes is created to read:

440.08 (2) (a) 47r. Nurse, advanced practice registered: March 1 of each even-numbered year.

SECTION 90. 440.08 (2) (a) 50. of the statutes is repealed.

SECTION 91. 440.094 (1) (c) 1. of the statutes is amended to read:

440.094 (1) (c) 1. A registered nurse, licensed practical nurse, or ~~nurse-midwife licensed under ch. 441, or an~~ advanced practice registered nurse ~~prescriber-certified licensed~~ under ch. 441.

SECTION 92. 440.094 (2) (a) (intro.) of the statutes is amended to read:

440.094 (2) (a) (intro.) Notwithstanding ss. 441.06 (4), ~~441.15 (2), 441.16, 441.09 (3) (b), 446.02 (1), 447.03 (1) and (2), 448.03 (1) (a), (b), and (c) and (1m), 448.51 (1), 448.61, 448.76, 448.961 (1) and (2), 449.02 (1), 450.03 (1), 451.04 (1), 455.02 (1m), 457.04 (4), (5), (6), and (7), 459.02 (1), 459.24 (1), and 460.02, a health care provider may provide services within the scope of the credential that the health care provider holds and the department shall grant the health care provider a temporary credential to practice under this section if all of the following apply:~~

SECTION 93. 440.981 (1) of the statutes is amended to read:

440.981 (1) No person may use the title "licensed midwife," describe or imply that he or she is a licensed midwife, or represent himself or herself as a licensed midwife unless the person is granted a license under this subchapter or is licensed as ~~a nurse-midwife under s. 441.15~~ an advanced practice registered nurse and possesses a certified nurse-midwife specialty designation under s. 441.09.

SECTION 94. 440.982 (1) of the statutes is amended to read:

440.982 (1) No person may engage in the practice of midwifery unless the person is granted a license under this subchapter, is granted a temporary permit pursuant to a rule promulgated under s. 440.984 (2m), or is licensed as ~~a nurse-midwife under s. 441.15~~ an advanced

practice registered nurse and possesses a certified nurse-midwife specialty designation under s. 441.09.

SECTION 95. 440.987 (2) of the statutes is amended to read:

440.987 (2) One member who is licensed as ~~a nurse-midwife under s. 441.15~~ an advanced practice registered nurse and possesses a certified nurse-midwife specialty designation under s. 441.09 and who practices in an out-of-hospital setting.

SECTION 96. 441.001 (1c) of the statutes is created to read:

441.001 (1c) ADVANCED PRACTICE REGISTERED NURSING. “Advanced practice registered nursing” means the practice of a certified nurse-midwife, the practice of a certified registered nurse anesthetist, the practice of a clinical nurse specialist, and the practice of a nurse practitioner.

SECTION 97. 441.001 (3c) of the statutes is created to read:

441.001 (3c) PRACTICE OF A CERTIFIED NURSE-MIDWIFE. “Practice of a certified nurse-midwife” means practice in the management of women’s health care, pregnancy, childbirth, postpartum care for newborns, family planning, and gynecological services consistent with the standards of practice of the American College of Nurse-Midwives or its successor.

SECTION 98. 441.001 (3g) of the statutes is created to read:

441.001 (3g) PRACTICE OF A CERTIFIED REGISTERED NURSE ANESTHETIST. “Practice of a certified registered nurse anesthetist” means providing anesthesia care, pain management care, and care related to anesthesia and pain management for persons across their lifespan, whose health status may range from healthy through all levels of acuity, including persons with immediate, severe, or life-threatening illness or injury, in diverse settings, including hospitals, ambulatory surgery centers, outpatient clinics, medical offices, and home health care settings.

SECTION 99. 441.001 (3n) of the statutes is created to read:

441.001 (3n) PRACTICE OF A CLINICAL NURSE SPECIALIST. “Practice of a clinical nurse specialist” means providing advanced nursing care, primarily in health care facilities, including the diagnosis and treatment of illness for identified specific populations based on a specialty.

SECTION 100. 441.001 (3r) of the statutes is created to read:

441.001 (3r) PRACTICE OF A NURSE PRACTITIONER. “Practice of a nurse practitioner” means practice in ambulatory, acute, long-term, or other health care settings as a primary or specialty care provider who provides

health services, including assessing, diagnosing, treating, or managing acute, episodic, and chronic illnesses.

SECTION 101. 441.001 (3w) of the statutes is created to read:

441.001 (3w) PRESCRIPTION ORDER. “Prescription order” has the meaning given in s. 450.01 (21).

SECTION 102. 441.001 (5) of the statutes is created to read:

441.001 (5) RECOGNIZED ROLE. “Recognized role” means one of the following roles:

- (a) Certified nurse-midwife.
- (b) Certified registered nurse anesthetist.
- (c) Clinical nurse specialist.
- (d) Nurse practitioner.

SECTION 103. 441.01 (3) of the statutes is amended to read:

441.01 (3) The board may promulgate rules to establish minimum standards for schools for professional nurses and schools for licensed practical nurses, and schools for advanced practice registered nurses, including all related clinical units and facilities, and make and provide periodic surveys and consultations to such schools. ~~It~~ The board may also establish promulgate rules to prevent unauthorized persons from practicing professional nursing. ~~It shall approve all rules for the administration of this chapter in accordance with ch. 227.~~

SECTION 104. 441.01 (4) of the statutes is amended to read:

441.01 (4) The board shall direct that those schools that qualify be placed on a list of schools the board has approved for professional nurses ~~or~~ of schools the board has approved for licensed practical nurses, or of schools the board has approved for advanced practice registered nurses on application and proof of qualifications; and the board shall make a study of nursing education and ~~initiate~~ promulgate rules and policies to improve it.

SECTION 105. 441.01 (7) (a) (intro.) of the statutes is amended to read:

441.01 (7) (a) (intro.) The board shall require each applicant for the renewal of a registered nurse ~~or~~ licensed practical nurse, or advanced practice registered nurse license issued under this chapter to do all of the following as a condition for renewing the license:

SECTION 106. 441.01 (7) (b) of the statutes is amended to read:

441.01 (7) (b) The board may not renew a registered nurse ~~or~~ licensed practical nurse, or advanced practice registered nurse license under this chapter unless the renewal applicant has completed the nursing workforce survey to the satisfaction of the board. The board shall establish standards to determine whether the survey has been completed. The board shall, by no later than June

30 of each odd-numbered year, submit all completed nursing workforce survey forms to the department of workforce development.

SECTION 107. 441.01 (7) (c) of the statutes is created to read:

441.01 (7) (c) An applicant who is renewing both a registered nurse and advanced practice registered nurse license under s. 441.09 (1) (c) is only required to pay a single fee under par. (a) 2.

SECTION 108. 441.06 (title) of the statutes is repealed and recreated to read:

441.06 (title) Registered nurses; civil liability exemption.

SECTION 109. 441.06 (3) of the statutes is amended to read:

441.06 (3) ~~— Except as provided in s. 441.09 (1) (c), a registered nurse practicing for compensation shall, on or before the applicable renewal date specified under s. 440.08 (2) (a), submit to the board on furnished forms a statement giving name, residence, and other facts that the board requires, with the nursing workforce survey and fee required under s. 441.01 (7) and the applicable renewal fee determined by the department under s. 440.03 (9) (a).~~

SECTION 110. 441.06 (4) of the statutes is amended to read:

441.06 (4) Except as provided in ss. 257.03 and 440.077, no person may practice or attempt to practice professional nursing, nor use the title, letters, or anything else to indicate that he or she is a registered or professional nurse unless he or she is licensed under this section. Except as provided in ss. 257.03 and 440.077, no person not so licensed may use in connection with his or her nursing employment or vocation any title or anything else to indicate that he or she is a trained, certified or graduate nurse. This subsection does not apply to any registered nurse who holds a multistate license, as defined in s. 441.51 (2) (h), issued by a jurisdiction, other than this state, that has adopted the nurse licensure compact under s. 441.51.

SECTION 111. 441.06 (7) of the statutes is renumbered 441.09 (7) and amended to read:

441.09 (7) CIVIL LIABILITY. No person ~~certified licensed~~ as an advanced practice registered nurse ~~prescriber~~ under s. ~~441.16 (2)~~ this section is liable for civil damages for any of the following:

(a) Reporting in good faith to the department of transportation under s. 146.82 (3) a patient's name and other information relevant to a physical or mental condition of the patient that in the advanced practice ~~nurse prescriber's~~ registered nurse's judgment impairs the patient's ability to exercise reasonable and ordinary control over a motor vehicle.

(b) In good faith, not reporting to the department of transportation under s. 146.82 (3) a patient's name and other information relevant to a physical or mental condition of the patient that in the advanced practice ~~nurse prescriber's~~ registered nurse's judgment does not impair the patient's ability to exercise reasonable and ordinary control over a motor vehicle.

SECTION 112. 441.065 of the statutes is created to read:

441.065 Use of titles. (1) Except as provided in sub. (2), no person licensed under this chapter may use, assume, or append to his or her name any title that is not granted under this chapter unless the person holds another credential, as defined in s. 440.01 (2) (a), that entitles the person to use, assume, or append to his or her name the title or the person is permitted to use, assume, or append to his or her name the title under any law of this state.

(2) (a) Subsection (1) does not prohibit a person who holds a doctorate degree from using, assuming, or appending to his or her name the title "doctor" or any other words, letters, or abbreviations that represent that the person holds that doctorate degree or the field in which the degree was received. If a person to whom this paragraph applies uses, assumes, or appends to his or her name the title "doctor," the person shall also use, assume, or append to his or her name words, letters, or abbreviations that represent the field in which the person received the doctorate degree.

(b) Subsection (1) does not prohibit a person who holds a bachelor's degree or master's degree from using, assuming, or appending to his or her name any words, letters, or abbreviations that represent that the person holds that degree or the field in which the degree was received.

SECTION 113. 441.07 (1g) (intro.), (a), (c) and (e) of the statutes are amended to read:

441.07 (1g) (intro.) Subject to the rules promulgated under s. 440.03 (1), the board may deny an initial license or revoke, limit, suspend, or deny the renewal of a license of a registered nurse, ~~nurse-midwife advanced practice registered nurse~~, or licensed practical nurse; ~~deny an initial certificate or revoke, limit, suspend, or deny the renewal of a certificate to prescribe drugs or devices granted under s. 441.16; or reprimand a registered nurse, nurse-midwife advanced practice registered nurse~~, or licensed practical nurse; if the board finds that the applicant or licensee committed any of the following:

(a) Fraud in the procuring or renewal of the ~~certificate or~~ license.

(c) Acts ~~which that~~ show the registered nurse, ~~nurse-midwife advanced practice registered nurse~~, or licensed practical nurse to be unfit or incompetent by reason of

negligence, abuse of alcohol or other drugs, or mental incompetency.

(e) A violation of any state or federal law that regulates prescribing or dispensing drugs or devices, if the person ~~has a certificate to prescribe drugs or devices under s. 441.16~~ may issue prescription orders under s. 441.09 (2).

SECTION 114. 441.07 (1r) of the statutes is created to read:

441.07 (1r) If the board finds that a person licensed under this chapter has violated s. 441.065, the board shall discipline the person as follows:

- (a) For a 1st violation, issue a written warning.
- (b) For a 2nd violation, suspend the license of the person.
- (c) For a 3rd violation, revoke the license of the person.

SECTION 115. 441.07 (2) of the statutes is amended to read:

441.07 (2) The board may reinstate a revoked license, no earlier than one year following revocation, upon receipt of an application for reinstatement. This subsection does not apply to a license that is revoked under sub. (1r) or s. 440.12.

SECTION 116. 441.09 of the statutes is created to read:

441.09 Advanced practice registered nurses; civil liability exemption. (1) LICENSE. (a) An applicant who satisfies all of the following requirements may apply to the board for initial licensure by the board as an advanced practice registered nurse:

- 1. The applicant satisfies one of the following criteria:
 - a. The applicant holds a valid license to practice as a registered nurse issued under s. 441.06 (1), (1c), or (1m).
 - b. The applicant applies concurrently for a license under s. 441.06 (1), (1c), or (1m) with the application for a license under this paragraph.
 - c. The applicant is a registered nurse who holds a multistate license, as defined in s. 441.51 (2) (h), issued by a jurisdiction, other than this state, that has adopted the nurse licensure compact.
- 2. The applicant provides evidence satisfactory to the board that he or she satisfies one of the following criteria:
 - a. The applicant has completed a graduate-level or postgraduate-level education program that is approved by the board and that prepares the applicant for the practice of advanced practice registered nursing in one of the 4 recognized roles, and the applicant holds a current certification by a national certifying body approved by the board.

b. On January 1, 2026, the applicant was licensed as a registered nurse in this state and was practicing in a recognized role, and the applicant satisfies additional criteria established by the board by rule under sub. (6) (a) 3. relating to practice, education, or certification.

3. The applicant pays the fee specified under s. 440.05 (1).

4. The applicant provides to the board evidence of any malpractice liability insurance coverage required under sub. (5).

5. If the applicant is applying to receive a certified nurse-midwife specialty designation under par. (b) 1., the applicant does all of the following:

a. Provides evidence satisfactory to the board that the applicant is currently certified by the American Midwifery Certification Board or its successor.

b. Files with the board any plan required under sub. (3m) (f).

6. The applicant does not have an arrest or conviction record, subject to ss. 111.321, 111.322, and 111.335.

7. The applicant meets any other criteria established by the board by rule under sub. (6) (a) 3. relating to the education, training, or experience required for each recognized role.

(b) 1. a. Subject to subd. 3. and s. 441.07 (1g), the board shall grant an advanced practice registered nurse license to an applicant the board determines meets the requirements under par. (a). The board shall also grant a person who is granted a license under this subd. 1. a. one or more specialty designations corresponding to the recognized roles for which the board determines that the person qualifies based on the person's qualifications under par. (a).

b. The board shall grant an advanced practice registered nurse license to each individual who, on the day before the effective date of this subd. 1. b. [LRB inserts date], was certified to issue prescription orders under s. 441.16, 2023 stats. The board shall also grant a person who is granted a license under this subd. 1. b. one or more specialty designations corresponding to the recognized roles for which the board determines that the person qualifies based on the person's qualifications.

c. The board shall grant an advanced practice registered nurse license to each individual who, on the day before the effective date of this subd. 1. c. [LRB inserts date], was licensed as a nurse-midwife under s. 441.15, 2023 stats. The board shall also grant a person who is granted a license under this subd. 1. c. a nurse-midwife specialty designation.

2. Each specialty designation granted under subd. 1. shall appear on the person's advanced practice registered nurse license.

3. The board may not grant an advanced practice

registered nurse license to a person applying concurrently for a license under s. 441.06 (1), (1c), or (1m), unless the board also grants the person the license under s. 441.06 (1), (1c), or (1m).

4. The board may place specific limitations on a person licensed as an advanced practice registered nurse as a condition of licensure.

5. If all of the following apply to a person, a notation indicating that the person may not issue prescription orders shall appear on the person's advanced practice registered nurse license:

a. The person is granted an advanced practice registered nurse license under subd. 1. a. and satisfies only par. (a) 2. b. but not par. (a) 2. a., or the person is granted an advanced practice registered nurse license under subd. 1. c.

b. On January 1, 2026, the person did not hold a certificate under s. 441.16 (2), 2023 stats.

