



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

BUMEDINST 6550.14A  
BUMED-N01C  
8 Sep 2025

BUMED INSTRUCTION 6550.14A

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 26 July 2023  
(b) DHA-PM 6025.13, Clinical Quality Management in the Military Health System  
Volume 4: Credentialing and Privileging, 29 August 2019  
(c) OPNAVINST 1120.7A

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

1. Purpose. To provide guidance for commanders, commanding officers, chief nursing officers, and directors 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. BUMEDINST 6550.14.
3. Scope and Applicability. 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 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), prior to 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, including while in the process of redesignation or administrative separation, the officer may only participate in all phases of the nursing process 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, outlined in enclosure (1). The graduate nurse is prohibited from independently performing the duties and functions listed in subparagraphs 5a through 5f:

- a. Accounting for or administering controlled substances.
  - b. Verifying or administering blood or blood products.
  - c. Verifying dosages of medications, including high-risk medications, or weight-based medications which require a second RN signature, such as insulin, warfarin, 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 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 reporting to his or her command. 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 The National Council of State Boards of Nursing regulations and specific state BON requirements, the officer must wait 45 to 90 days to retake 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 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 of the procedures listed in subparagraphs 7a(1) through 7a(2):
    - (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; 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" (fitness report block 33) 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” will be marked, and the officer will receive a mark for promotability in the “Significant Problems” category.

c. The chief nursing officer or officer in charge will notify the Nurse Corps Career Planner 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). All necessary documentation for redesignation will be provided by PERS-315. The redesignation process will not be rescinded, per reference (c), even if the member successfully completes the NCLEX-RN on a fourth or subsequent attempt.

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 chief nursing officer or officer in charge. Written notification delineating the individual’s scope of practice limitations must be maintained on file by the chief nursing officer or officer in charge and the medical staff services.

## 8. Records Management

a. Records created as a result of this instruction, regardless of format or media, must be maintained and dispositioned per the records disposition schedules located on the Department of the Navy Assistant for Administration, Directives and Records Management Division portal page at <https://portal.secnav.navy.mil/orgs/DUSNM/DONAA/DRM/Records-and-Information-Management/Approved%20Record%20Schedules/Forms/AllItems.aspx>.

b. For questions concerning the management of records related to this instruction or the records disposition schedules, please contact the local records manager or the OPNAV Records Management Program (DNS-16).

9. Review and Effective Date. Per OPNAVINST 5215.17A, the Corps Chiefs’ Office (BUMED-N01C) will review this instruction annually around the anniversary of its issuance date to ensure applicability, currency, and consistency with Federal, Department of Defense (DoD), Secretary of the Navy and Navy policy and statutory authority using OPNAV 5215/40 Review of Instruction. This instruction will be in effect for 10 years, unless revised or cancelled in the interim and will be reissued by the 10-year anniversary date if it is still required, unless it meets

one of the exceptions in OPNAVINST 5215.17A, paragraph 9. Otherwise, if the instruction is no longer required, it will be processed for cancellation as soon as the need for cancellation is known following the guidance in OPNAV Manual 5215.1 of May 2016.

10. Information Management Control. Reports required in paragraph 6 and subparagraph 7b of this instruction are exempt from reports control per Secretary of the Navy Manual 5214.1 of December 2005, part IV, subparagraph 7k.



D. K. VIA

Releasability and distribution:

This instruction is cleared for public release and is available electronically only via the Navy Medicine Web site, <https://www.med.navy.mil/Directives>

BUMEDINST 6550.14A  
8 Sep 2025

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

DD Mmm YYYY

From: Chief Nursing Officer, [Command]  
To: [Rank First Name, Last Name,] NC, USN

Subj: SCOPE OF PRACTICE LIMITATIONS FOR UNLICENSED NURSE CORPS  
OFFICERS

Ref: (a) DoD Instruction 6025.13 of 26 July 2023  
(b) DHA-PM 6025.13, Clinical Quality Management in the Military Health System  
Volume 4: Credentialing and Privileging, 29 August 2019  
(c) OPNAVINST 1120.7A  
(d) SECNAVINST 1920.6D

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 including high-risk medications, or weight-based medications which require a second RN signature, such as insulin, warfarin, 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 providers.
- f. Acting as shift charge nurse or working as the only nurse on duty.

Enclosure (1)

Subj: SCOPE OF PRACTICE LIMITATIONS FOR UNLICENSED NURSE CORPS  
OFFICERS

3. Your responsibilities include the information listed in subparagraphs 3a and 3b:

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 reporting to this command.

b. Meet with the Nurse Resident 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 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 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:

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, generally 45 to 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 coordinator, or other designated nurse supervisor, for review of NCLEX-RN examination results or practice examination areas noted to need improvement.

e. Meet with Nurse Resident Program coordinator, designated nurse supervisor, and RN preceptor to discuss preparation for second or 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 program coordinator, or designated nurse supervisor.

Subj: SCOPE OF PRACTICE LIMITATIONS FOR UNLICENSED NURSE CORPS  
OFFICERS

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

Signature

Copy to:  
Nurse Preceptor  
Manager, Nurse Resident Program  
Chief Nursing Officer  
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 and Print Name)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Nurse Resident Program Coordinator,  
or Other Designated Nurse Supervisor  
(Sign and Print Name)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Identified Preceptor (Sign and Print Name)

\_\_\_\_\_  
Date

(If different from Nurse Resident Program manager, or other designated nurse supervisor)