



DEPARTMENT OF THE NAVY
BUREAU OF MEDICINE AND SURGERY
7700 ARLINGTON BOULEVARD
FALLS CHURCH, VA 22042

IN REPLY REFER TO
BUMEDINST 6550.14
BUMED-M00C
9 Oct 2014

BUMED INSTRUCTION 6550.14

From: Chief, Bureau of Medicine and Surgery

Subj: POLICY FOR ADMINISTRATIVE AND CLINICAL MANAGEMENT OF
UNLICENSED NURSE CORPS OFFICERS

Ref: (a) DoD Instruction 6025.13 of 17 February 2011
(b) BUMEDINST 6320.66E
(c) OPNAVINST 1120.7A
(d) SECNAVINST 1920.6C

Encl: (1) Sample Scope of Practice Limitations for Unlicensed Nurse Corps
Officers Letter

1. Purpose. To provide guidance for commanders, commanding officers, senior nurse executives, and directors for nursing services at medical treatment facilities in the administrative and clinical management of nurse corps officers who are unlicensed or fail the National Council Licensure Examination for Registered Nurses (NCLEX-RN) examination.
2. Cancellation. BUMED ltr 6550.10 Ser BUMED-M00C/151 of 2 Aug 2004
3. Scope. This policy applies to all ships and stations having medical department personnel on board.
4. Background. References (a) and (b) identify professional standards and policies for licensure of Navy nurses. The National Council of State Boards of Nursing (NCSBN) coordinates the administration of the NCLEX-RN examination through the Board of Nursing (BON) in each state, the District of Columbia, commonwealth, possession, or territory of the United States. Passing the examination indicates a candidate's potential to provide safe and effective nursing care.
5. Scope of Practice Limitation. Nurses may be assessed, per reference (c), while awaiting results of the NCLEX-RN examination and state licensure. However, until proof of successful completion of the licensure examination, officers may serve in the capacity of a graduate nurse. As a graduate nurse, even if in the process of redesignation or administrative separation, the officer may participate in all phases of the nursing process, but only under the direct supervision of a registered nurse (RN). Written notification will be provided to the graduate nurse delineating the limitations to the individual's scope of practice and identifying a RN preceptor, see enclosure (1). The graduate nurse is prohibited from performing the following duties and functions independently:

- a. Accounting for or administering controlled substances.
 - b. Verifying or administering blood or blood products.
 - c. Verifying dosages of medications/weight-based medications which require a second RN signature, such as insulin, Coumadin, Heparin, intravenous medications, and medications given to infants and children.
 - d. Countersigning documents that require the signature of a RN, to include nursing assessments, do not resuscitate orders, and consents for procedures.
 - e. Taking verbal or telephone orders from physicians/licensed independent providers.
 - f. Acting as shift charge nurse or working as the only nurse on duty.
6. Licensure. If an officer has not already taken the licensure examination, he or she must apply to take it within 30 days of reporting to his or her command and take the examination within 90 days of being deemed eligible. Officers in a wait status to sit for the examination will be allowed time to prepare for the licensure examination. At the discretion of the senior nurse executive or director of nursing services, preparation time/activities may be inclusive of clinical opportunities, self-study, test-taking, and a review course at the officer's expense. The officer will be in close communication with the nurse resident/intern coordinator, or other designated nurse supervisor, and RN preceptor, to discuss their progress with preparation for the examination. Ultimately, it is the professional responsibility of the officer to ensure preparedness for the NCLEX-RN examination.
7. Failure of Licensure Examination. An officer receiving a fail report from the state BON is allowed two additional opportunities to pass the licensure examination. Per NCSBN regulations and specific state BON requirements, the officer must wait 45 to 90 days prior to retaking the examination. Failure to pass the examination on a second attempt may result in modification of the current plan of supervision by the nurse resident/intern coordinator, or other designated nurse supervisor, and RN preceptor.
- a. To enhance the officer's success in passing the repeat licensure examination, the individual's command will ensure the following procedures:
 - (1) Direct the nurse corps officer to notify the command of each NCLEX-RN test result within 2 working days of receipt.
 - (2) Have an individualized remedial education or training plan, based on the NCLEX-RN diagnostic profile results. The plan must include: assessment and identification of examination problem areas; action to be taken; and monitoring and evaluation of progress. Recommended

actions include, but are not limited to: augmentation of clinical experience, mentor/tutorial assistance, self-study, intense preceptorship, test-taking or stress management instruction, and a review course at the officer's expense.

b. No mandated or prohibited trait mark is required in "Professional Expertise" for promotability or retention for the reporting period in which the member's first or second licensure examination failure occurs. For a reporting period in which a member has failed the licensure examination three times, a grade no greater than 1.0 in "Professional Expertise" (fitness report block 33) will be marked, and the officer will receive a mark for promotability in the "Significant Problems" category.

c. The senior nurse executive or director of nursing services shall notify the Nurse Corps Career Planner (BUMED-M00C3) regarding all NCLEX-RN failures, and both the Nurse Corps Career Planner and the Nurse Corps Officer Community Manager (PERS-315) immediately upon notice of the third NCLEX-RN failure, but no more than 3 working days after being notified by the member. Nurse corps officers whose education was subsidized or had received an accession bonus may be required to repay bonus and stipend monies per their service agreement.