(c) On or before the applicable renewal date specified under s. 440.08 (2) (a), an advanced practice registered nurse shall submit to the board on a form furnished by the board a statement giving his or her name and residence, the nursing workforce survey and fee required under s. 441.01 (7), evidence of having satisfied the continuing education requirements under sub. (4), evidence of any malpractice liability insurance coverage required under sub. (5), any plan required under sub. (3m) (f), current evidence that the person satisfies each of the requirements under par. (a) 1., 2., 5. a., and 7. that apply with respect to the person, and any other information that the board requires by rule, with the applicable renewal fee determined by the department under s. 440.03 (9) (a). The board shall grant to a person who satisfies the requirements under this paragraph the renewal of his or her advanced practice registered nurse license and specialty designations granted under par. (b) 1. and shall, if the person holds a license under s. 441.06 (1), (1c), or (1m), also grant the renewal of that license.

(2) PRESCRIBING AUTHORITY. (a) Except as provided in par. (b), an advanced practice registered nurse may issue prescription orders, subject to the rules promulgated under sub. (6) (a) 1. and 4., and may provide expedited partner therapy in the manner described in s. 441.092.

(b) An advanced practice registered nurse may not issue prescription orders if a notation under sub. (1) (b) 5. indicating that the advanced practice registered nurse may not issue prescription orders appears on the advanced practice registered nurse's license.

(3) LICENSE REQUIRED; USE OF TITLES. (a) 1. The holder of a license issued under this section is an "advanced practice registered nurse," may append to his or her name the title "A.P.R.N.," and is authorized to practice advanced practice registered nursing.

2. The holder of a specialty designation for a recognized role granted under sub. (1) (b) 1. may append to his or her name the title and an abbreviation corresponding to that recognized role.

(b) 1. Except as provided in sub. (3m) (e) and s. 257.03, no person may practice or attempt to practice advanced practice registered nursing, nor use the title "advanced practice registered nurse," the title "A.P.R.N.," or anything else to indicate that he or she is an advanced practice registered nurse unless he or she is licensed under this section.

2. Except as provided in s. 257.03, no person may do any of the following:

a. Use the title "certified nurse-midwife," the title "C.N.M.," or anything else to indicate that he or she is a certified nurse-midwife unless he or she has been granted a certified nurse-midwife specialty designation under sub. (1) (b) 1.

b. Use the title "certified registered nurse anesthetist," the title "C.R.N.A.," or anything else to indicate that he or she is a certified registered nurse anesthetist unless he or she has been granted a certified registered nurse anesthetist specialty designation under sub. (1) (b) 1.

c. Use the title "clinical nurse specialist," the title "C.N.S.," or anything else to indicate that he or she is a clinical nurse specialist unless he or she has been granted a clinical nurse specialist specialty designation under sub. (1) (b) 1.

d. Use the title "nurse practitioner," the title "N.P.," or anything else to indicate that he or she is a nurse practitioner unless he or she has been granted a nurse practitioner specialty designation under sub. (1) (b) 1.

(3m) PRACTICE REQUIREMENTS AND LIMITATIONS.

(a) 1. An advanced practice registered nurse licensed under this section may, except as provided in subd. 2. and par. (b), practice advanced practice registered nursing only in collaboration with a physician or dentist.

2. Subdivision 1. does not apply to an advanced practice registered nurse with a certified nurse-midwife specialty designation.

(b) An advanced practice registered nurse to whom par. (a) 1. applies may, except as provided in pars. (bg) 1. and (c), practice advanced practice registered nursing in a recognized role without being supervised by or collaborating with, and independent of, a physician or dentist if the board verifies, upon application of the advanced practice registered nurse, that the advanced practice registered nurse satisfies all of the following:

1. The advanced practice registered nurse has completed 3,840 hours of professional nursing in a clinical setting. Clinical hours completed as a requirement of a nursing program offered by a qualifying school of nursing under s. 441.06 (1) (c) may be used to satisfy the re-

quirement under this subdivision. Hours completed to satisfy a requirement of an education program described in sub. (1) (a) 2. a. may not be used to satisfy the requirement under this subdivision.

2. At least 24 months have elapsed since the advanced practice registered nurse first began completing the clinical hours required by a nursing program described under subd. 1.

3. The advanced practice registered nurse has completed 3,840 clinical hours of advanced practice registered nursing practice in that recognized role while working with a physician or dentist who was immediately available for consultation and accepted responsibility for the actions of the advanced practice registered nurse during those 3,840 hours of practice. The advanced practice registered nurse may substitute additional hours of advanced practice registered nursing working with a physician or dentist described under this subdivision to count toward the requirement under subd. 1. Each such additional hour shall count toward one hour of the requirement under subd. 1.

4. At least 24 months have elapsed since the advanced practice registered nurse first began practicing advanced practice registered nursing in that recognized role as described under subd. 3.

(bd) For purposes of par. (b) 3., hours of advanced practice registered nursing practice may include the lawful practice of advanced practice registered nursing outside this state or the lawful practice of advanced practice registered nursing in this state prior to the effective date of this paragraph [LRB inserts date].

(bg) 1. An advanced practice registered nurse may provide treatment of pain syndromes, as defined in s. 50.60 (5), through the use of invasive techniques only while working in a collaborative relationship with a physician who, through education, training, and experience, specializes in pain management. Except as provided in subd. 2., this subdivision applies regardless of whether the advanced practice registered nurse has qualified for independent practice under par. (b).

2. Except as provided in par. (c), subd. 1. does not apply to an advanced practice registered nurse who is providing treatment of pain syndromes, as defined in s. 50.60 (5), through the use of invasive techniques in a hospital, as defined in s. 50.33 (2), or in a clinic associated with a hospital, and who has qualified for independent practice under par. (b).

3. Except as provided in par. (c), subd. 1. does not apply to an advanced practice registered nurse who has qualified for independent practice under par. (b) and has privileges in a hospital, as defined in s. 50.33 (2), to provide treatment of pain syndromes, as defined in s. 50.60 (5), through the use of invasive techniques without a collaborative relationship with a physician.

(bm) For purposes of pars. (a) 1. and (bg) 1., a collaborative relationship is a process in which an advanced practice registered nurse is working with a physician or dentist, in each other's presence when necessary, to deliver health care services within the scope of the advanced practice registered nurse's training, education, and experience. The advanced practice registered nurse shall document such a collaborative relationship.

(c) Nothing in this section prohibits an entity employing or with a relationship with an advanced practice registered nurse from establishing additional requirements for an advanced practice registered nurse as a condition of employment or relationship.

(d) An advanced practice registered nurse shall adhere to professional standards when managing situations that are beyond the advanced practice registered nurse's expertise. If a particular patient's needs are beyond the advanced practice registered nurse's expertise, the advanced practice registered nurse shall, as warranted by the patient's needs, consult or collaborate with or refer the patient to at least one of the following:

1. A physician licensed under ch. 448.

2. Another health care provider for whom the advanced practice registered nurse has reasonable evidence of having a scope of practice that includes the authorization to address the patient's needs.

(e) An advanced practice registered nurse licensed under this section may delegate a task or order to another clinically trained health care worker if the task or order is within the scope of the advanced practice registered nurse's practice, the advanced practice registered nurse is competent to perform the task or issue the order, and the advanced practice registered nurse has reasonable evidence that the health care worker is minimally competent to perform the task or issue the order under the circumstances.

(f) An advanced practice registered nurse with a certified nurse-midwife specialty designation may not offer to deliver babies outside of a hospital setting unless the advanced practice registered nurse files with the board, and the board approves, a proactive plan for ensuring appropriate care or care transitions conforming with professional standards for patients with higher acuity or emergency care needs that exceed the advanced practice registered nurse's scope of practice. An advanced practice registered nurse who offers to deliver babies outside of a hospital setting shall file a plan under this paragraph when applying for an initial license under this section or a renewal of a license under this section, shall keep the plan current with the board, and shall follow the plan.

(4) CONTINUING EDUCATION. Every advanced practice registered nurse shall submit to the board evidence of having completed at least 16 contact hours per bien-

nium in clinical pharmacology or therapeutics relevant to the advanced practice registered nurse's area of practice. The board may promulgate rules regarding the continuing education requirements under this subsection.

(5) **MALPRACTICE LIABILITY INSURANCE.** No person may practice advanced practice registered nursing unless he or she at all times has in effect malpractice liability insurance coverage evidenced by personal liability coverage in the amounts specified for health care providers under s. 655.23 (4) or coverage under a group liability policy providing individual coverage for the person in the amounts specified under s. 655.23 (4). An advanced practice registered nurse shall submit evidence of that coverage to the board when applying for an initial license under this section or a renewal of a license under this section. An advanced practice registered nurse shall also submit such evidence to the board upon request of the board.

(6) **RULES.** (a) The board shall promulgate rules necessary to administer this section, including rules for all of the following:

1. Further defining the scope of practice of an advanced practice registered nurse, practice of a certified nurse-midwife, practice of a certified registered nurse anesthetist, practice of a nurse practitioner, and practice of a clinical nurse specialist and defining the scope of practice within which an advanced practice registered nurse may issue prescription orders under sub. (2).

2. Determining acceptable national certification for purposes of sub. (1) (a) 2. a.

3. Establishing the appropriate education, training, or experience requirements that a registered nurse must satisfy in order to be an advanced practice registered nurse and to obtain each specialty designation corresponding to the recognized roles.

4. Specifying the classes of drugs, individual drugs, or devices that may not be prescribed by an advanced practice registered nurse under sub. (2).

5. Specifying the conditions to be met for registered nurses to do the following:

- a. Administer a drug prescribed by an advanced practice registered nurse.

- b. Administer a drug at the direction of an advanced practice registered nurse.

6. Establishing standards of professional conduct for advanced practice registered nurses generally and for practicing in each recognized role.

(am) The board may promulgate rules to implement sub. (3m) (b).

(b) The board may not promulgate rules that expand the scope of practice of an advanced practice registered nurse beyond the practices within advanced practice registered nursing.

SECTION 117. 441.092 of the statutes is created to read:

441.092 Expedited partner therapy. (1) In this section:

(b) "Antimicrobial drug" has the meaning given in s. 448.035 (1) (b).

(c) "Expedited partner therapy" has the meaning given in s. 448.035 (1) (c).

(2) Notwithstanding the requirements of s. 448.9785, an advanced practice registered nurse who may issue prescription orders under s. 441.09 (2) may provide expedited partner therapy if a patient is diagnosed as infected with a chlamydial infection, gonorrhea, or trichomoniasis and the patient has had sexual contact with a sexual partner during which the chlamydial infection, gonorrhea, or trichomoniasis may have been transmitted to or from the sexual partner. The advanced practice registered nurse shall attempt to obtain the name of the patient's sexual partner. A prescription order for an antimicrobial drug prepared under this subsection shall include the name and address of the patient's sexual partner, if known. If the advanced practice registered nurse is unable to obtain the name of the patient's sexual partner, the prescription order shall include, in ordinary, bold-faced capital letters, the words, "expedited partner therapy" or the letters "EPT."

(3) The advanced practice registered nurse shall provide the patient with a copy of the information sheet prepared by the department of health services under s. 46.03 (44) and shall request that the patient give the information sheet to the person with whom the patient had sexual contact.

(4) (a) Except as provided in par. (b), an advanced practice registered nurse is immune from civil liability for injury to or the death of a person who takes any antimicrobial drug if the antimicrobial drug is prescribed, dispensed, or furnished under this section and if expedited partner therapy is provided as specified under this section.

(b) The immunity under par. (a) does not extend to the donation, distribution, furnishing, or dispensing of an antimicrobial drug by an advanced practice registered nurse whose act or omission involves reckless, wanton, or intentional misconduct.

SECTION 118. 441.10 (7) of the statutes is amended to read:

441.10 (7) No license is required for practical nursing, but, except as provided in s. 257.03, no person without a license may hold himself or herself out as a licensed practical nurse or licensed attendant, use the title or letters "Trained Practical Nurse" or "T.P.N.", "Licensed Practical Nurse" or "L.P.N.", "Licensed Attendant" or "L.A.", "Trained Attendant" or "T.A.", or oth-

erwise seek to indicate that he or she is a licensed practical nurse or licensed attendant. No licensed practical nurse or licensed attendant may use the title, or otherwise seek to act as a registered, licensed, graduate or professional nurse. Anyone violating this subsection shall be subject to the penalties prescribed by s. 441.13. ~~The board shall grant without examination a license as a licensed practical nurse to any person who was on July 1, 1949, a licensed attendant.~~ This subsection does not apply to any licensed practical nurse who holds a multistate license, as defined in s. 441.51 (2) (h), issued by a jurisdiction, other than this state, that has adopted the nurse licensure compact ~~under s. 441.51.~~

SECTION 119. 441.11 (title) of the statutes is repealed.

SECTION 120. 441.11 (1) of the statutes is repealed.

SECTION 121. 441.11 (2) of the statutes is renumbered 441.09 (5m) and amended to read:

441.09 (5m) LICENSURE EXEMPTION. The provisions of s. ~~448.04 (1) (g)~~ 448.03 (1) (d) do not apply to ~~a~~ an advanced practice registered nurse licensed under this section who possesses a certified registered nurse anesthetist specialty designation under sub. (1) (b) 1. or to a person who engages in the practice of a nurse anesthetist while performing official duties for the armed services or federal health services of the United States.

SECTION 122. 441.11 (3) of the statutes is repealed.

SECTION 123. 441.15 of the statutes is repealed.

SECTION 124. 441.16 of the statutes is repealed.

SECTION 125. 441.18 (2) (a) (intro.) of the statutes is amended to read:

441.18 (2) (a) (intro.) An advanced practice registered nurse ~~certified to who may~~ issue prescription orders under s. ~~441.16~~ 441.09 (2) may do any of the following:

SECTION 126. 441.18 (2) (b) of the statutes is amended to read:

441.18 (2) (b) An advanced practice registered nurse who prescribes or delivers an opioid antagonist under par. (a) 1. shall ensure that the person to whom the opioid antagonist is prescribed has or has the capacity to provide the knowledge and training necessary to safely administer the opioid antagonist to an individual undergoing an opioid-related overdose and that the person demonstrates the capacity to ensure that any individual to whom the person further delivers the opioid antagonist has or receives that knowledge and training.

SECTION 127. 441.18 (3) of the statutes is amended to read:

441.18 (3) An advanced practice registered nurse who, acting in good faith, prescribes or delivers an opioid antagonist in accordance with sub. (2), or who, acting in good faith, otherwise lawfully prescribes or dis-

penses an opioid antagonist, shall be immune from criminal or civil liability and may not be subject to professional discipline under s. 441.07 for any outcomes resulting from prescribing, delivering, or dispensing the opioid antagonist.

SECTION 128. 441.19 of the statutes is repealed.

SECTION 129. 448.03 (2) (a) of the statutes is amended to read:

448.03 (2) (a) Any person lawfully practicing within the scope of a license, permit, registration, certificate, or certification granted to practice midwifery under subch. XIII of ch. 440, to practice professional ~~or~~ practical, or advanced practice registered nursing or nurse midwifery under ch. 441, to practice chiropractic under ch. 446, to practice dentistry, dental therapy, or dental hygiene or as an expanded function dental auxiliary under ch. 447, to practice optometry under ch. 449, to practice as a physician assistant under subch. IX, to practice acupuncture under ch. 451 or under any other statutory provision, to practice naturopathic medicine under ch. 466, or as otherwise provided by statute.

