Kim Glazier, Executive Director
Oklahoma Board of Nursing
2915 N. Classen Blvd., Ste. 524
Oklahoma City, Oklahoma 73106

Dear Executive Director Glazier:

This office has received your request for a written Attorney General Opinion regarding agency action that the Oklahoma Board of Nursing intends to take in Board case 3.120.17. The proposed action is to accept an application by a Certified Registered Nurse Anesthetist (CRNA) for the authority to select, order, obtain, and administer anesthesia-related drugs. The proposed action also imposes a severe reprimand on the licensee, requires completion of courses in nursing law and nursing ethics, and imposes fines and costs totaling $2,984.86.

The applicant had been convicted with alcohol-related misdemeanor convictions in 1992 and 1999. The applicant omitted these convictions from the applicant’s original Registered Nurse license application in 2009, from an application for CRNA licensure in 2009, and from license renewal applications in 2010, 2012, and 2014. Each of these applications clearly requires information about criminal history. The applicant did disclose the convictions in 2016 along with the present application for CRNA medication authority.

The Oklahoma Nursing Practice Act, 59 O.S.2011 & Supp.2016, §§ 567.1–567.20, authorizes the Board to impose discipline on licensees who engage “in deceit or material misrepresentation in procuring or attempting to procure a license to practice” and those who engage in “unprofessional conduct as defined in the rules of the Board,” 59 O.S.Supp.2016, § 567.8(B)(1)(a), (B)(7). The Board’s rules include “falsifying documents submitted to the Board of Nursing” as a form of unprofessional conduct. OAC 485:10-11-1(b)(3)(E). These statutes and rules reflect the State’s significant interest in ensuring that applicants for professional licensure contain accurate and complete information.

Nurses must also be able to be trusted with extensive documentation duties, particularly regarding medication. That concern is especially relevant here, where the core issue is whether the applicant is qualified to have the authority to select and order medication. The proposed action grants this authority while imposing fines, a severe reprimand, and additional education, which reasonably serve the purposes of deterring future violations and equipping the licensee to avoid them.
It is, therefore, the official opinion of the Attorney General that the Oklahoma Board of Nursing has adequate support for the conclusion that this action advances the State of Oklahoma’s policy requiring complete and accurate information as part of nurses’ professional licensure process.

E. SCOTT PRUITT
ATTORNEY GENERAL OF OKLAHOMA