d. Any nurse corps officer who fails to obtain the required professional licensure after three unsuccessful NCLEX-RN attempts will be processed for redesignation or administrative separation, per references (c) and (d). All necessary documentation for redesignation will be provided by the Nurse Corps Officer Community Manager (PERS-315). The redesignation process will not be rescinded, per reference (c), even if the member successfully completes the NCLEX-RN.

e. A nurse corps officer who is awaiting redesignation or administrative separation can continue to work as a graduate nurse under the direct supervision of a RN, as delineated in this policy, or may be assigned to a nonclinical environment at the discretion of the senior nurse executive/director of nursing services. Written notification delineating the individual's scope of practice limitations must be maintained on file by the senior nurse executive/director of nursing services and the Medical Staff Services.

8. Records. Records created as a result of this instruction, regardless of media and format, shall be managed per SECNAV M-5210.1 of January 2012.



M. L. NATHAN

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BUMEDINST 6550.14
9 Oct 2014

**SAMPLE SCOPE OF PRACTICE LIMITATIONS FOR
UNLICENSED NURSE CORPS OFFICERS LETTER**

Date

From: Senior Nurse Executive/Director of Nursing Services
To: ENS First Name, Last Name, NC, USN

Subj: SCOPE OF PRACTICE LIMITATIONS FOR UNLICENSED NURSE CORPS
OFFICERS

Ref: (a) DoD Instruction 6025.13 of 17 February 2011
(b) BUMEDINST 6320.66E
(c) OPNAVINST 1120.7A
(d) SECNAVINST 1920.6C

1. Reference (a) and (b) identify professional standards and policies for licensure of Navy nurse corps officers.
2. Per references (c), until successful proof of completion of the licensure examination, you may serve in the capacity of a graduate nurse. As a graduate nurse, you may participate in all phases of the nursing process, but only under the direct supervision of a Registered Nurse (RN) preceptor. You are prohibited from performing the following duties and functions independently:
 - a. Accounting for or administering controlled substances.
 - b. Verifying or administering blood or blood products.
 - c. Verifying dosages of medications/weight-based medications which require a second RN signature, such as insulin, Coumadin, Heparin, intravenous medications, and medications given to infants and children.
 - d. Countersigning documents that require the signature of a RN, to include nursing assessments, do not resuscitate orders, and consents for procedures.
 - e. Taking verbal or telephone orders from physicians/licensed independent providers.
 - f. Acting as shift charge nurse or working as the only nurse on duty.

Enclosure (1)

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OFFICERS

3. Your responsibilities include the following:

a. Take action to register for the National Council Licensure Examination for Registered Nurses (NCLEX- RN) within 30 days of reporting to this command and take the examination within 90 days of being deemed eligible.

b. Meet with the nurse resident/internship program manager, or designated nurse supervisor, and RN preceptor to discuss preparation for the examination.

4. When notified by your State Board of Nursing (BON), you must report examination results within 2 working days of notification and provide the examination profile to your chain of command, beginning with the nurse resident/internship program coordinator, or designated nurse supervisor, and RN preceptor. A passing score and successful completion of all orientation requirements entitles you to assume the full scope of RN responsibilities.

5. If you do not pass the examination on your first attempt, you will continue as a graduate nurse with the aforementioned practice limitations. The nurse resident/internship program coordinator, other designated nurse supervisor, and nurse preceptor will meet with you to develop a plan of action to prepare for reexamination. Your responsibilities include the following:

a. Take action to register for an NCLEX-RN reexamination.

b. Pay the examination fees and schedule an appointment to retake the NCLEX-RN examination within the allotted timeframe per your BON, 45-90 days from the date of your first examination.

c. Consider registering for an NCLEX-RN review course in the local area at your own expense.

d. Coordinate with the nurse resident/intern coordinator, or other designated nurse supervisor, for review of review of NCLEX-RN examination results or practice examination areas noted to need improvement.

e. Meet with nurse resident/internship program coordinator, designated nurse supervisor, and RN preceptor to discuss preparation for second/third examination.

6. Failure to pass the examination on a second attempt may result in modification of the current plan of supervision by the nurse resident/internship program coordinator, or designated nurse supervisor.

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7. Failure to pass the examination on the third attempt will result in redesignation or administrative separation, per references (c) and (d).

Signature of Senior Nurse Executive

Copy to:
Nurse Preceptor
Manager, Nurse Resident/Intern Program
Senior Nurse Executive/Director of Nursing Services
Medical Staff Services

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I have read the above information. I understand that if I do not pass the NCLEX-RN examination on a third attempt, redesignation or administrative separation from the Navy will be initiated by the command.

Nurse (Sign/Print Name)

Date

Nurse Resident/Intern Program Coordinator,
or Other Designated Nurse Supervisor
(Sign/Print Name)

Date

Identified Preceptor (Sign/Print Name)

Date

*If different from nurse resident/intern program manager, or other designated nurse supervisor