SECTION 130. 448.035 (1) (a) of the statutes is repealed.

SECTION 131. 448.035 (2) to (4) of the statutes are amended to read:

448.035 (2) Notwithstanding the requirements of s. 448.30, a physician ~~or certified advanced practice nurse prescriber~~ may provide expedited partner therapy if the patient is diagnosed as infected with a chlamydial infection, gonorrhea, or trichomoniasis and the patient has had sexual contact with a sexual partner during which the chlamydial infection, gonorrhea, or trichomoniasis may have been transmitted to or from the sexual partner. The physician ~~or certified advanced practice nurse prescriber~~ shall attempt to obtain the name of the patient's sexual partner. A prescription order for an antimicrobial drug prepared under this subsection shall include the name and address of the patient's sexual partner, if known. If the physician ~~or certified advanced practice nurse prescriber~~ is unable to obtain the name of the patient's sexual partner, the prescription order shall include, in ordinary bold-faced capital letters, the words, "expedited partner therapy" or the letters "EPT."

(3) The physician ~~or certified advanced practice nurse prescriber~~ shall provide the patient with a copy of the information sheet prepared by the department of health services under s. 46.03 (44) and shall request that the patient give the information sheet to the person with whom the patient had sexual contact.

(4) (a) Except as provided in par. (b), a physician ~~or certified advanced practice nurse prescriber~~ is immune from civil liability for injury to or the death of a person who takes any antimicrobial drug if the antimicrobial

drug is prescribed, dispensed, or furnished under this section and if expedited partner therapy is provided as specified under this section.

(b) The immunity under par. (a) does not extend to the donation, distribution, furnishing, or dispensing of an antimicrobial drug by a physician ~~or certified advanced practice nurse prescriber~~ whose act or omission involves reckless, wanton, or intentional misconduct.

SECTION 132. 448.56 (1) and (1m) (b) of the statutes are amended to read:

448.56 (1) WRITTEN REFERRAL. Except as provided in this subsection and s. 448.52, a person may practice physical therapy only upon the written referral of a physician, naturopathic doctor, physician assistant, chiropractor, dentist, podiatrist, or advanced practice registered nurse ~~prescriber certified under s. 441.16 (2)~~. Written referral is not required if a physical therapist provides services in schools to children with disabilities, as defined in s. 115.76 (5), pursuant to rules promulgated by the department of public instruction; provides services as part of a home health care agency; provides services to a patient in a nursing home pursuant to the patient's plan of care; provides services related to athletic activities, conditioning, or injury prevention; or provides services to an individual for a previously diagnosed medical condition after informing the individual's physician, naturopathic doctor, physician assistant, chiropractor, dentist, podiatrist, or advanced practice registered nurse ~~prescriber certified under s. 441.16 (2)~~ who made the diagnosis. The examining board may promulgate rules establishing additional services that are excepted from the written referral requirements of this subsection.

(1m) (b) The examining board shall promulgate rules establishing the requirements that a physical therapist must satisfy if a physician, naturopathic doctor, physician assistant, chiropractor, dentist, podiatrist, or advanced practice registered nurse ~~prescriber~~ makes a written referral under sub. (1). The purpose of the rules shall be to ensure continuity of care between the physical therapist and the health care practitioner.

SECTION 133. 448.62 (2m) of the statutes is amended to read:

448.62 (2m) An advanced practice registered nurse ~~who is certified to issue prescription orders under s. 441.16 and~~ who is providing nonsurgical patient services as directed, supervised, and inspected by a podiatrist who has the power to direct, decide, and oversee the implementation of the patient services rendered.

SECTION 134. 448.67 (2) of the statutes is amended to read:

448.67 (2) SEPARATE BILLING REQUIRED. Except as provided in sub. (4), a licensee who renders any podi-

atric service or assistance, or gives any podiatric advice or any similar advice or assistance, to any patient, podiatrist, physician, physician assistant, advanced practice registered nurse ~~prescriber certified under s. 441.16 (2)~~, partnership, or corporation, or to any other institution or organization, including a hospital, for which a charge is made to a patient, shall, except as authorized by Title 18 or Title 19 of the federal Social Security Act, render an individual statement or account of the charge directly to the patient, distinct and separate from any statement or account by any other podiatrist, physician, physician assistant, advanced practice registered nurse ~~prescriber~~, or other person.

SECTION 135. 448.956 (1m) of the statutes is amended to read:

448.956 (1m) Subject to sub. (1) (a), a licensee may provide athletic training to an individual without a referral, except that a licensee may not provide athletic training as described under s. 448.95 (5) (d) or (e) in an outpatient rehabilitation setting unless the licensee has obtained a written referral for the individual from a practitioner licensed or certified under subch. II, III, IV, V, or VII of this chapter; under ch. 446; or under s. ~~441.16 (2)~~ 441.09 or from a practitioner who holds a compact privilege under subch. XI or XII of ch. 448.

SECTION 136. 450.01 (1m) of the statutes is repealed.

SECTION 137. 450.01 (16) (h) 2. of the statutes is amended to read:

450.01 (16) (h) 2. The patient's advanced practice registered nurse ~~prescriber~~, if the advanced practice registered nurse ~~prescriber has entered into a written agreement to collaborate with a physician~~ may issue prescription orders under s. 441.09 (2).

SECTION 138. 450.01 (16) (hr) 2. of the statutes is amended to read:

450.01 (16) (hr) 2. An advanced practice registered nurse ~~prescriber who may issue prescription orders under s. 441.09 (2)~~.

SECTION 139. 450.03 (1) (e) of the statutes is amended to read:

450.03 (1) (e) Any person lawfully practicing within the scope of a license, permit, registration, certificate, or certification granted to practice as a pharmacy technician under s. 450.068, to provide home medical oxygen under s. 450.076, to practice professional ~~or practical, or advanced practice registered nursing or nurse-midwifery~~ under ch. 441, to practice dentistry, dental therapy, or dental hygiene or as an expanded function dental auxiliary under ch. 447, to practice medicine and surgery under ch. 448, to practice optometry under ch. 449, to practice naturopathic medicine under ch. 466, or to practice veterinary

medicine under ch. 89, or as otherwise provided by statute.

SECTION 140. 450.11 (1g) (b) of the statutes is amended to read:

450.11 (1g) (b) A pharmacist may, upon the prescription order of a practitioner providing expedited partner therapy, as specified in s. ~~441.092~~, 448.035, or 448.9725, that complies with the requirements of sub. (1), dispense an antimicrobial drug as a course of therapy for treatment of chlamydial infections, gonorrhea, or trichomoniasis to the practitioner's patient or a person with whom the patient has had sexual contact for use by the person with whom the patient has had sexual contact. The pharmacist shall provide a consultation in accordance with rules promulgated by the board for the dispensing of a prescription to the person to whom the antimicrobial drug is dispensed. A pharmacist providing a consultation under this paragraph shall ask whether the person for whom the antimicrobial drug has been prescribed is allergic to the antimicrobial drug and advise that the person for whom the antimicrobial drug has been prescribed must discontinue use of the antimicrobial drug if the person is allergic to or develops signs of an allergic reaction to the antimicrobial drug.

SECTION 141. 450.11 (1i) (a) 1. of the statutes is amended to read:

450.11 (1i) (a) 1. A pharmacist may, upon and in accordance with the prescription order of an advanced practice registered nurse ~~prescriber~~ under s. 441.18 (2) (a) 1., of a physician under s. 448.037 (2) (a) 1., or of a physician assistant under s. 448.9727 (2) (a) 1. that complies with the requirements of sub. (1), deliver an opioid antagonist to a person specified in the prescription order and may, upon and in accordance with the standing order of an advanced practice registered nurse ~~prescriber~~ under s. 441.18 (2) (a) 2., of a physician under s. 448.037 (2) (a) 2., or of a physician assistant under s. 448.9727 (2) (a) 2. that complies with the requirements of sub. (1), deliver an opioid antagonist to an individual in accordance with the order. The pharmacist shall provide a consultation in accordance with rules promulgated by the board for the delivery of a prescription to the person to whom the opioid antagonist is delivered.

SECTION 142. 450.11 (1i) (b) 2. b. of the statutes is amended to read:

450.11 (1i) (b) 2. b. An advanced practice registered nurse ~~prescriber~~ may only deliver or dispense an opioid antagonist in accordance with s. 441.18 (2) or in accordance with his or her other legal authority to dispense prescription drugs.

SECTION 143. 450.11 (7) (b) of the statutes is amended to read:

450.11 (7) (b) Information communicated to a

physician, physician assistant, or advanced practice registered nurse ~~prescriber~~ in an effort to procure unlawfully a prescription drug or the administration of a prescription drug is not a privileged communication.

SECTION 144. 450.11 (8) (e) of the statutes is amended to read:

450.11 (8) (e) The board of nursing, insofar as this section applies to advanced practice ~~nurse prescribers~~ registered nurses.

SECTION 145. 450.13 (5) (b) of the statutes is amended to read:

450.13 (5) (b) The patient's advanced practice registered nurse ~~prescriber~~, if the advanced practice registered nurse ~~prescriber has entered into a written agreement to collaborate with a physician~~ may issue prescription orders under s. 441.09 (2).

SECTION 146. 450.135 (7) (b) of the statutes is amended to read:

450.135 (7) (b) The patient's advanced practice registered nurse ~~prescriber~~, if the advanced practice registered nurse ~~prescriber has entered into a written agreement to collaborate with a physician~~ may issue prescription orders under s. 441.09 (2).

SECTION 147. 462.04 of the statutes is amended to read:

462.04 Prescription or order required. A person who holds a license or limited X-ray machine operator permit under this chapter may not use diagnostic X-ray equipment on humans for diagnostic purposes unless authorized to do so by prescription or order of a physician licensed under s. 448.04 (1) (a), a naturopathic doctor licensed under s. 466.04 (1), a dentist who is licensed under s. 447.04 (1) or who holds a compact privilege under subch. II of ch. 447, a dental therapist licensed under s. 447.04 (1m), a podiatrist licensed under s. 448.63, a chiropractor licensed under s. 446.02, an advanced practice registered nurse ~~certified~~ licensed under s. ~~441.16 (2)~~ 441.09, a physician assistant who is licensed under s. 448.974 or who holds a compact privilege under subch. XIII of ch. 448, or, subject to s. 448.56 (7) (a), a physical therapist who is licensed under s. 448.53 or who holds a compact privilege under subch. XI of ch. 448.

SECTION 148. 655.001 (1) of the statutes is renumbered 655.001 (1r).

SECTION 149. 655.001 (1g) of the statutes is created to read:

655.001 (1g) "Advanced practice registered nurse" means an individual who is licensed under s. 441.09, who has qualified to practice independently in his or her recognized role under s. 441.09 (3m) (b), and who practices advanced practice registered nursing, as defined under s. 441.001 (1c), outside of a collaborative rela-

tionship with a physician or dentist, as described under s. 441.09 (3m) (a) 1., or other employment relationship.

SECTION 150. 655.001 (7t) of the statutes is amended to read:

655.001 (7t) “Health care practitioner” means a health care professional, as defined in s. 180.1901 (1m), who is an employee of a health care provider described in s. 655.002 (1) (d), (e), (em), or (f) and who has the authority to provide health care services that are not in collaboration with a physician under s. 441.15 (2) (b) or under the direction and supervision of a physician or ~~nurse anesthetist~~ advanced practice registered nurse.

SECTION 151. 655.001 (9) of the statutes is repealed.

SECTION 152. 655.002 (1) (a) of the statutes is amended to read:

655.002 (1) (a) A physician or ~~a nurse anesthetist~~ an advanced practice registered nurse for whom this state is a principal place of practice and who practices his or her profession in this state more than 240 hours in a fiscal year.

SECTION 153. 655.002 (1) (b) of the statutes is amended to read:

655.002 (1) (b) A physician or ~~a nurse anesthetist~~ an advanced practice registered nurse for whom Michigan is a principal place of practice, if all of the following apply:

1. The physician or ~~nurse anesthetist~~ advanced practice registered nurse is a resident of this state.
2. The physician or ~~nurse anesthetist~~ advanced practice registered nurse practices his or her profession in this state or in Michigan or a combination of both more than 240 hours in a fiscal year.
3. The physician or ~~nurse anesthetist~~ advanced practice registered nurse performs more procedures in a Michigan hospital than in any other hospital. In this subdivision, “Michigan hospital” means a hospital located in Michigan that is an affiliate of a corporation organized under the laws of this state that maintains its principal office and a hospital in this state.

SECTION 154. 655.002 (1) (c) of the statutes is amended to read:

655.002 (1) (c) A physician or ~~nurse anesthetist~~ an advanced practice registered nurse who is exempt under s. 655.003 (1) or (3), but who practices his or her profession outside the scope of the exemption and who fulfills the requirements under par. (a) in relation to that practice outside the scope of the exemption. For a physician or ~~a nurse anesthetist~~ an advanced practice registered nurse who is subject to this chapter under this paragraph, this chapter applies only to claims arising out of practice that is outside the scope of the exemption under s. 655.003 (1) or (3).

SECTION 155. 655.002 (1) (d) of the statutes is amended to read:

655.002 (1) (d) A partnership comprised of physicians or ~~nurse anesthetists~~ advanced practice registered nurses and organized and operated in this state for the primary purpose of providing the medical services of physicians or ~~nurse anesthetists~~ advanced practice registered nurses.

SECTION 156. 655.002 (1) (e) of the statutes is amended to read:

655.002 (1) (e) A corporation organized and operated in this state for the primary purpose of providing the medical services of physicians or ~~nurse anesthetists~~ advanced practice registered nurses.

SECTION 157. 655.002 (1) (em) of the statutes is amended to read:

655.002 (1) (em) Any organization or enterprise not specified under par. (d) or (e) that is organized and operated in this state for the primary purpose of providing the medical services of physicians or ~~nurse anesthetists~~ advanced practice registered nurses.

SECTION 158. 655.002 (2) (a) of the statutes is amended to read:

655.002 (2) (a) A physician or ~~nurse anesthetist~~ advanced practice registered nurse for whom this state is a principal place of practice but who practices his or her profession fewer than 241 hours in a fiscal year, for a fiscal year, or a portion of a fiscal year, during which he or she practices his or her profession.

SECTION 159. 655.002 (2) (b) of the statutes is amended to read:

655.002 (2) (b) Except as provided in sub. (1) (b), a physician or ~~nurse anesthetist~~ advanced practice registered nurse for whom this state is not a principal place of practice, for a fiscal year, or a portion of a fiscal year, during which he or she practices his or her profession in this state. For a health care provider who elects to be subject to this chapter under this paragraph, this chapter applies only to claims arising out of practice that is in this state and that is outside the scope of an exemption under s. 655.003 (1) or (3).

SECTION 160. 655.003 (1) of the statutes is amended to read:

655.003 (1) A physician or ~~a nurse anesthetist~~ an advanced practice registered nurse who is a state, county or municipal employee, or federal employee or contractor covered under the federal tort claims act, as amended, and who is acting within the scope of his or her employment or contractual duties.

SECTION 161. 655.003 (3) of the statutes is amended to read:

655.003 (3) Except for a physician or ~~nurse anesthetist~~ advanced practice registered nurse who meets the

criteria under s. 146.89 (5) (a), a physician or ~~a nurse anesthetist~~ an advanced practice registered nurse who provides professional services under the conditions described in s. 146.89, with respect to those professional services provided by the physician or ~~nurse anesthetist~~ advanced practice registered nurse for which he or she is covered by s. 165.25 and considered an agent of the department, as provided in s. 165.25 (6) (b).

SECTION 162. 655.005 (2) (a) of the statutes is amended to read:

655.005 (2) (a) An employee of a health care provider if the employee is a physician or ~~a nurse anesthetist~~ an advanced practice registered nurse or is a health care practitioner who is providing health care services that are not ~~in collaboration with a physician under s. 441.15 (2) (b)~~ or under the direction and supervision of a physician or ~~nurse anesthetist~~ advanced practice registered nurse.

SECTION 163. 655.005 (2) (b) of the statutes is amended to read:

655.005 (2) (b) A service corporation organized under s. 180.1903 by health care professionals, as defined under s. 180.1901 (1m), if the board of governors determines that it is not the primary purpose of the service corporation to provide the medical services of physicians or ~~nurse anesthetists~~ advanced practice registered nurses. The board of governors may not determine under this paragraph that it is not the primary purpose of a service corporation to provide the medical services of physicians or ~~nurse anesthetists~~ advanced practice registered nurses unless more than 50 percent of the shareholders of the service corporation are neither physicians nor ~~nurse anesthetists~~ advanced practice registered nurses.

SECTION 164. 655.23 (5m) of the statutes is amended to read:

655.23 (5m) The limits set forth in sub. (4) shall apply to any joint liability of a physician or ~~nurse anesthetist~~ advanced practice registered nurse and his or her corporation, partnership, or other organization or enterprise under s. 655.002 (1) (d), (e), or (em).

SECTION 165. 655.27 (3) (a) 4. of the statutes is amended to read:

655.27 (3) (a) 4. For a health care provider described in s. 655.002 (1) (d), (e), (em), or (f), risk factors and past and prospective loss and expense experience attributable to employees of that health care provider other than employees licensed as a physician or ~~nurse anesthetist~~ advanced practice registered nurse.

SECTION 166. 655.27 (3) (b) 2m. of the statutes is amended to read:

655.27 (3) (b) 2m. In addition to the fees and payment classifications described under subds. 1. and 2.,

the commissioner, after approval by the board of governors, may establish a separate payment classification for physicians satisfying s. 655.002 (1) (b) and a separate fee for ~~nurse anesthetists~~ advanced practice registered nurses satisfying s. 655.002 (1) (b) which take into account the loss experience of health care providers for whom Michigan is a principal place of practice.

SECTION 167. 655.275 (2) of the statutes is amended to read:

655.275 (2) APPOINTMENT. The board of governors shall appoint the members of the council. Section 15.09, except s. 15.09 (4) and (8), does not apply to the council. The board of governors shall designate the chairperson, who shall be a physician, the vice chairperson, and the secretary of the council and the terms to be served by council members. The council shall consist of 5 or 7 persons, not more than 3 of whom are physicians who are licensed and in good standing to practice medicine in this state and one of whom is ~~a nurse anesthetist~~ an advanced practice registered nurse who is licensed and in good standing to practice nursing in this state. The chairperson or another peer review council member designated by the chairperson shall serve as an ex officio nonvoting member of the medical examining board and may attend meetings of the medical examining board, as appropriate.

SECTION 168. 655.275 (5) (b) 2. of the statutes is amended to read:

655.275 (5) (b) 2. If a claim was paid for damages arising out of the rendering of care by ~~a nurse anesthetist~~ an advanced practice registered nurse, with at least one ~~nurse anesthetist~~ advanced practice registered nurse.

SECTION 169. 895.478 (3m) of the statutes is amended to read:

895.478 (3m) ELEMENTARY AND SECONDARY SCHOOLS. An elementary or secondary school and its designated school personnel, and a physician, advanced practice registered nurse ~~prescriber~~, or physician assistant who provides or administers an opioid antagonist, are not liable for any injury that results from the opioid antagonist, regardless of whether authorization was given by the pupil's parent or guardian or by the pupil's physician, advanced practice registered nurse ~~prescriber~~, or physician assistant, unless the injury is the result of an act or omission that constitutes gross negligence or willful or wanton misconduct. The immunity from liability provided under this subsection is in addition to and not in lieu of that provided under s. 895.48.

SECTION 170. 961.01 (19) (a) of the statutes is amended to read:

961.01 (19) (a) A physician, advanced practice registered nurse, dentist, veterinarian, podiatrist, op-

tometrists, scientific investigator or, subject to s. 448.975 (1) (b), a physician assistant, or other person licensed, registered, certified or otherwise permitted to distribute, dispense, conduct research with respect to, administer or use in teaching or chemical analysis a controlled substance in the course of professional practice or research in this state.

SECTION 171. 961.395 of the statutes is amended to read:

961.395 Limitation on advanced practice registered nurses. (1) An advanced practice registered nurse who ~~is certified~~ may issue prescription orders under s. ~~441.16~~ 441.09 (2) may prescribe controlled substances only as permitted by the rules promulgated under s. ~~441.16 (3)~~ 441.09 (6) (a) 4.

(2) An advanced practice registered nurse ~~certified under s. 441.16~~ who may issue prescription orders under s. 441.09 (2) shall include with each prescription order the ~~advanced practice nurse prescriber certification license~~ number issued to him or her by the board of nursing.

(3) An advanced practice registered nurse ~~certified under s. 441.16~~ who may issue prescription orders under s. 441.09 (2) may dispense a controlled substance only by prescribing or administering the controlled substance or as otherwise permitted by the rules promulgated under s. ~~441.16 (3)~~ 441.09 (6) (a) 4.

SECTION 172. Nonstatutory provisions.

(1) Using the procedure under s. 227.24, the board of nursing may promulgate rules under ch. 441 that are necessary to implement the changes in this act. Notwithstanding s. 227.24 (1) (a) and (3), the board is not re-

quired to provide evidence that promulgating a rule under this subsection as an emergency rule is necessary for the preservation of the public peace, health, safety, or welfare and is not required to provide a finding of emergency for a rule promulgated under this subsection. A rule under this subsection may take effect no later than the date specified in SECTION 173 (intro.) of this act. Notwithstanding s. 227.24 (1) (c) and (2), a rule promulgated under this subsection is effective for 2 years after its promulgation, or until permanent rules take effect, whichever is sooner, and the effective period of a rule promulgated under this subsection may not be further extended under s. 227.24 (2).

(2) (a) In this subsection, the definitions under s. 441.001 apply.

(b) Notwithstanding s. 441.09 (3), an individual who, on January 1, 2026, is licensed as a registered nurse in this state and is practicing in a recognized role may continue to practice advanced practice registered nursing and the corresponding recognized role in which he or she is practicing and may continue to use the titles corresponding to the recognized roles in which he or she is practicing during the period before which the board takes final action on the person's application under s. 441.09. This paragraph does not apply after the first day of the 13th month beginning after the effective date of this paragraph.

SECTION 173. Effective dates. This act takes effect on the first day of the 13th month beginning after publication, except as follows:

(1) SECTION 172 (1) of this act takes effect on the day after publication.

STATEMENT OF SCOPE

BOARD OF NURSING

Rule No.: N 1 to 8

Relating to: Advanced practice registered nurses and comprehensive review

Rule Type: Both Permanent and Emergency

1. Finding/nature of emergency (Emergency Rule only):

Per Section 172 (1) of the 2025 Wisconsin Act 17, the Board of Nursing may promulgate emergency rules to implement the changes in the act. The Board is not required to provide a finding of an emergency or provide evidence for the preservation of the public peace, health, safety, or welfare.

2. Detailed description of the objective of the proposed rule:

The objective of the proposed rules is to implement statutory changes from 2025 Wisconsin Act 17 and to conduct a comprehensive review of chapters N 1 to 8 to ensure that the rules are current with standards of practice and consistent with statute.

3. Description of the existing policies relevant to the rule, new policies proposed to be included in the rule, and an analysis of policy alternatives:

The proposed project will promulgate rules necessary to implement 2025 Wisconsin Act 17, which makes substantial changes to ch. 441 related to the creation of a new system of licensure that allows registered nurses to be licensed as advanced practice registered nurses (APRN). This new system for APRN licensure replaces the previous advanced practice nurse prescriber certification and requires applicants to provide evidence of education and certification in one of the following recognized roles: certified nurse-midwife (CRM); certified registered nurse anesthetist (CRNA); clinical nurse specialist (CNS); and nurse practitioner (NP). The act establishes new requirements for the licensure, renewal, independent practice, and continuing education of APRNs.

The alternative would be to not revise the code, which would create confusion among stakeholders, and it will make the current code in conflict with the new statutes.

4. Detailed explanation of statutory authority for the rule (including the statutory citation and language):

Section 15.08 (5) (b), Stats., provides an examining board “[s]hall promulgate rules for its own guidance and for the guidance of the trade or profession to which it pertains. . .”

Section 227.11 (2) (a), Stats., states that “[e]ach agency may promulgate rules interpreting the provisions of any statute enforced or administered by the agency, if the agency considers it necessary to effectuate the purpose of the statute...”

Section 441.01 (3), Stats., as amended by 2025 WI Act 17, provides “[t]he board may promulgate rules to establish minimum standards for schools for professional nurses, schools for licensed practical nurses, and schools for advanced practice registered nurses, including all related clinical units and facilities, and make and provide periodic surveys and consultations to such schools. The board may also promulgate rules to prevent unauthorized persons from practicing professional nursing.”

Section 441.09 (4), Stats., as created by 2025 WI Act 17, states that “[t]he board may promulgate rules regarding the continuing education requirements...”

Section 441.09 (6) (a), Stats., as created by 2025 WI Act 17, states that “[t]he board shall promulgate rules necessary to administer this section, including rules for all of the following:

1. Further defining the scope of practice of an advanced practice registered nurse, practice of a certified nurse-midwife, practice of a certified registered nurse anesthetist, practice of a nurse practitioner, and practice of a clinical nurse specialist and defining the scope of practice within which an advanced practice registered nurse may issue prescription orders under sub. (2).
2. Determining acceptable national certification for purposes of sub. (1) (a) 2. a.
3. Establishing the appropriate education, training, or experience requirements that a registered nurse must satisfy in order to be an advanced practice registered nurse and to obtain each specialty designation corresponding to the recognized roles.
4. Specifying the classes of drugs, individual drugs, or devices that may not be prescribed by an advanced practice registered nurse under sub. (2).
5. Specifying the conditions to be met for registered nurses to do the following:
 - a. Administer a drug prescribed by an advanced practice registered nurse.
 - b. Administer a drug at the direction of an advanced practice registered nurse.
6. Establishing standards of professional conduct for advanced practice registered nurses generally and for practicing in each recognized role.”

Section 441.09 (6) (am), Stats., as created by 2025 WI Act 17, states that “[t]he board may promulgate rules to implement sub. (3m) (b)”, which states that an advanced practice registered nurse who practice in collaboration with a physician or dentist may “practice advanced practice registered nursing in a recognized role without being supervised by or collaborating with, and independent of, a physician or dentist” after meeting certain requirements.

5. Estimate of amount of time that state employees will spend developing the rule and of other resources necessary to develop the rule:

80 hours

6. List with description of all entities that may be affected by the proposed rule:

Advanced practice nurses, advanced practice nurse prescribers, nurse-midwives, applicants for nursing licenses, entities that employ nurses and nursing students.

7. Summary and preliminary comparison with any existing or proposed federal regulation that is intended to address the activities to be regulated by the proposed rule:

None.

8. Anticipated economic impact of implementing the rule (note if the rule is likely to have a significant economic impact on small businesses):

The proposed rule will have minimal to no economic impact on small businesses and the state’s economy as a whole.

Contact Person: Sofia Anderson, Administrative Rules Coordinator, DSPSAdminRules@wisconsin.gov.

Approved for publication:

Authorized Signature

Date Approved

Approved for implementation:

Authorized Signature

Date Approved

Board of Nursing
Rule Projects (Updated 09/29/2025)

Permanent Rules

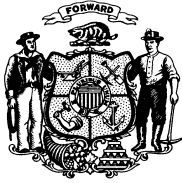
Clearinghouse Rule Number	Scope #	Scope Expiration	Date Scope Requested by Board	Rules Affected	Relating Clause	Synopsis	Stage of Rule Process	Next step
				N 1	Faculty Accreditation Standards	Expand criteria regarding who can teach in a clinical setting to include BSNs.	Preliminary public hearing to be held at the October meeting.	Scope implementation and drafting of the rule.
				N 1 to 8	APRNs and comprehensive review	The Board will implement the changes of 2025 WI Act 17 and also conduct a comprehensive review to ensure the code is up to current standards of practice.	Scope Statement ready for review at the October meeting.	Scope submission to Governor's Office and, after approval, to Administrative Register for publication.
25-012	106-24	05/04/2027	04/11/2024	N 8	Advanced Practice Nurse Prescribers	The Board will conduct a review of the educational and renewal requirements for APNPs licensure.	Effective October 1, 2025.	N/A

Scope Statements

Clearinghouse Rule Number	Scope #	Scope Expiration	Date Scope Requested by Board	Rules Affected	Relating Clause	Synopsis	Stage of Rule Process	Next step
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Board of Nursing

			10/8/2020	N 8	APNP prescribing limitations	Review of limitations in N8 regarding APNPs prescribing certain drugs.	Scope submitted to Governor's Office, 11/24/20.	
			7/30/2020	N 8	Collaboration with other health care providers	Review of the collaboration requirements in N8 and other changes throughout the chapter.	Scope submitted to Governor's Office, 10/15/20.	
			6/11/2020	N 2	Temporary permits	Requirements for temporary permits to respond to a future emergency and may promulgate a permanent rule to allow the Board to grant a waiver of or variance to the requirements in emergency situations.	Scope submitted to Governor's Office on 10/15/20	



2025 ASSEMBLY BILL 294

May 30, 2025 - Introduced by Representatives SORTWELL, DITTRICH, GOEBEN, GUNDRUM, KREIBICH, MIRESE and O'CONNOR, cosponsored by Senator CABRAL-GUEVARA. Referred to Committee on Health, Aging and Long-Term Care.

- 1 **AN ACT** *to amend* 15.405 (7g) of the statutes; **relating to:** membership on the
2 Board of Nursing.

Analysis by the Legislative Reference Bureau

Under current law, the Board of Nursing has several powers and duties related to the licensure of nurses and the regulation of the practice of nursing in this state. The Board of Nursing consists of the following nine members appointed for staggered four-year terms: five currently licensed registered nurses, one currently licensed practical nurse, one individual who is either a licensed registered nurse or a licensed practical nurse, and two public members. This bill revises the membership of the Board of Nursing to provide that the board consist of three currently licensed registered nurses, one currently licensed practical nurse, one currently certified advanced practice nurse prescriber, one nurse educator, one member who is either a licensed registered nurse or a licensed practical nurse, and two public members. The bill provides that the two members of the Board of Nursing who were appointed as currently licensed registered nurses whose terms expire the earliest following the effective date of the bill must be replaced by a currently certified advanced practice nurse prescriber and a nurse educator after their terms expire.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

ASSEMBLY BILL 294**SECTION 1**

SECTION 1. 15.405 (7g) of the statutes is amended to read:

15.405 **(7g)** BOARD OF NURSING. There is created a board of nursing in the department of safety and professional services. The board of nursing shall consist of the following members appointed for staggered 4-year terms: ~~5~~ 3 currently licensed registered nurses under ch. 441; one currently licensed practical nurse under ch. 441; one currently certified advanced practice nurse prescriber under ch. 441; one nurse educator; one member who is either a licensed registered nurse or a licensed practical nurse under ch. 441; and 2 public members. Each registered nurse member shall have graduated from a program in professional nursing and each practical nurse member shall have graduated from a program in practical nursing accredited by the state in which the program was conducted.

SECTION 2. Nonstatutory provisions.

(1) Of the members of the board of nursing who were appointed as currently licensed registered nurses under ch. 441 pursuant to s. 15.405 (7g), the position of the 2 such members whose terms expire the earliest following the effective date of this subsection shall be replaced by a currently certified advanced practice nurse prescriber under ch. 441 and a nurse educator after their terms expire.

(END)

Assembly

Record of Committee Proceedings

Committee on Health, Aging and Long-Term Care

Assembly Bill 294

Relating to: membership on the Board of Nursing.

By Representatives Sortwell, Dittrich, Goeben, Gundrum, Kreibich, Miresse and O'Connor; cosponsored by Senator Cabral-Guevara.

May 30, 2025 Referred to Committee on Health, Aging and Long-Term Care

June 25, 2025 **Public Hearing Held**

Present: (15) Representative Moses; Representatives Brooks, Dittrich, Gundrum, Kitchens, Neylon, Snyder, Summerfield, VanderMeer, Wichgers, Subeck, Stubbs, Vining, Johnson and Mayadev.

Absent: (0) None.

Excused: (0) None.

Appearances For

- Representative Shae Sortwell - 2nd Assembly District
- Senator Rachael Cabral-Guevara - 19th Senate District
- Peter Welch - WAICU
- Peter Welch - WI Nurses Association
- Mary Beck Metzger - WI Nurses Association

Appearances Against

- None.

Appearances for Information Only

- None.

Registrations For

- Christopher Wojnar - WI Nurses Association
- Jenna Palzkill - WI Assoc. of Nurse Anesthetists

Registrations Against

- None.

Registrations for Information Only

- None.

September 03, 2025 **Executive Session Held**

Present: (14) Representative Moses; Representatives Brooks, Dittrich, Kitchens, Neylon, Snyder, Summerfield, VanderMeer, Wichgers, Subeck, Stubbs, Vining, Johnson and Mayadev.

Absent: (0) None.

Excused: (1) Representative Gundrum.

Moved by Representative Dittrich, seconded by Representative Snyder that **Assembly Amendment 1** be recommended for adoption.

Ayes: (14) Representative Moses; Representatives Brooks, Dittrich, Kitchens, Neylon, Snyder, Summerfield, VanderMeer, Wichgers, Subeck, Stubbs, Vining, Johnson and Mayadev.

Noes: (0) None.

ASSEMBLY AMENDMENT 1 ADOPTION RECOMMENDED,
Ayes 14, Noes 0

Moved by Representative Dittrich, seconded by Representative Subeck that **Assembly Bill 294** be recommended for passage as amended.

Ayes: (14) Representative Moses; Representatives Brooks, Dittrich, Kitchens, Neylon, Snyder, Summerfield, VanderMeer, Wichgers, Subeck, Stubbs, Vining, Johnson and Mayadev.

Noes: (0) None.

PASSAGE AS AMENDED RECOMMENDED, Ayes 14, Noes 0

Maryjane Behm
Committee Clerk



SHAE SORTWELL

STATE REPRESENTATIVE • 2nd ASSEMBLY DISTRICT

Hearing Testimony
Assembly Committee on Health, Aging, and Long-Term Care
June 25, 2025
Assembly Bill 294

Chairman Moses and members of the Assembly Committee on Health, Aging, and Long-Term Care – Thank you for giving me the opportunity to speak on AB 294, relating to membership on the Board of Nursing.

Assembly Bill 294 revises the membership of the Board of Nursing to replace two licensed registered nurses with an advanced practice nurse prescriber (APNP) and a nurse educator. The bill provides that the two members of the Board of Nursing who were appointed as licensed registered nurses whose terms expire the earliest following the effective date of the bill must be replaced by an APNP and a nurse educator after their terms expire.

With Wisconsin facing nursing shortages, especially in rural areas, a nurse educator and APNP can provide valuable perspectives to the board on recruitment, retention, and training strategies to build a robust nursing workforce. This will ensure Wisconsin stays ahead of these trends by shaping policies that reflect emerging practice models and prepare the workforce for the future of care delivery.

I appreciate the opportunity to testify on this legislation and would gladly answer any questions the committee may have.



RACHAEL A. CABRAL-GUEVARA

STATE SENATOR • 19TH SENATE DISTRICT

Testimony before the Assembly Committee on Health, Aging, and Long-Term Care

Senator Rachael Cabral-Guevara

June 25, 2025

Hello, members of the Assembly Committee on Health, Aging, and Long-Term Care. Thank you for allowing me to provide testimony on Assembly Bill 294, a bill that would ensure the Board of Nursing has a well-rounded perspective on nursing education and a growing role within nursing, Advanced Practice Registered Nursing.

Requiring both a nurse educator and an Advanced Practice Registered Nurse (APRN, currently classified as an Advanced Practice Nurse Prescriber under statute) to serve on the Wisconsin Board of Nursing (BON) would provide a well-rounded approach to nursing regulation, combining educational experience with advanced clinical practice to better serve the state's healthcare needs.

Nurse educators bring specialized knowledge in curriculum development, teaching methodologies, and student assessment. Their presence ensures that nursing education programs align with current clinical practices and educational standards, fostering a well-prepared nursing workforce.

APRNs, including nurse practitioners, nurse midwives, nurse anesthetists, and clinical nurse specialists, possess advanced clinical training and often serve as primary care providers. Their inclusion offers the board firsthand insights into advanced nursing practices, patient care complexities, and the evolving healthcare landscape.

With Wisconsin facing nursing shortages, especially in rural areas, a nurse educator and APRN can provide valuable perspectives to the Board of Nursing on recruitment, retention, and training strategies to build a robust nursing workforce.

As healthcare rapidly evolves—with shifts toward telehealth, team-based care, and increasingly complex patient needs—the roles and responsibilities of nurses are also changing. Having a nurse educator and APRN on the BON ensures Wisconsin stays ahead of these trends by shaping policies that reflect emerging practice models and prepare the workforce for the future of care delivery.

I am hopeful you will support this important bill right-sizing representation on the Board of Nursing.

Testimony on AB 294/ SB 282 – June 25, 2025

Thank you, Chairman Moses and members of the Assembly Committee on Health, Aging & Long-term Care, for allowing me to speak to you today. My name is Mary Beck Metzger, and I have been a Wisconsin RN for 46 years, and a Family Nurse Practitioner for 25 years.

The Wisconsin Board of Nursing is the regulatory body for the state's nurses and nursing schools. The Wisconsin 2024 RN Workforce Survey notes that there are 93,008 Registered Nurses and of that, 9,127 or 9.8 percent are Advanced Practice Nurses. There are 4,600 licensed practical nurses.

There are at least 45 approved in-state schools of nursing awarding Associate Degrees, Bachelor of Science degrees, Masters, PhD, and Doctorate of Nursing Practice degrees, graduating about 3000 students per year. 1200 nurse faculty teach in Wisconsin schools.

AB 294 changes the make-up of the membership of the Wisconsin BON. Currently the Board is made up of five RNs, two LPNs, and two public members. AB 294 would designate two of the RN seats: one for an APNP, and another for a Nurse Educator.

It is critically important for an Advanced Practice Nurse to be seated on the BON. An APNP has an inside view of the education, training, experience, and varied clinical practices of APNPs, and can provide expert insight on regulations and policies that directly impact their practices and the patients they provide care for. An APNP on the BON can ensure that the Board understands the APNP standards of care, prioritizing patient safety and optimal outcomes of care. As the BON regulates nursing educational programs in Wisconsin, it is vital that an individual who is a graduate of an APN program be able to provide insights on the graduate school curriculum and process. An APNP on the BON offers a unique perspective, collaborating with other Board members to ensure that regulatory decisions are comprehensive, current, and equitable, ultimately protecting the public while advancing the nursing profession. In addition, APNP representation will support the use of evidence-based, patient-centered care and can guide discussions on expanding access to care through full practice authority and other reforms—especially in rural and underserved areas.

It is equally important that a seat on the BON be reserved for a Nurse Educator. Nurse Educators hold expertise in curriculum development and instruction, a constantly changing landscape with numerous evolving technologies. They teach needed skills, foster academic discussion, and appropriately assess students' progress, helping to ethically train the next generation of nurses and advanced practice nurses. Nurse Educators guide students to design and implement innovations and quality-improvements in clinical settings. Nurse Educators are pivotal in setting and ensuring high educational standards, careful program evaluation and regulation, helping align academic preparation with licensure requirements and workforce demands. In Wisconsin, which is facing a nursing and nurse faculty shortage we must be intentional about placing importance on valuing and promoting Nurse Educators who reinforce a preventive approach to public protection starting at the educational level.

Thank you for allowing me to share my support for AB 294. I want to thank Representative Sortwell for sponsoring AB 294 and Representatives Dittrich and Gundrum as co-sponsors. We ask that AB 294 be passed out of committee as soon as possible. I will gladly answer any questions.

Mary Beck Metzger, DNP, FNP-BC, APNP

Family Nurse Practitioner, Rock River Community Clinics- Watertown & Whitewater

Wisconsin Nurses Association

June 25, 2025

Representative Clint Moses, Chair
Assembly Health, Aging and Long-Term Care Committee
Room 12 West
State Capitol
Madison, WI 53708

RE: Support of Assembly Bill 294 and Senate Bill 282 membership on the Board of Nursing

Dear Chairperson Moses and Members of the Assembly Health, Aging and Long-Term Care Committee: Thank you for holding a public hearing on Assembly Bill 294 and its companion, Senate Bill 282, which proposes to formally identify specific types of registered nurses as designated members of the Wisconsin Board of Nursing.

My name is Christopher Wojnar. I am a native Wisconsinite, an Advanced Practice Registered Nurse, and a nationally board-certified Psychiatric Mental Health Nurse Practitioner. I appear before you today on behalf of the Wisconsin Nurses Association (WNA)—our state's professional organization representing registered nurses across all specialties, settings, and regions. Membership in WNA is open to any Wisconsin RN, and our mission includes the advancement of nursing practice, professional standards, and public health.

Designated Seat for an Advanced Practice Registered Nurse

WNA strongly supports the inclusion of a designated seat for an Advanced Practice Registered Nurse (APRN) on the Board of Nursing. This designation would ensure that advanced clinical expertise is directly represented in regulatory decisions that affect modern nursing practice, licensure, and patient care in our state.

APRNs—including nurse practitioners, clinical nurse specialists, certified registered nurse anesthetists, and certified nurse midwives—provide vital healthcare services throughout Wisconsin. We are frequently primary care providers, mental health specialists, anesthesia providers, and maternal care clinicians. In rural and underserved areas especially, APRNs are often the only accessible healthcare professionals available to patients.

Having an APRN on the Board ensures that someone with direct clinical insight into advanced nursing practice can help craft regulations related to licensure, continuing education, collaborative agreements, and prescriptive authority. An APRN board member would offer critical perspectives on

the practical impact of regulations, especially as they relate to workforce sustainability and scope-of-practice modernization.

Importantly, Wisconsin would not be the first state to recognize this need. Louisiana, Tennessee, North Dakota, and Kentucky all have statutory mandates requiring at least one APRN to serve on their Board of Nursing. These mandates generally stipulate that the APRN must be actively practicing and licensed in the state. There is a growing national trend to include advanced practice nurses in nursing regulatory bodies, aligning board composition with the evolving demands and complexity of modern healthcare delivery.

WNA supports the continued gubernatorial appointment of board members and believes this legislation wisely preserves that authority. At the same time, we urge that any APRN selected for this seat be someone who is actively engaged in direct patient care—those with “boots on the ground” knowledge who can speak to the lived realities of modern clinical practice.

Designated Seat for a Nurse Educator

WNA also strongly supports the establishment of a designated seat for a nurse educator. Nurse educators are critical to the future of Wisconsin’s nursing workforce. They bring expertise in curriculum development, accreditation standards, clinical competency requirements, and educational innovations aligned with national trends and state-specific health needs.

A nurse educator’s voice on the Board of Nursing ensures that decisions about program approvals, education regulations, and clinical training requirements are informed by the realities of academic practice. Educators are the bridge between regulation and the classroom, translating policy into workforce preparedness. Their contributions are especially relevant as Wisconsin addresses the ongoing nursing faculty shortage, high turnover in clinical education roles, and the need to expand nursing school capacity to meet future demand.

As of 2016, Wisconsin had an estimated 825 nurse educators, and that number continues to grow thanks to state-supported initiatives such as the Wisconsin Nurse Educator Program, which has already funded over 130 new educators and is expanding further. The Board of Nursing plays a direct role in approving, monitoring, and evaluating pre-licensure and graduate-level nursing programs. Including a nurse educator ensures that academic rigor and workforce alignment are kept at the forefront of every decision made by the Board.

This designated seat will elevate the educational standards that support public safety and help ensure that the next generation of nurses is not only clinically competent but also prepared to meet the changing healthcare needs of our state.

Final Thoughts

It is important to note that Assembly Bill 294 does not increase the size of the Board of Nursing. It simply ensures that two of the five designated registered nurse seats are explicitly reserved for an

APRN and a nurse educator—two essential roles in Wisconsin’s nursing landscape that are currently underrepresented in our regulatory structures.

WNA believes that these additions will bring the Board of Nursing into better alignment with 21st-century nursing practice and education. This legislation offers a common-sense, no-cost solution to strengthen the integrity of our nursing regulation while supporting public health, workforce stability, and patient safety.

Thank you for the opportunity to share WNA’s position on this important legislation. We especially thank Representative Sortwell for authoring this bill and Representatives Dittrich and Gundrum for their co-sponsorship. We respectfully urge this committee to support AB 294 and advance it out of committee without delay.

I welcome any questions and would be honored to contribute further if needed.

Sincerely,

A handwritten signature in black ink, appearing to read 'C. Wojnar', with a stylized flourish extending to the right.

Christopher Wojnar, MSN, APNP, PMHNP-BC
Board of Directors, Wisconsin Nurses Association



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TO: Chairman Moses and Members of the Committee on Health, Aging and Long-Term Care
DATE: June 25, 2025
RE: Testimony in Support of Assembly Bill 294

Good morning, Chair Moses and members of the Assembly committee on Health, Aging and Long-Term Care. Thank you for the opportunity to testify in support of Assembly Bill 294 (AB-294), regarding membership on the Board of Nursing.

My name is Jenna Palzkill and I am a Certified Registered Nurse Anesthetist (CRNA) and Past President of the Wisconsin Association of Nurse Anesthetists (WIANA).

WIANA supports AB 294, which updates the membership of the Board of Nursing to better reflect today's nursing landscape. Including an advanced practice nurse prescriber and a nurse educator ensures the Board includes voices from both advanced clinical practice and nursing education.

Nurses working in advanced roles are on the front lines of care delivery. CRNAs, for example, provide anesthesia care in a variety of settings including hospitals, ambulatory surgical centers, obstetrics, and the military. We are highly trained professionals with deep clinical experience. Representation on the Board matters—it means these perspectives are present when decisions are made that shape how nursing is practiced and regulated in Wisconsin.

This legislation recognizes the value of that expertise and supports a more balanced and informed Board. WIANA believes that adding advanced practice and educational representation will strengthen the Board's ability to make decisions that serve both patients and the nursing profession as a whole.

Thank you again for your time and consideration of this important measure to support nurses and the patients they serve.



Remove Barriers to Mental Health Care for Health Workers

Like everyone, health workers deserve the right to pursue mental health care without fear of losing their job. However, overly invasive mental health questions in licensing and credentialing applications prevent health workers from seeking support and increase the risk of suicide.

Such questioning tends to be broad or stigmatizing, such as asking about past mental health care and treatment, which has no bearing on a health worker's ability to provide care and violates the Americans with Disabilities Act.

Ensuring that health workers can access mental health care when needed not only benefits their wellbeing, but it also improves the health of our entire country.

Join us in removing this substantial barrier to mental health care for our health workers!

Wellbeing First Champion Challenge

The Wellbeing First Champion Challenge program supports licensure boards, health systems, hospitals, medical centers, clinics, and other care facilities in auditing and updating their licensing and credentialing applications to be free of intrusive mental health questions and stigmatizing language. Once the applications are verified, organizations are recognized as a Wellbeing First Champion.

Show Your Workforce that Your Institution Supports Mental Health Privacy

- 1** [Create an account](#) to access our free toolkit and resources.
- 2** **Audit** and **Change** any invasive or stigmatizing language around mental health in licensing or credentialing applications.
- 3** Once applications are updated, [log back in](#) to **Submit** the applications to verify alignment with national best practices that champion equal privacy in mental health care.
- 4** After verification, organizations are recognized as a Wellbeing First Champion and provided the badge and toolkit to **Communicate** to their workforce that it's safe to seek mental health care.

5

After the initial recognition, organizations submit annual verification for **Renewal** and receive the continued recognition for communicating with and educating their workforce on an ongoing basis that it is safe to seek mental health care.

Get Started Now



The Wellbeing First Champion Badge serves as a visual recognition for health workers.

When health workers are deciding in which state or organization to work, the Badge serves as a standardized form of communication that an organization's licensing or credentialing applications are free of intrusive mental health questions and stigmatizing language.

The Wellbeing First Champion Badge includes the year of recognition, so health workers can be assured that an organization remains committed to their mental health. Learn more about our verification and recognition approach:

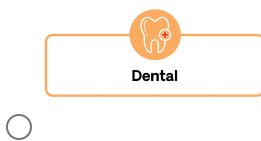
[Learn More](#)

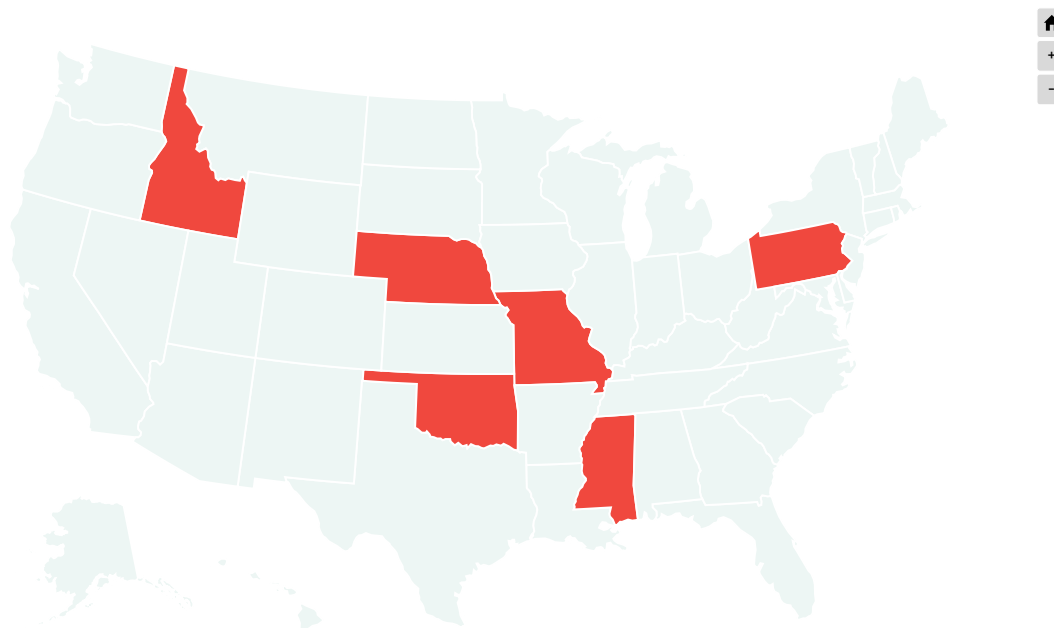
The State of Our States

Wellbeing First Champions for Licensing

As of September 19, 2025, 5 dental licensure boards, 40 medical licensure boards, 6 nursing licensure boards, and 9 pharmacy licensure boards verified their licensing applications do not include intrusive mental health questions—benefiting nearly 1.85 million licensed health workers.

Click an icon below to view the state of the states for each profession and explore state-specific information by clicking on an individual state.





States where Nursing Boards' initial and renewal RN, LPN, and APRN applications are consistent with recommendations

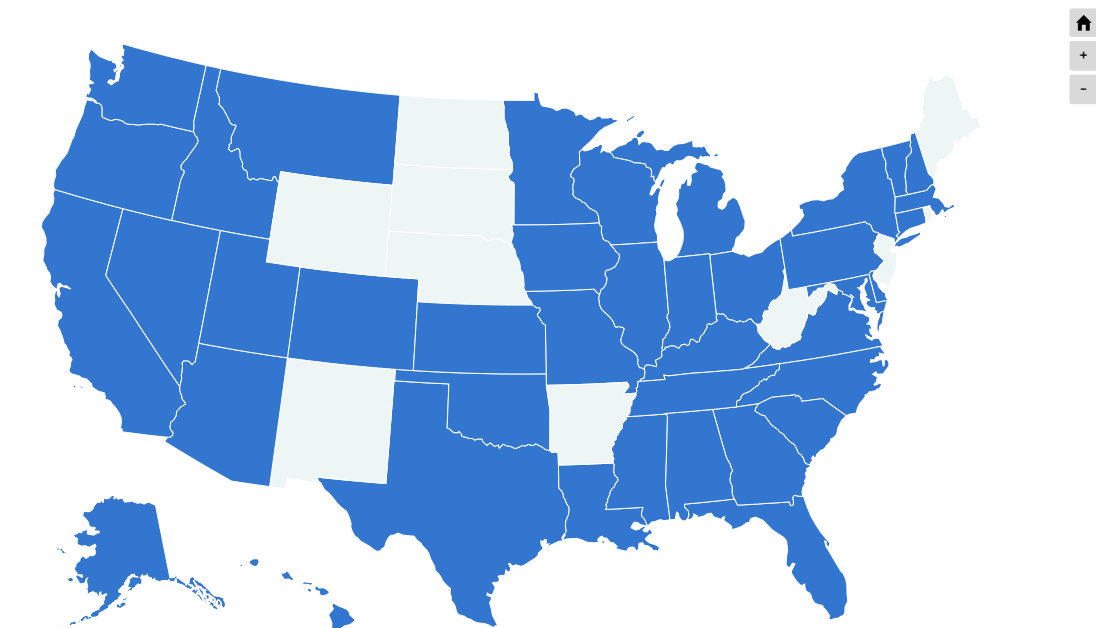
Wellbeing First Champions for Credentialing

As of September 19, 2025, 1,850 hospitals, medical centers, clinics, and other care facilities verified their credentialing applications do not include intrusive mental health questions—benefiting nearly 357,000 credentialed health workers.

Jackson and Coker Locum Tenens (2024-2025), Envision Healthcare (2024-2025), Vituity (2025), and LocumTenens.com (2025) have also verified their applications and forms—benefiting 38,000 health workers.

Additionally, 2 insurance companies, PacificSource Health Plans (2024) and Providence Health Plan (2025), verified their credentialing applications—benefiting more than 52,000 health workers.

Click a state on the map below to explore state-specific information.



States where care facilities' credentialing applications are consistent with recommendations



Become a Wellbeing First Champion

For licensure boards, health systems, hospitals, medical centers, clinics, and other care facilities who are ALL IN for prioritizing their workforce's mental health, get started now in auditing and updating your licensing and credentialing applications to be free of intrusive mental health questions and stigmatizing language. Once the applications are verified, organizations are recognized as a Wellbeing First Champion.

Get Started Now

ALL IN Wellbeing First for Healthcare

ALL IN: Wellbeing First for Healthcare, a coalition led by the Dr. Lorna Breen Heroes' Foundation, brings together healthcare organizations committed to advancing solutions for health worker well being and mental health, including the Wellbeing First Champion Challenge program. Learn more and join us at allinforhealthcare.org.

The Dr. Lorna Breen Heroes' Foundation expresses its immense gratitude to coalition member, the American Medical Association, whose dedication, time, and support make this program and impact possible.

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Physician Initial Application – Updates to Consider May 2025

For the purposes of these questions, the following phrases or words have the following meanings:

1. ~~–The cognitive capacity to make appropriate clinical diagnoses and exercise reasoned judgments and to learn and keep abreast of developments; and~~
2. ~~–The ability to communicate those judgments and information to patients and other health care providers, with or without the use of aids or devices, such as voice amplifiers; and~~
3. ~~–The physical capability to perform tasks such as physical examination and surgical procedures, with or without the use of aids or devices, such as corrective lenses or hearing aids.~~

"Medical Condition" includes physiological, mental or psychological conditions or disorders, such as, but not limited to ~~orthopedic~~ musculoskeletal impairments, visual, speech, and hearing impairments, ~~cerebral palsy, epilepsy, muscular dystrophy, multiple sclerosis, cancer, heart disease, diabetes,~~ neurological conditions, intellectual disability, ~~emotional or mental illness,~~ behavioral health conditions, specific learning disabilities, ~~HIV disease, tuberculosis, drug addiction and alcoholism~~ substance use disorder, alcohol use disorder, other substance use disorders or any communicable infectious diseases; such as hepatitis.

"Chemical Substances" is to be construed to include alcohol, marijuana, drugs, or medications, including those taken pursuant to a valid prescription for legitimate medical purposes and in accordance with the prescriber's direction, as well as those used illegally.

"Currently" does not mean on the day of, or even in the weeks or months preceding the completion of this application. Rather, it means recently enough so that the use of drugs may have an ongoing impact on one's functioning as a licensee, or within the past two years.

~~**"Illegal use of Controlled Dangerous Substances"** means the use of controlled dangerous substances obtained illegally (e.g. heroin or cocaine) as well as the use of controlled dangerous substances, which are not obtained pursuant to a valid prescription, or not taken in accordance with the directions of a licensed health care practitioner~~

12. Do you have a ~~medical, physical, or mental condition~~ medical condition, as defined above, which ~~in any way~~ currently impairs or limits your ability to practice medicine with reasonable skill and safety?

Yes, please describe the medical condition and any limitations and/or impairment, including whether you require any accommodation to ensure safe, competent practice.

No

13. If yes to Question 12, do you have a please describe the limitation and/or impairment, including whether you require an accommodation to ensure safe, competent practice. are the limitations or impairments caused by your medical, physical, or mental condition reduced or ameliorated because you receive ongoing treatment (with or without medications); participate in a monitoring program; or reduced or ameliorated because of the field of practice, the setting, or the manner in which you have chosen to practice?

Yes

No // or open text box [for liaison review]

14. Do you use chemical substance(s), as defined above, that in any way currently impairs or limits your ability to practice medicine with reasonable skill and safety?

Yes, please describe your chemical substance(s) use and any limitations and/or impairment, including whether you require any accommodation to ensure safe, competent practice.

No

15. Are you currently (within the last two years) engaged in the illegal use of controlled dangerous substances?

Yes

No

16. If yes to Question 15, are you participating in a supervised rehabilitation program or professional assistance program, which monitors you in order to assure that you are not engaging in the illegal use of controlled dangerous substances?

Yes

No

17. Have you ever been diagnosed as having, or have you ever been treated for, pedophilia exhibitionism, or voyeurism?

Yes, please describe your diagnosis and any limitations and/or impairment, including whether you require any accommodation to ensure safe, competent practice.

No

Commented [JL1]: I'm wondering about noun/verb agreement with "chemical substance(s)... impairs or limits"?
Should we say "any chemical substance?"



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Welcome, let's begin your renewal.

If you have questions about your renewal, please submit a support ticket by clicking "Request Support" in the blue banner on the top of this page. Provide complete contact information and a detailed description of the issue you're experiencing. Include your date of birth and the last 4 digits of your SSN, so that we can verify your identity. Once your renewal is complete and your license is renewed, you will receive an email with a link to print a copy of your license with the updated expiration date.

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Contact Information

4822 Madison Yards Way Madison, WI 53705

(608) 266-2112

(877) 617-1565



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Physician - MD - Renewal

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Personal Information

Per Wis. Stats. 440.14, if you are an individual or sole proprietor, you may declare that your street address and/or PO Box #, telephone number and electronic mail address is not to be disclosed on any list of ten or more credential holders that the department furnishes to another person. Please check the box to make this declaration.

☐ Please do not disclose my street address and/or PO Box #, telephone number and electronic mail address on lists.

You are required to update your name and address within 30 days of the change per [Wis State Stat 440.11](#). To make changes, you will need to be logged into your account and click on the **Amendment Tab** to request a change. Please note that name changes require documentation of the name change before being submitted.

Email address, Phone Number and Gender changes can be made by clicking on the down arrow by your name in the upper right corner of your account. Then click on **My Profile**. Click on the **Edit Profile** button to make changes.

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Attestations



Please fill all the attestations to proceed.

Affidavit of credential Holder

I declare that I am the person referred to on this application and that all answers set forth are each and all strictly true in every respect. I understand that failure to provide requested information, making any materially false statement and/or giving any materially false information in connection with my application for a license/credential or for renewal or reinstatement of a license/credential may result in license/credential application processing delays; denial, revocation, suspension or limitation of my license/credential; or any combination thereof; or such other penalties as may be provided by law. I further understand that if I am issued a license/credential renewal, or reinstatement thereof, failure to comply with the statutes and/or administrative code provisions of the licensing authority may be cause for disciplinary action.

☐ I have read and understand the above Affidavit of credential holder statement.

Continuing Duty of Disclosure

I understand that I have a continuing duty of disclosure as long as my license/credential is current and valid. If information I have provided becomes invalid, incorrect or outdated, since the last renewal or issuance of my license/credential, I understand that I am obliged to provide any information to ensure the information on file for my license/credential remains current, valid, and truthful. I understand that the Department of Safety and Professional Services may view acts of omission as dishonesty and that my duty of disclosure exists as long as my license/credential is current and valid.

☐ I have read and I understand the above continuing duty of disclosure statement

All applications for professional licenses/credentials are checked to determine whether the applicant is liable for delinquent state taxes. Under state law, the department must deny your application if you are liable for delinquent Wisconsin taxes.(*6) If you are liable for delinquent state taxes, pay the delinquent amount before the application process is completed. Retain proof that you have satisfied the tax delinquency. If you have any questions about payment of delinquent taxes, please contact your nearest Department of Revenue office or call (608) 261-6249.

An application may be denied or a license/credential suspended if an applicant or license/credential holder is delinquent in paying support or fails to comply with a subpoena or warrant issued by the department of workforce development or a county child support agency related to support or paternity proceedings.(*2)

*6 - Section 440.12, Wis. Stats.

*2 - Sections 49.22, and 440.13, Wis. Stats.

Affidavit/Licensee Charges Or Conviction

A holder of any of the credentials/licenses set forth in Wis. Stat. s. 440.03(13)(b) who is convicted of a felony or misdemeanor, since the issuance of the license/credential or since the last renewal, in the state or elsewhere shall notify the department in writing of the date, place and nature of the conviction or finding within 48 hours after the entry of the judgment of conviction. Notice shall be made by mail and shall be proven by showing proof of the date of mailing the notice. Notice shall include a copy of the judgment of conviction and a copy of the complaint or other information which describes the nature of the crime and the judgment of conviction in order that the department may determine whether the circumstances of the crime of which the license/credential holder was convicted are substantially related to the practice of the license/credential holder. [Form #2254](#) should be completed and submitted to the department along with the associated fees and all requested documents.

☐ I have read and understand the above statement regarding the responsibility to report any felony or misdemeanor conviction since the issuance or last renewal of my license.

Acknowledgement to continue

By clicking "Save & Next" below, I am signifying that I have read the above statements (Continuing Duty of Disclosure, License/Credential Holder Charges or Convictions, and Affidavit of Applicant) and understand the obligation I have as a license/credential-holder should the information I've provided to the Department of Safety and Professional Services change.

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Declarations

If you do not have a Social Security Number on file with us or are exempt from having a Social Security Number, and/or your legal status as a qualified alien or nonimmigrant lawfully present in the United States has changed since your last renewal (or the issuance of your license/credential if you have not renewed before), please contact the DSPS at [608-266-2112](tel:608-266-2112) or dsp renewal@wisconsin.gov

☐ I have read and understood the above legal status statement.

Since your last renewal (or initial licensure if this is your first renewal), do you have any pending charges, convictions and/or have you violated any federal or state laws, or any local ordinances (for ordinance violations you do not need to include minor traffic violations that do not involve alcohol or drugs, such as speeding or seat belt violations)? *Expunged convictions must be reported.

- ☐ NO, I DO NOT have pending charges, convictions, and/or ordinance violations to report.
- ☐ YES, I HAVE pending charges, convictions, and/or ordinance violations to report.

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Continuing Education

Please note that the Medical Examining Board will conduct a continuing medical education compliance audit. More information regarding this process can be found on our website: <https://dsps.wi.gov/Pages/Professions/Physician/CE.aspx>

* Attestation of Continuing Education

- ☐ I have completed at least 30 hours of acceptable continuing medical education pursuant to Wis. Admin. Code Med 13.02 and 13.03. I will furnish evidence of completion to the Medical Examining Board upon request.
- ☐ I have completed at least 30 hours of acceptable continuing medical education pursuant to Wis. Admin. Code Med 13.04 by completing three consecutive months of postgraduate training in a program approved by the board within the last biennium. I will furnish evidence of completion to the Medical Examining Board upon request.
- ☐ I have NOT completed at least 30 hours of acceptable continuing medical education pursuant to Wis. Admin. Code MED 13.02(2), due to a prolonged illness, disability or other similar circumstances and I am requesting a waiver of these requirements. I will submit a waiver request with my renewal application. I understand my renewal will not be processed until my waiver request has been reviewed by the board.

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4822 Madison Yards Way Madison, WI 53705 (608) 266-2112 (877) 617-1565

Physician - MD - Renewal

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- Supplementary Information
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Additional Renewal Requirements

Verify Professional Specialties:

☐ Please check here if you are willing to serve as an expert witness in disciplinary proceedings.

Medicine and Surgery Renewal Addendum

For the purposes of these questions, the following phrases or words have the following meanings:

Medical Condition includes physiological, mental or psychological conditions or disorders, such as, but not limited to musculoskeletal impairments, visual, speech, and hearing impairments, neurological conditions, intellectual disability, behavioral health conditions, specific learning disabilities, substance use disorder, alcohol use disorder, other substance use disorders or any communicable infectious diseases; such as hepatitis.

Chemical Substances is to be construed to include alcohol, marijuana, drugs, or medications, including those taken pursuant to a valid prescription for legitimate medical purposes and in accordance with the prescriber's direction, as well as those used illegally.

Currently does not mean on the day of, or even in the weeks or months preceding the completion of this application. Rather, it means recently enough so that the use of drugs may have an ongoing impact on one's functioning as a licensee, or within the past two years.

For any **YES** answers below, please upload a detailed statement and supporting documents on the Supporting Documents page.

- *1. Do you have a medical condition, as defined above, which currently impairs or limits your ability to practice medicine with reasonable skill and safety that has not been previously disclosed?
 - ☐ Yes, please describe the medical condition and any limitations and/or impairment, including whether you require any accommodation to ensure safe, competent practice.
 - ☐ No
- *2. Do you use any chemical substance(s), as defined above, that currently impairs or limits your ability to practice medicine with reasonable skill and safety that has not been previously disclosed?
 - ☐ Yes, please describe your chemical substance(s) use and any limitations and/or impairment, including whether you require any accommodation to ensure safe, competent practice.
 - ☐ No
- *3. Have you ever been diagnosed as having or have you ever been treated for pedophilia, exhibitionism, or voyeurism that has not been previously disclosed?
 - ☐ Yes, please describe your diagnosis and any limitations and/or impairment, including whether you require any accommodation to ensure safe, competent practice.
 - ☐ No

*4. Have you ever been reprimanded, demoted, discipline, cautioned, placed on probation, limited in your practice or privileges, placed on or taken leave greater than 90 days, or terminated by any employer, educational institution, training program, licensing board, hospital, medical facility, professional society, specialty board, or medical body for any reason that has not been previously disclosed?

☐ Yes, please provide details about the action, including the name of the entity and date of action and provide supporting documents like a letter from your employer or educational institution, for example.

☐ No

*5. Is disciplinary action pending against you in any jurisdiction that has not been previously disclosed?

☐ Yes, please provide details about pending action, including name of the agency and status of action and provide supporting documents.

☐ No

*6. Has the Drug Enforcement Administration (DEA) withdrawn your DEA number or warned you, or have you been denied a DEA number that has not been previously disclosed?

☐ Yes, please provide details on the action taken and provide supporting documents.

☐ No

*7. Have any medical malpractice suits or claims ever been filed against you as a result of professional services that have not been previously reported?

☐ Yes, please submit Malpractice Suits or Claims Form #12829 and documentation of the claims/suits, final settlements, dispositions, NPDB report, or dismissed information.

☐ No

Form #12829: <https://dsps.wi.gov/Credentialing/Health/fm12829.pdf>

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Supplementary Information

As part of the license renewal process the Department of Safety and Professional Services (DSPS) in partnership with the Department of Health Services (DHS) is collecting data that will be used to designate Health Professional Shortage Areas (HPSAs). Providers working in areas designated as HPSAs may be eligible for loan repayment and Medicaid/Medicare bonus payments which are intended to improve access to primary care.

The study is found at the link below. Clicking the link will open the study in a new window. The study may take between 5 to 10 minutes to complete.

Click on Supplemental Information to complete the questions. When finished with your responses, click Submit and you will be returned to this page.

[Supplementary information](#)

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Supporting Documents

Only upload Form 2254 if you have any new convictions or pending charges since your last renewal or initial licensure if this is your first renewal.
When documents are uploaded to your renewal application, it triggers a manual review of your application whether the documents are required or not.

Documents	Title	Who Submits?	Actions
	Sentencing Verification	Applicant	
	Convictions and Pending Charges Form #2254	Applicant	
	Personal Statement	Applicant	
	Police Report/Criminal Complaint	Applicant	
	AODA Assessment/Current use Statement	Applicant	
	Judgment of Conviction	Applicant	
	Other	Applicant	

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- ☐ Payment

Payment

Please be aware that payments using a checking/savings account may take 3-5 business days to process.

Category	Response	Cost
Renewal Fee		\$120.00

Total		\$120.00
--------------	--	-----------------

The total amount to be paid for this license application is **\$120.00**

Please click the "Pay and Submit" button to proceed with the chosen payment method.

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Pay and Submit

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Initial Application for Physician Licensure in Wisconsin - 2025



HomeLicense and Applications ▼Request SupportAmendments ▼Supervisors ▼

Welcome to Wisconsin's Department of Safety and Professional Services

Selected Application Method : Initial Application

Act 10

This license can be issued to a provider from another state during a national public health emergency. This license can also be issued to providers who are licensed in good standing in another state who also apply for a permanent license at the same time.

Select

Initial Application

This is the regular license to practice medicine and surgery. Please see info Form #570 (<https://dsps.wi.gov/Credentialing/Health/info570.pdf>) for a description of the required forms and reports. NOTE: For a Resident Educational License (REL) for post-graduate training purposes, choose to apply for Resident Educational License instead of Physician. NOTE: For licensing through the Interstate Medical Licensure Compact, visit <https://www.imlcc.org/> . If you hold a Physician License obtained through the Interstate Medical Licensure Compact (IMLC) you must renew online through the IMLC at <https://www.imlcc.org/renew/> . Only licenses obtained through the IMLC may renew through the IMLC site.

Select

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Physician - DO

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Instructions

The following screens will ask for information required in order to determine your eligibility for the license you selected. You do not need to complete the entire application in one sitting – your progress will automatically be saved.

However, review of your application will be contingent upon submission of all relevant information, documentation, and payment.

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Personal Information

The Department must deny your application if you are liable for delinquent state taxes, UI contributions or child support (Wis. Stat. § 440.12 and 440.13).

▼ Name

☐ Your name, address, phone number and e-mail address are available to the public. Check this box to withhold street address or PO Box, phone number, and e-mail address from lists of 10 or more credential holders (Wis. Stat. § 440.14).

First Name	Middle Initial	Last Name
Former / Maiden Name(s) ⓘ		

▼ Personal Details

Date of Birth	Social Security Number
Ethnicity	Gender

▼ Communication

Email Address	* Personal Phone Number

▼ Home Address

* Address line 1	Address line 2
* City	* State
	* Zip Code

☒ Use Home Address as Mailing Address

* Please select which endorsement you are seeking:

* Have you ever been licensed in Wisconsin as a Physician - DO?

☐ Yes ☐ No

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You may enter your Federation ID if you wish to prepopulate school information, Post-Graduate Training/Fellowship, Practice, and Other Activities. Please click here to enter your ID. [click here](#)

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School Information

DEGREE	GRADUATION DATE	SCHOOL	STATE	CITY	ACTIONS

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Specialty

I am currently certified as:

- ☐ Academic Medicine - 37
 ☐ Administrative Medicine - 71
 ☐ Aerospace Medicine - 33
 ☐ Alcoholism - Chemical Dependency - 49
 ☐ Allergy - Immunology - 01
 ☐ Anesthesiology - 02
 ☐ Aviation Medicine - 32
 ☐ Dermatology - 03
 ☐ Emergency Medicine - 31
 ☐ Endocrinology - 56
 ☐ Family Medicine - 925
 ☐ Gastroenterology - 06
 ☐ General Practice - 08
 ☐ Genetics - 61
 ☐ Geriatrics - 29
 ☐ Hand Surgery - 64
 ☐ Hebiatrics - 46
 ☐ Hematology - 07
 ☐ Hyperbaric Medicine - 65
 ☐ Immunology - Infectious Diseases - 47
 ☐ Institutional Medicine - 39
 ☐ Internal Medicine - 04
 ☐ Internal Medicine - Cardiology - 05
 ☐ Internal Medicine - Pulmonary Medicine - 45
 ☐ Neonatology - 63
 ☐ Nephrology - 40
 ☐ Neurology - 10
 ☐ Neuromuscular Medicine - 926
 ☐ Neurophysiology - 51
 ☐ Nuclear Medicine - 23
 ☐ Obstetrics and Gynecology - 12
 ☐ Occupational Medicine - 30
 ☐ Oncology - 38
 ☐ Ophthalmology - 13
 ☐ Orthopedic Surgery - 14
 ☐ Otolaryngology - 67
 ☐ Otorhinolaryngology - ENT - 15
 ☐ Pain - 66
 ☐ Pathology - 16
 ☐ Pathology - Clinical - 17
 ☐ Pathology - Surgical Anatomic - 72
 ☐ Pediatrics - 18
 ☐ Pediatrics - Other - 60
 ☐ Perinatology - 62
 ☐ Pharmacology - Clinical - 48
 ☐ Physical Medicine and Rehabilitation - 19
 ☐ Preventive Medicine - 09
 ☐ Proctology - 36
 ☐ Psychiatry - 20
 ☐ Psychiatry - Child - 21
 ☐ Public Health - 22
 ☐ Radiation - Oncology - 70
 ☐ Radiology - 53
 ☐ Radiology - Diagnostic - 43
 ☐ Radiology - Nuclear Medicine - 68
 ☐ Radiology - Ultrasound - 69
 ☐ Radiology - Interventional - 946
 ☐ Research - 34
 ☐ Retired - 24
 ☐ Rheumatology - 57
 ☐ School Physician - 52
 ☐ Surgery - Cardiovascular - 44
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Veteran's Fee Waiver Request

ARE YOU A VETERAN? If yes, please view the DSPS website at <https://dspd.wi.gov/Pages/Professions/MilitaryLicensureBenefits.aspx> for information and eligibility requirements for veterans, service members, former service members, and their spouses.

If you qualify, are you requesting a waiver of your initial credentialing fee?

☐ Yes ☐ No

If you qualify, are you requesting equivalency of your military training and experience?

☐ Yes ☐ No

If you qualify, are you a service member, former service member, or spouse requesting a reciprocal credential?

☐ Yes ☐ No

If your family income is at or below 180% of the federal poverty line (42 USC 9902(2)), you may be eligible for a reduced credential fee. Fee reduction requests must be made at the time of application. The fee reduction is limited to the credential fee. Exam and other fees will not be reduced.

Application Fee Reduction Request

Are you requesting a reduced credential fee?

☐ Yes ☐ No

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Post-Graduate Training/Fellowships, Practice, And Other Activities

List in chronological order from the date of graduation from medical school to the present time. The below information must include professional and non-professional activities.

FACILITY	CITY	STATE	ACTIONS
No records found.			

Add Details

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License History

* I AM OR HAVE BEEN LICENSED IN THE FOLLOWING STATE(S). (Include all active and inactive states.)

- ☐ Alabama ☐ Alaska ☐ American Samoa ☐ Arizona ☐ Arkansas ☐ Armed Forces America ☐ Armed Forces Europe ☐ Armed Forces Pacific ☐ Baker Island
☐ California ☐ Colorado ☐ Connecticut ☐ Delaware ☐ Florida ☐ Georgia ☐ Guam ☐ Hawaii ☐ Howland Island ☐ Idaho ☐ Illinois ☐ Indiana
☐ Iowa ☐ Jarvis Island ☐ Johnston Atoll ☐ Kansas ☐ Kentucky ☐ Kingman Reef ☐ Louisiana ☐ Maine ☐ Maryland ☐ Massachusetts ☐ Michigan
☐ Micronesia ☐ Midway Atoll ☐ Minnesota ☐ Mississippi ☐ Missouri ☐ Montana ☐ Navassa Island ☐ Nebraska ☐ Nevada ☐ New Hampshire
☐ New Jersey ☐ New Mexico ☐ New York ☐ North Carolina ☐ North Dakota ☐ Northern Mariana Islands ☐ Ohio ☐ Oklahoma ☐ Oregon ☐ Palmyra Atoll
☐ Pennsylvania ☐ Puerto Rico ☐ Rhode Island ☐ South Carolina ☐ South Dakota ☐ Tennessee ☐ Texas ☐ US Virgin Islands ☐ Utah ☐ Vermont
☐ Virginia ☐ Wake Island ☐ Washington ☐ District Of Columbia ☐ West Virginia ☐ Wisconsin ☐ Wyoming ☐ None

For each credential listed above, you are required to have each State Board or territory of the United States submit a letter of verification to the Wisconsin Department of Safety and Professional Services. The verification letter(s) must state your date of birth, credential number, date of issuance, and a statement regarding disciplinary actions.

REGARDING THE STATES YOU LISTED ABOVE: Identify the states in which you were licensed by EXAM. ⓘ

- ☐ Alabama ☐ Alaska ☐ American Samoa ☐ Arizona ☐ Arkansas ☐ Armed Forces America ☐ Armed Forces Europe ☐ Armed Forces Pacific ☐ Baker Island
☐ California ☐ Colorado ☐ Connecticut ☐ Delaware ☐ Florida ☐ Georgia ☐ Guam ☐ Hawaii ☐ Howland Island ☐ Idaho ☐ Illinois ☐ Indiana
☐ Iowa ☐ Jarvis Island ☐ Johnston Atoll ☐ Kansas ☐ Kentucky ☐ Kingman Reef ☐ Louisiana ☐ Maine ☐ Maryland ☐ Massachusetts ☐ Michigan
☐ Micronesia ☐ Midway Atoll ☐ Minnesota ☐ Mississippi ☐ Missouri ☐ Montana ☐ Navassa Island ☐ Nebraska ☐ Nevada ☐ New Hampshire
☐ New Jersey ☐ New Mexico ☐ New York ☐ North Carolina ☐ North Dakota ☐ Northern Mariana Islands ☐ Ohio ☐ Oklahoma ☐ Oregon ☐ Palmyra Atoll
☐ Pennsylvania ☐ Puerto Rico ☐ Rhode Island ☐ South Carolina ☐ South Dakota ☐ Tennessee ☐ Texas ☐ US Virgin Islands ☐ Utah ☐ Vermont
☐ Virginia ☐ Wake Island ☐ Washington ☐ District Of Columbia ☐ West Virginia ☐ Wisconsin ☐ Wyoming

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Declarations

- *1. Are you registered or licensed in any other profession(s)?
☐ Yes ☐ No
- *2. Have you ever been credentialed under any other name(s)?
☐ Yes ☐ No
- *3. Are you familiar with the state health laws and rules and regulations of the Wisconsin Department of Health regarding communicable diseases?
☐ Yes ☐ No
- *4. Have you ever failed to pass any state board examination, national board examination (NBME or NBOME), FLEX, or USMLE examination?
☐ Yes ☐ No
- *5. Have you ever surrendered, resigned, canceled, or been denied a professional license or other credential in Wisconsin, or any other jurisdiction?
☐ Yes ☐ No
- *6. Is disciplinary action pending against you in any jurisdiction?
☐ Yes ☐ No
- *7. Have you ever been reprimanded, demoted, disciplined, cautioned, placed on probation, limited in your practice or privileges, placed on or taken leave greater than 90 days, or terminated by any employer, educational institution, training program, licensing board, hospital, medical facility, professional society, specialty board, or medical body for any reason?
☐ Yes ☐ No
- *8. Have any suits or claims ever been filed against you as a result of professional services?
☐ Yes ☐ No
- *9. Has the Drug Enforcement Administration ever withdrawn your DEA number or warned you, or have you been denied a DEA number?
☐ Yes ☐ No
- *10. Have you ever been convicted of a misdemeanor, felony, or other violation of federal, state, or local law or do you have any felony, misdemeanor or other violation of federal, state, or local law charges pending against you in this state or any other? This includes convictions resulting from a plea of no contest, a guilty plea, or verdict.
☐ Yes ☐ No
- *11. Are you incarcerated, on probation, or on parole for any conviction?
☐ Yes ☐ No

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Additional Declarations

For the purposes of these questions, the following phrases or words have the following meanings:

"Medical Condition" includes physiological, mental or psychological conditions or disorders, such as, but not limited to musculoskeletal impairments, visual, speech, and hearing impairments, neurological conditions, intellectual disability, behavioral health conditions, specific learning disabilities, substance use disorder, alcohol use disorder, other substance use disorders or any communicable infectious diseases, such as hepatitis.

"Chemical Substances" is to be construed to include alcohol, drugs, or medications, including those taken pursuant to a valid prescription for legitimate medical purposes and in accordance with the prescriber's direction, as well as those used illegally.

"Currently" does not mean on the day of, or even in the weeks or months preceding the completion of this application. Rather, it means recently enough so that the use of drugs may have an ongoing impact on one's functioning as a licensee, or within the past two years.

For any **YES** answers below, please upload a detailed statement and supporting documents on the Supporting Documents page.

- *12. Do you have a medical condition, as defined above, which currently impairs or limits your ability to practice medicine with reasonable skill and safety that has not been previously disclosed?
- ☐ Yes, please upload a statement describing the medical condition and any limitations and/or impairment, including whether you require any accommodation to ensure safe, competent practice.
- ☐ No
- *13. Do you use any chemical substance(s), as defined above, that currently impairs or limits your ability to practice medicine with reasonable skill and safety that has not been previously disclosed?
- ☐ Yes, please upload a statement describing your chemical substance(s) use and any limitations and/or impairment, including whether you require any accommodation to ensure safe, competent practice.
- ☐ No
- *14. Have you ever been diagnosed as having, or have you ever been treated for, pedophilia, exhibitionism, or voyeurism that has not been previously disclosed?
- ☐ Yes, please upload a statement describing your diagnosis and any limitations and/or impairment, including whether you require any accommodation to ensure safe, competent practice.
- ☐ No

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Supporting Documents

Your **Application Number/Credential Number** must be provided to all third parties who are asked to submit documentation in support of your application for licensure. Please log in to the system and click the Check Application Status button located on the home screen to view your application number. Documentation submitted by a third party **must** be submitted using the LicensE third-party portal at license.wi.gov.

Certified court records are certified as true and correct by the Office of the Clerk of Courts and may include judgement of conviction, police report, incident report, criminal complaint, court-ordered assessment report, etc. Records may be obtained from the Office of the Clerk of Courts in the county in which your case was heard or the relevant police department.

Question	Documents	Who Submits?	Actions
* Photograph - 8x12 cm, Taken Not More Than 60 Days Prior to Date of Application, Notarized to Affirm True Likeness		Applicant	
* National Practitioner Data Bank (NPDB) Report/Self-Query Response (Upload report from NPDB or is included in optional FCVS report)		Applicant	
* Signed Authorization and Waiver Form 571		Applicant	
Judgment of Conviction		Applicant	
Copy of Marriage Certificate, Divorce Decree, etc. (If Applicable)		Applicant	
Documents for Waiver of 24-months Accredited Post-graduate Training (If Applicable)		Applicant	
Communicable Diseases Certification (Form 1229) (If Applicable)		Applicant	
Convictions and Pending Charges (Form #2252) and Supporting Documents (If Applicable)		Applicant	

Supporting Documents for State Board Discipline (If Applicable)	Applicant	
Malpractice Suits and Claims Form 2829 and Supporting Documents (If Applicable)	Applicant	
Veteran Request Application Addendum Form 2996 (If Requesting Equivalency of Military Training and Experience)	Applicant	
Copy of WI Dept of Veterans Affairs (WDVA) Voucher Code (If Applying for Veteran Fee Waiver)	Applicant	
Application Updates	Applicant	
Verification of All Licenses, Current or Expired (Excluding Temporary or Resident/Educational Licenses)	Applicant	
Police Report/Criminal Complaint	Applicant	
Personal Statement	Applicant	
Sentencing Verification	Applicant	
AODA Assessment/Current use Statement	Applicant	
ECFMG Certificate (included in optional FCVS report)	Applicant	
* Physician Data Center (PDC) Practitioner Profile Report from the Federation of State Medical Boards (FSMB) or is included in optional FCVS report	Third Party	
* Physicians Profile Data Report from AMA or AOA (Must request directly from AMA or AOA)	Third Party	

* Medical Education Verification: Use Form 2164 or optional FCVS report	Third Party
* Postgraduate Training Verification(s): Use Form 2165 or optional FCVS report (Form 2165 is required for training not included in FCVS report)	Third Party
* National Boards: USMLE (Steps 1, 2 & 3), COMLEX (3 Levels), FLEX, NBME, NBOME, LMCC or Other (Not required if included in optional FCVS report)	Third Party
Application Updates	Third Party
Verification of All Licenses, Current or Expired (Excluding Temporary or Resident/Educational Licenses)	Third Party
ECFMG Certificate (included in optional FCVS report)	Third Party
Documents for Waiver of 24-months Accredited Post-graduate Training (If Applicable)	Third Party
Other	Third Party
FCVS Report from the Federation of State Medical Boards (FSMB) (OPTIONAL)	Third Party
Hospital, Facility and Employer Verifications Needed - Form 2167 OR 3046 (If facility was Joint Commission Certified). Your employer may be able to complete the form and provide a list of all hospital affiliations.	Third Party
Other	Applicant 

[Previous](#)
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 You may enter your Federation ID if you wish to prepopulate school information, Post-Graduate Training/Fellowship, Practice, and Other Activities. Please click here to enter your ID. [click here](#)

Physician - DO

Steps

- ☒ Instructions
- ☒ Personal Information
- ☒ School Information
- ☒ Specialty
- ☒ Application Fee Reduction Request
- ☒ Post-Graduate Training/Fellowships, Practice, And Other Activities
- ☒ License History
- ☒ Declarations
- ☒ Additional Declarations
- ☒ Supporting Documents
- ☒ **Attestation**
- ☐ Payment

Attestation

*I declare under penalty of law that I am (check one):

- ☐ A citizen or national of the United States, or
- ☐ A qualified alien or nonimmigrant lawfully admitted to the United States who is eligible to receive this professional license or credential as defined in the Personal Responsibility and Work Opportunities Reconciliation Act of 1996, as codified in 8 U.S.C. §1601 et. seq. (PRWORA).

For questions concerning PRWORA status, please contact the U.S. Citizenship and Immigration Services in the Department of Homeland Security at 1-800-375-5283 or online at <http://www.uscis.gov>.

Should my legal status change during the application process or after a credential is granted, I understand that I must report this change to the Wisconsin Department of Safety and Professional Services immediately.

Please note that unless legislation is passed to allow Deferred Action for Childhood Arrivals (DACA) recipients to obtain a professional license or credential, DACA recipients are not eligible.

Continuing Duty of Disclosure

I understand that I have a continuing duty of disclosure during the application process. If information I have provided in this application becomes invalid, incorrect, or outdated, I understand that I am obliged to provide any necessary information to ensure the information on my application remains current, valid, and truthful. I understand that credentialing authorities may view acts of omission as dishonesty and that my duty of disclosure during the application process exists until licensure is granted or denied.

Affidavit of Applicant

I declare that I am the person referred to on this application and that all answers set forth are each and all strictly true in every respect. I understand that failure to provide requested information, making any materially false statement and/or giving any materially false information in connection with my application for a credential or for renewal or reinstatement of a credential may result in credential application processing delays; denial, revocation, suspension or limitation of my credential; or any combination thereof; or such other penalties as may be provided by law. I further understand that if I am issued a credential, or renewal, or reinstatement thereof, failure to comply with the statutes and/or administrative code provisions of the licensing authority will be cause of disciplinary action.

By signing below, I am signifying that I have read the above statements (Certification of Legal Status, Continuing Duty of Disclosure, and Affidavit of Applicant) and understand the obligation I have as an applicant or credential-holder should information I have provided to the Department of Safety and Professional Services change.

* Signature

Date

Previous

Save & Next

Contact Information

4822 Madison Yards Way Madison, WI 53705

(608) 266-2112

(877) 617-1565



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Physician - DO

Steps

- ✓ Instructions
- ✓ Personal Information
- ✓ School Information
- ✓ Specialty
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- ✓ Post-Graduate Training/Fellowships, Practice, And Other Activities
- ✓ License History
- ✓ Declarations
- ✓ Additional Declarations
- ✓ Supporting Documents
- ✓ Attestation
- Payment

Payment

Please submit your payment now. Your application cannot be submitted until successful payment is received.

Please be aware that payments using a checking/savings account may take 3-5 business days to process.

Category	Response	Cost
Initial Fee		\$120.00

Total		\$120.00
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The total amount to be paid for this license application is **\$120.00**

Please click the "Pay and Submit" button to proceed with the chosen payment method.

Previous

Pay and Submit

Contact Information

4822 Madison Yards Way Madison, WI 53705 (608) 266-2112 (877) 617-1565



**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and title of person submitting the request: Brenda Taylor, Board Services Supervisor		9/26/2025	
3) Name of Board: Board of Nursing			
4) Meeting Date: 10/09/2025	5) Attachments: ☐ Yes ☒ No	6) How should the item be titled on the agenda page? Newsletter Matters	
7) Place Item in: ☒ Open Session	8) Is an appearance before the Board being scheduled? ☒ No	9) Name of Case Advisor(s), if applicable: N/A	
10) Describe the issue and action that should be addressed: Please discuss deadlines and consider topics for the next newsletter. November 2025 issue • Deadline: Wednesday, October 1, 2025 • Chairs Corner: Attrition rate and workforce efforts Articles: • Rob – Article on NCSBN Annual Meeting topic/report • Patrick – critical care • Jenny – specialty spotlights • Amanda – CSB – PDMP update & reminder • A.I. exam room [Phil as resource] • Ethics in A.I. [Gina/WNA] BOTS calling themselves “Nurse” when a live nurse is not present • Orders update May 2025-October 2025 Articles/Ideas: • Rotating Articles on Professional Nursing Roles • New Member introductions with headshots (<i>As needed for new appointments, subject to oath receipts</i>) • Rotating Articles on Nurse Administrative Code • Shelly – Spotlight ambulatory operations • Possible N6/Rules Status update • Reminder to Update Contact Information – DSPS Staff • Archive: https://dsps.wi.gov/Pages/BoardsCouncils/Nursing/Newsletter.aspx			
11) Authorization  9/26/2025			
Signature of person making this request		Date	
Directions for including supporting documents: 1. This form should be saved with any other documents submitted to the Agenda Items folders. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 3. If necessary, provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			